A Case Report of Treating One Patient with Cold-Uterus Infertility Complicated by Low Back Pain Using Traditional Chinese Medicine Cupping Combined with Yang-Warming Cupping

Shi Runxian¹

2026-07-03

ChinaRxiv

Abstract

This article summarizes the case of a woman diagnosed with "infertility due to uterine cold complicated by lumbar and back pain." Between the end of menstruation and ovulation, flash cupping and water cupping were applied to points on the Ren, Chong, and Dai meridians, as well as Zhongwan, Shenque, Dazhui, and other acupoints, once weekly. Warm yang cupping was applied to the abdomen to warm the uterus, dispel cold, and regulate spleen-stomach deficiency cold, once weekly, with one week constituting one treatment course; a total of 3 courses were administered. The patient's cold pain in the lumbar region disappeared, the sensation of cold in the lower abdomen during menstruation was markedly reduced, and basal body temperature showed a biphasic pattern. Cupping and moving cupping can effectively warm and unblock the Chong and Ren meridians, dispel cold, and relieve pain, while warm yang cupping has a significant short-term effect in improving menstrual disorders and low back pain caused by uterine cold.

Full Text

A Case Report of Treating One Patient with Cold-Uterus Infertility Complicated by Low Back Pain Using Traditional Chinese Medicine Cupping Combined with Yang-Warming Cupping

Shi Runxian1

(1. Nursing Department, Beijing Changping District Tiantongyuan North Community Health Service Center, Beijing, 102218; 2.)

【Abstract】 This article summarizes one case of a woman diagnosed with "cold-uterus infertility complicated by low back pain." During the interval from the end of menstruation to ovulation, acupoints on the Ren, Chong, and Dai meridians, as well as Zhongwan, Shenque, and Dazhui, were selected, and flash cupping, water cupping, and regular cupping were applied once weekly. On the abdomen, Yang-warming cupping was used to warm the uterus and dispel cold and to regulate spleen–stomach deficiency cold, also once weekly. One week constituted one treatment course, and a total of three treatment courses were administered. The patient' s cold-type low back pain disappeared, the sensation of lower-abdominal cold during menstruation was markedly reduced, and basal body temperature showed a biphasic pattern. Cupping and moving cupping effectively warmed and unblocked the Ren and Chong meridians, dispersed cold, and relieved pain; Yang-warming cupping showed significant short-term efficacy in improving menstrual irregularities and low back pain caused by uterine cold.

【Keywords】 menstrual irregularities; cold-uterus infertility; low back pain; cupping and moving cupping; Yang-warming cupping

A Case Report on Treating a Patient with Cold Uterus Infertility and Lower Back Pain with Spleen Deficiency and Dampness Using Traditional Chinese Medicine Cupping Combined with Warming Yang Cupping

Runxian Shi1

(1. Nursing Department, Beijing Changping District Tiantongyuan North Community Healthcare Center, Beijing, 102218; 2.)

【Summary】 This article summarizes a case of a woman diagnosed with "infertility due to uterine cold combined with low back pain." Between the end of her period and ovulation, acupoints including the Ren meridian, Chong meridian, Dai meridian, as well as Zhongwan, Shenque, and Dazhui were selected. Flash cupping, water cupping, and regular cupping were applied once a week, with abdominal moxibustion cups used to warm the uterus and dispel cold, and to regulate spleen and stomach deficiency-cold, also once a week, for a total of one menstrual cycle. The patient' s lower back cold pain disappeared, abdominal cold sensation during menstruation was significantly reduced, and basal body temperature showed a biphasic pattern. Cupping and moving cups effectively warmed and unblocked the Ren and Chong meridians, dispersed cold, and relieved pain, while warming cups showed significant short-term effects in improving menstrual irregularities and lower back pain caused by uterine cold.

【Keywords】 Menstrual disorders; infertility due to cold uterus; lower back pain; cupping therapy; Yang-warming cupping.

"Cold-uterus infertility" is a classic pathogenesis of infertility summarized by ancient Chinese medicine practitioners through extensive clinical practice. As early as the *Shennong Bencao Jing*, there was a record stating, "When wind-cold resides in a woman' s uterus, she may remain barren for ten years without children." The uterus is an organ unique to women. During pregnancy, if the embryo is compared to a seed, the maternal uterus is the ecosystem that provides all the energy for its growth and development. The classic gynecological work of Chinese medicine, *Fu Qingzhu' s Gynecology: Infertility Due to Lower-Body Ice-Coldness*, also states: "When a woman' s lower body is ice-cold, it is not a place where fire does not warm but rather a place of severe cold and ice; grasses and trees do not grow there, and fish and dragons do not thrive. Since the womb is already cold, how can conception occur?" Through a metaphor drawn from the natural phenomenon that vegetation withers in places of yin cold, this passage vividly and profoundly reveals that uterine cold is a key pathological

basis leading to infertility.[1] Chinese medicine holds that "the kidney governs reproduction, the Chong is the sea of blood, and the Ren governs the fetus." Deficiency and decline of kidney yang and deficiency-cold of the Chong and Ren can lead to impaired follicular development and ovulatory dysfunction. At the same time, cold congeals the blood, and obstruction causes pain, often accompanied by cold pain in the waist and sacrum and a sensation of coldness in the lower abdomen. [[unclear: text continues after the visible character "温" at the bottom of the page]]

Wenyang cupping therapy integrates the negative-pressure adsorption of cupping with the warm-heat penetration of moxibustion. Heating of the cup body combined with combustion of the moxa pillar penetrates deeply into the acupoint meridians, promotes the smooth movement of qi and blood, and is especially suitable for cold-pattern disorders in gynecology. This comprehensive outpatient clinic treated one patient with uterine cold infertility complicated by low back pain. After treatment with wenyang cupping combined with flash cupping and water cupping, the symptoms were markedly relieved. The nursing diagnosis and treatment are summarized as follows:

1. Case Data

1.1 General Information

The patient was a 30-year-old woman. Her chief complaint was "irregular menstruation, uterine-cold infertility complicated by decreased ovarian function." Four days before presentation she developed pain in the lower back, without special treatment; 1 day before presentation the pain worsened. The Numerical Rating Scale (NRS) score was 6, affecting daily activities. She came to the outpatient clinic for treatment on June 9, 2026.

1.2 Physical Examination

The patient was alert, with a dark complexion, mental fatigue and lack of strength, cold pain in the lumbar and sacral region, cold limbs with aversion to cold, a preference for warmth in the lower abdomen, a pale tongue with white coating, and a deep, thready pulse. She had no previous history of special diseases or allergies, denied any family genetic history, and had no history of lumbar trauma or surgery. Auxiliary examination showed: T: 36.7°C, BP: 125/69 mmHg, P: 78 beats/min, R: 20 breaths/min; no tenderness; lumbar examination: mild tenderness between the L3–S1 spinous processes and in the paraspinal muscles on both sides, no obvious radiating pain, and no abnormality of the lumbar skin. Anti-Müllerian hormone (AMH): 0.81 ng/mL; luteinizing hormone: 1.62 mIU/ml; follicle-stimulating hormone: 7.6 mIU/ml; estradiol: 117.93 pmol/L.

1.3 Diagnosis and Treatment

Traditional Chinese medicine diagnosis: spleen deficiency with dampness obstruction, thoroughfare vessel deficiency-cold, and blood stasis; Western medicine diagnosis: irregular menstruation, uterine-cold infertility complicated

by decreased ovarian function. In traditional Chinese medicine, treatment was based on warming the kidney and uterus, regulating and supplementing the thoroughfare vessel to assist pregnancy, warming the channels and activating blood to relieve pain, and regulating the cycle to promote ovulation. The patient was treated with TCM flash cupping and water cupping, once per week; wenyang cupping therapy, once per week, with 1 week as one course of treatment. After the first course ended on June 9, 2026, the patient' s low back pain and lower abdominal cold pain were significantly relieved. After the third course on June 24, 2026, the low back pain disappeared, the lower abdominal cold pain had improved compared with before, and the patient ended treatment.

2. Nursing Care

2.1 Nursing Assessment

2.1.1 Assessment of Low Back Pain Symptoms

The Numerical Rating Scale (NRS) was used to assess the patient' s low back pain. A score of 0 indicates "no pain,"and a score of 10 indicates "the most severe pain." For the NRS, the patient is asked to choose a fixed number representing the degree of pain, from 0 points (no pain) to 10 points (the most severe pain)[2]. The patient' s NRS score for low back pain was 6.

2.1.2 Assessment of the Degree of Uterine Cold

The TCM diagnostic scale for uterine cold in infertility was used. The score for each item equals the item severity score × weight; the total score is the sum of the scores for all items. A score $ $64.5 can be diagnosed as uterine cold in infertility[1]. The patient' s score on the TCM diagnostic scale for uterine cold in infertility was 150.

2.1.3 Psychological Assessment

The Self-Rating Anxiety Scale (SAS) was used to assess the patient' s psychological status, with 50 points as the cutoff value for assessment; the higher the score, the more severe the anxiety[3]. At the initial visit, the patient' s SAS standard score was 53 (mild anxiety), reflecting concern about the prognosis of the disease, uncertainty regarding treatment efficacy, and anxiety about medical expenses.

2.1.4 Sleep Assessment

The Pittsburgh Sleep Quality Index (PSQI) was used to evaluate the patient' s sleep quality. It includes seven dimensions: subjective sleep quality, sleep latency, sleep duration, sleep efficiency, sleep disturbance, use of hypnotic medication, and daytime dysfunction. The total score ranges from 0 to 21; the higher the score, the poorer the sleep quality. A score $ $7 indicates relatively good sleep quality, a score >7 indicates the presence of sleep disturbance, and a PSQI total score >6 is defined as sleep disturbance[4]. The patient' s PSQI score was 10.

2.1.5 Stool Assessment

The Bristol Stool Form Scale (BSFS) was used. It is a seven-category visual chart that presents images and textual descriptions of different stool forms, ranging sequentially from Type 1, the hardest stool lumps, to Type 7, watery stool. Types 1 and 2 indicate constipation; Types 3 and 4 are ideal stool forms, with Type 4 being the easiest to pass; Types 5–7 indicate possible diarrhea[5]. At the time of consultation, the patient' s assessment result was Type 5.

2.2 Nursing Diagnoses

The nursing diagnoses were as follows: pain: related to cold in the uterus and obstruction by cold-dampness, resulting in impaired circulation of qi and blood and blockage of the lumbar and dorsal meridians; anxiety: related to infertility-associated fertility concerns and uncertainty about future pregnancy outcomes; disturbed sleep pattern: related to lumbar and dorsal pain affecting comfort and anxiety affecting sleep onset; disturbed stool form: related to spleen deficiency with dampness obstruction and weakened transformation and transportation function.

2.3 Nursing Plan

TCM-characteristic treatment: abdominal Wenyang cupping therapy was administered once per week; flash cupping and water cupping therapy were administered once per week as one course of treatment. The patient reported that lumbar and dorsal pain was alleviated compared with before, and the sensation of coldness in the lower abdomen was reduced. After three consecutive courses of treatment, the lumbar and dorsal pain symptoms disappeared, and the sensation of coldness in the lower abdomen was reduced. Health education: health education was provided regarding the patient' s daily routine, dietary care, skin care, and psychological care.

2.4 Nursing Measures

2.4.1 Flash Cupping and Water Cupping Therapy Cupping is also one of the external treatment methods of traditional Chinese medicine. The negative pressure generated during cupping can cause local skin congestion. During cupping, close contact between the cup and the skin produces a certain sensation of warmth. This warm stimulation can act directly on the lumbar muscles, increase muscle temperature, accelerate blood circulation in the muscles, relieve muscle tension and spasm, and reduce pain and stiffness caused by muscle spasm. In addition, warm stimulation can accelerate the metabolism of local tissues, promote the discharge of metabolic products in the muscles, such as lactic acid, and reduce the accumulation of metabolic products in the muscles, thereby further relieving the patient' s pain[6].

During the procedure, the patient was placed in the prone position. The operator held the cup in the right hand (a glass cup with an inner diameter of

5 cm). With the left hand, the operator ignited a cotton ball soaked in 95% ethanol held with forceps, first heated the mouth of the cup, then inserted it into the cup, quickly removed it after flash ignition, placed the cup on the treatment site for 1 s, and then quickly removed it. The operator then performed the procedure up and down along the spine and on both sides according to the tender points in the lumbar region until local flushing appeared. Finally, the warm cup was used to hot-iron the lumbar region. The entire procedure lasted about 4 min[7]. The herbal composition for water cupping consisted of 50 g each of Cinnamomi Ramulus, Angelica sinensis, Carthamus tinctorius, Angelica pubescens, Lycopodii Herba, and Zanthoxylum bungeanum, placed in a cloth bag and decocted in a pot for 30 min. Bamboo cups were soaked in the medicinal liquid and boiled for 35 min. The selected acupoints were Dazhui, Jianjing, Tianzhu, Tianzong, Jianzhen, Bailao, Gaohuang, Bingfeng, Tianliao, and Ashi points; for bilateral acupoints, the affected side was selected. The bamboo cups were applied by suction to the corresponding acupoints and removed after being retained for 7 min[8]. As prescribed by the physician, cupping, flash cupping, and water cupping therapy were administered once daily, 7 min each time, with 5 days as one course of treatment, for three consecutive courses.

2.4.2 Wenyang Cupping Therapy A specially made Wenyang cup was selected as the cupping instrument. It had a ceramic inner liner, was heat-resistant, and could hold moxa wool for continuous warming. The medium used was gua sha essential oil, prepared from a base oil combined with extracts such as safflower, red peony root, Chuanxiong rhizome, and Salvia miltiorrhiza. The main acupoints selected were Shenque, Guanyuan, Qihai, and the bilateral Zigong points; Yaoyangguan, Mingmen, and the bilateral Baliao points were used as adjunct points. Before and during menstruation, treatment focused mainly on the abdomen; after menstruation, warm stimulation of the lumbosacral region was strengthened.

During the procedure, the patient lay supine with the abdomen exposed, and essential oil was applied locally. Each time, six smokeless moxa sticks were placed in the inwardly concave combustion chamber at the top of the Wenyang cup. After ignition, when the cup had heated to an appropriate temperature—defined as a warm and comfortable sensation for the patient without scalding—a combustion rack containing an alcohol cotton ball was placed at the Qihai point and the alcohol cotton ball was ignited. The Wenyang cup was then placed on the abdomen, and negative pressure was used to attach it to the abdomen for Wenyang cupping moxibustion therapy. The surrounding area was wrapped with a clean towel to prevent chilling during treatment. Each treatment lasted 40 min. At the end of treatment, nursing staff removed the large cup, wiped the abdomen clean with a clean dry towel, helped the patient dress, and emphasized keeping warm. Throughout the procedure, warmth and comfort were maintained, with the endpoint being flushing of the abdominal skin and a deep penetrating sensation of heat[9]. Regarding the treatment-course schedule, treatment was started on the tenth day after the onset of menstruation, 1

···once per week; one menstrual cycle constituted one course of treatment.

2.4.3 Guidance on Daily-Life Regulation

Avoid raw, cold, and cold-natured foods; in particular, before and during menstruation, avoid iced beverages and cold-natured fruits. Keep the waist and abdomen warm, and add clothing in air-conditioned rooms. Soak the feet in hot water every evening, adding 15 g of mugwort leaf, until slight sweating occurs. The patient was guided in exercise and dietary planning: the daily diet should be kept light, outdoor exercise should be actively undertaken, and body-weight control should be strengthened, which can also improve the patient' s own resistance and physical fitness. The patient was instructed to develop a regular daily schedule and not to stay up late, smoke, or drink alcohol[⁀10].

2.4.4 Psychological Care

The patient was helped to correct negative mental states and adverse living conditions, thereby creating the necessary foundation for nurturing life. Psychological burdens were relieved, confidence in disease treatment was established, and the influence of psychological responses on treatment was reduced. The patient' s self-doubt was lessened and her damaged self-esteem improved, enabling her, to a certain extent, to positively plan health behaviors and related decisions and helping her regain confidence. The spouse also needed to provide a certain degree of support and companionship in order to improve adverse psychological emotions[⁀11].

2.5 Nursing Evaluation

After the first treatment, the patient reported that the pain in the waist and back had eased compared with before, and the cold sensation in the lower abdomen had lessened. After three courses of treatment, the patient's waist and back pain disappeared, the cold sensation in the lower abdomen improved compared with before, her spirit was clear, her complexion was healthy and lustrous, fatigue and lack of strength disappeared, the tongue was pale red with a thin coating, bowel movements were normal, and the pulse changed from deep, tight, and rough to deep, fine, and moderate. Details are shown in Table 1.

Table 1 Evaluation of Therapeutic Efficacy

Course	Waist and Back Numerical Rating Scale (NRS)	TCM Diagnostic Scale for Infertility with Uterine Cold	Self-Rating Anxiety Scale (SAS)	Pittsburgh Sleep Quality Index (PSQI)	Bristol Stool Form Scale (BSFS)
Before consultation	6 points	150 points	50 points	10 points	Type 5
After the first course	4 points	147 points	50 points	9 points	Type 5
After the second course	2 points	146 points	49 points	8 points	Type 4
After the third course	0 points	141 points	48 points	7 points	Type 3

3. Results and Follow-Up

In this case, after intervention with yang-warming cupping therapy as well as cupping, flash cupping, and water cupping, the patient' s waist and back pain was effectively controlled and the symptoms of uterine cold were improved. The patient was taught daily-life regulation, and psychological nursing was provided to reduce anxiety symptoms. One week after the end of treatment, telephone follow-up was conducted. The patient reported that the symptoms of waist and back pain had disappeared, the cold sensation in the lower abdomen had improved compared with before, and the symptoms of uterine cold had been markedly alleviated. TCM-characteristic nursing effectively improved the patient' s clinical symptoms, enhanced her quality of life, and relieved her anxiety.

4. Discussion

This patient was a typical case of spleen deficiency with dampness encumbrance, deficiency-cold of the Chong and Ren vessels, combined with blood stasis; the key pathogenesis lay in "cold" and "stasis." During treatment, methods are often adopted to warm the kidney, strengthen yang, unblock the Governor Vessel, eliminate dampness, and free the channels, so as to restore the body' s yang qi and healthy qi, dispel pathogenic qi, thereby relieving symptoms and restoring health[^11]. Treatments such as cupping, flash cupping, and water cupping are TCM therapies that not only have few adverse effects but can also regulate the body' s physiological functions as a whole, improving the patient' s immunity

and self-repair capacity. They can effectively improve the patient' s symptoms, reduce pain, relieve fatigue, restore joint function, and so forth, thereby greatly improving the patient' s quality of life. While allowing the patient to enjoy the benefits brought by traditional medicine, they also help the patient better cope with the challenges of disease and restore a healthy state of life[^12]. Yang-warming cupping is a traditional TCM therapy,

integrates the advantages of traditional therapies such as cupping, moxibustion, and scraping. By applying a warm cup to the skin, it can effectively stimulate the body' s yang qi and promote the movement of qi and blood. By applying heated cups to specific acupoints, the thermal effect stimulates the skin and meridians, combining the expulsion of cold with warming supplementation, thereby promoting blood circulation and regulating the balance of yin and yang. During the procedure, the warm stimulation produced by the warming-yang cup can warm and unblock the meridians and disperse pathogenic cold-dampness from the body. For various conditions caused by kidney deficiency with depletion of the Governor Vessel and invasion by wind-cold-damp pathogens, warming-yang cupping has a marked therapeutic effect. It has few adverse effects and is safe and reliable. It can relieve symptoms such as muscle soreness and joint pain and improve bodily discomfort. At the same time, through warming and supplementation of the abdomen, warming-yang cupping enhances the flow of qi and blood, enables yang qi to rise continuously, helps regulate the body' s internal and external environments, strengthens immunity, and improves patients' quality of life [12].

During treatment, emphasis on "premenstrual intervention" is crucial. Taking advantage of the gradual flourishing of qi and blood in the Chong and Ren vessels before menstruation, warmth is used to loosen cold-stasis binding so that menstruation proceeds smoothly. At the same time, lifestyle regulation is combined to remove the causes of disease. This case suggests that warming-yang cupping has definite efficacy in gynecological cold-pattern-related diseases such as dysmenorrhea, delayed menstruation, and infertility due to uterine cold; cupping, flash cupping, and water cupping can improve patients' low-back pain, shorten the duration of pain, and alleviate symptoms. The mechanism may be related to the traditional Chinese medicine theory of "warming the kidney and strengthening yang, unblocking the Governor Vessel and dispersing cold," improving local qi and blood circulation by harmonizing the yang qi of the kidney and Governor Vessel. Moreover, the operation is comfortable and noninvasive, with high patient acceptance, and is worthy of promotion.

Patient informed consent: Informed consent for publication of the case report was obtained from the patient.

Conflict-of-interest statement: The authors declare that there is no conflict of interest in this article.

References

[1] Bao Huafang, Pan Peng. Comparison of the application of verbal rating scale and numerical rating scale in assessing postoperative pain intensity in patients in the anesthesia recovery room [J]. Contemporary Medical Symposium, 2025, 23(29): 190-192.

[2] Gong Zheng, Shi Xiangmei, Ma Saihua, et al. Development of a traditional Chinese medicine diagnostic scale for uterine cold in infertility [J]. Chinese Journal of Traditional Chinese Medicine and Pharmacy, 2026, 41(1): 280-285.

[3] Zhang Qian, Chen Yi, Sun Chunyan. Predictive value of a screening model for insomnia risk in hospitalized patients with comorbid upper respiratory tract infection and anxiety-depression [J]. Journal of Navy Medicine, 2026, 47(2): 194-197.

[4] Hou Yanan, Yang Xue, Yang Jing, et al. Effect of auricular acupressure with cowherb seeds at the Anmian point on the Pittsburgh Sleep Quality Index score in elderly patients with coronary atherosclerotic heart disease after percutaneous coronary intervention [J]. China Journal of Pharmaceutical Economics, 2026, 21(4): 79-82+86.

[5] Pu Qiuxia, Li Hongwei, Hong Yali. Current status of application of the Bristol Stool Form Scale abroad and its implications [J]. Nursing Research, 2019, 33(09)

[6] Ma Deying. Research progress on treatment of residual pain after intervertebral foramen endoscopic surgery in patients with lumbar disc herniation [J]. Chinese Journal of Modern Drug Application, 2026, 20(13): 157-160.

[7] Liu Jun. Clinical observation on acupuncture combined with flash cupping in the treatment of peripheral facial paralysis in the acute stage [J]. Inner Mongolia Journal of Traditional Chinese Medicine, 2026, 45(3): 107-109.

[8] Zheng Jing, Yan Yuqiang, Deng Meimei. Effect of water cupping combined with medium-frequency pulsed electrotherapy on pain and cervical mobility in patients with cervical spondylosis [J]. Hebei Journal of Traditional Chinese Medicine, 2026, 48(5): 766-769+775.

[9] Gao Ping, Wu Xiaoying, Guo Suwen, et al. Clinical efficacy of warming-yang cupping combined with fire-dragon moxibustion in the treatment of kidney-deficiency cold-pattern ankylosing spondylitis [J]. Smart Healthcare, 2025, 11(11): 88-91.

[10] Yang Hui, Sang Peng. Clinical observation of warming-yang cupping moxibustion in the treatment of urinary retention after cerebral infarction [J]. Chinese Journal of Traditional Medical Science and Technology, 2024, 31(5): 942-945.

[11] Huang Wenxia, Chen Shuxian, Wu Xiaomei, et al. Effects of health education combined with psychological nursing intervention on patients

with infertility [J]. Journal of Bingtuan Medicine, 2026, 24(1): 71-73. DOI: 10.27028/j.cnki.jbtmed.2026.01.016.

[12] Gao Ping, Wu Xiaoying, Guo Suwen, et al. Clinical efficacy of warming-yang cupping combined with fire-dragon moxibustion in the treatment of kidney-deficiency cold-pattern ankylosing spondylitis [J]. Smart Healthcare, 2025, 11(11): 88-91. DOI: 10.19335/j.cnki.2096-1219.2025.11.024.

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