

Progress in the treatment of colorectal polyps from the perspective of the “spleen”

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Abstract: Colorectal polyp refers to a kind of elevated lesion protruding from the mucosal surface of the large intestine into the intestinal lumen, and the etiology is complex and diverse. Ancient and modern medical doctors believe that "spleen deficiency" is the key mechanism of colorectal polyps, and many clinical research data show that spleen and stomach weakness, spleen deficiency and colorectal polyps are closely related, according to the principle of Chinese medicine, "seek the root cause of the disease", clinically, we can take "spleen" as the basis for the treatment of colorectal polyps. According to the principle of "treating the disease at its root" in Chinese medicine, the clinical practice can be based on the theory of "spleen" as the entry point for the treatment of colorectal polyps and the addition and subtraction of clinical evidence, thus opening up a new way of thinking for the treatment of colorectal polyps.

1. Introduction

Colorectal polyp refers to a class of protruding from the surface of the mucosa of the large intestine to the intestinal lumen of the bulging lesions, can occur in any part of the intestinal tract, in the absence of a determination of the nature of its pathology before collectively referred to as the "polyp" [1]. Chinese medicine on the "colon polyps" is not yet a unified name, "Ling Shu - water bloating" said: "Cold guest in the intestines outside, and Wei Qi wrestling, the gas shall not be Wing, because there is a system, the fetish and internal, the evil gas is up, polyps are born." It can be seen that the "colon polyps" is categorized as "intestinal Qin" in Chinese medicine. With the progress of the condition of colorectal polyps, patients may appear abdominal pain, diarrhea, constipation, blood in stool and other symptoms, so later generations of doctors believe that this disease is also under the Chinese medicine "intestinal fetish" "diarrhea" "blood in stool" "Intestinal tumor" and other categories [2]. Chinese medicine on the "colon polyps" etiology, pathogenesis is not yet a unified understanding, most believe that "spleen deficiency" is the main point of the disease, innate endowment deficiency or acquired dietary indiscipline, addiction to fat, sweet and thick flavors or addiction to cold, cold, damage to the spleen and stomach function, affecting the gastrointestinal The function of the stomach and intestines is affected by the elevation and function of the stomach and intestines, and over time, dampness and heat are generated and phlegm and turbidity are formed [3].

The pathogenesis of colorectal polyps has not yet been clarified, some scholars suggest that it is mainly located in the intestinal crypts of the intestinal stem cells in the proliferation, differentiation, apoptosis of this self-renewal of the balance of the pathway is broken [4], many domestic and foreign literature pointed out that age, gender, smoking, alcohol, high-fat diet, lack of exercise is the occurrence of the disease of high-risk factors [5-7]. At present, colorectal polyps are mainly diagnosed by endoscopy, according to its pathological nature, colorectal polyps can be divided into non-adenomatous polyps and adenomatous polyps, adenomatous polyps are also known as pre-cancerous lesions, as shown in Figure 1. Studies have shown that [8] colorectal polyps are predominantly found in rectal and sigmoid colon, with an incidence rate of 44% to 53%, followed by the transverse colon (32% to 36%), ascending colon (14% to 20%). The larger the polyp and with age, the prevalence of colorectal polyps and the rate of cancer increases, with an average of 5-15 years, the cancer rate reaches 3%-27% [9], as shown in Figure 2. Therefore, early intervention treatment for colorectal polyps is important to reduce the incidence of colorectal cancer.

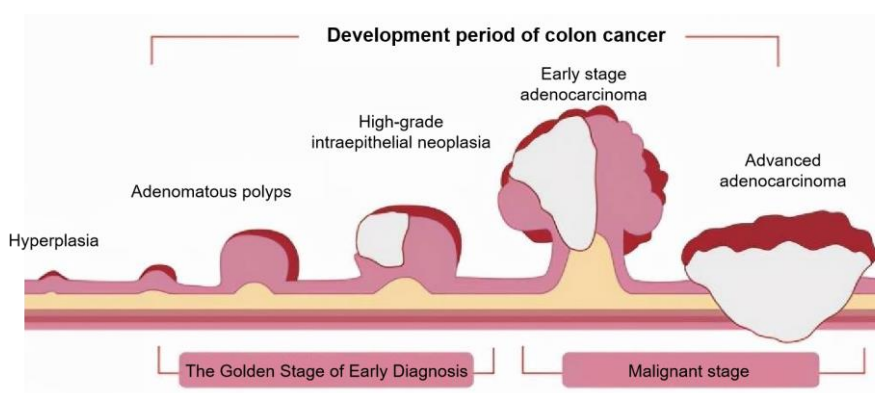


Figure 1: Development of colon cancer

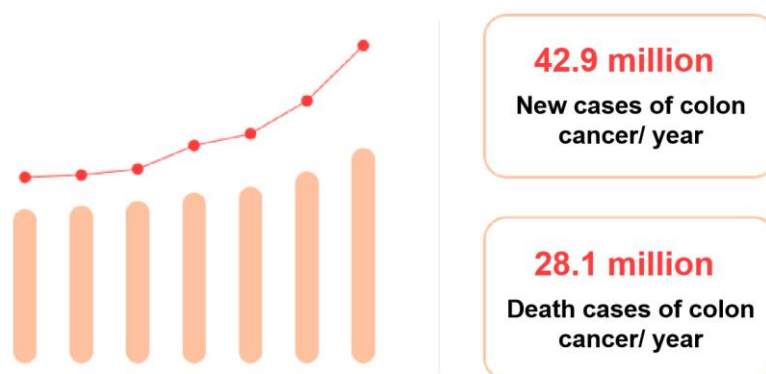


Figure 2: Incidence rate of colon cancer in China

At present, the most direct and effective method of Western medicine is endoscopic resection, but the problems of recurrence after resection, repeated clinical symptoms, bleeding and perforation and other complications have not been effectively improved, and there is no medicine for the prevention and treatment of colorectal polyps. Chinese medicine follows the basic principle of "treating the disease at its root", and has a series of advantages in the treatment of colorectal polyps, such as preventing recurrence of polyps, effectively improving clinical symptoms, and low cost, etc. In recent years, the author will discuss the advantages of treating colorectal polyps from the theory of "spleen", and will discuss the advantages of treating colorectal polyps from the theory of "spleen". The author

will summarize the progress of research on the treatment of colorectal polyps from the theory of "spleen" in recent years.

2. Etiology and pathogenesis are related to the spleen.

As early as in the "Spiritual Pivot - five changes" proposed: "people good disease intestinal accumulation of people between the spleen and stomach, cold and temperature is not second, the evil gas slightly to the accumulation to stay to the big gathering is up." Although there is no "polyp" this independent name, but a large number of literature are considered "intestinal accumulation" for polyps. Explained the polyp of the large intestine in the intestines, belongs to the spleen and stomach, the spleen and stomach weakness, dysfunction, water, dampness, phlegm and beverages in the intestines, intestinal stagnation, phlegm and dampness cohesion, or stasis of blood within the stoppage, over time into a tumor into a rest [10]. There is also the "treatment of the machine" said: "strong people have no accumulation, false people have, the spleen and stomach weakness, qi and blood are weak, four seasons have feelings, all can become a product", further suggesting that polyps is the weakness of the spleen and stomach for this, and dampness and heat, phlegm, blood stasis for the standard of the standard of the deficiency of the standard of the disease.

Most of the current medical doctors have different interpretations of the etiology and pathogenesis of this disease, but they all believe that "spleen deficiency" is the key to the development of colorectal polyps. Wang Lanying [11] believes that the disease is based on the deficiency of the spleen and stomach, and the interaction of cold, dampness, heat and stasis is the symptom, which belongs to the syndrome of the basic deficiency and the symptomatic solid. Professor Han Shutang [12] summarized the long-term clinical experience and pointed out that the weakness of the spleen and stomach, and the accumulation of deficiency is the most important etiological factor in the development of colonic polyps. Gao Jiabin [13] summarized that this disease focuses on spleen deficiency, and the dampness, turbidity, and stasis caused by it are the main etiological factors. Liu Yang [14] believes that "spleen deficiency" is the internal cause of colorectal polyps, but also the focus of the pathogenesis, while dampness, heat, cold, dampness, dampness, phlegm and the resulting stasis, stasis is the external cause of the disease, the combination of internal and external interactions, and ultimately the formation of colorectal polyps. Sukun Han et al [15] believe that spleen deficiency is the root cause of colorectal polyps, spleen qi deficiency and spleen yang deficiency is the main; spleen failure, or spleen yang deficiency, cold and dampness, or contain a long time to generate dampness and heat, can cause phlegm and dampness, blockage of qi, if the qi and blood phlegm and stasis congestion of the intestinal tract, derived from colorectal polyp disease. Xie Sheng et al. [16] concluded from clinical observation that the pathogenesis of this disease focuses on "spleen deficiency, cold and dampness", and its etiology is caused by cold and dampness, dampness and phlegm, resulting in stagnation of stasis and blood stasis. Chen Wanqun et al [17] summarized the characteristics of the pathogenesis of polyps due to the deficiency of the spleen and stomach, and the disorders of cold and heat in the stomach and intestines caused by the six elements, diet, and seven emotions, and the cold condensation and blood stasis from the clinical diagnosis and treatment. According to Zhou Jiyong [18], phlegm, dampness and stasis caused by spleen deficiency are the key pathomechanisms for the formation of colonic polyps. According to Liu Tianwen [19], weakness of the spleen and stomach, and dampness and heat in the large intestine are the important pathological basis for the production of colorectal polyps. Ma Xiaolin et al [20] believed that emotional and emotional disorders, cold and dampness, and dietary irregularities injuring the spleen and stomach, resulting in weakness of the spleen and stomach are the main reasons for the development of this disease. Fu Zhongzhu, a national famous veteran Chinese medicine practitioner, also believed that the occurrence of this disease is related to the patient's spleen and stomach weakness and the accumulation of dampness and turbidity,

and that the key to the pathogenesis of this disease is the deficiency of the spleen, and the pathologic products of phlegm, dampness, and stasis accumulate and develop [21]. Duo Sijing et al [22] concluded that the pathomechanism of colorectal polyps is caused by weakness of the spleen and stomach, and accumulation of phlegm, turbidity and other pathological factors. Yang Wenge et al [23] believe that the modern lifestyle and changes in dietary habits lead to the spleen and stomach damage endogenous dampness, as well as dietary factors subjected to dampness, dampness for a long time in the intestines and bowels, qi and blood cohesion, the formation of polyps. Xu Fulin [24] believes that this disease occurs in the middle-aged and elderly people, due to the weakening of the spleen and stomach function of the middle-aged and elderly people, coupled with dietary indiscretions and other triggers, the spleen is not healthy and transportation, meridian blockage so that the gas is unfavorable, squatters, blood and turbid gas interactions and the birth of polyps. Niu Xingdong [25] believes that adenomatous colorectal polyps are located in the large intestine, which has the closest relationship with the spleen and stomach. The spleen and stomach are the foundation of the later life, the spleen and stomach deficiency, transportation and transformation powerless, brewing dampness and turbidity, blockage of qi, dampness into phlegm, phlegm and dampness, blockage of blood transportation, blood stasis, and over the long term, the development of heat, and ultimately developed into a swelling. Therefore, colorectal polyp disease is based on the deficiency of the spleen and stomach, with phlegm, blood stasis and turbid toxin as the symptoms.

3. Symptom characteristics are linked to the spleen

Zhu Ping et al [26] concluded in their study of the correlation between Chinese medicine evidence and the expression of VEGF, KDR and MVD in 148 cases of colorectal polyps that the Chinese medicine evidence was most frequent in the spleen and stomach weakness evidence, and pointed out that the spleen and stomach weakness type had the highest proportion among the evidence types of colorectal polyps. Chen Xuan et al [27] showed in a retrospective analysis study of 119 patients with colorectal polyps with Chinese medicine evidence and combined Chinese and Western medicine treatment that 66 of 119 patients had spleen qi weakness evidence, accounting for 55.46%. Luo Fen [28] investigated the Chinese medicine body type of 207 patients with colorectal polyps and found that the cases in the colorectal polyp group accounted for the largest proportion of spleen and stomach weakness certificates (33.82%) after statistical analysis using SPSS 19.0 software. Yan Simeng et al [29] in 200 cases of colorectal polyp patients in the study of Chinese medicine physique and symptom types and their relationship found that the disease to spleen and stomach weakness certificate, the middle deficiency of dirty cold certificate is the main, and also see damp-heat congestion and congestion certificate and liver depression and stagnation of qi certificate. Mao Wenxin et al [30] retrospectively analyzed the Chinese medicine syndromic characteristics of 876 patients with colorectal polyps in Guangdong region and showed that the distribution of Chinese medicine syndromes in patients with colorectal polyps was most common in the syndromes of spleen and kidney yang deficiency and dampness stagnation, followed by the syndromes of spleen and stomach weakness. Xue Jing et al [31], after identifying and typing 630 patients with colorectal polyps who presented to the clinic with chronic diarrhea and were detected by electronic colonoscopy, concluded that 281 cases (44.6%) of spleen and kidney yang deficiency, 188 cases (29.8%) of spleen deficiency and dampness stagnation, 113 cases (17.9%) of spleen qi weakness, and 48 cases (7.6%) of liver and spleen disorders were associated with the "spleen". All of them were related to "spleen". Zhang Lunjing et al [32] collected 182 patients with adenomatous polyps of the colon and analyzed the distribution characteristics of the evidence, and the results showed that the most common disease site evidence elements were spleen and large intestine according to the frequency of occurrence. Qin Yiwen [33] also found that the spleen was the main disease site of colon polyps in the study of Chinese

medicine evidence elements.

In addition, spleen deficiency constitution is also closely related to colorectal polyps. Li Yuchan [34] investigated 174 patients with adenomatous polyps, whose main body types were, in order, qi deficiency or a tendency to qi deficiency, yang deficiency or a tendency to yang deficiency, and phlegm-dampness or a tendency to phlegm-dampness. Tan Weilu [35] investigated 97 patients with recurrent colorectal polyps, in which those with qi deficiency or with qi deficiency tendency were the most numerous, followed by those with damp-heat quality or with damp-heat quality tendency. Jiang Chunhua [36], in the treatment of patients with multiple polyps of the colon after total colectomy, concluded that such patients In addition, spleen deficiency constitution is also closely related to colorectal polyps. Chen [37] proposed the "polyp-related constitution", linking the three representatives of damp-heat, qi deficiency and phlegm-dampness with the three corresponding types of spleen and stomach damp-heat syndrome, spleen and stomach weakness syndrome, spleen and stomach deficiency and dampness syndrome, revealing their close relationship as cause and effect, and further illustrating the close relationship between qi deficiency and spleen and stomach weakness syndrome and the occurrence of colorectal polyps. It further illustrates that qi deficiency, spleen and stomach weakness and the occurrence of colorectal polyps are inseparable. As stated in "Su Wen - The Theory of Thoracic Methods", "when positive qi exists inside, evil cannot be dried up", physical factors as the internal cause of the disease, and the strength of the individual's physical condition will also affect the occurrence and development of colorectal polyps.

4. Treatment from the "Spleen" in the identification of evidence

Colorectal polyps are caused by "spleen deficiency", which is caused by dampness, heat, phlegm and blood stasis in the intestines. Modern medical practitioners treat the disease by replenishing the spleen and benefiting the qi, adding and subtracting, and treating the symptoms and the root cause together, which achieves a good therapeutic effect. Li Xiaolan et al [38] for intestinal polyps after resection of 143 patients, given oral spleen strengthening and clearing heat and dampness agent to strengthen the spleen and benefit the qi, clearing heat and dampness, 2 years later review of the patients recurrence rate of 14.7%, lower than the control group of 32.2%, significantly reducing the rate of recurrence of polyps. Zhang Fengmin et al [39] divided 122 patients with colorectal polyps after endoscopic treatment and identified as adenomas of spleen deficiency, dampness and stasis type into a treatment group and a control group. The treatment group was treated with the internal administration of traditional Chinese medicine and acupuncture using the Pui Tu Sheng Jin method with the addition and subtraction of Ginseng, Poria, Atractylodes Macrocephalae, lentils, Chen Pi, Chinese yam, fried Semen Coix Seed, Lotus Seed, Radix et Rhizoma Sandaricae, Glycyrrhiza Glutinosa, Panax Quinquefolii Powder; the control group was treated with the Pui Tu Sheng Jin method with the addition and subtraction of Ginseng and Rhizoma Polypaea. After 2 months of treatment, the symptoms of the patients in the treatment group were significantly improved compared with those in the control group; the recurrence rates of the treatment group were significantly lower than those of the control group at 6 months, 1 year and 3 years after treatment. It not only improved the clinical manifestations of the patients, but also reduced the possibility of recurrence after endoscopic treatment. Xu Fulin [40] used the method of replenishing qi, eliminating stasis, clearing the intestines and eliminating knots to treat 30 cases of colorectal polyps by strengthening the spleen and benefiting the health of the soup (Astragalus membranaceus 15g, Radix et Rhizoma Alba 15g, Fructus Codonopsis 3g, Fructus Dioscorea 10g, Fructus Schisandrae chinensis 3g, Fructus Codonopsis 15g, Fructus Ocimum gratissimum 5g, Fructus Pseudostellariae 3g, Fructus Sanguisorbiae 6g, Curcuma longa 10g, Glycyrrhiza Uralensis 6g), which resulted in the treatment of 14 clinical cures, 6 apparent cases, 8 cases, 8 cases, 2 cases of invalid cases. The results were 14 cases

of clinical cure, 6 cases of significant effect, 6 cases of improvement, 8 cases and 2 cases of ineffectiveness. Niu Xiaoling et al [41] used spleen strengthening and phlegm elimination soup with addition and subtraction to treat endoscopic resection of colorectal adenomas with spleen deficiency and phlegm obstruction, respectively, the colonoscopy was reviewed at 6 and 12 months after treatment, and the recurrence rate of the treatment group was significantly lower than that of the control group. Yin [42] used self-prepared spleen strengthening and tumor prevention soup to prevent postoperative recurrence of colorectal adenoma, and the results of follow-up colonoscopy after 1 year showed that the recurrence rate of the Chinese medicine intervention group was 33.30%, and the recurrence rate of the control group was 66.7% ($P < 0.05$), which suggests that the efficacy of the Chinese medicine intervention group was significantly better than that of the control group. Guan Luchun [43] observed the effect of ganlingbaijusan plus and minus formula on postoperative recurrence of polyp colectomy, and the results showed that the postoperative recurrence rate of the Chinese medicine treatment group was explicitly reduced compared with that of the patients who were given conventional antibiotic treatment only after the operation. Liu Zhiyong et al [44] believed that the coldness of the spleen and stomach is the root of the formation of colorectal polyps, so the "five accumulation of scattered" warm dispersal of cold in the middle, evacuation of cold in the outside, cold, dampness, phlegm, blood stasis, depression and other disease-causing factors and pathological products have a dispersing effect, which can prevent cold and damp colorectal polyps from recurring, and the clinical application has not been found to have a significant adverse reaction.

The effect of selecting the acupoints of the "spleen meridian" in the treatment of colorectal polyps is obvious. Dai Meilan et al [45] selected acupuncture points in the abdomen such as the middle epigastric region, Shenque, Qihai and Guanyuan according to the mechanism of polyp recurrence, and used thunder fire moxibustion to treat patients with adenomatous colorectal polyps after endoscopic removal, with the whole process time of 30min, once a day, 14d as a course of treatment, with a 3d break in the middle, and two consecutive courses of treatment. Two years of follow-up, it was found that the recurrence rate of the treatment group was 9.23% in the 1st year and 18.33% in the 2nd year, which were lower than the 20.29% and 37.68% in the control group, and there was a statistically significant difference between the two groups ($P < 0.05$). Wei Yanbi [46] used acupoints to bury threads (Lung Yu, Spleen Yu, Kidney Yu, Tianshu, Guanyuan, Ashigaru, Fenglong, colon polyps plus Enteric Yu, upper Juzhu, weekly buried threads, 4 times as a course of treatment), with oral appendicitis Lizhong Tang plus reduction (1 dose / day, 4 weeks as a course of treatment) to treat 45 patients with intestinal polyps, the results showed that the recurrence rate of intestinal polyps in the treatment group was 28.89%, which is obviously superior to that of the control group of 72.72%, the two groups compared statistically significant difference ($P < 0.05$). The results showed that the recurrence rate of intestinal polyps in the treatment group was 28.89%, which was significantly better than that in the control group of 72.72%.

5. Summary and Outlook

With the changes in people's dietary structure and living habits, the detection rate of colorectal polyps has been on the rise year by year. Chinese medicine believes that colorectal polyps belong to the "intestinal Qin" "intestinal tumors" and other categories, the location of the disease is mainly in the large intestine, and the spleen is closely related to the spleen - spleen deficiency lifting mechanism can be out of order, over time, the transformation of dampness and heat, phlegm formation and polyps are formed by phlegm and turbidity. As an important part of the development process of colorectal polyps, the spleen is closely related to them in terms of etiology, symptomatology and treatment. Therefore, it is of great significance to discuss the treatment of colorectal polyps from the theory of "spleen" for the clinical diagnosis and treatment of this disease.

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