

A Nursing Care Report of a Lung Cancer Patient with Cough Undergoing Five-Element Energy Cupping Therapy: Postprint

Authors: Yan Kang, Liu Shuhong, Zhao Yanan, Zhao Baoya

Date: 2022-08-17T00:00:00+00:00

Abstract

Cough constitutes one of the common symptoms in lung cancer patients. This article summarizes the nursing experience of treating a lung cancer patient with cough using Five Elements Energy Cupping therapy. Under the guidance of Traditional Chinese Medicine (TCM) theory and employing the principles of “using dredging as tonification” and “using warming as tonification,” the patient underwent Five Elements Energy Cupping therapy on the Governor Vessel (Dazhui acupoint) and Bladder Meridian (Feishu, Pishu, and Shenshu acupoints). This intervention reduced the patient’s TCM symptom score, cough symptom score, and nine-constitution score, improved the Karnofsky Performance Status (KPS) score, effectively alleviated cough symptoms, enhanced patient compliance with treatment and nursing care, and warrants clinical application.

Full Text

A Nursing Case Report on Five Elements Energy Cupping Therapy for a Lung Cancer Patient with Cough

Yan Kang, Liu Shuhong, Zhao Yanan, Zhao Baoya

Department of Oncology, Dongfang Hospital, Beijing University of Chinese Medicine, Beijing

Abstract

Cough is one of the most common symptoms in lung cancer patients. This article summarizes the nursing experience of treating a lung cancer patient with cough using Five Elements Energy Cupping Therapy. Guided by Traditional Chinese Medicine (TCM) theory and employing the principles of “treating stasis as tonification” and “treating cold as tonification,” the therapy was applied along

the Governor Vessel (Dazhui acupoint) and Bladder Meridian (Feishu, Pishu, and Shenshu acupoints). The treatment reduced the patient's TCM symptom score, cough symptom score, and Nine Constitution score while improving the Karnofsky Performance Status (KPS) score. The therapy effectively alleviated cough symptoms and enhanced patient compliance with treatment and nursing care, demonstrating its clinical applicability.

Keywords: lung cancer; cough; Five Elements Energy Cupping Therapy; nursing

Introduction

Lung cancer is one of the most prevalent malignant tumors in China, posing a serious threat to public health. Cough occurs in a significant proportion of lung cancer patients, characterized by intermittent or paroxysmal patterns, prolonged duration, and frequent recurrence. Contributing factors include direct tumor effects, carcinomatous lymphangitis, atelectasis, infection, and treatment-related toxicity from chemotherapy, radiotherapy, and targeted therapy. Current Western medical management primarily relies on expectorants, bronchodilators, and central antitussives, but these approaches have relatively narrow therapeutic targets, limited efficacy, and notable adverse effects.

In TCM theory, lung cancer-related cough falls under the categories of “lung accumulation,” “chronic cough,” and “persistent cough.” The fundamental pathogenesis involves deficiency of vital qi and excess of pathogenic factors, wherein constitutional weakness, internal accumulation of cancer toxins, and external pathogenic invasion lead to phlegm and cancer toxins obstructing the airways, causing impaired lung dispersion and descent, and resulting in cough. TCM offers both internal and external treatment modalities for lung cancer cough—internal treatment primarily involves oral herbal medicine, while external approaches include acupoint application, catgut embedding, and cupping therapy. However, reports on Five Elements Energy Cupping Therapy for lung cancer cough with lung qi deficiency pattern remain scarce. Our department applied this innovative therapy to a lung cancer patient with cough, achieving remarkable results, which we now report.

1. Clinical Data

1.1 Patient Information Patient Li, female, was diagnosed with right lung adenocarcinoma after presenting with cough at a local hospital. Chest X-ray and contrast-enhanced CT revealed a right lung mass, and biopsy confirmed the diagnosis. She received pemetrexed plus capecitabine chemotherapy, achieved improvement, and was discharged for regular follow-up with stable disease. The patient subsequently developed persistent cough with sputum production and visited our nursing clinic.

Initial Presentation (Day 1): The patient reported fatigue, chest tightness, shortness of breath, cough with white thin sputum, low cough sound, sponta-

neous sweating, aversion to cold, poor appetite, and restless sleep. Tongue: pale with white coating. Pulse: weak. TCM diagnosis: Lung cancer (lung-spleen deficiency with phlegm-stasis intermingling); Cough (lung qi deficiency). Western diagnosis: Right lung adenocarcinoma; Cough.

Day 3: Fatigue and chest tightness reduced; cough and sputum production decreased with less sputum volume.

Day 7: Fatigue and cough further improved; no chest tightness or shortness of breath; spontaneous sweating and aversion to cold slightly reduced.

Day 10: Only mild fatigue remained; minimal cough without sputum; no chest tightness or shortness of breath; no spontaneous sweating; appetite and sleep normalized.

1.2 Treatment Protocol The patient received Five Elements Energy Cupping Therapy along the Governor Vessel (Dazhui) and Bladder Meridian (Feishu, Pishu, Shenshu) to tonify lung qi, resolve phlegm, and arrest cough. Treatment was administered once weekly, with four sessions constituting one therapeutic course.

Procedure: The patient assumed a prone position with the back fully exposed. Gua sha oil was applied to the skin. The therapy consisted of four sequential techniques: (1) Flash cupping along both Bladder Meridians in a clockwise direction; (2) Moving cupping along the Governor Vessel and Bladder Meridian with moderate suction, following a middle-to-sides sequence until skin flushing appeared; (3) Retained cupping at Dazhui, bilateral Feishu, bilateral Pishu, and bilateral Shenshu—after positioning the cups, 95% alcohol cotton was ignited at the cup bottom, allowed to extinguish naturally, and this process was repeated three times before retaining the cups for 20 minutes with warmth preservation; (4) Rolling cupping: warm cup bodies were rolled over the aforementioned acupoints until slight skin redness appeared.

2. Nursing Care

2.1 Environmental and Daily Living Management Maintain clean, fresh indoor air with regular ventilation; prohibit smoking; prevent dust and odor stimulation; ensure appropriate temperature and humidity. Encourage adequate rest and avoid overexertion that may deplete vital qi. Adjust clothing according to seasonal changes—patients with lung qi deficiency are susceptible to external pathogens and should avoid wind exposure when sweating.

2.2 Dietary Care Provide light, easily digestible foods; avoid greasy, spicy, or throat-irritating substances such as chili, pepper, tobacco, and alcohol. For lung qi deficiency, recommend lung-tonifying, warm-natured foods including lean meat, chicken, milk, eggs, red dates, lentils, and Chinese yam.

2.3 Emotional Support Offer comfort and encouragement to alleviate psychological concerns and strengthen the patient's confidence in treatment.

3. Discussion

3.1 Therapeutic Mechanism Lung cancer-related cough belongs to TCM categories of “lung accumulation” and “chronic cough.” The condition results from prolonged illness causing constitutional deficiency, particularly lung qi depletion, compounded by chemotherapy toxicity that disrupts organ function and leads to phlegm retention in the lungs, obstructing the airways and causing cough. The treatment principle focuses on tonifying lung qi, resolving phlegm, and arresting cough.

Cupping therapy, known as “horn method” in ancient texts, utilizes negative pressure created by heat to rapidly adhere cups to acupoints, thereby regulating qi and blood circulation, expelling pathogens, strengthening the body's foundation, and regulating organ function and meridian systems. This innovative therapy integrates flash, moving, and retained cupping with fire's warming effects and negative pressure to restore the ascending, descending, entering, and exiting of qi throughout the body, ultimately achieving yin-yang balance and disease resolution.

The selected acupoints include Dazhui, Feishu, Pishu, and Shenshu. Feishu, where lung qi infuses into the back, is a primary acupoint for lung channel and respiratory diseases that can regulate and tonify lung qi, relieve cough and asthma, and improve pulmonary ventilation. Dazhui tonifies qi and strengthens yang, Pishu fortifies the spleen and resolves dampness, and Shenshu—selected because the kidney stores essence and adequate kidney qi ensures abundant essence, spirit, and qi—tonifies the congenital foundation to harmonize qi and blood among the five organs and restore functional balance.

The therapy's innovation lies in applying the “treating cold as tonification” principle. First, 95% alcohol cotton generates warming effects during combustion to support the source of transformation and achieve the goal of supporting yin while assisting yang. Second, warm cup rolling transmits heat to various meridians, producing effects of warming channels, tonifying middle qi, and dispersing stasis, thereby enhancing the body's ability to strengthen vital qi and expel pathogens. Literature indicates that cupping can stimulate nerve endings, improve microcirculation, reduce inflammatory responses, and enhance immunity. Stimulation of Feishu can boost immunity, increase lung capacity and oxygen consumption, and improve macrophage function.

3.2 Advantages and Clinical Outcomes This therapy represents an innovative integration of multiple cupping techniques combined with rolling and kneading manipulations, offering high comfort and acceptance that improves patient compliance and therapeutic efficacy. The case demonstrated reduced TCM symptom scores, cough symptom scores, and Nine Constitution scores

alongside improved KPS scores, confirming effective symptom improvement.

3.3 Limitations This report is based on a single case with limited sample size requiring further data collection. Additionally, the procedure involves fire operation with relatively high risk, necessitating enhanced safety measures.

4. Effect Evaluation

Outcome measures included cough symptom score, TCM symptom score, KPS score, and Nine Constitution score, all of which showed improvement following treatment.

References

- [1] Sun Kexin, Zheng Rongshou, Zeng Hongmei, et al. Analysis of lung cancer incidence and mortality in China in 2015[J]. Chinese Journal of Oncology, 2019.
- [2] Cherny N, Fallon M, Kaasa S, et al. Oxford Textbook of Palliative Medicine[M]. Oxford University Press, 2015.
- [3] Harle ASM, Blackhall FH, Smith JA, et al. Understanding cough and its management in lung cancer[J]. Current Opinion in Supportive and Palliative Care, 2012.
- [4] Wang B. Clinical study on treating non-small cell lung cancer cough with qi-yin deficiency and blood stasis pattern using qi-tonifying, yin-nourishing, and stasis-resolving method[D]. Changchun: Changchun University of Chinese Medicine, 2018.
- [5] Wang Zhigang. Clinical observation on treating non-small cell lung cancer-related cough with Chinese medicine[J]. Journal of Basic and Clinical Oncology, 2017.
- [6] Wang Kaiwen, Yang Zhiling, Liu Yu, et al. Research progress on Chinese medicine treatment of lung cancer cough[J]. New Chinese Medicine, 2020.
- [7] Qu Yixin, Fang Fang, Pan Shenglian, et al. Clinical observation on treating 60 cases of pediatric cough with lung qi deficiency pattern using cupping combined with pediatric tuina[J]. Chinese Journal of Pediatrics, 2016.
- [8] Zheng Yachao, Meng Xiangwen, Ma Jiajia, et al. Application status of cupping therapy in preventive medicine in recent 10 years[J]. Journal of Liaoning University of Traditional Chinese Medicine, 2020.
- [9] Huang L. Progress in cough management for lung cancer patients[J]. Drugs & People, 2014.
- [10] Peng Jian, Ouyang Wei, Li Mei, et al. Clinical effect of moxibustion combined with acupoint application in treating senile depression[J]. China Modern Medicine, 2020.

- [11] Harle ASM, Blackhall FH, Molasiotis A, et al. Cough in patients with lung cancer: a longitudinal observational study of characterization and clinical associations[J]. Chest, 2014.
- [12] Kang Ming, Zhang Ningsu, Wang Xiaodong. Clinical characteristics and TCM syndrome differentiation of advanced lung cancer patients[J]. Liaoning Journal of Traditional Chinese Medicine, 2015.
- [13] Liu Xiaoxia, Wu Haijuan. Clinical observation on treating acute exacerbation of chronic obstructive pulmonary disease with conventional Western medicine combined with balanced fire cupping[J]. Western Journal of Traditional Chinese Medicine, 2018.
- [14] Gao Guosheng, Zhang Kun, Yuan Jun. Treatment of 60 cases of phlegm-dampness accumulating in the lung type cough using back-shu point cupping[J]. Journal of External Therapy of Traditional Chinese Medicine, 2017.

Note: Figure translations are in progress. See original paper for figures.

Source: ChinaXiv – Machine translation. Verify with original.