



Analysis of Lu Lihuan's Experience in Treating Chronic Pharyngitis Using the "Three-Step Pharyngitis-Relieving" Method

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Abstract

Lu Lihuan, the son of Lu Shouyan, the founder of the national intangible cultural heritage "Lu's Acupuncture", is a representative inheritor of this traditional technique. The author of this paper had the privilege of studying under Master Lu, absorbing his teachings, and inheriting his academic thoughts. This paper summarizes Master Lu's clinical experience in treating chronic pharyngitis using the "three-step pharyngitis-relieving" method, introducing his experience in syndrome differentiation, acupoint selection principles, and other clinical insights related to this condition.

Keywords

Chronic pharyngitis
Lu's acupuncture, Combining
acupuncture and medication

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1. Introduction

Chronic pharyngitis is a common clinical condition characterized by diffuse inflammation of the pharyngeal mucosa, submucosa, and lymphatic tissues. In traditional Chinese medicine, it falls under the categories of "plum-stone "Qi" " and "laryngeal obstruction". Statistics indicate that with increasing life stress and worsening air pollution, the incidence of chronic pharyngitis has been rising annually, with prolonged disease courses. The prevalence rate among adults is approximately 20% ^[1].

Director Lu Lihuan is a representative successor of "Lu's Acupuncture Therapy", a national and Shanghai

municipal intangible cultural heritage, and the son of Lu Shouyan, a leading authority in acupuncture. Mr. Lu has comprehensively inherited the academic thoughts of Lu's Acupuncture and, through decades of consistent clinical practice, he has adhered to traditional methods while not being bound by them, incorporating many innovations into the passing down. This paper provides a brief summary and analysis of Director Lu Lihuan's academic thoughts on chronic pharyngitis.

2. Lu Lihuan's understanding of chronic pharyngitis

Chronic pharyngitis, known as “deficiency fire throat obstruction” or “beaded throat obstruction” in traditional Chinese medicine, falls under the category of throat obstruction^[2]. Mr. Lu believes that chronic pharyngitis generally has a long course and often occurs on the basis of deficiency in the “Yin” and “Yang”, “Qi”, and blood of the internal organs. It is commonly caused by prolonged unresolved wind-heat or warm-heat conditions, with residual pathogens remaining, which over time damage the “Yin”. Therefore, this condition is predominantly characterized by deficiency, with “Yin” deficiency being more prominent. When water fails to restrain fire, deficiency fire rises and scorches the throat, leading to “Yin” deficiency symptoms such as sore throat, burning sensation, worsening symptoms with excessive speech or in the afternoon. Additionally, “Qi” deficiency is also commonly observed, so attention should also be paid to invigorating the spleen and replenishing “Qi”. In most patients, on the basis of deficiency, the body's fluids and blood are unable to circulate properly, accumulating in the throat, thus forming phlegm retention and blood stasis. This results in symptoms such as a sensation of a foreign body or obstruction in the throat, and dark red or deep red congestion of the throat mucosa, indicating symptoms of phlegm-dampness or blood stasis.

Therefore, Mr. Lu summarizes the pathological factors of this condition as deficiency, phlegm, and stasis, with “Yin” deficiency as the root cause and phlegm and stasis accumulation as the manifestations. He emphasizes the key points of acupuncture as “treating deficiency, phlegm, and stasis, and selecting acupoints based on discomfort”, and has developed the “Three-Step Throat-Relieving” method to further standardize the acupuncture treatment pathway for chronic pharyngitis.

3. Lu Lihuan's “three-step throat-relieving” characteristic therapy for chronic pharyngitis

Through years of clinical practice, Mr. Lu has summarized the “Three-Step Throat-Relieving” method based on the characteristic techniques of Lu's Acupuncture, which includes “direct needling at the site of discomfort”,

“treating deficiency, phlegm, and stasis”, and “combining acupuncture with medication to consolidate the foundation”. This method has shown good efficacy in treating chronic pharyngitis, and is described in detail below.

3.1. Characteristics of Lu's acupuncture

The Lu's Acupuncture School has always emphasized acupuncture manipulation techniques. Inspired by the lines from “Biao You Fu”, press firmly and repeatedly with the left hand to disperse “Qi”, and insert gently and slowly with the right hand to avoid pain” and from “Liu Zhu Zhi Wei Fu”. The needle should be inserted quickly and advanced slowly once in place”, the Lu's School commonly employs the “claw-cutting needle insertion technique” with both hands in clinical acupuncture practice^[3]. Building on this foundation, Elder Lu innovated the “sequential force application” needle manipulation technique. This involves, during needle insertion, the left hand (the pressing hand) applying a strong lateral pressure on the acupoint with the thumb while the right hand (the inserting hand) holds the needle and applies sequential force from the chest, upper arm, forearm, wrist, to the fingertips, with the needle tip slightly rotating as it is inserted into the acupoint to the desired depth. This is followed by small-amplitude lifting-thrusting and twirling to facilitate “Qi” movement, combining the effects of manipulation and “Qi” activation^[4]. Additionally, the Lu's School strongly advocates for warm needle acupuncture, believing that it not only has the effect of warming and promoting the flow of meridian “Qi” but also supplements the insufficient strength of the needle^[5]. Elder Lu strictly adheres to the operational techniques of Lu's Acupuncture in clinical practice and, through years of clinical experience, has developed a distinctive clinical diagnosis and treatment approach.

3.2. “Three-step throat-benefiting” characteristic therapy

3.2.1. Direct needling at the site of discomfort

(1) Acupoint selection

Dongfeng acupoint (an extra meridian acupoint located on the neck, below the lower border of the mandible, anterior to the carotid artery, and 0.5 cun anteroinferior to Tianrong acupoint of the Small Intestine Meridian)

(2) Operation

The patient assumes a supine position, and the local area is routinely disinfected. A disposable acupuncture needle of 0.3 mm × 40 mm is selected, and the needle tip is inserted directly towards the throat for a depth of one to one and a half cun. The patient may experience a sensation of heaviness and distension radiating towards the throat at the needling site. Warm needle acupuncture is applied by twisting moxa wool the size of a jujube pit onto the needle tails on both sides, followed by retaining the needles for 20 minutes.

Despite being nearly ninety years old, Elder Lu has a profound understanding of Western anatomy. Influenced by Western anatomical knowledge, Elder Lu proposed the key point of needling “at the site of discomfort”, emphasizing acupuncture treatment around the area of discomfort. Elder Lu believes that, in a diseased state, the location of discomfort most accurately reflects the nature of the disease. After fully grasping the anatomy of the affected area, direct needling at the site of discomfort can produce immediate effects in unblocking meridians and dispersing pathogenic factors. Therefore, when treating chronic pharyngitis, Mr. Lu always applies acupuncture at the Dongfeng acupoint. This acupoint is located in the submandibular triangle, and a straight needle insertion can reach the posterior pharyngeal wall. The area behind the mandible is innervated by branches of the lingual nerve and glossopharyngeal nerve. Straight needle insertion at this location can effectively alleviate uncomfortable symptoms such as pharyngeal itching and dryness, showing better clinical efficacy compared to the traditional use of the Tiantu acupoint.

3.2.2. Treatment based on deficiency, phlegm, and blood stasis

(1) Acupoints

Chize (bilateral), Zhongwan, Hegu (bilateral), and Baihui

(2) Operation

The patient lies in a supine position. After routine skin disinfection, disposable acupuncture needles measuring 0.35 mm × 40 mm are used for needle insertion. The straight insertion depth for Chize, Zhongwan, and Hegu is approximately one cun. Zhongwan is stimulated with twirling reinforcing

manipulation upon “Qi” arrival, while Chize and Hegu are stimulated with twirling reducing manipulation. A disposable acupuncture needle measuring 0.25 mm × 25 mm is used for oblique insertion at Baihui, with the needle tip reaching the subgaleal layer. After “Qi” arrival at these acupoints, warm needle technique is applied, and all needles are retained for 20 minutes.

Numerous discussions on chronic pharyngitis can be found in medical texts throughout history, particularly in the Huangdi Neijing. Mr. Lu is well-versed in the Neijing and strongly agrees with statements such as “Rebellion of the Hand Yangming channel leads to laryngeal obstruction and swelling” (Su Wen: Jue Lun Pian) and “Dryness of the throat and pharynx indicates a disease in the spleen earth” (Su Wen: Yin Yang Lei Zheng)^[6]. Mr. Lu believes that chronic pharyngitis often arises from deficiencies in the five viscera, leading to the formation of pathogenic factors such as phlegm-dampness, fire-evil, and blood stasis. During the course of the disease, it is highly prone to the intertwining and transformation of deficiency and excess conditions. Therefore, when treating chronic pharyngitis, Mr. Lu not only focuses on clearing pathogenic factors but also pays great attention to nourishing deficiencies. Only by strengthening the foundation and consolidating deficiencies can the disease be controlled at its source and treatment efficacy be consolidated. Hence, he selects Chize to nourish “Yin” and moisten the lungs, Zhongwan to strengthen the spleen and resolve dampness, Baihui to fortify the body and consolidate deficiencies, and Hegu to regulate “Qi” and blood circulation.

3.2.3. Combination of acupuncture and medication to strengthen the foundation

(1) Medication preparation

BCG Polysaccharide Nucleic Acid Injection, 1 mL (Manufacturer: Hunan Siqi Biopharmaceutical Co., Ltd.; Drug Approval Number: Guoyao Zhunzi S20020019; Specification: 1ml/ampoule).

(2) Acupoints

Bilateral Zusanli for acupoint injection, with 0.5 mL injected per acupoint, twice a week.

In clinical practice, Mr. Lu selects different drugs for acupoint injection based on the patient’s symptoms. He believes that acupoint injection, guided by the dialectical

thinking of Traditional Chinese Medicine (TCM), utilizes injections of Western medicine or proprietary Chinese medicines to further enhance therapeutic effects. Chronic pharyngitis has a long duration and is prone to recurrent episodes, strongly related to the patient's own immune capacity. Both Zusanli (ST36) acupoint and Bacillus Calmette-Guerin Polysaccharide Nucleic Acid Injection have immune-boosting effects. The combined use of these two can integrate the stimulation of acupuncture, the properties of the drugs, and the penetrating effect on acupoints, thereby exerting their comprehensive effects and achieving the purpose of strengthening the body's foundation.

4. Case examples

Ms. Li, female, aged 36, first consultation date on March 19, 2023.

The patient has a history of chronic pharyngitis. Two weeks ago, after a high fever from COVID-19 infection, she developed symptoms of sore throat, itchy throat, and dry throat. Currently, her COVID-19 antigen test has turned negative, but she still experiences itchy throat, dry throat, and a foreign body sensation in her throat. She is also prone to fatigue, has dry stools, and poor sleep quality. Her tongue is red, especially at the tip, with tooth marks on the sides, a thin coating, and a thin and wiry pulse.

(1) Western medicine diagnosis

Chronic pharyngitis; TCM diagnosis: Chronic laryngeal obstruction; Dialectical classification: Heat excess damaging "Yin", "Qi" deficiency and phlegm accumulation;

(2) Treatment principle

Nourishing "Yin" and reducing fire, strengthening the spleen and resolving phlegm, clearing and benefiting the throat.

Following the aforementioned ideas and treatment principles, Mr. Lu formulated the main acupuncture points for chronic pharyngitis as Dongfeng (bilateral), Chize (bilateral), Zhongwan, Hegu (bilateral), and Baihui. Based on the patient's symptoms and condition, he tailored the prescription, selecting Ningshen, Tianshu (bilateral), Qihai, Sanyinjiao (bilateral), Taichong (bilateral), Zusanli (bilateral), and Zhaohai (bilateral). Technique is by wisting reinforcement and reduction. Warm needle acupuncture was added to bilateral

Dongfeng, Hegu, Tianshu, Zusanli, Zhaohai, as well as Zhongwan and Qihai. Acupoint injection: Bilateral Zusanli; Drug: Bacillus Calmette-Guerin Polysaccharide Nucleic Acid Injection 1 mL, with 0.5 mL injected per acupoint, twice a week.

On her second consultation, the patient's sensation of a foreign body in the throat significantly improved, and her sleep quality also improved compared to before. The previous prescription was maintained. Subsequently, modifications were made based on the prescription according to the symptoms, and all symptoms resolved after one month.

Needling the Dongfeng acupoint (a specific acupuncture point) in a straight manner can reach the tonsils and the posterior pharyngeal wall. The posterior part of the mandible is innervated by branches of the glossopharyngeal nerve and the lingual nerve. Therefore, straight needling at this point can effectively alleviate throat discomforts such as itching and dryness, making it an empirically effective acupoint used by Mr. Lu in treating pharyngitis. The Chize acupoint (LU5) is the He-sea point of the Lung Meridian of Hand Taiyin. According to the Huangdi Neijing (The Inner Canon of Huangdi), "It enters the Chize, which is the artery in the elbow, serving as the He-sea point of the Hand Taiyin Meridian". Its operational pattern involves, on one hand, transporting and transforming water "Qi" through the lung to the Kongzui acupoint (LU6), and on the other hand, transforming water into "Qi" and circulating it in the upper regions. Throat pain and itching caused by lung dryness can be alleviated by needling this point, which moistens the lung and dispels fire to reverse the adverse flow. The Baihui acupoint (GV20) is a commonly used acupoint in Mr. Lu's clinical practice. Mr. Lu believes that the Baihui, located at the vertex of the head, is the convergence point of numerous meridians. It can not only treat neurological disorders such as insomnia and headaches but also enhance the body's vital energy ("Qi"). It is particularly suitable for patients who have recovered from illness but whose vital energy has not fully restored. When combined with acupoints like Ningshen (a calming acupoint) and Sanyinjiao (SP6), it can induce calmness and sleep. The Zhongwan acupoint (CV12) is the Fu-gathering point among the eight influential points, which has the function of invigorating the spleen and resolving

dampness. When combined with the Hegu acupoint (LI4), it regulates the function of the Fu organs. When paired with the Baihui and Qihai acupoints (CV6), it can elevate “Yang” and replenish “Qi”. The Zhaohai acupoint (KI6) belongs to the Kidney Meridian of Foot Shaoyin and is the intersection point of the Foot Shaoyin and Yinqiao Meridians, where the water of the Kidney Meridian converges. It is a commonly used acupoint by Mr. Lu in treating “Yin”-deficiency diseases. When combined with the Tianshu (ST25) and Sanyinjiao acupoints, it can moisten the intestines and facilitate bowel movements. The Zusanli acupoint (ST36) can regulate the body’s immunity and enhance disease resistance. When combined with the Baihui and Zhongwan acupoints, it can regulate the spleen and stomach and replenish “Qi”. When paired with the Hegu acupoint, it can dredge the meridians and activate collaterals. Additionally,

considering the high work pressure patients usually face, Mr. Lu selects the Taichong acupoint (LR3) to soothe the liver and regulate “Qi”, ensuring that tonification is accompanied by dispersion, preventing stagnation, and accelerating the dispersion of pathogenic factors in the throat. The combination of these acupoints collectively nourishes “Yin”, reduces fire, strengthens the spleen, resolves phlegm, and clears and benefits the throat.

In summary, Mr. Lu’s treatment of chronic pharyngitis is characterized by rigorous differentiation of symptoms, a combination of traditional Chinese and Western approaches in acupoint selection, and an emphasis on integrating traditional Chinese medicine with modern medical practices. This approach has opened up new avenues for clinical acupuncture treatment, achieved favorable clinical outcomes, and received unanimous recognition from patients.

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Disclosure statement

The authors declare no conflict of interest.

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