

## **Hemicrania**

### **Case history**

A woman aged 40 came to the clinic, complaining of headache for 20 years. Bouts of right temporal pain began 20 years ago, often become more severe by nervous tension or over fatigue, and aggravated during menses. She experienced boring pain in the right temporal region accompanied by cramping pain of the right eye. The bouts usually subsided after 3-5 days, sometimes with slight pain remaining. Blood pressure was 16/11Kpa; temperature and heart rhythm were found normal upon entering the hospital. Neurological and fundoscopic examinations revealed no abnormality. Her case was diagnosed by the internist as one of vascular headache.

### **Findings obtained with the traditional Chinese diagnostic procedures including:**

Right hemicrania occurred due to tension, fatigue and menses; flushed face; restlessness; irritability; poor appetite with bitter feeling in mouth; constipation (one b.m. in 2-3 days); reddened tongue with thin yellow coating; fine taut pulse, weak at the left cubit.

### **Diagnosis and syndrome differentiation:**

This is a case of headache due to internal wind. The wind is from liver due to deficiency of liver yin and hyperactivity of liver yang.

Also, it must be pointed out that the headache is not cause by external wind. That is because when we talk about the attack of external wind , it is usually characterized by paroxysmal pains and absence of any symptoms indicating involvement of internal viscera, such as restlessness, insomnia, bitter feeling in mouth and constipation. Headache due to the attack of external wind is a symptom which is not precipitated by fatigue or menses.

So in this case, the bouts of hemicrania accompanied by right-eye pain, irritability, and taut pulse were actually caused by internal wind from liver due to liver yang transforming into wind; restlessness and insomnia were due to liver qi stagnation which means the failure of the liver to disperse. flushed face, bitter taste in mouth, constipation and yellow

tongue coat were caused by liver-fire arising from transformation of liver yang. Further, inhibition of spleen by an overactive liver caused poor appetite. Fine pulse weak at the left cubit indicated deficiency of kidney yin, as this results in failure to nourish liver yin, leading to the hyperactivity of the liver yang.

**Principle of treatment:**

To nourish kidney yin and liver yin in order to reduce fire, and to subdue hyperactivity of liver yang and the resulting internal wind.