

Efficacy of TCM Therapy of Claustrophobia: A Case Report

Bing-Sheng Yuan^{1*}

Abstract: Mrs. S, 55 years old, suffered from claustrophobia for more than 30 years, aggravated for 3 years, with anxiety, headache and tremor. All kinds of treatments were ineffective. July 2, 2019, First visiting my clinic, according to traditional Chinese medicine, she was diagnosed as clandestine phobia/psychosis (panic), which was caused by panic injury of kidney and brain loss. Treatment principle is tonifying Spleen and Kidney, benefiting Qi and blood, adjusting Du meridian, Chong meridian, and Ren meridian; assist in resolving phlegm and tranquilizing heart. After five acupuncture and traditional Chinese medicine, Mrs. S take the elevator (closed and windowless) three times this week, without any discomfort. No panic palpitations have occurred in recent week.

Keywords: Clandestine phobia; Chinese medicine; Herbal medicine; Acupuncture; Case report

Introduction

Claustrophobia is a type of specific phobia, where one has a fear of closed spaces. Examples of closed spaces are elevators, cars, airplanes, etc [1]. Patients feel anxious, panic, shortness of breath, rapid heartbeat, blushing and sweating because they fantasize that they can not escape the panic situation. In severe cases, they will suffer from asphyxia, dizziness and a sense of near death. However, once patient leave this environment, the patient's physiology and behavior will quickly return to normal [2]. The emergence of claustrophobia is not caused by a single factor, but comprehensive, such as individual growth experience, personality temperament, psychological stress and other factors, especially closely related to the traumatic experience of an individual in infancy [3]. Common treatment measures include psychological induction, full irrigation, cognitive therapy, systemic desensitization therapy, etc [4]. However, these methods require higher conditions in clinical practice and are generally difficult to implement. Modern clinical studies have shown that acupuncture therapy has unique advantages in regulating mental and emotional disorders such as anxiety [5-7]. Here, we report a case of a patient with Serious claustrophobia, being successfully treated by TCM therapy.

Patient information

Mrs. S, 55 years old, suffered from clandestine phobia for more than 30 years, aggravated for 3 years, with anxiety, headache and tremor. Since adolescence, the patient have been afraid of enclosed spaces such as elevators, windowless toilets or other rooms. She was diagnosed as clandestine phobia in hospital, and all kinds of treatments were ineffective. Being inquired about the reasons, Mrs. S said when she was a teenager, She was trapped closed toilet for more than 10 minutes because she could not open the lock after going to the toilet in adolescence. Later, when encountering closed space or windowless rooms, especially elevators or some windowless toilets, She feel nervous, anxious, short of breath, even unable to breathe, trembling, sweating, feeble hands and feet, and unable to open the door. In the past three years, the illness has aggravated for unknown reasons and the patient feel panic Attack in crowded or unfamiliar environments. The patient are often nervous, anxious and have headaches. She is always worried about cyclists in the park and about being locked up in bars. The patient has provided written informed consent for the publication of the case.

Clinical findings

Cun pulse of both hands is floating and thready;

¹Chief TCM Physician, Dr. Yuan Herbs & Acupuncture (TCM Clinic), 331, England, DN4 6TR, United Kingdom.

^{*}Corresponding: Bing-Sheng Yuan, E-mail: Yuanbingsheng@gmail.com.

Guan pulse is slippery and agitated, and the Chi pulse is deep and thin. The tongue is light red and the middle and posterior parts of the tongue coating are greasy (Fig. 1 A). Longitudinal fissures were found in the central part of the anterior part of the tongue, and depressions and folds were found in the left part of the anterior part. There are huge fissures in both heels and the medial and lower part of the first metatarsal bone in front of the sole for five years, which are accompanied by pain and affect walking, especially serious in summer; the left side is more serious. The longest fissure is about 5-6 cm and the depth is about 0.5 cm (Fig. 1B). Sleep and eat well, urinate 3 times at night; 5 years of menopause. She often feeling hot and sweating. Because of psychological pressure, She usually drink alcohol, three times a week.

Diagnosis

She was diagnosed by tongue and pulse examination from TCM. Diagnosis of the TCM finally confirmed Panic injuries kidney and brain dystrophy internally. Treatment principle: Tonifying Spleen and Kidney, Benefiting Qi and Blood, Adjusting Du, Chong and Ren Meridians; Assist in resolving phlegm and tranquilizing heart.

Treatment

On July 2, 2019, the patient first sought TCM treatment in our clinic. The patient was first placed in a comfortable supine position. Subsequently, the acupuncture physician pointed on Yongquan point (KI 1), Waiguan point (SJ 5), Linqi point (GB41), Taixi point (KI 3), Yingu point (,KI 10), Shenmen point (HT 7), Neiguan point (PC 6), Baihui point (GV 20), Xuanji point (RN 21), Juque point (RN 14), Qihai point (RN 6), Guanyuan point (RN 4),

Tianshu point (ST 25). The acupuncture physician used 0.25 x.30mm sterile acupuncture needles. The angle of the needles was 15°,45° or 90°, and the depth of the acupuncture was 0.5 to 0.8 cun. Because the patient is afraid of pain, and clandestine phobia belongs to mental disease, light prick was used. After acupuncture at the above points, manipulation was performed to make it deqi, and the needles were placed for 30 minutes. And give Chinese herbal medicine: Guizhi Gancao add Longgu Muli Tang, Additional bitter cardamon, longspur epimedium, cultivated land for treatment Xin Shen. Additional Dingzhi Xiaowan for Invigorating the spleen and resolving phlegm, Additional the root of redrooted salvia, Dried tangerine peel for Regulating Qi and activating blood circulation (Tab.1). CHM composition (Tab. 1), which was used for the patient, were The CHM composition were decocted in 300ml water for oral administration with 150ml decoction twice daily. This patient received a TCM monotherapy for 14 days, with no other drug used during this period.

After the previous treatment, the patient had occasional mild headache and was still sensitive and tense to the enclosed space, leaving no discomfort. The tongue and pulse are as before. On July 8, 2019, the patient received a second treatment. Needling the following: Shenmai (BL62), Houxi SI 3(), Baihui (DU 20), Xuanzhong (GB 39), Zusanli (ST 36), Sishen Cong (EX-HN 1), Fuliu (KI 7), Jiuwei (RN 15), Neiguan (PC 6), Shenmen (RT7) acupoint. The operation method is as above.

July 16, 2019, Third visit

The general condition improved markedly. Urine decreased to 2 times in the past week. Good sleep, no headache, relief of anxiety, mental improvement. But the patient are still anxious and fearful in confined



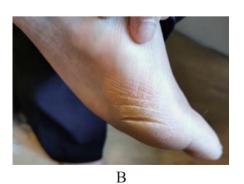


Figure 1 The characteristics of tongue and sole before treatment

spaces. She only took TCM twice because of feeling bitter. Both Cun pulse and Guan pulse is string, slippery and large; Chi pulse is weak, deep and thin. The Shendao (DU 11) and Pohu (BL 42), Shentang (BL 44), Geguan (BL 46), Yishe (BL 49) and Zhishi (BL 52) acupoints are tender.

Needling the following: Zulinqi (GB 41), Waiguan (SJ 5), Houxi (SI 3), Baihui (DU 20), Sishen Cong (EX-HN 1), Fengfu (DU 16), Qiangjian (DU 18), Naokong (GB 19), Dazhui (DU 14), Shendao (DU 11), Pohu (BL 43), Shentang (BL 44), hunmen (BL 4), Yishe (BL 49), Zhishi, (BL 52). Yingu (KI 10), Fuliu (KI 7), Jugu (LI 16), Jianliao (SJ 14) point.

July 22, 2019, Fourth visit

"A little less anxiety about being in an closed space". Cun pulse on the right is floating and Guan pulse is slippery. Cun pulse and Guan pulse on the left is wiry. Both Chi pulse is weak. Right Cun pulse shifted significantly inward. The colour of tongue was dark and tongue body was fat, slightly swollen in the front, with depression and folds, and posterior middle tongue coating is greasy.

Needling the following: Zhaohai (KI 6), Lieque (LU 7), Yongquan point (KI 1), Zhiyin (BL 67), Baihui (DU 20), Sishen Cong (EX-HN 1), Fengfu (DU 16), Qiangjian (DU 18), Naokong (GB 19), Shenzhu (DU 12), Shendao (DU 11), Pohu (BL 43), Shentang (BL 44), hunmen (BL 4), Yishe (BL 49), Zhishi (BL 52), Mingmen (DU 4), Yaoyangguan (DU 3).

July 29, 2019, Fifth visit

After early treatment, her condition improved greatly. In recent days, the discomfort of the patients has been alleviated, and the breathing has improved significantly when the patients enter the closed space. Needling the following: Shenmai (BL 62), Houxi (SI 3), Yongquan point (KI 1), Zhiyin (BL 67) point.

August 5, 2019, Sixth visit

After five treatments, there is no discomfort now. No headache, no obvious anxiety, feeling very calmer. The patient took the elevator (closed and windowless) three times this week without any discomfort. No panic palpitations have occurred in recent weeks. The chap of the foot (anterior part of the sole and heel) has only a slight indentation. Continue the former method of treatment and consolidation (Fig.2).

Outcome assessment

Take the elevator (closed and windowless) three times this week, without any discomfort. No panic palpitations have occurred in recent weeks.



Figure 2 The characteristics of sole after treatment

Follow-up

During the treatment period of Chinese medicine, she did not take any other medication except to take 1-2 weeks of Chinese medicine (because she felt bitter and did not take it again). On December 17, 2019, she visited to treat for pain in her left leg because of a three-day walk. She said she had never felt panic attacks or palpitations and had no problems in closed rooms such as elevators or toilets over the past 2-3 months. She was pleased with the result.

Discussion / comment

Specify the significant and difficult for the diagnosis or treatment of this case; highlight the strengths and characteristics, elaborate the rationale of prescription, and the take away message from this case. Joy anger, worry, miss, and fear are the normal emotional response of people to things. If in a certain extent, they are normal. But if the emotional response to anger, anxiety, fear is too sensitive, abnormal or excessive, it is a mental disorder. The abnormal mind is often caused by the discord between yin and Yang, Qi and blood of the five-Zang (五肚), which affects the function of the five-Zang. Neijing Tiaojing Lun recorded "Over blood makes you angry, blood insufficiency makes you fear".

This patient suffered from clandestine terror, which lasted 30 years. Her Cun and Guan pulse is large and two Chi pulse is deep and weak, which is the manifestation of kidney deficiency. Kidney deficiency causes fear and disturbance. These is a crack in the center of the anterior tongue and a depression on the left of the anterior tongue, which was the manifestation of insufficiency of Qi and blood in the heart and brain. The sole of the foot

Table 1 Acupuncture and Chinese medicine treatment

Visiting time	Acupuncture point	Traditional Chinese medicine
July 2, 2019	Yongquan point (KI 1), Waiguan point (SJ 5), Linqi point (GB41), Taixi point (KI 3), Yingu point (,KI 10), Shenmen point (HT 7), Neiguan point (PC 6), Baihui point (GV 20), Xuanji point (RN 21), Juque point (RN 14), Qihai point (RN 6), Guanyuan point (RN 4), Tianshu point (ST 25).	
July 8, 2019	Shenmai (BL62), Houxi (SI 3), Baihui (DU 20), Xuanzhong (GB 39), Zusanli (ST 36), Sishen Cong (EX-HN 1), Fuliu (KI 7), Jiuwei (RN 15), Neiguan (PC 6), Shenmen acupoint (RT7)	nese medicine powder): Cin-
July 16, 2019	Zulinqi (GB 41), Waiguan (SJ 5), Houxi (SI 3), Baihui (DU 20), Sishen Cong (EX-HN 1), Fengfu (DU 16), Qiangjian (DU 18), Naokong (GB 19), Dazhui (DU 14), Shendao (DU 11), Pohu (BL 43), Shentang (BL 44), Hunmen (BL 4), Yishe (BL 49), Zhishi, (BL 52). Yingu (KI 10), Fuliu (KI 7), Jugu (LI 16), Jianliao (SJ 14) point.	
July 22, 2019 July 29, 2019	Zhaohai (KI 6), Lieque (LU 7), Yongquan point (KI 1), Zhiyin (BL 67), Baihui (DU 20), Sishen Cong (EX-HN 1), Fengfu (DU 16), Qiangjian (DU 18), Naokong (GB 19), Shenzhu (DU 12), Shendao (DU 11), Pohu (BL 43), Shentang (BL 44), hunmen (BL 4), Yishe (BL 49), Zhishi (BL 52), Mingmen (DU 4), Yaoyangguan (DU 3) Shenmai (BL 62), Houxi (SI 3), Yongquan point (KI 1), Zhiyin (BL 67) point.	
August 5, 2019	Same treatment as last time	

is the place where the kidney meridian is injected; the medial margin of the foot belongs to the spleen-Taiyin meridian. Severe chap in the first metatarsal bone of the foot and heel is the manifestation of insufficiency of Qi and blood in the spleen and kidney meridians of foot Taiyin and foot Shaoyin. Therefore, the treatment is to nourish the spleen and kidney, enrich Qi and blood, adjusting Du, Chong, Ren meridians; assist in resolving phlegm and tranquilizing heart.

Zhenjiu Dacheng 《 针 灸 大 成 》recorded acupuncture at Baihui (DU 20) point could cure

palpitation and amnesia, acupuncture at Qiangjian (Du 18) point could cure headache and dizziness, and acupuncture at Fengfu (DU16) point could cure typhoid fever and wandering to commit suicide. Acupuncture at Shenzhu (DU 12) Point can be treated Epilepsy, etc; Acupuncture of Shendao (DU 11) Point can be Treated forgetfulness and palpitation. Next, needling Baihui point (GV 20), Shenzhu (DU 12), Shendao (DU 11) Pohu (BL 43), Shentang (BL 44), Hunmen (BL 4), Yishe (BL 49), and Zhishi, (BL 52) to dredge the Du Meridian and play a role in waking up the brain.

CASE REPORT



The principle of traditional Chinese Medicine in the treatment of psychiatric disorders is the homology of Shen (神) and Qi, which is commonly used in TCM Tuina, acupuncture, traditional Chinese Medicine or language induction.

References

- Vadakkan C, Siddiqui W. Claustrophobia. Treasure Island (FL): StatPearls Publishing; 2019 May 13.
- 2. Fang H, Yang H, Zhu HX, et al. Clinical appearances and psychological nursing for patients with Claustrophobia in MRI. Journal of Nurses Training, 2007, 22(18): 1694-1695.
- 3. Wu HG, Kang LQ. Psychological nursing of the patients with claustrophobia undergoing MRI. Hebei Medicial Journal, 2010, 32(10): 1336.
- 4. Guo ZL. Claustrophobia's Defense Strategy and Methods Under the Sight of Psychology. Journal of Henan Mechanical and Electrical Engineering College. 2014; 22(3): 63-65.
- 5. Bombi Lee, Seung-Nam Kim, Hi-Joon Park, et al. Research advances in treatment of neurological and psychological diseases by acupuncture at the Acupuncture Meridian Science Research Center. Integrat Med Res. 2014(3): 41-48.
- 6. He W, Zhou QZ, Yu SG, et al. Study on the mechanism of A-type natriuretic peptide receptor in anti anxiety effect of acupuncture "Ningxin Anshen" Chinese Acupuncture & Moxibustion, 2015, 35(1): 101, 104.
- 7. Li ZH, Zou W, Yu XP. Observation on the immediate effect of acupuncture on 23 cases of claustrophobia. Chinese Acupuncture & Moxibustion, 2018, 38(3): 304, 307.

Competing interests: The authors declare no conflict of interest.

Received: 1 September 2019; **Accepted:** 24 November 2019. **Online:** 17 December 2019.

Publisher's note: TMR Publishing Group Limited remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

© The Author(s), under exclusive licence to TMR Publishing Group Limited 2019