

# Rational Use of Traditional Chinese Medicine and Clinical Efficacy Analysis

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**Abstract:** Objective: To analyze the influence of rational use of traditional Chinese medicine on clinical efficacy. Methods: 104 patients with adverse drug reactions of traditional Chinese medicine admitted to our hospital from January 2020 to June 2022 were selected as the irrational group, and 104 patients with rational drug use of traditional Chinese medicine in the same period were selected as the control group. Retrospectively analyze relevant data between the two groups, compare between groups, discuss the role of rational use of traditional Chinese medicine in clinical efficacy and common problems, and propose corresponding optimization strategies. Results: The clinical manifestations of 104 patients with multiple adverse reactions after taking traditional Chinese medicine in this experiment were found to be related to the following irrational use through analysis: 17 cases (16.3%) of irrational processing methods of traditional Chinese medicine, 20 cases (19.2%) of irrational use of traditional Chinese medicine combined with western medicine, 27 cases (26.0%) of irrational use and dosage, 50 cases (48.0%) of irrational treatment based on syndrome differentiation, and 2 cases (1.9%) of other factors. Compared with the control group, there were statistical differences ( $P < 0.05$ ). The patient satisfaction and clinical efficacy of the control group reached 98% and 96% respectively after the optimization of the scheme. Conclusion: Through comparative study, it is found that there are problems in the use of traditional Chinese medicine in patients with adverse reactions of traditional Chinese medicine, and the clinical efficacy analysis is carried out, and the corresponding optimization scheme is formulated to reduce the adverse reactions of patients affecting the efficacy, and actively improve the rationality and safety of traditional Chinese medicine.

## 1. Introduction

The use of traditional Chinese medicine in China has a long history of thousands of years. In the context of the integration of traditional Chinese medicine and western medicine, traditional Chinese medicine is not only popular for independent use, but also has a good effect in combination with western medicine. However, many people always mistakenly believe that Chinese medicine has no adverse reactions, or some minor adverse reactions occur, so it is easy to be ignored and people pay little attention to the rational use of Chinese medicine. As a result, Chinese medicine users have many adverse reactions that affect the clinical efficacy. In order to improve the clinical effect of rational use of Chinese medicine, ensure the rationality, scientificity, safety and appropriateness of Chinese medicine, give better play to the advantages of Chinese medicine<sup>[1]</sup>, it is necessary to comprehensively analyze the factors that affect the rational use of clinical Chinese medicine and formulate corresponding optimization strategies. This paper conducts research on this, as reported below.

## 2. Data and Methods

### 2.1 General Data

104 patients with adverse reactions of traditional Chinese medicine admitted to our hospital from January 2020 to June 2022 were selected. The relevant data were analyzed retrospectively and

compared with the control group with irrational use. The role of rational use of traditional Chinese medicine in clinical efficacy and common problems were analyzed. 64 males and 40 females were in the irrational group. The age range was 22-68 years, with an average age of  $(45.5 \pm 5.2)$  years. The average time of taking traditional Chinese medicine was  $(14.4 \pm 4.2)$  days. During the period of taking traditional Chinese medicine, there were adverse reactions of different degrees. The clinical manifestations were: skin redness, swelling and spots, unexplained muscle soreness, capillary degeneration and bleeding, fatigue, sleep disorder, gastrointestinal dysfunction, headache of unknown causes, etc. There were 104 patients in the control group, 60 males, 44 females, ranging from 23 to 69 years old, with an average age of  $(46.4 \pm 6.2)$  years; The clinical diagnosis of diseases taking traditional Chinese medicine mainly focuses on cardiovascular diseases, respiratory diseases, gastrointestinal diseases and other common and chronic diseases. There was no statistical difference between the two groups ( $P > 0.05$ ), so a comparative study could be conducted.

## **2.2 Methods**

Through the retrospective analysis of the relevant data of the two groups of patients, the clinical manifestations of patients in the use of traditional Chinese medicine were analyzed, including the irrational processing methods of traditional Chinese medicine, the irrational use of Chinese and western medicine, the irrational usage and dosage, and the irrational treatment based on syndrome differentiation. The satisfaction of patients was investigated through questionnaires to summarize, and finally the corresponding optimization scheme was proposed.

### **2.2.1 Common Factors of Adverse Drug Reactions**

Common factors of clinical adverse drug reactions of traditional Chinese medicine are irrational dosage and usage, irrational combination of traditional Chinese and western medicine, irrational processing method, and irrational treatment based on syndrome differentiation.

### **2.2.2 Main Coping Strategies**

The main coping strategies for rational drug use in control group include strictly control the usage and dosage of traditional Chinese medicine, clarify the safety and therapeutic effect of compatibility of traditional Chinese medicine and western medicine, check the processing methods of traditional Chinese medicine and eliminate the taboos, and conduct reasonable treatment based on syndrome differentiation. In particular, the use of some toxic drugs should be confirmed and prompted. Otherwise, adverse reactions of traditional Chinese medicine will occur.

From the analysis of review materials, ① patients who take excessive aconitum and aconite in the course of using aconite drugs will inevitably cause slight poisoning for patients with poor immune ability, resulting in erythema of the body and discomfort of gastrointestinal function. Toxic drug pharmacies should be strictly controlled. Some patients have adverse reactions when using the traditional Chinese medicine of activating the collaterals and channels, such as nux vomica, which can not only clear the channels, but also reduce swelling and mass, strengthen the spleen and stomach, but it is found from the materials that patients will have headache and capillary degeneration of unknown causes after taking the drug in large doses (more than 0.6g per day) and multiple times, while the normal dosage should be 0.3-0.6g per day; ② The usage is irrational. For example, musk and donkey hide gelatin should be taken after closing, but not directly decocted. The decocting method of drugs with special requirements should be specified in the prescription; ③ Pay attention to the rationality of the combination of traditional Chinese medicine and western medicine. For the combination of traditional Chinese medicine and western medicine, we must pay attention to their compatibility and clinical efficacy. Otherwise, it will cause unnecessary harm to patients and produce some serious adverse reactions and sequelae. Therefore, the time, dose and incompatibility of the two drugs should be comprehensively considered in the combination of traditional Chinese and western medicine, especially the pharmacological investigation on the possible adverse reactions of the two drugs. If necessary, the blood drug concentration should be tested for patients who are taking multiple drugs to avoid harm. ④ Rationality of processing:

irrational processing methods of different traditional Chinese medicines should be eliminated. Scientific processing, usage, dosage and decocting of toxic traditional Chinese medicines should be especially irrational. From the material review, the situation causing serious harm often affects the efficacy, so the processing technology is particularly important. We should strictly follow the procedures, master the fire conditions and pay attention to the quality of Freon. ⑤ Adhere to the principle of reasonable syndrome differentiation and treatment, and be able to make full use of the patient's etiology, pathogenesis, own constitution, past history and medication history in the use, dosage and dosage form of traditional Chinese medicine, and pay attention to allergens. For example, some patients directly take fire catharsis drugs after meals and take detoxification and nourishing drugs before meals, which will cause physical discomfort. It is urgent to ensure the health of patients from the perspective of rational drug use. Doctors should prompt and warn in time. ⑥ Other optimization strategies: for patients, more health education on rational drug use should be strengthened, and drug use promotion videos and articles should be displayed on the public platform, so as to better realize rational drug use, reduce the incidence of adverse reactions and errors caused by patients' own reasons, and improve the rationality and safety of clinical use of traditional Chinese medicine<sup>[2]</sup>.

### 2.3 Observation Indicators

The incidence of irrational drug use, adverse reaction rate and overall satisfaction were compared between the two groups.

### 2.4 Statistical Analysis

SPSS 26.0 was used for data processing. The measurement data is expressed in  $\bar{x} \pm s$  by t test, and the counting data is expressed in% by  $\chi^2$  inspection. The difference was statistically significant with  $P < 0.05$ .

## 3. Results

The clinical manifestations of 104 patients in the irrational group who had multiple adverse reactions after taking traditional Chinese medicine in this experiment were found to be related to the following irrational use through analysis: 17 cases (16.3%) of irrational processing methods of traditional Chinese medicine, 20 cases (19.2%) of irrational use of traditional Chinese medicine and western medicine, 27 cases (26.0%) of irrational use and dosage, 50 cases (48.0%) of irrational treatment based on syndrome differentiation, and 2 cases (1.9%) of other factors. There were statistical differences compared with the control group ( $P < 0.05$ ). See Table 1.

Table 1 Analysis of the Main Problems of 104 Cases of Adverse Reactions of Traditional Chinese Medicine in the Irrational Group (%)

Factors	Cases	Incidence rate of adverse reactions (%)
irrational processing methods	17	16.3%
irrational use of traditional Chinese medicine and western medicine	20	19.2%
irrational use and dosage	27	26.0%
irrational treatment based on syndrome differentiation	50	48.0%
Other factors	2	1.9%

There were statistical differences compared with the control group.

Table 2 The incidence of adverse drug reactions in the irrational group was significantly different from that in the control group ( $P < 0.05$ ), including skin redness, swelling and spots, muscle soreness without cause, capillary degeneration and bleeding, fatigue, sleep disorder, gastrointestinal dysfunction, and headache of unknown cause. See Table 2 for details

Table 2 Comparison of Adverse Reaction Rate between the Two Groups during Medication [Case(%)]

Group	Case	skin redness, swelling and spots	muscle soreness without cause	capillary degeneration and bleeding	fatigue, sleep disorder	gastrointestinal dysfunction	headache of unknown cause
Control group	104	2 (1.9)	3 (2.8)	0 (0)	2 (1.9)	3 (2.8)	1 (0.9)
Irrational group	104	30 (28)	40 (38)	20 (19)	50 (48)	55 (52)	30 (28)

Table 3 Comparison of Clinical Efficacy and Total Effective Rate. The Difference between the Two Groups is Statistically Significant (P<0.01)

Table 3 Comparison of Total Effective Rate Results of Two Groups of Patients [Cases (%)]

Group	Case	Clinical efficacy	Total effective rate
Control group	104	100(96.1)	102 (98.0)
Irrational group	104	66(63.4)	76 (73.0)
T value			12.35
P value			<0.01

#### 4. Discussion

The harmfulness of rational use of traditional Chinese medicine is often ignored by many doctors and patients, and even some folk traditional Chinese medicine use toxic traditional Chinese medicine in large doses to improve the therapeutic effect, causing significant safety hazards to the health of patients. The rational use of traditional Chinese medicine must comply with the requirements of traditional Chinese medicine theory and national Chinese pharmacopoeia on drug safety and dosage. From the perspective of clinical medication, many patients pay attention to economic benefits and do not think much about safety and effectiveness, and always think that Chinese medicine can cure the disease. In particular, many drugs used in clinical practice are prescription drugs, which must be used in combination with Chinese and western medicines according to the correct processing method, reasonable usage and dosage, and in particular, the fundamental concept of syndrome differentiation and treatment of traditional Chinese medicine should be followed, so as to ensure that patients can save the sick and reduce adverse reactions in the process of using traditional Chinese medicine for treatment.

The irrational drug use of 104 patients was analyzed this time. Compared with the control group, there were significant differences in the incidence of adverse reactions, clinical efficacy and overall satisfaction rate, which were caused by the above reasons: 17 cases (16.3%) of irrational processing methods of traditional Chinese medicine, 20 cases (19.2%) of irrational use of Chinese and western medicine, 27 cases (26.0%) of irrational use and dosage, 50 cases (48.0%) of irrational treatment based on syndrome differentiation, 2 cases (1.9%) with other factors, which led to a great difference in the clinical efficacy of patients after taking drugs. Therefore, corresponding optimization measures must be taken: strictly control the usage and dosage of traditional Chinese medicine, clarify the safety and therapeutic effect of the compatibility of traditional Chinese medicine and western medicine, check the processing methods of traditional Chinese medicine and eliminate the taboos, and conduct reasonable treatment based on syndrome differentiation. In particular, the use of some toxic drugs should be confirmed and prompted. At the same time, it is necessary to strengthen the supervision of the use of traditional Chinese medicine and select scientific decoction

methods to reduce drug-induced diseases.

## **5. Conclusion**

To sum up, by summarizing and analyzing the problems existing in the rational use of the two groups of traditional Chinese medicine, and by optimizing the strategy to further straighten out the problems, we can find out the reasons to reduce the occurrence of adverse reactions, improve the rationality and safety of drug use, and make patients satisfied.

## **References**

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