Acute respiratory infections cannot be diagnosed and treated properly without a thorough understanding of the theory of the 6 Stages and particularly that of the 4 Levels. The beginning stages of an acute respiratory infection usually manifest with symptoms of invasions of Wind from the Chinese medicine point of view.

The "Discussion of Cold-induced Diseases" by Zhang Zhong Jing provided the earliest framework for the diagnosis and treatment of diseases from exterior Wind-Cold. Although this famous classic does also discuss invasions of Wind-Heat and their treatment, a comprehensive theory of exterior diseases from Wind-Heat was not developed until the late 1600s by the School of Warm Diseases (Wen Bing). Thus, the two schools of thought which form the pillars for the diagnosis and treatment of exterior diseases in Chinese medicine are separated by about 15 centuries: they are the School of Cold-induced Diseases (School of Shang Han) based on the "Discussion of Cold-induced Diseases" ("Shang Han Lun") by Zhang Zhong Jing (c. AD 220) and the School of Warm Diseases (Wen Bing School) which started in the late 1600s and early 1700s. The main advocates of this school were Wu You Ke (1582-1652), Ye Tian Shi (1667-1746) and Wu Ju Tong (1758-1836).

**Shang Han Lun - The Six Stages**

The symptomatology of Wind-Cold was discussed by Zhang Zhong Jing in the "Discussion of Cold-induced Diseases" (c. AD 220) where he first elaborated the theory of the 6 Stages. These are:

- **Greater Yang**
  - Wind-Cold with prevalence of Cold
  - Wind-Cold with prevalence of Wind
- **Bright Yang**
  - Channel pattern (Stomach-Heat)
  - Organ pattern (Stomach-Fire)
- **Lesser Yang**
- **Greater Yin**
- **Lesser Yin**
- **Terminal Yin**

The first stage, Greater Yang, is the only Exterior one. At this stage Wind-Cold is on the Exterior and only the Lung's Defensive-Qi portion is affected, not the Interior. The Lung's dispersing and descending of Qi is impaired and the external Wind is lodged in the space between skin and muscles impairing the circulation of Defensive-Qi.

The essential symptoms of the Greater Yang stage are:

- aversion to cold or shivering
"Aversion to cold" indicates the typical cold feeling and shivering which comes on as a wave in the beginning stages of a cold or influenza. It is characteristic in so far as it is not relieved by covering oneself. Most people who experience a bad cold or flu shiver even in bed under the blankets.

The occipital headache or stiffness is due to the obstruction of Defensive-Qi circulation in the Greater-Yang channels (Small Intestine and Bladder) which flow in that area. The Floating pulse reflects the rushing of Defensive Qi towards the Exterior to fight the pathogenic factor.

Besides these three cardinal symptoms there are many others such as a runny nose, sneezing, possibly a fever, a cough, body aches, itchy throat, etc. All these are due to the impairment of the dispersing and descending of Qi by the Lungs and by the obstruction to the circulation of Defensive-Qi in the muscles.

**Wen Bing - The 4 Levels**

What does "Warm disease" mean? This is my own translation of the Chinese term Wen Bing. The above-mentioned doctors from this school of thought introduced important innovations to the theory of Wind in Chinese medicine. The School of Warm Diseases postulates that some exterior pathogenic factors go beyond the natural characters of "Wind"; they are so virulent and strong that, no matter how strong a person's body's Qi may be, men, women and children fall ill by the dozen. More importantly, for the first time in the history of Chinese medicine, these doctors recognized that some external pathogenic factors are infectious.

A further innovative idea stemming from this school was that the pathogenic factors causing Warm diseases, all of them falling under the category of Wind-Heat, enter via the nose and mouth, rather than via the skin as happens for Wind-Cold.

The essential characteristics of Warm diseases therefore are:

1. They manifest with the general symptoms and signs of Wind-Heat in the early stages (Wind-Heat is intended here in a broad sense as it may also manifest as Damp-Heat, Summer-Heat, Winter-Heat, Spring-Heat and Dry-Heat);
2. There is always a fever;
3. They are infectious;
4. The Wind-Heat penetrates via the nose and mouth;
5. The pathogenic factor is particularly strong.
6. The Wind-Heat has a strong tendency to become interior Heat.
7. Once in the Interior, the Heat has a strong tendency to dry up body fluids.

Thus, although all pathogenic factors contemplated by the School of Warm Diseases fall under the broad definition of Wind-Heat, not all diseases caused by Wind-Heat are Warm diseases. Some of the exterior diseases that start with symptoms of Wind-Heat are Warm diseases (with all the above-mentioned characteristics) and some are not. Examples of Warm diseases are measles, chicken-pox, some types of influenza, German measles, poliomyelitis, smallpox, scarlet fever, whooping cough or meningitis. Examples of Wind-Heat diseases which are not Warm diseases are common cold (of the Wind-Heat type), some types of influenza, glandular fever (mononucleosis) and any non-specific upper-respiratory infection manifesting with symptoms of Wind-Heat. **An influenza epidemic is usually a Wen Bing disease. This is because it is very virulent and has a strong tendency to enter the Qi level (causing chest infections) very quickly.**
The distinction between simple invasions of Wind-Heat and invasions of Wind-Heat that are a Wen Bing disease is a very important consideration in practice: it is possible to stop diseases from "simple" Wind-Heat at the early stages, but although true Warm diseases may be alleviated in the initial stages, they may not be entirely stopped at the initial stages. In particular, in the case of Warm diseases, even though it may not stop them at the Exterior level, Chinese medicine can certainly achieve the following aims:

- Alleviate the symptoms
- Shorten the course of the disease
- Prevent transmission to the Ying and Blood levels (see below)
- Prevent complications
- Prevent the formation of residual pathogenic factors

The treatment of exterior invasions is important because they can have very serious consequences in children and the elderly. In children, many serious diseases start with symptoms of invasion of Wind-Heat: in the initial stages one does not know what disease it might be and it is therefore important to treat the manifestations early. For example, measles, diphtheria, whooping cough, poliomyelitis, acute nephritis, scarlet fever and meningitis may all manifest with symptoms of Wind-Heat in the beginning stage. In the elderly, exterior Wind may easily penetrate the Interior causing bronchitis and pneumonia which is often fatal in old age.

**The Four Levels**

The 4 Levels are:

- Defensive-Qi Level (Wei Level)
  - Wind-Heat
  - Damp-Heat
  - Summer-Heat
  - Wind-Dry-Heat
- Qi Level
  - Lung-Heat
  - Stomach-Heat
  - Stomach and Intestines Dry-Heat
  - Gall-Bladder Heat
  - Stomach and Spleen Damp-Heat
- Nutritive-Qi Level
  - Heat in Pericardium
  - Heat in Nutritive Qi
- Blood Level
Heat Victorious agitates Blood
Empty-Wind agitates in the Interior
Empty-Wind agitates in the Interior
Collapse of Yin
Collapse of Yang

The first Level concerns the exterior stage of an invasion of Wind-Heat, the other three Levels describe pathological conditions which arise when the pathogenic factor penetrates the Interior and turns into Heat. The four Levels represent different levels of energetic depth, the first being the Exterior and the other three being the Interior. The interesting part of this theory is the distinction, within the Interior, of three different levels, the Qi Level being the most superficial (within the Interior) and the Blood Level the deepest.

The Defensive-Qi Level of the 4 Levels broadly corresponds to the Greater Yang Stage of the 6 Stages. The former deals with Wind-Heat and the latter with Wind-Cold.

The main symptoms of invasion of Wind-Heat are aversion to cold, shivering, fever, sore throat, swollen tonsils, headache and body-aches, sneezing, cough, runny nose with yellow discharge, slightly dark urine, slightly Red sides of the tongue and a Floating-Rapid pulse. It is worth noting that in Wind-Heat too there is aversion to cold as this is due to Wind-Heat obstructing the Defensive Qi which therefore fails to warm the muscles.

COMMON COLD AND INFLUENZA

Infection from the common cold or influenza virus takes place through the upper respiratory tract and may occur in any season but it is more frequent in Winter or Spring. From the Chinese point of view, they can manifest with symptoms either of Wind-Cold or Wind-Heat.

Common cold and influenza are viral infections of the upper respiratory tract. The common cold may be caused by a variety of viruses including the adenovirus, echovirus, parainfluenza virus, respiratory syncytial virus and rhinovirus. Influenza may be caused by the influenza viruses A, B or C.

AETIOLOGY AND PATHOLOGY

An invasion of an exterior pathogenic factor is due to a temporary and relative imbalance between it and the body's Qi. This imbalance may occur either because the body's Qi is temporarily and relatively weak or because the pathogenic factor is very strong. The body's Qi may be temporarily and relatively weak due to overwork, excessive sexual activity, irregular diet and emotional stress or a combination of these. When the body is thus weakened, even a mild pathogenic factor may cause an external invasion of Wind.

"Wind" indicates both an aetiological factor and a pathological condition. As an aetiological factor, it literally refers to climatic influences and especially sudden changes of weather to which the body cannot adapt. As a pathological condition, "Wind" refers to a complex of symptoms and signs manifesting as Wind-Cold or Wind-Heat. In clinical practice, this is the most important aspect of the concept of Wind. Thus, the diagnosis of "Wind" invasion is made not on the basis of the history (no need to ask the patient whether he or she has been exposed to wind), but on the basis of the symptoms and signs. If a person has all the symptoms and signs of "Wind" (aversion to cold, shivering, fever, sneezing, runny nose,
headache and a Floating pulse), then the condition is one of exterior Wind, no matter what climate that person has been exposed to in the previous days or hours. Indeed, there are also chronic conditions which manifest with symptoms of "Wind" and are treated as such even though they have no relation to climatic factors. For example, allergic rhinitis (due to house-dust mites or pollen) manifests with symptoms and signs of "Wind" and is treated as such.

Common cold and influenza may manifest primarily with symptoms of Wind-Cold or Wind-Heat. These are the two major types of Wind and most other types may be treated by modifying basic formulae for Wind-Cold or Wind-Heat

Simultaneous cold feeling and fever

The simultaneous fever and shivers is the most characteristic symptom of the beginning stages of an invasion of Wind: they indicate that there is an invasion of an exterior pathogenic factor and that this factor is still at the Exterior level. As long as there are shivers the pathogenic factor is on the Exterior.

I shall now discuss in detail the pathology and clinical significance of the aversion to cold and fever in the beginning stage of invasion of exterior Wind.

Aversion to cold

In Exterior patterns, the aversion to cold and cold feeling is due to the fact that the external Wind obstructs the space between skin and muscles where the Defensive Qi circulates; as Defensive-Qi warms the muscles, its obstruction by Wind causes the patient to feel cold and shiver (even if the pathogenic factor is Wind-Heat). Thus, Defensive-Qi is not necessarily weak but only obstructed in the space between skin and muscles.

Thus, in Exterior patterns, both Wind-Cold and Wind-Heat cause a cold feeling and shivering: it is a common misconception that this is not the case with Wind-Heat. Since the cold feeling is caused by the obstruction of Defensive Qi by Wind (whether it is Wind-Cold or Wind-Heat) in the space between skin and muscles, the cold feeling and shivering is present also in invasions of Wind-Heat, albeit to a lesser degree than in Wind-Cold.

Thus, generally speaking, there are three aspects to the cold feeling in invasions of exterior Wind: the patients feels cold, he or she has waves of shivers, and he or she is reluctant to go out and wants to stay indoors. Except in mild cases, the cold feeling is not relieved by covering oneself.

In conclusion, a feeling of cold in exterior invasions is due to the obstruction of Defensive-Qi in the space between skin and muscles and it indicates that the pathogenic factor is on the Exterior: as soon as the feeling of cold goes, the pathogenic factor is in the Interior.

Fever

As for fever it is important to understand that the Chinese term fa shao or fa re do not necessarily indicate fever. Fever is a sign in modern Western medicine, not in old Chinese medicine. In old China, there were obviously no thermometers and the symptom fa shao or fa re described in the old texts do not necessarily mean that the patient has an actual fever. It literally means emitting burning heat and it indicates that the patient's body feels hot, almost burning to the touch: the areas touched were usually the forehead and especially the dorsum of the hands (as opposed to the palms which tend to reflect more Empty Heat). In fact, it is a characteristic of fa re (so-called fever) in the exterior stage of invasions of Wind that the dorsum of the hands feel hot compared to the palms and the upper back feels hot compared to
the chest. This objective hot feeling of the patient's body may or may not be accompanied by an actual fever. When the symptoms of shivers and feeling cold occurs simultaneously with the objective sign of the patient's body feeling hot to the touch (or having an actual fever), it indicates an acute invasion of external Wind and it denotes that the pathogenic factor is still on the Exterior. In particular, it is the symptoms of shivering and feeling cold that indicate that the pathogenic factor is on the Exterior: the moment the patient does not feel cold any longer but feels hot and, if in bed, he or she throws off the blankets, it means that the pathogenic factor is in the Interior and it has turned into Heat.

The fever, or hot feeling of the body in external invasions of Wind is due to the struggle between the body's Qi (Upright Qi) and the external pathogenic factor. Thus, the strength of the fever (or hot feeling of the body) reflects the intensity of this struggle: this depends on the relative strength of the external pathogenic factor and the strength of the Upright Qi. The stronger the external pathogenic factor, the higher the fever (or hot feeling of the body); likewise, the stronger the Upright Qi, the higher the fever (or hot feeling of the body). Thus the fever will be highest when both the external pathogenic factor and the Upright Qi are strong. Thus, there are three possible situations:

- Strong pathogenic factor and strong Upright Qi: high fever (or hot feeling of the body)
- Strong pathogenic factor with weak Upright Qi or vice versa: medium fever (or hot feeling of the body)
- Weak pathogenic factor and weak Upright Qi: low fever (or hot feeling of the body) or no fever

However, the relative strength of the pathogenic factor and the Upright Qi is only one factor which determines the intensity of the fever (or hot feeling of the body). Another factor is simply the constitution of a person: a person with a Yang constitution (i.e. with predominance of Yang) will be more prone to invasions of Wind-Heat rather than Wind-Cold and will be more prone to have a higher fever (or hot feeling of the body). Indeed, it could be said that the constitution of a person is the main factor which determines whether a person who falls prey to an invasion of Wind develops Wind-Cold or Wind-Heat. Were it not so, in cold, Northern countries nobody should fall prey to invasions of Wind-Heat which is not the case. This is also the reason why, in children, invasions of Wind-Heat are far more prevalent than Wind-Cold: this is because children are naturally Yang in nature compared to adults. There are, however, also new, artificial factors which may predispose a person to invasions of Wind-Heat when succumbing to Wind and these are very dry, centrally-heated places, hot working conditions (e.g. cooks, metal workers), etc.

Thus, what determines whether the invading external Wind manifests with Wind-Heat or Wind-Cold is primarily the constitution of the person and, although it is true to say that a high or low fever may be present in both Wind-Heat and Wind-Cold, it is a fact that in practice Wind-Heat is characterized by generally a higher fever (or hot feeling of the body) than Wind-Cold.

The differentiation between Wind-Heat and Wind-Cold is not made only on the basis of the intensity of shivers and fever (or hot feeling of the body), although it is true to say that a high fever is more likely to occur with invasions of Wind-Heat. Other factors, such as tongue and other symptoms help us to differentiate Wind-Cold from Wind-Heat. This is illustrated in Table 1 (below).

**An influenza epidemic definitely manifests with symptoms of Wind-Heat in all cases**
The most important thing to establish when we see a patient suffering from an acute respiratory infection is whether the stage of the condition is external or internal, i.e. whether the pathogenic factor is still on the Exterior or is in the Interior. In terms of levels, this means distinguishing whether the patient is still at the Wei level or at the Qi level. The differentiation between the Wei and the Qi level is relatively easy: if the patient suffers from aversion to cold, he or she is still at the Wei level; if he or she does not suffer from aversion to cold but, on the contrary, from aversion to heat, the patient is at the Qi level.

Thus, common cold and influenza will always start with manifestations similar to the Greater Yang stage of the 6 Stages or the Defensive-Qi level of the 4 Levels depending on whether the pathogenic factor is Wind-Cold or Wind-Heat. If the pathogenic factor is not expelled at the beginning stages, it will change into Heat and penetrate into the Interior.

Once the pathogenic factor penetrates into the Interior, the body's Qi carries on its fight against it in the Interior: this causes a high fever and a feeling of heat, in marked contrast to the aversion to cold and the shivering which occur when the body's Qi fights the pathogenic factor on the Exterior. At the exterior level, the internal organs are not affected and it is only the Lung's Defensive-Qi portion which is involved. When the pathogenic factor becomes interior, the organs are affected and especially the Lungs and/or Stomach (see below).

This stage of development in the pathology of these diseases is crucial as, if the pathogenic factor is not cleared, it may either penetrate more deeply and cause serious problems (at the Nutritive-Qi or Blood Level) or give rise to residual Heat which is often the cause of chronic post-viral fatigue syndromes.

In the Interior, the main patterns appearing will be either the Bright Yang pattern of the 6 Stages or, more commonly, one of the Qi-Level patterns within the 4 Levels. In general, at the Qi Level, either the Stomach or Lung or both are affected.

<table>
<thead>
<tr>
<th>Pathology</th>
<th>Wind-Cold</th>
<th>Wind-Heat</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wind-Cold obstructing Defensive Qi</td>
<td>Wind-Heat injuring Defensive Qi and impairing the descending of Lung-Qi</td>
<td></td>
</tr>
<tr>
<td>Penetration of Pathogenic Factor</td>
<td>Via skin</td>
<td>Via nose and mouth</td>
</tr>
<tr>
<td>Fever</td>
<td>Light</td>
<td>High</td>
</tr>
<tr>
<td>Aversion to Cold</td>
<td>Pronounced</td>
<td>Slight</td>
</tr>
<tr>
<td>Body Aches</td>
<td>Severe</td>
<td>Slight</td>
</tr>
<tr>
<td>Thirst</td>
<td>None</td>
<td>Slight</td>
</tr>
<tr>
<td>Urine</td>
<td>Pale</td>
<td>Slightly Dark</td>
</tr>
<tr>
<td>Headache</td>
<td>Occipital</td>
<td>Whole head</td>
</tr>
<tr>
<td>Sweating</td>
<td>No sweating or slight sweating on head</td>
<td>Slight sweating</td>
</tr>
<tr>
<td>Tongue</td>
<td>No change</td>
<td>Slightly red on the sides and/or front</td>
</tr>
<tr>
<td>Pulse</td>
<td>Floating-Tight</td>
<td>Floating-Rapid</td>
</tr>
<tr>
<td>Treatment</td>
<td>Pungent-warm herbs to cause sweating</td>
<td>Pungent-cool herbs to release the Exterior</td>
</tr>
</tbody>
</table>

Table 1 - Comparison of Wind-Cold and Wind-Heat

**TREATMENT - THREE TREASURES REMEDIES**
EXPEL WIND-COLD

This is of course suitable to expel Wind-Cold manifesting with symptoms of chilliness (aversion to cold), possibly fever, runny nose, cough, sneezing, headache, stiff neck and Floating pulse. This is what is commonly called a head cold. At least 9 tablets a day (3 tablets 3 times a day after meals) should be taken and possibly even more depending on the severity of the symptoms. Best results are obtained if the tablets are taken with an infusion made with fresh ginger root.

Acupuncture

LU-7 Lieque, L.I.-4 Hegu, L.I.-20 Yingxiang, BL-12 Fengmen with cupping, BL-13 Feishu, S.I.-3 Houxi (especially in case of headache).

EXPEL WIND-HEAT

Invasions of Wind-Heat manifest with aversion to cold, fever, thirst, sore throat, body aches, headache, tonsillitis, ear infection, cough, Floating-Rapid pulse and tongue red on the sides. The dosage is the same as for Expel Wind-Cold, i.e. at least 9 tablets a day. This is the remedy of choice for influenza: use 12 tablets a day. Expel Wind-Heat should be a standby remedy in any household with children.

Acupuncture


CLEAR METAL

Clear Metal was formulated to treat the Qi Level of influenza. The simplest and clearest sign that the invasion of Wind has moved from the Exterior (Wei Level) to the Interior (Qi Level) is that the patient feels not longer cold and does not shiver but feels instead hot and thirsty. The most common patterns at this level are either Lung-Heat of Lung-Phlegm-Heat.

Clear Metal was formulated to treat primarily Lung-Heat at the Qi Level when the patient displays the following symptoms: cough, slight breathlessness, fever, feeling of heat, thirst, tightness of the chest and upper back. Clear Metal has also a strong anti-viral action. The dosage for an adult is at least 9 tablets per day. This dose can be exceeded in severe cases.

CLEAR THE SOUL

Clear the Soul can be used for acute chest infections following an invasion of Wind, i.e. when the pathogenic factor is Phlegm-Heat in the Lungs at the Qi level. The main manifestations calling for this remedy in this context are: a cough following a cold or flu, expectoration of profuse sticky-yellow sputum, slight breathlessness, a feeling of oppression of the chest, possibly fever, thirst, disturbed sleep, a Full-Slippery pulse, a red tongue with sticky-yellow coating. The dosage is at least 9 tablets per day.

Clear the Soul can be used also for residual pathogenic factor with Phlegm-Heat when the patient suffers from a chronic cough with catarrh and some breathlessness.

LIMPID SEA
TLimpid Sea resolves Damp-Phlegm and can be used for a chest infection manifesting with Damp-Phlegm in the Lungs following a cold or flu. The main manifestations are: a cough with expectoration of profuse, sticky-white sputum, slight breathlessness, a feeling of oppression of the chest, a sticky tongue coating, a Full-Slippery pulse. The dosage is at least 9 tablets per day.

**Acupuncture**

This is of course suitable to expel Wind-Cold manifesting with symptoms of chilliness (aversion to cold), possibly fever, runny nose, cough, sneezing, headache, stiff neck and Floating pulse. This is what is commonly called a head cold. At least 9 tablets a day (3 tablets 3 times a day after meals) should be taken and possibly even more depending on the severity of the symptoms. Best results are obtained if the tablets are taken with an infusion made with fresh ginger root.

**EXPEL WIND-COLD**