### Research Progress in the Treatment of Diabetes Complications with Yiqi Huoxue Prescriptions Combined with Acupuncture and Moxibustion

Li Qingsong<sup>1,a</sup>, Wang Xiaomeng<sup>1</sup>, Li Xiaochen<sup>1</sup>, Li Ya<sup>2</sup>, Guo Jiangfan<sup>1</sup>, Wu Lili<sup>2</sup>, Qin Lingling<sup>3</sup>, Liu Tonghua<sup>2,b,\*</sup>

<sup>1</sup>First Clinical School of Medicine, Shaanxi University of Chinese Medicine, Xianyang, Shaanxi, 712046, China

<sup>2</sup>Key Laboratory of Health Cultivation of the Ministry of Education, Beijing University of Chinese Medicine, Beijing, 100029, China

<sup>3</sup>Department of Science and Technology, Beijing University of Chinese Medicine, Beijing, 100029, China

> <sup>a</sup>1976994492@qq.com, <sup>b</sup>thliu@vip.163.com \*Corresponding author

*Keywords:* Yiqi Huoxue, acupuncture and moxibustion, complications of diabetes, combination, mechanism of action

Abstract: The complication of diabetes is a chronic disease of brain, heart, kidney, nerve and other tissues caused by the gradual development of diabetes. And it is the main cause of death or disability of most diabetes patients, which seriously affects the physical and mental health and quality of life of patients. Research shows that diabetes is the third leading cause of death, after cancer and cardiovascular and cerebrovascular diseases. In recent years, clinical and experimental research has been carried out on diabetes and other diseases. Recent years, clinical and experimental research on diabetes and its complications has always been a hot spot. Compared with modern medicine, traditional Chinese medicine has the advantages of multiple benefits. Compared with modern medicine, traditional Chinese medicine has the advantages of multiple ways, levels and targets. The prescriptions for Yiqi Huoxue flow further reflect the principle of syndrome differentiation and treatment, as well as the importance of the use of traditional Chinese medicine. The prescriptions for Yiqi Huoxue flow further reflect the principle of syndrome differentiation and treatment, and play a better role in the treatment of diabetes complications. At the same time, acupuncture and moxibustion can play the role of dredging channels, activating collaterals, and harmonising qi and blood. It has gradually become an important means of treating diabetes complications. The combination of the two therapies will further expand the advantages of traditional Chinese medicine in treating diseases. Therefore, Yiqi Huoxue formula combined with acupuncture and moxibustion is an essential programme for the treatment of diabetes complications. However, at home and abroad, there is a lack of systematic and comprehensive sorting on the treatment of complications of diabetes with prescriptions for supplementing qi and moxibustion. However, at home and abroad, there is a lack of systematic and comprehensive sorting on the treatment of complications of diabetes with prescriptions for supplementing qi and activating blood circulation and the combination of acupuncture and moxibustion and moxibustion. This article mainly reviews the treatment of diabetic microangiopathopathy (nephropathy, neuropathy, retinopathy) and diabetic foot (DF) with Yiqi Huoxue prescription combined with acupuncture and moxibustion in recent years, in order to provide better ideas for clinical treatment.

Diabetes mellitus (DM) is a chronic metabolic disease characterised by hyperglycaemia caused by absolute or relative insulin deficiency due to a variety of factors. The number of people aged 20-79 years with diabetes mellitus is estimated to be 53.72 billion globally in 2021, and is projected to grow to 78.3 billion by 2046, with a predominance of middle-income countries[1,2]. In China, there are 116.4 million people with diabetes, and by 2030, the number of people over 65 with diabetes is expected to grow to 54.3 million people[3,4]. Insulin, metformin and other medications require long-term injections or oral treatment, and poor glycemic control is associated with many complications, including microangiopathy[5], diabetic foot (DF), etc. with adverse reactions. It can be seen that there is much room for the development of Chinese medicine to actively participate in the treatment of diabetic complications. According to the principle of TCM diagnosis and treatment, diabetic complications can be treated by replenishing qi and boosting yang, resolving turbidities and lowering lipids, activating blood circulation and combining with spleen diagnosis and treatment.[6-8] The principle of diabetic complications can be treated according to the principle of TCM diagnosis and treatment. At the same time, modern research has shown that Chinese medicine and acupuncture can treat diabetes and its complications by inhibiting cell death, anti-inflammation, improving insulin secretion, and controlling multiple pathways to promote wound healing.[9-12]. The details are summarised in Table 1.

## **1.** Chinese medicine's understanding of diabetic complications and the application of the principle of "benefiting qi and activating blood circulation".

Traditional medicine believes that DM belongs to the category of "thirst-quenching disease". The Spiritual Pivot has a cloud: "The five organs are all weak, good disease and disease." It can be seen that thirst disease and the important relationship between innate endowment, coupled with worry and depression, exogenous evil, fatigue injury, dietary disorders and other factors leading to the occurrence of the disease, the basic pathology for the yin deficiency for this, dry heat for the standard. Complications of diabetes are mainly related to two causes, in short, the liver and spleen deficiency is not enough, too much living and eating, mainly manifested as "three more and one less", more drinking, more eating, more urination, weight loss symptoms.[6,13] The main symptoms are "three more and one less", more drinking, more eating, more urination and weight loss. With the development or aggravation of the disease, oedema, stroke, blindness, impotence, gangrene and other complications may appear. Modern medical doctors treat diabetic complications with their own strengths, mainly adopting the principle of diagnosis and treatment. Academician Tong Xiaolin believes that diabetic nephropathy (DN), diabetic retinopathy (DR), diabetic distal symmetric polyneuropathy have the pathogenesis of "stasis", and treatment is based on the principle of "invigorating blood circulation and removing blood stasis", and in the later stage, "benefiting qi and warming yang". "[14] The treatment is to "activate blood circulation and eliminate stasis" and "benefit qi and warm yang" in the later stage. Professor Lu Renhe took "activating blood circulation and removing blood stasis, benefiting qi and nourishing yin" as the main treatment principle, and created a treatment method for diabetic nephropathy mainly based on "removing blood stasis and dispersing stagnation", and commonly used medicines for activating blood circulation and relieving pain in combination with medicines for tonifying qi in clinical practice.[15,16] He also used blood-activating and pain-relieving medicines with qi tonic medicines in clinical practice. According to State Medical Master Shang Dejun, the key to the pathogenesis of diabetic foot is "stasis due to deficiency, stasis obstructing the meridians", and when the disease lasts for a long time, there will be a mixture of deficiency and reality, so the treatment can be based on the evidence-based therapy by using traditional Chinese medicines that benefit qi and activate blood and combining them with acupoint injections.[17] The treatment can be based on the combination of internal administration of Chinese medicines that benefit vital energy and promote blood circulation and acupoint injection.

**2.** Benefiting qi and activating blood formulae combined with acupuncture in the treatment of microvascular lesions

#### 2.1 Diabetic nephropathy

DN is a major complication of diabetic microangiopathy, and according to the symptoms, it belongs to the categories of "oedema", "fatigue" and "Guan Ge" in Chinese medicine. About one third of type 1 or type 2 diabetic patients worldwide develop diabetic nephropathy, and gradually form end-stage renal disease (ESRD).[18] The Chinese medicine is based on the identification of evidence and treatment. Traditional Chinese Medicine (TCM) is based on the identification and treatment of diabetic nephropathy according to the DN patients with different types of evidence mainly from the "spleen and kidney" to carry out integrated treatment of Chinese medicine, the specific treatment is as follows:

Warm Kidney, tonify Qi and invigorate blood formula consists of Astragalus, Chinese yam, Poria, Radix Rehmanniae Praeparata, Rhizoma Ligustici, Rhizoma Ligustici Chuanxiong, Peach kernel, Radix Angelicae Sinensis, Radix Paeoniae Alba, Cornu Cervi Pantotrichum, Zedoariae, Safflower, Dampy, and Dilang[19,20]. Shan Liufeng[21]combined with Wenshen Buqi Huoxue prescription to treat Qi-Yin deficiency and blood-stasis type DN on the basis of lowering blood sugar, diuresis and detumescence and moxibustion (bilateral Shenshu, Geshu, Guanyuan and Zusanli). After treatment, the HbAlc, urinary albumin excretion rate (UAER), 24h urinary protein quantity (24hUAE) and meridian energy index of the patients were significantly lower than those of the control group, treated with moxibustion alone and conventional treatment. The mechanism of action was related to increasing immunity, accelerating insulin secretion, improving glomerular filtration barrier and renal microcirculation.

Yishen Huoxue Xiezhuo prescription is composed of Pueraria root, Ghost arrow, Raw astragalus, Cicada flower, Litchi core, and Dijin grass. It has the effect of invigorating qi and spleen-turbidness, activating blood circulation and removing blood stasis.Lu's school of acupuncture, as one of the most influential schools of acupuncture in China at home and abroad, focuses on the deficiency of kidney qi and makes good use of warm needles, which can be better used for the treatment of diabetic complications.[22,23] which can be better used for the treatment of diabetic complications. [22,23] which can be better used for the treatment of diabetic complications. Hu Jing[24] et al. combined Lu's acupuncture (Ganshu, Pishu, Sanjiaoshu, Shenshu, and Fuai, Fujie, Guanyuan, Zhangmen, and Zsanli, etc.) with the above additions and subtractions for DN with deficiency of spleen and kidney qi and dampness stasis and obstruction and found that it could reduce the level of inflammatory cytokine expression and improve the inflammatory response, and the patient's fasting blood glucose (FBG) was lower than that of the kidney qi.

In the group with the combination of western medicine alone and Chinese and western medicine, the 2h postprandial glucose (2hPG), HbAlc and inflammatory cytokines (MCP-1, TGF- $\beta$ 1, TNF- $\alpha$ ) were better than those in the group with the combination of western medicine alone and Chinese and western medicine, and the goal of slowing down the progression of renal function was achieved.

Jianpi Gushen decoction is composed of Codonopsis pilosulae, Jinchuanzi, Cuscuta chinensis, Atractylodes macrocephala, Poria, Astragali, Fructus Mori, Angelica sinensis, Rhubarb, Salviae Miltiorrhizae, which together play the role of "benefiting the qi and promoting the yang, and activating the blood to eliminate blood stasis" effect. At the same time, warm acupuncture and moxibustion organic combination, with the effect of moving qi, warm meridians and dispersal of cold. Wang Yonggang[25] et al. combined warm acupuncture (kidney Yu, Yishe, Qihai, Taichong, Taixi, Ashigaru, Huanjiu, etc.) to treat diabetic nephrotic syndrome of spleen-kidney yang deficiency, and found that this method could improve type IV collagen and connective tissue growth factor, slow down the progress of fibrosis, and promote the improvement of renal function, and the patients' Chinese medicine symptom scores, albumin (Alb), creatinine (Scr), urea nitrogen (BUN) and other indexes improved. Then clinical symptoms were relieved.

Yiqi Yangyin Huoxue formula is composed of Astragalus, Cornus officinalis, Yam, Poria, Ophiopogon, Peony bark, Red peony root, Rehmannia rehmanni, Yellow essence, Scrophulariae and Chuanxiong. Acupuncture has a good effect in improving clinical symptoms and renal function in patients with diabetic nephropathy, while acupuncture kidney points have the effect of enhancing urinary function and reducing urinary protein[26,27] . Quan Liugen[26] et al. used the above additions and subtractions combined with acupuncture (Quchi, Ashigangsanli, Zhigou, Hegu, Diqi, Sanyinjiao, Tianshu, Zhongkou, Blood Sea, Kidney Yu, and Zhongji) to treat DN with deficiency of qi and yin and obstruction of blood stasis, and the patients' total Chinese medicine symptom scores, glomerular filtration rate (eGFR), and 24hUAE were lower than that of the control group, and the mechanism of action was related to the reduction of renal function of patients with DN and protect renal function.

#### 2.2 Diabetic peripheral neuropathy

The most common complication in patients with DM is peripheral neuropathy (DPN). Peripheral nerve damage can manifest as progressive distal symmetrical polyneuropathy, autonomic neuropathy, etc., which is characterised by the sensation of wearing gloves or stockings, as well as a possible loss of motor function, most commonly in the hands and lower limbs.[28,29] . At present, the research on the combined use of Chinese medicine in DPN with the evidence of phlegm and stasis obstruction, yang deficiency and cold coagulation, qi and yin deficiency, and collateral paralysis obstruction has been successful.

Jianpi Yiqi Tongluo formula consists of Raw astragalus, Mulberry, Chuanxiong, Yam, Eucommia, Poria, Salvia miltiorrhiza, Stir-fried White art, Radix Pseudostellariae, and Scorched Licorice. The combined use of these medicines can achieve the functions of strengthening spleen and supplementing qi, drying dampness and water, activating blood circulation and removing blood stasis, relaxing tendons and activating collaterals. Acupuncture point injection organically combines meridians, medicines and needling, and produces benign stimulation to the acupoints for a long period of time. [30,31] It enhances the efficacy of activating blood circulation and removing blood stasis. Foot Sanli acupoint injection is a safe and effective treatment for DPN, with obvious advantages in relieving pain and improving nerve conduction velocity. [32] The advantages are obvious in relieving pain and improving nerve conduction velocity. Yang Wei[33]utilized Zusanli, Yanglingquan, and Fenglong acupoints for acupoint injection type DPN. This treatment approach promoted nerve repair, reduced levels of glycosylation end products (AGEs) and high mobility group protein (HMGB1), decreased inflammation, oxidative stress, and damage to tubular endothelial cells in the patients. It also improved levels of endothelial cell-related factors and nerve

conduction velocity, effectively alleviating clinical symptoms such as numbness, pain, and sensory abnormalities.

Danggui Guizhi Zhuyang Decoction is composed of Angelica officinalis, Cinnamomum officinalis, Paeony, Astragalus, Blood rattan, Tongcao and Asarum. It has the function of benefiting qi and tonifying blood, warming the meridians and opening the channels.[34] At the same time, some studies have found that acupuncture can make the pain and other symptoms caused by neuropathy disappear completely, and there are no side effects[35]. Gao Zhongyu[36] discovered that the combination of this formula and acupuncture at ying-spring and shu-stream point (Ganshu, Pishu, Shenshu, Dadu, Erjian, Sanjian, Laogong, Xiangu, Neiting, Qiangu, Houxi, Zusanli, Shangjuxu, and Xiajuxu) for the treatment of Yang-void and cold-congealed type of DPN could regulate meridian qi, tonify the blood, consolidate the surface, and help Yang flow through the collaterals. This treatment approach resulted in lowered TCM score and Toronto Coneurological Symptom Score (TCSS), accelerated conduction speed of the peroneal and median nerves, and alleviated clinical symptoms.

Diqi tongbi decoction consists of Raw radix rehmanniae, Radix astragali, Radix pseudostellariae, Rhizoma anemarrhenae, Rhizoma coptidis, Radix trichosanthis, Caulis spatholobi, Winged euonymus twig, Rhizoma corydalis, Radix paeoniae rubra, Earthworm, Scorpion, Radix cyathulae, Dried ginger, all parties share, altogether plays ziyin yiqi, detoxification of t2dm work; At the same time, acupuncture is also beneficial to Qi and blood circulation. Abdominal Acupuncture Therapy is developed from the theory of traditional acupuncture, which is painless, simple, safe and effective. Xue Bo[37]found that the combination of abdominal acupuncture (middle epigastric, lower epigastric, Qihai, Guanyuan, slippery meat gate, Waoling, lower rheumatism point, lower rheumatism point, upper rheumatism point, upper rheumatism point) with the addition of Diqi Tongpao Tang had a significant effect on the patients with deficiency of qi and yin and collateral channel paralysis obstruction, and that the medication of nourishing yin and tonifying qi, clearing heat and dispersing blood stasis together with the treatment of the acupoints that dredged up collateral channel qi and eliminated congestion and stagnation of the evil qi could lower and maintain blood glucose, and the patients' traditional Chinese medicine symptoms, such as Points, tactile sensation, sensory threshold (CPT), FBG, etc. were significantly improved.

#### 3. Diabetic retinopathy

Diabetic retinopathy (DR) is one of the common microvascular complications of diabetes mellitus, which is classified as "bird's eye" or "internal obstruction" in traditional Chinese medicine (TCM), creating a precedent for TCM nomenclature of diabetic eye diseases.[38] It is expected that by 2045, the number of DR patients will increase to 1.5 million. The number of people with DR is expected to rise to 160.5 million by 2045.[39] The number of people with DR is expected to rise to 160.5 million by 2045.[39] The number of people with DR is expected to rise to a significantly improve vision and slow the disease process without adverse events.[40] The article states that acupuncture, herbs, or a combination of both can significantly improve vision and slow the progression of the disease without adverse events. Based on what was found, the combined therapeutic approach was mainly applied to the qi and yin deficiency type of DR.

Jiawei Buyang Huanwu decoction is composed of Astragalus, Raw dihuang, Xuanshen, Poria, Yam, Peach kernel, Safflower, Angelica sinensis, Lumbricus, Atractylodes macrocephala, Red peony, and Chuanxiong, which is beneficial to qi, nourishes yin and invigorates the blood and collaterals. Organic iodide promotes the uptake of inflammatory factors as well as diseased tissues, which is enhanced by acupoint injections. Yuan Xiaoyan[41] et al. used the above plus and minus combination of Xinming 3 and 2 acupoints for the treatment of DR with deficiency of qi and yin, which could relax the vascular smooth muscle and improve the levels of plasma endothelin (ET-l) and nitric oxide (NO) to achieve vasoconstriction and ultimately improve the clinical symptoms of the patients.

Astragalus, Dred rehmannia root, Goji berries, Pueraria root, Trichosanthin, Yam, Ligusticum Chuanxiong, Salvia miltiorrhiza, Leeching, Hangzhou chrysanthemum, Notoginseng powder (infusion), licorice together to form a Chinese herbal compound Yeshi Fuming decoction, with beneficial qi filling essence, promoting blood circulation and removing blood stasis, tonifying kidney and spleen work, combined with acupuncture, further enhance the effect of supplementing Qi and promoting blood circulation. In addition, modern studies have shown that acupuncture can improve ocular vascular microcirculation, promote the metabolism of oxygen and energy in the ischaemic area, and thus improve DR[42,43]. Meanwhile, it has been documented that acupuncture combined with conventional medication is more effective than medication alone in treating DR without adverse events[44]. The study conducted by Feng Yuan[45] et al. highlighted that in DR patients with qi and yin deficiency, the addition of night-vision reminder soup combined with acupuncture (Eyeming, Zanzhu, Chengqi, Sizhukong, Pupilosus, Hegu, Taichong, Xuehai, and Zusanli) may ameliorate retinal ganglion cell disorders, regulate glucose metabolism, and promote apoptosis of retinal endothelial cells. This treatment approach was found to increase the patient's serum calcium and magnesium ion levels, decrease levels of soluble intercellular adhesion molecule-1 (sICAM-1) and connective tissue growth factor (CTGF), and improve retinal fundus arterial haemodynamics and other indicators. Furthermore, the treatment resulted in the improvement of clinical symptoms such as blurred vision, dry eyes, and tiredness

Tangwangling is composed of Panax quinquefolius powder, Notoginseng powder, Radix polygoni, Radix yam, Radix pueraria root, Bupleurum, Selfheal, vinegar, Raw cattails, Hawthorn, Qing Xiangzi, and Licorice. It has the effect of invigorating qi and nourishing Yin, activating blood and clearing collaterals.Camptothecin Injection can act directly in the patient's nervous system, promote the recovery of ocular neurological activity, and at the same time relieve the blood supply of ocular tissues to gradually restore the patient's vision.[46] The injection of camphorine can work directly on the patient's nervous system to promote the recovery of the active function of the eye nerves, while relieving the blood supply to the eye tissues and gradually restoring the patient's vision. Acupuncture point injection embodies the characteristic therapy of Chinese medicine and further accelerates drug absorption. Zhang Shizhong[47] Zhang Shizhong et al. found that in the non-proliferative stage of DR (deficiency of qi and yin, and stasis in the collaterals), the combination of glycyrrhizin and camptothecin acupoint injection (adjacent to the superficial temporal artery of the affected eye) effectively improved the visual acuity, fundus haemorrhage, and the count of retinal microangiomas of the patient, which was related to the avoidance of platelet aggregation and the improvement of vasorelaxation function.

#### 4. Diabetic foot

Diabetic foot complications belong to the categories of "gangrene" and "sores" in Chinese medicine, which refer to the distal neuropathy and/or vascular lesions of the lower limbs of diabetic patients with varying degrees of severity, and are usually associated with foot infections, ulcers, or destruction of tissues.[48,49] The prevalence of diabetic foot ulcers in China. The prevalence of diabetic foot ulcers in China is 4.1%, and the amputation rate is 2.14%, which is the main cause of death and disability. In order to alleviate the socio-economic burden and reduce the amputation and morbidity/death rates, there are more and more researches on the treatment of DF by traditional Chinese medicine (TCM)[50,51], and the combined treatment protocols are dominated by the qi deficiency and blood stasis type of DF.

Name of complication	Type of certificate (e.g. medical certificate)	Programme			References
	deficiency of qi and yin	prescription + Moxibustion	glomerular filtration barrier and renal microcirculation	24hUAE, Meridian Energy Index ↓	[21]
	Spleen and kidney qi deficiency, dampness and stagnation	Xiezhuo prescription + Lu's moxibustion	inflammatory cytokine expression and improve the inflammatory response in vivo.	cytokines (MCP-1,	[24]
		Jianpi Gushen decoction + Warm Acupuncture	Improvement of type IV collagen and connective tissue growth factor, renal function, and retardation of fibrosis progression	TCM evidence points, Alb, Scr, BUN↓	[25]
		Yiqi Yangyin Huoxue	response and protects kidney function	Total TCM symptom score, eGFR and 24hUAE↓	[26]
	Obstruction of the channels by phlegm and stasis (TCM)	Jianpi Yiqi Tongluo formula + Acupuncture Point Injection	endothelial cell-related factor levels and nerve conduction velocity	AGEs, HMGB1↓	[33]
	cold and deficiency of yang (TCM)	Zhuyang Decoction + Acupuncture	nerve conduction velocity	TCM Evidence Score, TCSS↓	[36]
	of the channels	Abdominal	blood glucose levels	Improved TCM evidence score, tactile sensation, CPT, FBG	
	Deficiency of both qi and yin	Jiawei Buyang Huanwu decoction + acupoint injection	Relaxation of vascular smooth muscle relaxes and constricts blood vessels	Improved ET-l, NO levels, FBG, 2hPG↓	[41]
	Deficiency of both qi and yin	Yeshi Fuming decoction + Acupuncture	Improvement of retinal ganglion cells, disorders of glucose metabolism and promotion of retinal endothelial cell apoptosis	CTGF ↓, retinal fundus	
	Deficiency of qi and yin, and stasis in the channels (TCM)	A current and the second secon	Avoids platelet aggregation and improves vasodilation	Improvements in patient visual acuity, fundus haemorrhage and retinal microangioma counts	[47]
DF	Yang deficiency, internal cold, blood stasis	decoction + Acupuncture +	Promote blood circulation in the foot, reduce swelling and pain, resist the formation of local ulcers and promote the repair of damaged tissues.	Overall effective rate 91.1%, skin colour	
	Qi deficiency and blood stasis (TCM)	Buyang Huanwu decoction+	Improves coagulation and	Foot trauma condition, TCM symptom score improvement	

# Table 1: The mechanism and results of Yiqi Huoxue formula combined with acupuncture and moxibustion in the treatment of diabetes complications

Note: Up:  $\uparrow$ ; Down:  $\downarrow$ ; Joint: +

Clinical Effect of Yiqi Wenyang Huoxue decoction is composed of Astragalus, Cassia twig,

Angelica sinensis, Red peony root, Chuanxiong, Salvia miltiorrhiza, Shengdi, Sichuan Achyranthes, Dilong, White rigidopsis, Soodi, Ephedra and Licorice. The whole formula plays the work of warming Yang dispersing cold, supplementing Qi and promoting blood circulation and removing blood stasis.Zhang Shiyong[52] et al. used the above plus and minus combination of acupuncture on the affected side of Shenshu, Geshu, Yinlingquan, Sanyinjiao, Taixi, Zusanli, Jiexi, Chongyang, Neiting, Kunlun, and the skin near the lesion, as well as electromagnetic wave therapy, which can jointly play a role in promoting the circulation of blood in the foot, reducing swelling and pain, lowering blood glucose, resisting the formation of lesion ulcers, and promoting the repair of damaged tissues, thereby achieving the goal of improving and curing the diabetic foot. The aim is to improve and cure the diabetic foot.

Buyang Huanwu decoction is from "Reform and Error of the Medical Forest", and consists of Astragalus, Angelica sinensis, Chuanxiong, Peach kernel, Safflower, Dilong, and Red peony. Liang Zunxiao[53] et al. added chicken blood vine, cow's knee, Angelica dahurica, dandelion and combined acupuncture (Qihai and bilateral Sanyinjiao, Xuehai, Yanglingquan, Xuangzhong, Taixi and Zusanli acupoints) to treat DF of the qi deficiency and blood stasis type, the patients' foot trauma condition and Chinese medicine symptom scores were lower than those of the conventional Western medicine treatment group, and the mechanism was related to the improvement of the coagulation function and the alleviation of inflammatory reactions.

#### **5. Summary and Outlook**

Benefiting qi and activating blood formula combined with acupuncture therapy gives full play to the advantages of Chinese medicine in treating diabetic complications and reflects the diversity and effectiveness of Chinese medicine in treating the disease. Chinese medicine treatment of diabetic complications mainly focuses on benefiting qi, activating blood circulation and opening up the channels, and microvascular lesions and DF are always carried through this treatment principle. Acupuncture and moxibustion are based on acupoints, with significant therapeutic effects and easy acceptance by patients, and the acupoints are mainly Zusanli, Shenshu, etc.which is similar to the principle of prescription of gi activation and blood activation, reflecting the theory of Chinese medicine that "prolonged illnesses have more deficiencies and more blood stasis". According to the actual situation of diabetic patients, it is appropriate to combine qi and blood-boosting prescriptions with acupuncture therapy in the prevention and treatment of diabetic complications to improve the clinical therapeutic effect, delay the occurrence of complications, and further expand the advantages of Chinese medicine in treating diabetic complications. However, there are many shortcomings in the current treatment programme: ① Identification and typing methods, expert consensus failed to unify the views of the lack of standardised diagnostic and treatment standards; 2 There are many complications of diabetes mellitus, but the combination of acupuncture and moxibustion with qi and blood type formulas used for DM complications are relatively few clinical and experimental studies, and should also be increased for the combined treatment of diabetic osteoporosis, diabetic pruritis, diabetes mellitus, depression, and other complications research; ③ The research and development level of new drugs is not high, and at present, Chinese medicine mainly plays an auxiliary role in the treatment of diabetic complications, and it is hoped that Chinese medicine will further enhance the therapeutic role in the space, and look for more new drugs and acupuncture therapies; ④ There are fewer clinical or experimental samples of data used for the research and they are mainly dominated by the domestic ones, and there are fewer records of the foreign journals, and the conclusions may be with certain limitations, such as whether there are effects in the populations of different regions, ethnic groups, and environments, or not. The conclusions may have some limitations, such as for different regions, different races, different environments, whether the effect of the population also need to be further in-depth study. It is believed that in future research, Chinese medicine will give full play to the disciplinary advantages and characteristics of "holistic regulation" and "individualised diagnosis and treatment", and be better used in the diagnosis and treatment of diabetic complications and other diseases.

#### References

[1] Sun H, Saeedi P, Karuranga S, et al. IDF Diabetes Atlas: global, regional and country-level diabetes prevalence estimates for 2021 and projections for 2045[J]. Diabetes Res Clin Pract, 2022,183:109119.

[2] Harreiter J, Roden M. [Diabetes mellitus: definition, classification, diagnosis, screening and prevention (Update 2023)][J]. Wien Klin Wochenschr, 2023,135(Suppl 1):7-17.

[3] Lv Ruoqi. China in the latest version of "global diabetes map"[J]. Jiangsu Health Care, 2020(02):56.

[4] Chinese Medical Association Diabetes Branch. Guidelines for the prevention and treatment of type 2 diabetes mellitus in China (2020 edition)[J]. Chinese Journal of Practical Internal Medicine, 2021,41(8):668-695.

[5] Papatheodorou K, Papanas N, Banach M, et al. Complications of Diabetes 2016[J]. J Diabetes Res, 2016, 2016: 6989453.

[6] Dong Chao, Zhao Jinxi. Traditional Chinese medicine etiology and treatment principles of diabetes mellitus and its complications[J]. China Medical Journal, 2022,24(05):484-487.

[7] Zhang Jing, Wang Chuying, Hong Yushu, et al. Progress on the mechanism of action of tonifying Yang and restoring Wu Tang in the treatment of diabetes mellitus and its complications[J]. Speciality Research, 2023:1-6.

[8] Wang Meijun, Hu Yidi. Clinical study on the treatment of obese type 2 diabetes mellitus with lotus leaf lipid-lowering soup combined with acupoint burrowing[J]. New Chinese Medicine, 2023,55(13):170-174.

[9] Yue Guanru, Cai Wei. Research progress on the role of cellular focal death in diabetes and its complications[J]. Chinese Journal of Gerontology, 2023,43(08):2016-2021.

[10] Chen Feng, Zhang Fan, Hao Erwei, et al. Progress on the mechanism of action of Chinese herbal polysaccharides against diabetes mellitus and its complications[J]. Chinese Journal of Experimental Formulas, 2022, 28(12): 256-266.

[11] Zhou X, Guo Y, Yang K, et al. The signaling pathways of traditional Chinese medicine in promoting diabetic wound healing [J]. J Ethnopharmacol, 2022,282:114662.

[12] Dong Yulin, Zhang Xinxia. Progress of acupuncture intervention in pre-diabetes[J]. Asia-Pacific Traditional Medicine, 2023,19(04):234-237.

[13] Ma Sj, Huang Bn, Liu Ruotong. Analysis of Chinese medicine theories about diabetes[J]. Science Popular (Science Education), 2017(08):154.

[14] Li Ziyan, Li Mai, Yang Lixia, et al. Academic thinking of Tong Xiaolin in the treatment of diabetic complications[J]. Research on Traditional Chinese Medicine, 2021,34(09):67-70.

[15] Wei Jie, Zhang Pingxin, Li Dongyang, et al. Analysing the medication pattern of Professor Lv Renhe in the treatment of diabetes mellitus based on data mining[J]. Jilin Chinese Medicine, 2022,42(10):1207-1210.

[16] Liu Le. Lv Renhe's treatment of "Kidney complex microcriticism in the abdomen" from the theory of benefiting qi and nourishing blood[J]. Global Chinese Medicine, 2018,11(12):1938-1939.

[17] Liu Ming, Zhang Yue, Liu Zheng, et al. Experience of Shang Dejun, a national medical master, in treating diabetic foot [J]. Chinese Journal of Clinical Physicians, 2023,51(04):387-390.

[18] Moreno J A, Gomez-Guerrero C, Mas S, et al. Targeting inflammation in diabetic nephropathy: a tale of hope[J]. Expert Opin Investig Drugs, 2018,27(11):917-930.

[19] Wang Huan, Zhang Hongmei, Xu Jiamei, et al. Effects of moxibustion on renal haemodynamics in patients with chronic kidney disease[J]. Acupuncture Research, 2018,43(11):722-724.

[20] Chen Lianjing, Shi Juxia, Zhang Longzhao, et al. Effect of gentle moxibustion on the blood perfusion volume of ren Yu acupoint [J]. Shanghai Journal of Acupuncture and Moxibustion, 2019,38(05):574-577.

[21] San Liufeng, Meng Jingxi, Lu Liang. Effects of warm kidney, tonifying qi and activating blood formula combined with moxibustion on renal function and meridian energy index in patients with stage 3 diabetic nephropathy[J]. World Journal of Integrative Chinese and Western Medicine, 2022,17(10):2001-2005.

[22] Shu Yu, Pei Jian, Gao Zheng, et al. Experience of Lu's school of acupuncture and moxibustion in treating diabetic peripheral neuropathy[J]. Chinese Journal of Traditional Chinese Medicine, 2021,36(05):2763-2765.

[23] Pei J, Lu YY, Chen YJ, et al. Origin of Lu's Acupuncture and Main Academic Ideas[J]. Shanghai Journal of Acupuncture and Moxibustion, 2016,35(04):388-391.

[24] Hu Jing, Lu Jianrao, Zhang Bingbing, et al. Inflammatory cytokine levels in diabetic nephropathy treated by Benefiting Kidney, Activating Blood and Draining Turbidity Formula combined with Lu's acupuncture[J]. World TCM, 2019,14(05):1274-1277.

[25] Wang YG. Clinical value of tonifying spleen and kidney soup combined with warm acupuncture in treating diabetic

nephrotic syndrome with spleen and kidney yang deficiency[J]. Chinese Convalescent Medicine, 2021,30(08):828-830. [26] Kwon, Liu-Gen. Clinical observation on the treatment of diabetic nephropathy by combining acupuncture with yi qi, yin and blood formula[J]. Guangming Traditional Chinese Medicine, 2023,38(08):1438-1441.

[27] Xie Jing, Fang Zhaohui. Clinical observation on the treatment of early diabetic nephropathy by Dan hirudinea hypoglycaemic capsule combined with acupuncture[J]. Clinical Journal of Traditional Chinese Medicine, 2021, 33(01): 118-121.

[28] Jensen T S, Karlsson P, Gylfadottir S S, et al. Painful and non-painful diabetic neuropathy, diagnostic challenges and implications for future management[J]. Brain, 2021,144(6):1632-1645.

[29] Feldman E L, Callaghan B C, Pop-Busui R, et al. Diabetic neuropathy[J]. Nat Rev Dis Primers, 2019,5(1):42.

[30] Chen Younan, Guo Changqing, Liu Qingguo. Discussion on the development and application of the "Code of practice for acupuncture and moxibustion techniques, part 6: acupoint injection"[J]. Chinese Acupuncture and Moxibustion, 2009,29(07):581-586.

[31] Wang Qingyue. Research progress on clinical effects and mechanisms of acupoint injection[J]. China Traditional Chinese Medicine Modern Distance Education, 2013,11(18):160-161.

[32] Wang L Q, Chen Z, Zhang K, et al. Zusanli (ST36) Acupoint Injection for Diabetic Peripheral Neuropathy: A Systematic Review of Randomized Controlled Trials[J]. J Altern Complement Med, 2018,24(12):1138-1149.

[33] YANG Wei, SONG Yanyan, ZHANG Wenjing, et al. Clinical study on the treatment of diabetic peripheral neuropathy by strengthening the spleen, benefiting the qi and opening the channels combined with acupoint injection[J]. New Chinese Medicine, 2023,55(11):123-128.

[34] GUO Qi, YU Hongmei, YU Jianzhong. Effect of Angelica sinensis and Gui Zhi Yang-assisting formula combined with western medicines on Vaspin and cystatin C levels in diabetic peripheral neuropathy patients with Yang deficiency and cold condensation[J]. Sichuan Traditional Chinese Medicine, 2023,41(01):130-133.

[35] Abuaisha B B, Costanzi J B, Boulton A J. Acupuncture for the treatment of chronic painful peripheral diabetic neuropathy: a long-term study[J]. Diabetes Res Clin Pract, 1998,39(2):115-121.

[36] Gao Zhongyu. Effect of Angelica sinensis and Gui Zhi Yang-assisting formula combined with acupuncture at Xingtou and Xiahe points on nerve conduction velocity in patients with diabetic peripheral neuropathy with Yang deficiency and cold condensation[J]. Chinese contemporary medicine, 2023,30(05):144-147.

[37] Xue Bo. Clinical observation of Diqi Tongpao Tang combined with abdominal acupuncture in the treatment of diabetic peripheral neuropathy [D]. Changchun University of Traditional Chinese Medicine, 2020.

[38] Liu Suzhen, Yang Haodong, Zhang Huaji, et al. The relationship between signalling pathways and diabetic retinopathy and the progress of Chinese medicine intervention[J]. Chinese Journal of Experimental Herbal Medicine, 2023:1-11.

[39] Teo Z L, Tham Y C, Yu M, et al. Global Prevalence of Diabetic Retinopathy and Projection of Burden through 2045: Systematic Review and Meta-analysis[J]. Ophthalmology, 2021,128(11):1580-1591.

[40] Ang L, Song E, Jun J H, et al. Acupuncture for treating diabetic retinopathy: a systematic review and meta-analysis of randomised controlled trials[J]. Complement Ther Med, 2020,52:102490.

[41] Yuan Xiaoyan. Clinical study on the treatment of diabetic retinopathy with acupoint injection by adding tonic Yang Huiwu Tang[J]. Guangming Traditional Chinese Medicine, 2020,35(21):3382-3384.

[42] Zheng Xuejing, Zhang Huaji. Progress of Chinese medicine research on diabetic retinopathy[J]. Hunan Journal of Traditional Chinese Medicine, 2021,37(03):187-188.

[43] Xing Jiaming, Sheng Xueyan, Yan Xingke, et al. Overview of research on the mechanism of vision intervention by acupuncture [J]. China Journal of Traditional Chinese Medicine Information, 2017,24(01):124-127.

[44] Wang H, Sun H. A review of studies on acupuncture for diabetic retinopathy[J]. Acupuncture Clinical Journal, 2011, 27(06):86-88.

[45] Feng Yuan, Chen Yanling, Liu Lunzhi. Therapeutic effect of acupuncture combined with Chinese and western medicines in the treatment of diabetic retinopathy[J]. Shanghai Journal of Acupuncture and Moxibustion, 2022, 41(11):1065-1070.

[46] Wu Y. Clinical effect of compound camphorine injection combined with thromboxane capsule in the treatment of fundopathy [J]. China Medical Guide, 2021,19(09):145-146.

[47] Zhang Shizhong, Xin Shengfang, Dong Lina, et al. Observation on the clinical efficacy of oral administration of traditional Chinese medicine combined with acupoint injection of compound camptothecin in the treatment of diabetic retinopathy [J]. World Digest of Latest Medical Information, 2019,19(40):3-4.

[48] Gu GQ. Guidelines for the diagnosis and treatment of diabetic foot in China[J]. Chinese Journal of Clinicians, 2020, 48(01):19-27.

[49] Lipsky B A, Senneville E, Abbas Z G, et al. Guidelines on the diagnosis and treatment of foot infection in persons with diabetes (IWGDF 2019 update)[J]. Diabetes Metab Res Rev, 2020,36 Suppl 1:e3280.

[50] Liu F S, Li Y, Guo X S, et al. Advances in traditional Chinese medicine as adjuvant therapy for diabetic foot[J]. World J Diabetes, 2022,13(10):851-860.

[51] Chen Lihong, Ran Xingwu. Clinical characteristics of diabetic foot lesions and preventive measures in China[J]. Chinese Journal of Clinical Physicians, 2021,49(12):1390-1393.

[52] Zhang Shiyong, Ding Hong. Observations on 56 cases of diabetic foot treated by internal administration of traditional Chinese medicine together with acupuncture and electromagnetic wave[J]. Heilongjiang Traditional Chinese Medicine, 2014,43(04):49-50.

[53] Liang Zunxiao, Huang Yalian, Yang Jia, et al. Therapeutic effect of acupuncture combined with the addition and subtraction of tonifying Yang Huiwu Tang on diabetic foot with qi deficiency and blood stasis[J]. Chinese Journal of Traditional Chinese Medicine, 2020, 38(06):210-213.