

Nursing Experience of Combined Chinese Herbal Poultice and Warm Needling Therapy for Bilateral Lower Limb Edema in a Patient with Spleen-Kidney Yang Deficiency Pattern

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Abstract

This study investigates the clinical nursing efficacy of combined traditional Chinese medicine poultice and warm acupuncture therapy for patients with bilateral lower limb edema due to spleen-kidney yang deficiency pattern. Through nursing practice conducted on a 64-year-old male patient, experiences were summarized regarding nursing assessment, nursing diagnosis, nursing planning, and nursing interventions. The results demonstrated significant reduction in bilateral lower limb edema, alleviation of fatigue symptoms, improved sleep quality, and satisfactory blood pressure control. Through comprehensive measures including psychological counseling, dietary guidance, characteristic traditional Chinese medicine nursing care, and health education, the nursing team substantially enhanced patient treatment compliance and quality of life. The study concludes that combined traditional Chinese medicine poultice and warm acupuncture therapy exhibits notable therapeutic efficacy for edema associated with spleen-kidney yang deficiency pattern, with nursing care playing a crucial role in the treatment process.

Full Text

Nursing Experience with Chinese Medicine Sealing Combined with Moxibustion for Bilateral Lower Limb Edema in a Patient with Spleen-Kidney Yang Deficiency Syndrome

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Abstract

This study explores the clinical nursing effects of combining traditional Chinese medicine encapsulation with warm acupuncture for treating patients with spleen-kidney yang deficiency and bilateral lower limb edema. Through the nursing practice of a 64-year-old male patient, insights into nursing assessment, nursing diagnosis, nursing planning, and nursing measures were summarized. The results show that the patient's bilateral lower limb edema was significantly reduced, fatigue symptoms alleviated, sleep quality improved, and blood pressure well controlled. The nursing team, through comprehensive measures such as psychological counseling, dietary guidance, TCM characteristic care, and health education, significantly enhanced the patient's treatment compliance and quality of life. The study concludes that the combination of traditional Chinese medicine encapsulation with warm acupuncture for treating spleen-kidney yang deficiency edema has significant therapeutic effects, with nursing work playing a crucial role.

Keywords: Chinese medicine sealing; warm acupuncture; spleen and kidney yang deficiency syndrome; bilateral lower limb edema

Edema is a common clinical symptom with complex pathogenesis that may be associated with various diseases such as cardiovascular, renal, and hepatic disorders. In traditional Chinese medicine theory, edema is classified under categories including "water qi," "yang water," and "yin water," with its pathogenesis primarily involving spleen and kidney dysfunction that leads to abnormal water metabolism, internal generation of dampness, and overflow to the skin. Spleen-kidney yang deficiency syndrome represents a common pattern of edema, with patients typically presenting with bilateral pitting edema of the lower limbs accompanied by fatigue, cold intolerance, and soreness of the waist and knees.

In recent years, with the continuous development of TCM characteristic therapies, Chinese medicine sealing combined with warm acupuncture has gradually gained attention for treating spleen-kidney yang deficiency edema. Chinese medicine sealing involves preparing medicinal herbs with diuretic and yang-warming properties into pouches applied to affected areas or specific acupoints, exerting therapeutic effects through transdermal absorption. Warm acupuncture, building upon needling, utilizes the warming stimulation generated by burning moxa to warm and unblock meridians, harmonize qi and blood, and enhance acupuncture efficacy. The combined application of both methods not only leverages the pharmacological effects of the herbs but also utilizes the warming action of moxibustion to promote drug absorption and improve therapeutic outcomes.

In clinical nursing, for patients with spleen-kidney yang deficiency edema receiving Chinese medicine sealing combined with warm acupuncture, nursing work constitutes not only an important component of treatment but also a critical link in ensuring therapeutic efficacy and quality of life. This study summarizes the key nursing points and insights gained from the nursing practice of one pa-

tient with spleen-kidney yang deficiency and bilateral lower limb edema, aiming to provide reference for clinical nursing practice and further improve the application efficacy of TCM characteristic therapies in edema treatment and patient satisfaction.

1 Clinical Data

Patient Feng Yuzhang, male, 64 years old, was admitted on February 15, 2025, with a chief complaint of “bilateral lower limb edema for 2 months.” The patient was conscious and alert with fair spirit, slightly fatigued, and exhibited bilateral pitting edema of the lower limbs. Tongue presentation showed red tongue body with yellow greasy coating, and pulse was slippery. Physical examination revealed temperature 37.0°C, pulse 88 beats/min, respiration 18 breaths/min, blood pressure 134/90 mmHg, obese body habitus, and cooperative demeanor. Bilateral pitting edema was present without significant mobility impairment, and no other special abnormalities were noted.

Auxiliary examinations showed: complete blood count with white blood cells $12.2 \times 10^9/L$ and neutrophil percentage 76.3%; biochemical tests showed glucose 6.91 mmol/L and triglycerides 2.54 mmol/L; chest CT revealed subpleural patchy opacities in both lungs with mild interstitial changes; lower extremity vascular ultrasound showed arteriosclerosis with multiple plaques but patent deep veins; lumbar MRI showed multilevel disc bulging and degenerative changes.

TCM diagnosis was edema (spleen-kidney yang deficiency syndrome), while Western medicine diagnoses included edema, hypertension grade 2 (moderate risk), reflux esophagitis, and osteoporosis. After admission, integrated Chinese-Western medicine treatment was administered, including Chinese medicine sealing combined with warm acupuncture. On March 5, 2025, the patient’s condition stabilized with reduced bilateral lower limb edema as per medical orders.

2 Nursing Care

2.1 Nursing Assessment

2.1.1 Assessment of Symptoms and Signs Upon admission, the patient exhibited obvious bilateral pitting edema of the lower limbs accompanied by fatigue, dry mouth, and acid reflux. The tongue was red with yellow greasy coating, and the pulse was slippery. Nursing staff monitored the degree and extent of edema daily along with skin temperature changes, observing for signs of infection such as redness, swelling, heat, and pain. Assessment of mental status, appetite, and sleep revealed that the patient experienced poor sleep quality due to mobility limitations from edema, requiring melatonin for sleep aid. Additionally, constipation status was monitored, including bowel movement frequency and difficulty, to provide basis for subsequent nursing care.

2.1.2 Psychological Status Assessment Due to chronic edema and mobility limitations, the patient experienced anxiety and difficulty falling asleep at night, with a history of depressive states. Through communication, nurses identified the patient's concerns about disease prognosis and fear that edema would not improve, affecting daily life. During psychological assessment, attention was paid to emotional changes, observing for anxiety and depression manifestations to provide timely psychological counseling and enhance treatment confidence.

2.1.3 Treatment Compliance Assessment While the patient showed high acceptance of the integrated treatment plan, he harbored doubts about TCM characteristic therapies including Chinese medicine sealing and warm acupuncture, worrying about efficacy and safety. Nurses assessed the patient's understanding of the treatment plan, observed whether medications were taken on time and treatments were cooperated with, and communicated with the patient and family to understand treatment expectations and concerns, providing targeted health education to improve compliance.

2.2 Nursing Diagnosis

Based on symptoms and assessment results, primary nursing diagnoses included: impaired physical mobility due to bilateral pitting edema requiring limb elevation and moderate activity to improve circulation; sleep disturbance due to edema discomfort and psychological anxiety requiring environmental improvement and counseling; and risk for infection due to chronic edema and decreased skin resistance requiring close observation and preventive measures.

2.3 Nursing Plan

Based on the patient's condition, the following nursing plan was developed: (1) Edema management: assist with bilateral lower limb elevation to promote venous return and reduce edema; guide moderate limb activity and avoid prolonged standing or sitting; administer diuretics as prescribed while closely monitoring edema resolution and medication side effects. (2) Psychological support: actively communicate with the patient, patiently answer questions to relieve psychological pressure; encourage expression of feelings to enhance treatment confidence, with psychiatric consultation when necessary. (3) TCM characteristic nursing: explain the purpose, methods, and precautions of Chinese medicine sealing and warm acupuncture in detail to ensure cooperation; maintain strict aseptic technique during procedures, observe patient responses, and promptly address discomfort.

2.4 Nursing Measures

2.4.1 Edema Nursing The patient presented with significant bilateral lower limb edema. Nursing staff measured edema conditions daily at scheduled times, recording the extent and degree. Limb elevation was implemented to promote

venous return and reduce edema. Patients were instructed to avoid prolonged standing or sitting and engage in moderate limb activity to improve circulation. During nursing care, skin color, temperature, and integrity were closely monitored to prevent skin damage from edema. Additionally, diuretics were administered as prescribed while monitoring edema resolution and side effects such as electrolyte disturbances. Through comprehensive nursing measures, the patient's bilateral lower limb edema gradually decreased during hospitalization without skin breakdown or complications. The nursing team developed a personalized rehabilitation plan including daily moderate limb massage and passive exercise to further promote circulation. Regular communication with the patient allowed for timely adjustment of the nursing plan to ensure comfort and cooperation throughout treatment.

2.4.2 Psychological Counseling Due to chronic edema and mobility limitations, the patient experienced anxiety and difficulty sleeping. Nursing staff actively communicated with the patient to understand psychological status, patiently answered questions, and relieved anxiety. The patient was encouraged to express inner feelings to enhance treatment confidence. Through communication with the patient and family, psychological needs were identified for targeted counseling. The nursing plan was adjusted according to emotional changes to create a comfortable hospital environment. Through psychological counseling, the patient's emotions gradually stabilized and sleep quality improved. The nursing team also invited psychiatric specialists for consultation, providing professional psychological support and relaxation training. Through regular counseling and relaxation training, the patient's anxiety significantly decreased, sleep quality markedly improved, and overall recovery was enhanced.

2.4.3 TCM Characteristic Nursing During Chinese medicine sealing and warm acupuncture treatment, nurses explained the operation purpose, methods, and precautions in detail to ensure patient cooperation. Strict aseptic technique was maintained throughout the procedure while observing patient responses and promptly addressing discomfort. During Chinese medicine sealing, medication temperature was carefully monitored to avoid skin burns. During warm acupuncture, needle site reactions were observed to ensure safe and effective treatment. Through TCM characteristic nursing, the patient's bilateral lower limb edema and fatigue symptoms improved without treatment-related complications. The nursing team also provided education on TCM health preservation, guiding the patient on how to improve physical condition through diet, exercise, and emotional regulation in daily life. Through TCM characteristic nursing and health education, the patient's acceptance of TCM treatment significantly increased and physical symptoms markedly improved.

2.4.4 Dietary Guidance Given the patient's edema and hypertension history, low-salt and low-fat diet was recommended with controlled fluid intake, avoiding high-salt, high-fat, and high-sugar foods. Patients were guided to bal-

ance their diet with increased intake of vitamins and dietary fiber to improve nutritional status. Through dietary guidance, edema symptoms decreased and blood pressure was controlled within ideal range without deterioration from improper diet. The nursing team developed detailed dietary plans, monitored daily food intake to ensure balanced nutrition, and regularly communicated with the patient and family to understand dietary habits and preferences for plan adjustment, ensuring long-term adherence. Through scientific dietary management, the patient's overall health significantly improved.

2.4.5 Health Education With limited disease knowledge, the patient and family received education about the condition, including causes of edema, treatment plans, and prognosis. Patients were taught to self-monitor edema changes and master daily care techniques such as limb elevation and moderate activity. Through health education, patients and families gained deeper understanding of the disease, better cooperated with treatment and nursing, and improved self-management capabilities. The nursing team provided detailed health education manuals covering disease knowledge, rehabilitation methods, dietary guidance, and psychological adjustment. Regular health education lectures were organized for patients and families with expert presentations to further improve health awareness and self-management skills. Through systematic health education, patients could better manage their health after discharge and reduce disease recurrence risk.

3 Results and Follow-up

After 18 days of inpatient treatment and nursing care, patient Feng Yuzhang's condition significantly improved. Bilateral lower limb edema markedly decreased from initial pitting edema to gradual resolution, with reduced edema range, normalized skin temperature, and no new infections or complications. Fatigue symptoms decreased, mental status improved, sleep quality significantly enhanced without melatonin dependence, and constipation improved with increased bowel movement frequency without medication assistance. Blood pressure was controlled within ideal range without significant fluctuations.

During treatment, Chinese medicine sealing combined with warm acupuncture played an important role. Chinese medicine sealing effectively relieved bilateral lower limb edema through transdermal drug absorption, while warm acupuncture's warming stimulation promoted qi and blood circulation, improved local blood flow, and further reduced edema and fatigue symptoms. Through comprehensive measures including psychological counseling, dietary guidance, and health education, the nursing team enhanced patient confidence in treatment and improved self-management capabilities.

The patient was discharged on March 5, 2025, with basically resolved bilateral lower limb edema and improved tongue and pulse manifestations (reduced redness and yellow greasy coating, pulse changing from slippery to moderate). Post-discharge, the nursing team maintained continuous follow-up through telephone

calls and regular community family doctor visits. During the first week after discharge, bilateral lower limb edema did not recur, blood pressure remained around 130/85 mmHg, and sleep and dietary conditions were good. The patient followed the nursing team's recommendations for low-salt, low-fat diet, moderate exercise, and regular blood pressure and glucose monitoring. During follow-up, the patient reported good physical condition without new discomfort.

4 Discussion

4.1 Efficacy Analysis of Chinese Medicine Sealing Combined with Warm Acupuncture

Chinese medicine sealing acts directly on affected areas through transdermal drug absorption, exerting diuretic and yang-warming effects. Warm acupuncture utilizes warming stimulation from burning moxa to warm and unblock meridians, harmonize qi and blood, and enhance drug efficacy. The combined application creates synergistic effects. During treatment, this patient's bilateral lower limb edema gradually resolved, fatigue symptoms decreased, and tongue and pulse manifestations improved, demonstrating significant therapeutic efficacy of Chinese medicine sealing combined with warm acupuncture in treating spleen-kidney yang deficiency edema.

4.2 Importance of Nursing Measures

Throughout treatment, the nursing team provided comprehensive support through integrated nursing measures. Psychological counseling helped relieve anxiety and enhance treatment confidence, while dietary guidance and health education improved lifestyle and promoted recovery. Through these nursing measures, the patient's sleep quality, dietary status, and self-management capabilities significantly improved. Additionally, the nursing team maintained continuous follow-up through telephone calls and community family doctor visits, ensuring the patient could maintain healthy habits after discharge and reduce disease recurrence risk.

4.3 Nursing Insights

This patient's nursing practice demonstrates that Chinese medicine sealing combined with warm acupuncture has significant clinical effects for spleen-kidney yang deficiency edema, but nursing work is equally important. The nursing team must possess solid TCM nursing knowledge and skills to proficiently operate TCM characteristic therapies including Chinese medicine sealing and warm acupuncture. Simultaneously, nurses must attend to patients' psychological status and lifestyle, improving treatment compliance and quality of life through comprehensive nursing measures. Furthermore, the nursing team should strengthen communication with patients and families, provide personalized nursing plans, and ensure active patient cooperation to achieve optimal therapeutic outcomes.

4.4 Future Research Directions

Although this patient achieved good results through Chinese medicine sealing combined with warm acupuncture treatment, further clinical research is needed to verify its efficacy and safety. Future studies should consider expanding sample sizes and conducting multicenter, randomized controlled trials to more comprehensively evaluate the application value of Chinese medicine sealing combined with warm acupuncture in spleen-kidney yang deficiency edema patients. Additionally, modern medical technologies such as biomarker detection and imaging examinations could be integrated to further explore the mechanism of action, providing more scientific evidence for clinical application.

In conclusion, Chinese medicine sealing combined with warm acupuncture demonstrates significant effects in spleen-kidney yang deficiency edema patients, with comprehensive nursing measures from the nursing team playing an important supportive role in patient recovery. Through further research and practice, more effective treatment and nursing protocols may be provided for similar patients.

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