

Herpes Simplex (HSV-1; oral herpes)

1.1 Overview

Sex: Female

Age: 25

Height: 5'3"

Weight: 140 lbs

Occupation: Self Employed (Childcare)

Chief Complaint

Patient has been coming 2-4 times a month for treatments as a form of prevention and maintenance for cold sores for the period of 1 year. Eruptions are frequent and erratic; exacerbated by stress, alcohol, spice and possibly nightshade family of vegetables.

She also experience chronic sharp pain at UB15 at her HT Shu point and occasional low back pain.

Family Medical History

The patient has a family history of:

- Heart Disease
- High Blood Pressure

Patient Medical History

2010: contracted HSV-1

Patient has experienced in the past some form of physical, sexual, emotional trauma. We have not spoken about it in depth due to scope of practice, but also because she doesn't remember. Her current relationships with men tend to be emotionally unstable.

She is a cutter and binge drinker. When she consumes alcohol she becomes overwhelmingly emotional and has a tendency to cut or cry.

10 Questions Highlights

- tends to run hot; likes the color red, has red hair, red lipstick
- low back pain (pain scale of 5 - dull and achey)
- upper back pain (sharp, fixed with difficulty taking a deep breath) R sided at UB15 (rhomboids/scapula region)
- 2/3's a month temporal headaches

- insomnia (difficulty waking, 6-7 hours of sleep a night, vivid dream disturbed sleep; dreams are violent and sometimes cause her to wake screaming)
 - work related stressors ; appearance of cold sores ; worry does not want to have contagious virus around children
 - craves greasy, salty foods and alcohol
 - menses is light and spotty due to birth control; which she takes inconsistently. PMS symptoms include moods swings, bloating, cramping, back pain, and fatigue.
 - patient feels many emotions regularly; worry, sadness, indecision, anxiety, depression, anger and irritability
-

Patient Examination and Data Collection (Tongue/Pulse)

P: thin, wiry and rapid

T: changes from week to week;

- always swollen, toothmarks, peeled red tip with petechia
- sometimes orangey red color to the body
- sometimes pale body or dusky
- coat can be thin white or yellow or sometimes absent

The patient has fair skin that gets red easily. She is slightly overweight, but holds it well. She is usually in good spirits when I see her, but has come in to the office upset and crying (usually due to break ups).

Upon active and passive range of motion to wrist, elbow, shoulder girdle and neck, patient has normal range of motion, but adhesions in the affected muscles mentioned below. Her shoulders are slightly protracted and her mid thoracic area is hypertonic and lengthened from poor posture and body mechanics. Soft tissue adhesions are found in the muscles pectoralis major and minor, teres minor, infraspinatus, rhomboids and spinal erectors (C7-T7). She also has shortened and tight levator scapula (especially on the right), which poses as a trigger point area at the attachment site of the superior angle of the scapula (medial edge).

Quadratus lumborum and psoas muscles are tight and weak.

CASE ANALYSIS : Etiology & Pathophysiology

There is no cure for herpes simplex. Once a person has the virus, it remains in the body. The virus lies inactive in the nerve cells until triggered. Common triggers are:

- Stress : Physical or emotional
- Illness
- Fever

- Sun exposure
- Menstrual periods
- Surgery
- Fatigue

Traditional Chinese Medicine Diagnosis & Differentiation

I had to use different texts to collect data on Herpes Simplex because it can fall under mouth ulcers and is related to but different from Herpes zoster. In TCM, they do not differentiate between the two, even though they are different 2 different strains of the herpes virus with differing location outbreaks. I wanted to touch on zoster because of the Liver/Gallbladder association and address the dormancy of the disease.

Mouth ulcers “Kou Chuang” are a pathology of the Heart, Spleen and Stomach. The tongue is the sprout of the Heart, while a branch of the Spleen channel spreads out to the undersides of the tongue, and the mouth is the sense organ of the Spleen. The Stomach and Yang Ming channels are closely associated with the gums and buccal cavity; the portion of the oral cavity bounded by the lips, cheeks, and gums (Macleane 696).

The virus invades the body as an external pathogen foremost. Any pathogen is capable of causing mouth ulcers, if it transforms into heat. The Heart and its associated structures are easily affected by heat. The pathogens most associated with acute mouth ulcers are Wind Heat with Damp, Damp Heat, and Toxic Heat (Macleane 698). But because HSV-1 is a recurring virus, it will penetrate deep into the body, lodging in the Ying or blood level and be excreted by external attacks.

The most common etiology of recurring HSV-1, oral herpes, is stagnant heat in the Heart and Stomach/Spleen. The factors that contribute to the generation of internal heat are diet and stress. Hot foods and overindulgence with irregular eating habits weaken the SP/ST and create food stagnation and stagnant heat. Prolonged stress related to the 7 affects/emotions can inhibit the movement of HT qi, resulting in accumulation and stagnation. Smoldering heat in the HT develops into Heart fire. Heat can also be generated in the LV due to stagnation and be transmitted to the HT.

LV Fire due to stagnating heat may be caused by longstanding frustration and resentment or consistent consumption of very warming foods, such as barbequed meats or alcohol. Fire has a natural tendency to flare upwards, which makes it that much easier to trigger any skin eruption on the upper body. Liver Fire is always involved with eye herpes. (Stanescu)

Phlegm and Phlegm Heat, tend to complicate pre-existing pathology, rather than be a primary cause of oral ulcers. The obstruction by Phlegm to qi and blood circulation in the oral mucous membranes, gums or tongue, makes the ulcers persistent and chronic (Macleane 698).

There are other patterns for mouth ulcers; Yin deficiency with Fire, Spleen Yang Qi Deficiency and Heart Blood and Spleen Qi Deficiency. This patients' patterns coincide most with the later and we consequently diagnosed her with HT/SP disharmony predominantly as the root while the outbreaks manifested at different occasions as branches such as: Yin Deficiency with Heart Fire

and /or Liver Fire, LV Qi Stagnation, Blood Heat, ST Heat, and Qi and Blood Deficiency. Mouth ulcers of this type are both chronic and recurrent with both a dietary and emotional component. The ulcers arise because qi and blood are unable to adequately perfuse and nourish the tissues of the mouth. The Spleen is overwhelmed, resulting in insufficient blood and qi leading to blood deficiency. (Maclean 700). It is a viscous cycle, where deficiency engenders stagnation and heat; the blood cannot cool the heat being generated by the HT and LV. Blood further created by the LV, HT, and SP heats up to develop toxins. Treating the Chong Vessel ultimately encompasses the HT and SP disharmony.

The patient does not exhibit the SP Yang Qi Deficiency pattern, which is a more serious SP Qi Deficiency with cold signs. Here the ulcers would be very chronic and slow to heal. In addition, there would be other SP Yang Xu symptoms like loose stool, a history of anorexia, consumption of raw, cold foods. In contrast to ulcers involving HT pathology, there is little or no emotional component in Yang Deficiency ulcers.

Treatment Strategy

The treatment strategy has been to **Harmonize the Chong**, while using additional points to:

- Move Qi & Blood
- Clear Heat, Drain Fire (HT, ST, LV)
- Calm Shen
- Nourish Yin
- Smooth LV

Treatment Discussion

The following points were needled over a number of sessions. Currently we have been focusing on both front and back treatment s or lateral recumbent to address chronic and acute, as well as treating the ulcerative outbreaks on the lips and right shoulder pain/tension with low back pain.

Points	Rationale
NADA	Stress and Anxiety reduction. Shen Men, Muscle relaxant, tranquility, brain, point 0
SP 4 (r) + PC 6 (l)	Harmonize Chong, Tonify Spleen, Calm the HT
LU7 (l) + KD 6 (r)	Master Points and coupled points; Reduce anxiety; regulate menses
HT7 (l) + KD6 (r)	Yin Deficiency and Insomnia
Yin Tang	Calm the Mind
KD1 +DU20	Descends excess from Above, Tonify HT and KD Yin, Grounding

Points	Rationale
LV3 (l) + LI4 (r)	Half of the 4 gates to move Qi + Blood; Smooth, Clear the LV, Command point of Face + Mouth
ST4 thread to ST6	Local points; Clear Heat
DU 26 + CV24	Local points; Intersecting point for LI/ST
ST44	Clear ST Fire
LV 2	Clear LV Fire
SP6 + ST 36	Meeting point of 3 Yin; nourish Yin + Boost Qi; Harmonize Earth
SP9	Drain Damp
UB15, 17, 18, 23	Shu points for local pain and corresponding to HT, Blood, LV, KD

Treatments also include cupping on back, tui na, and herbal formulas.

Treatment Assessment

The treatments keep the HSV-1 breakouts at bay for weeks up to 3 months. Sometimes they do not come to a full head and acupuncture helps to prevent a full eruption; where only tingling and redness are the symptoms. When cold sores are present, they heal fast and are gone within 3 days. These are all improvements.

Biomedical Clinical Sciences

According to the American Academy of Dermatology, herpes simplex is a common viral infection, aka, a cold sore or fever blister. Most cold sores are caused by herpes simplex virus type 1 (HSV-1). Other names for cold sores caused by HSV-1 are:

- Oral herpes.
- Mouth herpes.
- Herpes simplex labialis

Herpes viruses cycle between periods of active disease—presenting as blisters containing infectious virus particles—that last 2–21 days, followed by a remission period.

Genital herpes, however, is often asymptomatic, though viral shedding may still occur. After initial infection, the viruses are transported along sensory nerves to the sensory nerve cell bodies, where they become latent and reside lifelong. Causes of recurrence are uncertain, though some potential triggers have been identified, including immunosuppressant drugs. The previously latent virus then multiplies new virus particles in the nerve cell and these are transported along

the axon of each neuron to the nerve terminals in the skin, where they are released. Over time, episodes of active disease reduce in frequency and severity.

Herpes simplex is most easily transmitted by direct contact with a lesion or the body fluid of an infected individual. Transmission may also occur through skin-to-skin contact during periods of asymptomatic shedding. Barrier protection methods are the most reliable method of preventing transmission of herpes, but they merely reduce rather than eliminate risk. Oral herpes is easily diagnosed if the patient presents with visible sores or ulcers. Early stages of orofacial herpes and genital herpes are harder to diagnose; laboratory testing is usually required.

There are eight types of herpes viruses known to affect humans. They are called the Herpes Human Viruses (HHV). These viruses are:

1. **HHV1 - HSV1 (Herpes Simplex Virus 1 commonly known as oral herpes)**
2. HHV2 - HSV2 (Herpes Simplex Virus 2 commonly known as genital herpes)
3. HHV3 - VZV (Varicella Zoster Virus commonly known as chickenpox or shingles)
4. HHV4 - EBV (Ebstein Barr Virus commonly known as infectious mononucleosis [mono or glandular fever])
5. HHV5 - CMV (Cytomegalo Virus is the most common virus transmitted to a pregnant woman's unborn child)
6. HHV6 - Roseolovirus more commonly known as the 6th disease or Roseola Infantum
7. HHV7 - Similar to HHV6 (not yet classified)
8. HHV8 - A type of rhadinovirus known as the Kaposi's sarcoma-associated herpesvirus (KSHV)

The different types of Human Herpes Viruses (HHV) work differently in your body and therefore cause different symptoms.

Herpes Simplex Virus 1(Oral Herpes)

- Pain
 - Sore muscles
 - Blisters and sores on or around the genital area and lip area.
 - Cold and flu like symptoms.
 - Dormant virus is activated by sunlight, stress, fatigue, pregnancy, injury to genital area or mouth.
 - Rash and bumps on skin
 - Fever
 - Symptoms take 7 to 14 days to clear.
 - Very contagious
- Between 45 to 65 million people are currently infected with genital herpes in the US (more than 1 in 5 Americans) and millions more worldwide.

Herpes Simplex Virus 2 (Genital Herpes)

- Herpes is more common in women (1 in 4 women are infected as opposed to 1 in 5 men) because male to female transmission is more efficient than from a female to a male.
- Compared to 20 years ago Genital Herpes is now twice as common especially amongst adults between the ages of 20 and 30yrs.

- Only 20 to 30 percent of patients suffering from herpes see a doctor.
- 10% or less of those who test positive with herpes knew they were infected.

Patient Counseling/Education

There are many treatments available for herpes.

- Taking Vitamin C and Zinc helps to boost your immune system and fight infections.
- A warm soothing bath for Chickenpox, Herpes and Shingles is good.
- Applying Aloe Vera cream to an HSV affected areas and for chickenpox can ease the discomfort.
- Taking Aspirin or Ibuprofen can relieve pain.
- For HSV1 and HSV2 always keep the infected areas dry.

Other homeopathic remedies are:

- amino acids (esp. arginine and lysine)
- apis (bee sting remedy)
- lomatium (desert parsley)
- rhus toxicodendron (dilution of poison oak)
- sepia (cuttlefish ink)

The patient was recommended to drink plenty of water and to cut out all hot foods. It was communicated that she should slowly begin reducing foods rich in sugar from her diet. She was also shown some abdominal breathing techniques to ground her energy and bring her breath deeply into her body. The patient was given ear seeds and a chart of the Nada points to administer at home.

Patient Prognosis

Patient is getting better at identifying the start of an outbreak and comes in for acupuncture to control the severity of the outbreaks. Since she has been coming, for 1 year now, the ulcers have been reduced in size and to a smaller location (left lower lip); instead of both lips, left and right. However, it is important to note that she does have recurring outbreaks every 5 to 7 weeks without fail. Her latest treatment, she did not come in for treatment of the cold sores, but a sty on the lower lid of her left eye.

Dietary and lifestyle recommendations must be adhered to, to further improve treatment.

Critique and Self-Assessment

I have been meaning to ask patient if there is a correlation between work/stress level and outbreaks. After going over the soap notes in detail, I noticed the longest durations of dormancy occurred during Spring Break (March to April), and Summer Break (July to September). Since she is a babysitter, her work load decreases during school breaks when the kids spend more time with their families. Helping to notice the pattern can help us treat her more vigorously at the

start of the school terms. I also did notice an increase in outbreaks during the spring, which can have a correlation to LV/Wood element and late summer/early autumn, which is SP/Earth element.

References

American Academy of Dermatology. Herpes Simplex. October 27, 2014.

<https://www.aad.org/dermatology-a-to-z/diseases-and-treatments/e---h/herpes-simplex>

Jacob, Jeffrey H. The Acupuncturist's Clinical Handbook. Aesclapius Press, Santa Fe, New Mexico. 2002.

Maclean, Will. Clinical Handbook of Internal Medicine. The Treatment of Disease with Traditional Chinese Medicine. Volume 2 Spleen and Stomach. 2002 University of Western Sydney

Stanescu, Adina. Traditional Chinese Medicine for Herpes Simplex. October 27, 2014. Vitality Magazine. <http://vitalitymagazine.com/article/traditional-chinese-medicine-for-herpes/>

Stengler Mark, ND - The Natural Physician's Healing Therapies. Proven Remedies That Medical Doctors Don't Know About. 2001 Prentice Hall Press.