

Influence of TCM External Therapy in the Gynecological Perioperative Period

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Abstract:

During the perioperative period of gynecological surgery, patients often experience symptoms such as insomnia, abdominal distension, nausea, and vomiting due to excessive anxiety and tension. These symptoms, including postoperative complications, increase patient pain and anxiety while complicating treatment. This paper analyzes the etiology and pathogenesis of issues arising in the gynecological perioperative period. It reviews the clinical application of TCM external therapies, including acupoint application, foot bath, and fumigation-washing, in recent years. The study summarizes the effects and efficacy of TCM external therapies in alleviating various clinical symptoms during the gynecological perioperative period.

Keywords:

TCM External Therapy, Gynecology, Perioperative Period, Acupoint, Foot Bath, Fumigation-washing Method

1. Introduction

With the continuous advancement of medical technology, surgical intervention has become the preferred and clinically effective option for treating gynecological diseases. Compared to traditional open surgery with large incisions and slow recovery, laparoscopic techniques have flourished in the 21st century. However, patients' fear of surgery and disease-related concerns persist, often leading to excessive anxiety, insomnia, nausea, abdominal distension, pain, and other discomforts during the perioperative period [1]. TCM external therapy is a distinct therapeutic approach differing from oral medication. It encompasses methods such as acupoint application, foot bath, and fumigation-washing. Guided by TCM theory, it utilizes the local stimulating effect of herbs, direct drug penetration, regulation through the meridian system, distribution via the Zang-fu organs, and skin absorption to achieve therapeutic outcomes. Essentially, TCM external therapy unifies the penetrative properties of medicinal substances with the skin's absorptive function. The absorbed substances enter systemic circulation and exert direct or indirect therapeutic effects locally or on the Zang-fu organs through the comprehensive regulatory and distributive functions of the meridians and organs. Additionally, these methods are relatively simple to perform, have broad indications, and are associated with minimal side effects, being

non-invasive and painless [2]. This paper reviews the influence of TCM external therapy in the gynecological perioperative period, finding that it can alleviate a series of stress responses, reduce patient tension, and promote recovery.

2. Gynecological Perioperative Period

The gynecological perioperative period [3] refers to the entire process surrounding a gynecological surgery, from the decision for surgical treatment until the patient is nearly recovered. It is primarily divided into the preoperative, intraoperative, and postoperative phases based on different time points. Key tasks during this period include: comprehensively assessing the patient's physical and mental health preoperatively and implementing measures to optimize surgical tolerance; ensuring patient safety and smooth surgical progress intraoperatively; and helping the patient regain physiological organ function as early as possible postoperatively, preventing complications and disabilities to achieve comprehensive and rapid recovery.

2.1. Clinical Manifestations in the Gynecological Perioperative Period

Common complications after gynecological surgery include abdominal distension, failure to pass flatus, poor appetite, excessive blood loss, deficiency of qi and blood, and blood stasis obstruction. Clinically, Western medical approaches like anti-infection and fluid replacement are often used for symptomatic treatment, alongside TCM conditioning to promote rapid recovery of vital energy [4].

2.2. Etiology and Pathogenesis in the Gynecological Perioperative Period

2.2.1. Gastrointestinal Distension

Postoperative weakness in gastrointestinal peristalsis leads to stagnation of qi movement, causing gas accumulation and distension in the abdomen. To prevent intestinal and pelvic adhesions, clinical practice often involves administering Paiqi Decoction postoperatively or applying acupoint patches to promote intestinal motility and restore gastrointestinal function quickly. These methods regulate qi and strengthen the spleen while enhancing the descending function of qi, collectively achieving the effect of regulating qi, awakening the spleen, opening the appetite, and descending qi. This induces frequent bowel sounds and allows gas expulsion through belching or flatulence, effectively relieving distension [5].

2.2.2. Blood Stasis and Internal Obstruction

For gynecological surgeries involving intrauterine procedures (e.g., dilation and curettage, abortion, hysteroscopy), Sheng Hua Decoction is commonly used postoperatively to invigorate blood, resolve stasis, and promote uterine contraction. Heavy bleeding after surgical or medical abortion is often due to retained embryonic tissue, preventing normal uterine contraction and leading to prolonged vaginal bleeding. "If the static blood is not removed, the bleeding will not stop" [6]. The retained tissue causes stasis in the uterus, akin to blood failing to return to its channels. Foot bath with Sheng Hua Decoction [7] or oral administration are common clinical methods. Ingredients like Dang Gui (*Angelica sinensis*) invigorate and tonify blood, exerting a bidirectional regulatory effect on uterine contraction: its water-soluble, non-volatile, crystalline components stimulate and enhance contraction, while its volatile oil inhibits contraction, promoting relaxation, thus also providing sedative, analgesic, and anti-inflammatory effects. Chuan Xiong (*Ligusticum chuanxiong*), Yi

Mu Cao (*Leonurus japonicus*), and Tao Ren (*Prunus persica*) activate blood circulation and dispel stasis, promoting uterine contraction to expel retained material. Pao Jiang (*Zingiber officinale rhizoma praeparatum*) and Gan Cao (*Glycyrrhiza uralensis*) regulate the nutrient system, resolve stagnation, calm the uterus, and stop bleeding. Warm water foot baths[8] relax the soles, open pores, and facilitate the distribution of medicinal effects through meridian points to the whole body, promoting blood circulation and the expulsion of stasis. This method is simple, easy to perform, utilizes readily available herbs, and effectively addresses clinical issues.

2.2.3. Poor Appetite

Even after postoperative passage of flatus and stool, many patients experience poor appetite, reluctance to eat, or thin white slightly greasy tongue coating, sometimes accompanied by low-grade fever (37-38°C). External application of pungent, aromatic, and warming herbs can be used, which warm the meridians, invigorate blood, resolve stasis, regulate qi, and alleviate pain. Common herbs include Fu Zi (*Aconitum carmichaelii*), She Xiang (*Moschus*), Gan Jiang (*Zingiber officinale*), Rou Gui (*Cinnamomum cassia*), Sha Ren (*Amomum villosum*), Hong Hua (*Carthamus tinctorius*), Ru Xiang (*Boswellia carterii*), Wu Zhu Yu (*Evodia rutaecarpa*), Wu Yao (*Lindera aggregata*), Xiang Fu (*Cyperus rotundus*), Chen Pi (*Citrus reticulata pericarpium*), and Cong Bai (*Allium fistulosum bulb*). In clinical practice, specific proportions are calculated, herbs are ground into powder and mixed with ginger juice, vaseline, or honey, then applied to acupoints like Zusanli (ST36), Neiguan (PC6), and Hegu (LI4) to strengthen the spleen, boost qi, awaken the spleen, and stimulate appetite. Improved appetite aids nutritional intake and recovery [9].

2.2.4. Postoperative Blood Deficiency

During postoperative recuperation, as appetite gradually improves, supplementation of qi and blood should be considered to support vital qi and eliminate pathogens. As women are fundamentally governed by blood, dual deficiency of qi and blood is common post-gynecological surgery, especially after procedures involving significant blood loss. Symptoms include fatigue, pale or sallow complexion, lassitude, blurred vision, pale lips, palpitations, insomnia, and a thready weak pulse. Treatment should focus on TCM formulas to strengthen the spleen, boost qi, and nourish blood [10].

2.2.5. Postoperative Qi Deficiency with Fever and Sweating

Many patients experience symptoms like shortness of breath, fatigue, spontaneous sweating, low-grade fever, and a pale red tongue with thin white coating postoperatively, indicating qi deficiency. TCM treatment principles involve boosting qi in the middle burner, generating fluids, and arresting sweating, stopping treatment once effective to avoid trapping pathogens [11].

3. Treatment with TCM External Therapy

TCM external therapy in the perioperative period provides significant physical and psychological support, enhances patient tolerance during surgery, helps patients navigate the perioperative period optimally, prevents or reduces postoperative gastrointestinal complications, and facilitates early recovery. Common methods include acupoint application, foot bath, and fumigation-washing [12]. Acupoint application [13] involves grinding fresh or dried herbs into powder, mixing it with egg white, vaseline, or garlic juice, and applying it directly to affected areas or specific

acupoints. Therapeutic effects are achieved through local drug absorption and acupoint stimulation. Foot bath [14], a key TCM external therapy, involves soaking feet in a decoction of herbs and hot water. It relieves fatigue, improves sleep, delivers herbal effects, improves local blood circulation via warm water, dispels cold pathogens, and promotes the elimination of metabolic waste, ultimately promoting health maintenance. Fumigation-washing [15] involves steaming and washing the external genitalia with a hot herbal decoction. The decoction acts via the skin and mucous membranes, promoting the opening of pores (cou li), ensuring the smooth flow of qi and blood in the Zang-fu organs, thereby preventing and treating diseases, particularly external genital conditions like eczema, pruritus, and ulcers.

4. Precautions for TCM External Therapy in the Gynecological Perioperative Period

First, all preparations must be standardized and sterilized before use. Self-decocted external solutions must be boiled for 20-30 minutes before use. Second, any important treatment area must be cleaned and disinfected to prevent infection. Third, intravaginal routine treatments are contraindicated 3 days before and after menstruation. External therapies should be used minimally during pregnancy and immediately postpartum. Fourth, sexual intercourse and bathing in tubs should be avoided during external treatment. Fifth, the principle of combining local external therapy with systemic treatment should be emphasized based on the holistic concept, highlighting TCM syndrome differentiation and treatment [16].

5. Application of TCM External Therapy in the Gynecological Perioperative Period

5.1. Acupoint Application

5.1.1. Promoting Recovery of Gastrointestinal Function

Gynecological surgery involves anesthesia and trauma, with gastrointestinal reactions being among the most common perioperative issues, occurring in 20%-30% of cases, reaching up to 46% after laparoscopy [17,18]. Clinical statistics show that gynecological surgery impacts the intestines. Shortly after surgery, due to anesthetic effects and mucosal trauma, patients may experience impaired flatus passage, such as distension and vomiting [19]. Current Western treatments often involve antiemetics and non-pharmacological methods, but these can cause side effects like allergies, fever, headache, dizziness, anxiety, and even rare severe complications [20,21]. TCM acupoint application involves preparing herbal substances into various forms and applying them to specific body surface acupoints based on meridian theory to achieve systemic effects. Huang Jiani et al. Xu Hongjie [22] applied TCM acupoint patches to bilateral Sanyinjiao (SP6), Hegu (LI4), Zusanli (ST36), and Neiguan (PC6) in postoperative gynecological patients, accompanied by acupoint massage (3 days/week, 1 minute/acupoint). The treatment group showed significantly better outcomes in time to first flatus, time to first defecation, and gastrointestinal reactions compared to the control group.

5.1.2. Alleviating Preoperative Anxiety

Most gynecological surgery patients experience anxiety about the surgery's success and potential pain, a normal reaction. However, unclear understanding of the

procedure can lead to excessive tension and anxiety, with insomnia being the most detrimental to recovery [23]. Zhou Jia et al. [24] applied an herbal paste (Ciwujia/Acanthopanax senticosus 30g, Chuanxiong/Ligusticum chuanxiong 20g, Houpo/Magnolia officinalis 10g, ground in a 3:2:1 ratio and mixed with vinegar) to Shenque (RN8), Tianshu (ST25), Zusanli (ST36), and Sanyinjiao (SP6) acupoints 1 hour preoperatively, once daily in the morning for 8 hours each time. Their State-Trait Anxiety Inventory (STAI) scores significantly decreased compared to the state 30 minutes before surgery. Stimulation of acupoints and skin absorption of drugs trigger meridian-mediated systemic regulation, exerting significant pharmacological effects.

5.1.3. Relieving Postoperative Pain

While cesarean section reduces labor pain, postoperative incision pain causes significant concern. Patients undergo oxytocin administration and uterine massage accompanied by wound pain. For severe pain, Western medicine often uses patient-controlled analgesia (PCA) pumps or analgesics [25]. While pain is relieved, PCA pumps can restrict mobility, increasing the risk of postpartum abdominal distension and deep vein thrombosis. Analgesics may also cause nausea and vomiting. Acupoint application uses herbs like Dang Gui (Angelica sinensis), Chuan Xiong (Ligusticum chuanxiong), Wu Zhu Yu (Evodia rutaecarpa), Pao Jiang (Zingiber officinale rhizoma praeparatum), and San Qi (Panax notoginseng) mixed with vinegar into medicinal cakes applied to Zigongxue (Extra point), Guanyuan (RN4), Qihai (RN6), and Shenque (RN8). These herbs primarily invigorate blood, resolve stasis, warm and tonify qi and blood, aiding rapid uterine recovery and warming the postpartum weakened body. Stimulating these acupoints regulates the Chong and Ren meridians, warms and promotes qi and blood flow, facilitating the expulsion of lochia [26]. The applied substances act directly on specific acupoints or lesion surfaces, causing local vasodilation, accelerating blood circulation, and achieving effects like activating blood, resolving stasis, reducing swelling, and alleviating pain. Compared to Western mechanisms, TCM is more conducive to fundamentally regulating the postpartum body's special condition, warming and tonifying qi and blood, promoting lactation, not only relieving pain but also minimizing impact on breastfeeding.

5.2. Foot Bath

5.2.1. Promoting Preoperative Tranquility

Surgery is the primary treatment for gynecological diseases. Despite technical advances, patients remain anxious about the procedure, often experiencing significant preoperative tension and anxiety, leading to insomnia and irritability [27]. TCM foot bath is a relaxing modern physiotherapy method. Soaking feet in a herbal decoction stimulates meridian points on the soles via the skin. Warm water causes vasodilation in the soles, increasing local blood flow and diverting more blood to the lower extremities' peripheral vessels, inducing drowsiness and tranquility. Peripheral nerves are temperature-sensitive; warming the soles relaxes them, aiding sleep. Women are fundamentally governed by the Liver; thus, Liver qi stagnation is common. Herbs like Chai Hu (Bupleurum chinense), Chen Pi (Citrus reticulata pericarpium), and Zhi Zi (Gardenia jasminoides) for soothing the Liver and relieving stagnation are often used in decoctions, sometimes with Ai Ye (Artemisia argyi) [28]. This regulates qi movement, facilitates the smooth flow of defensive qi into the yin aspect to interact with nutrient qi, balances yin and yang, ensures normal Zang-fu function, reduces preoperative anxiety, improves sleep quality, and benefits surgical progress.

5.2.2. Promoting Postoperative Flatus Passage with Warm Foot Bath

Anesthetics used in gynecological surgery affect abdominal organs, potentially causing colonic or gastric paralysis. Flatus usually passes spontaneously within 2-3 days postoperatively, after which oral intake can resume. Earlier resumption of normal diet aids recovery. Warm foot bath is a traditional TCM physiotherapy. “Blood moves with warmth and stagnates with cold.” Warm water stimulates acupoints on the soles, fully opening the foot meridians, accelerating qi and blood flow, enhancing metabolism. According to meridian pathways, this promotes the smooth function of corresponding organs, enhances gastrointestinal motility, regulates qi movement, facilitates early flatus passage, and enables earlier feeding [29]. Warm foot bath, based on both modern foot reflexology and traditional TCM theory, recognizes reflex zones on the soles corresponding to bodily organs. Stimulating these zones enhances endocrine system regulation of organ function and promotes blood circulation [30]. Stimulating zones corresponding to the anus, colon, and small intestine enhances their metabolic function, promotes gastrointestinal motility, facilitates early postoperative flatus passage, and enables earlier feeding to promote recovery. Warm water stimulation of sole acupoints also reduces pain and fatigue, inducing a more relaxed state, further mitigating surgical trauma [31].

5.3. Fumigation-Washing Method

5.3.1. Relieving Vulvar Pruritus

Vulvar pruritus is a common symptom in various gynecological diseases during the perioperative period. It can occur alone or with other vulvovaginal conditions, presenting with a normal vulva or signs like vesicles, erythema, fissures, or lichenification. Its high recurrence rate significantly impacts patients’ physical and mental health. Pang Chao et al. compared the efficacy of TCM fumigation-washing for simple vulvar pruritus [32]. The treatment group received herbal fumigation-washing (composed of Ku Shen/Sophora flavescens 50g, Long Kui/Solanum nigrum 20g, Ma Chi Xian/Portulaca oleracea 20g, Long Dan Cao/Gentiana scabra 30g, Ku Shen/Sophora flavescens 30g, Huang Bai/Phellodendron chinense 30g, Chuan Jiao/Zanthoxylum bungeanum 20g, Bai Bu/Stemona sessilifolia 30g, Che Qian Zi/Plantago asiatica 30g, Bai Xian Pi/Dictamnus dasycarpus 30g, Bo He/Mentha haplocalyx 20g), followed by topical application of Perrigo cream (Xi'an Janssen Pharmaceutical) or a small amount of erythromycin ointment. The control group used only Perrigo or erythromycin ointment. Both groups performed fumigation-washing twice daily. After one week, the treatment group showed significant reduction in vulvar pruritus and disappearance of skin fissures. Continued treatment for several weeks eliminated pruritus, with the vulva returning to normal except for hyperpigmentation [32]. Medicinal substances from fumigation-washing can be absorbed through the skin, primarily via epidermal keratinocytes, intercellular spaces, sweat glands, hair follicles, and sebaceous glands, exerting antibacterial and antipruritic effects. In TCM, vulvar pruritus often results from “insect erosion” (infection) and persistent damp-heat. This decoction primarily dispels wind, eliminates dampness, kills parasites, and stops itching. Perrigo has prominent antifungal and antipruritic effects. Erythromycin ointment contains vaseline, providing good emollience for fissured skin/mucosa, reducing discomfort [33]. Combining TCM fumigation-washing with Western medicine offers synergistic

effects, yielding better therapeutic outcomes. It is simple, easy to perform, has few side effects, and is widely applicable clinically.

5.3.2. Dampness Removal and Itch Relief for Vagina

The most common symptoms of female external genitalia are vulvitis and vaginitis. Removing dampness and relieving itching are primary methods for symptom relief. Fumigation-washing with Ai Cao (*Artemisia argyi*) has certain dampness-removing and itch-relieving effects and can improve various pruritic skin conditions like eczema and vulvar pruritus [34]. Clinically, Ai Ye can be boiled in water for about 15 minutes, removed, and the warm decoction used for perineal fumigation-washing. While relieving vulvitis and vaginitis symptoms, it improves vulvar itching. Using Ai Cao as moxa sticks for perineal fumigation is not recommended clinically. Ai Ye is a herb of pure yang nature; fumigation-washing with Ai Rong steadily strengthens yang qi, dispels cold, eliminates dampness, and unblocks meridians. It provides auxiliary therapeutic effects for dysmenorrhea, uterine cold, and yang deficiency in women [35]. During perineal fumigation-washing with Ai Cao, a clean environment is essential to prevent foreign bodies or Ai Cao from entering the vagina and causing infection or inflammation. The main chemical components of Ai Cao include volatile oils, tannins, flavonoids, alcohols, polysaccharides, and trace elements, all contributing to body regulation, sterilization, dampness removal, and itch relief. Ai Cao fumigation-washing should not be used too frequently, as it can disrupt the normal vaginal flora balance [36].

6. Conclusions

In summary, TCM external therapy is convenient to apply. It can alleviate gastrointestinal reactions, pain, sleep disturbances, and other symptoms during the gynecological perioperative period, reduce medical costs, minimize adverse drug reactions associated with perioperative complications, accelerate patient recovery, and is safe and simple. Therefore, the application of TCM external therapy in the gynecological perioperative period should be further promoted.

Conflicts of Interest

The authors declare that there is no conflict of interest regarding the publication of this article.

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