

## Chinese Herbal Medicine for Cancer Pain: Regional Contribution to a Global Problem

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### Abstract

This article is aimed to raise the question of usefulness of Chinese herbal medicine for treating people with cancer pain. Only three studies were found in PubMed, and Chinese herbal medicine had the potential to be an effective therapeutic adjunct to medical analgesic management, by reducing their adverse effects, and various methods of use provide advantageous options for management of cancer survivors in not only relieving pain but also in improving quality of life.

**Keywords:** Chinese herbal medicine; Herbal nutrition; Clinical nutrition; Cancer nutrition.

This letter to editor congratulates the International Journal of Nutrition and Food Sciences on its maiden scientific journey of publishing evidence. This article is aimed to raise the question of usefulness of Chinese herbal medicine for treating people with cancer pain.

Xu *et al* reviewed literature on Chinese herbal medicine for cancer pain by searching CBM, CMCC, Wanfang, and Weipu in Chinese and PubMed and EMBASE in English. The authors found 115 articles that were on various methods of administration (external application, oral administration, intravenous infusion, and other applications such as inhalation and clysmata); and 41 were randomized controlled clinical trials. The summative findings from those trials suggested

that “(1) Chinese medicine may be effective for cancer pain, and its effects are similar to those of Western analgesics; (2) Chinese medicine may reduce the side effects of conventional analgesics, thus enhancing cancer patients’ quality of life; and (3) the various methods of application – topical, oral, and intravenous – are suitable to treat a range of pain conditions found in cancer patients.” [1]

Wu *et al* investigated the effect of a 1-week Taiwanese traditional herbal diet (TTHD) on pain in 2,466 terminal cancer patients who were randomly divided into three groups: the TTHD group (n=1044; 42.3%) were given the TTHD consisting of analgesic herbs (paeony root: licorice root=1:1) and a Taiwanese tonic vegetable soup (Liliibulbus, Nelumbo seed, and Jujube fruit). The remaining patients were divided into a reference group, given the regular hospital diet, (n=909, 36.9%) and a control group, given the Taiwanese tonic vegetable soup without analgesic herbs, (n=513, 20.8%). The TTHD group reported enhanced pain relief compared to the reference and control groups.[2]

Yu *et al* developed a topical herbal formula Xiaotan Tongluo analgesic gel (XTTL gel) and explored the mechanisms of XTTL gel in a rat model of bone cancer pain (Walker-256 rat carcinoma cells directly into the right tibial medullary cavity of Wistar rats). The rats were

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randomly assigned to three groups- (1) sham bone cancer control (sham group): vehicle (PBS) inoculation without carcinoma cells plus topical administration of blank gel; (2) Sham treatment control (vehicle group): Walker-256 cell inoculation plus topical administration of blank gel; (3) XTTL gel treatment (treatment group): Walker-256 cell inoculation plus topical administration of XTTL gel. Topical use of XTTL gel may have an analgesic effect on bone cancer pain, an effect mediated by lowering of type I collagen carboxy-terminal telopeptide (ICTP) levels and inhibiting bone resorption by increasing bone-specific alkaline phosphatase (BAP) levels.[3]

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