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Case report

Qi therapy as a complementary therapy in chronic myeloid leukemia

Myeong Soo Lee

Center for Integrative Medicine, Institute of Medical Science, Wonkwang University, Iksan 570-749, Republic of Korea

SUMMARY

We describe the successful treatment of a case of chronic myeloid leukemia with Qi therapy. The patient's disease was managed with conventional medical treatment and Qi therapy as a complementary therapy. Before Qi therapy, 95% of the patient's bone marrow showed evidence of disease. A second bone marrow sample five months after Qi therapy revealed that 38% of the bone marrow was normal; one year after Qi therapy the bone marrow was no longer producing any cancer cells. Although these results were obtained for a single case only and may not constitute conclusive evidence, the data suggest that Qi therapy given as a complementary therapy during conventional medical treatment may have beneficial effects on chronic myeloid leukemia.

Key words: Qigong; Chronic myeloid leukemia; Case study

INTRODUCTION

Chronic myeloid leukemia (CML) is a rare type of cancer affecting 1-2% of adults. Although CML can occur at any age, it most frequently affects people middle-aged and older. It is a cancer of the granulocytes, one of the main types of leukocytes or white blood cells.

There are two general types of treatment for CML. The first aims to control the leukocyte proliferation with hydroxyurea, a mild chemotherapeutic agent that has no effect on the course of the disease. The second treatment involves interferon, an enhancer of the immune system, which is administered daily by self-injection and which may improve long-term survival in as many as

30% of patients. However, interferon has moderate-to-severe side effects such as depression, pain and fever.

Our previous studies and those of other practitioners of Chinese medicine have shown that Qi therapy (QT, external Qigong) beneficially affects the health and psychoneuroimmunological factors in healthy subjects and in some patients (Chen and Yeung, 2002; Lee, 2001a; 2003a). In particular, Qi therapy increases some immune functions and reduces pain (Lee et al., 2001b; 2003b). In several studies reviwed by Chen and Yeung (2002), a group treated with QT in combination with conventional methods improved more or had a better survival rate than a group treated with conventional methods alone. These studies suggest that QT might have potential as a complementary therapy in addition to the conventional treatment for CML. The aim of this study was to examine the effectiveness of QT and to determine whether it is a safe complementary method to offer to patients with CML during treatment with conventional

^{*}Correspondence: Myeong Soo Lee, PhD, Center for Integrative Medicine, Institute of Medical Science, Wonkwang University (School of Medicine), Iksan 570-749, Republic of Korea. Tel: +82-63-850-1525; Fax: +82-63-850-1528; E-mail: integmed@chol.com; qimed@wonkwang.ac.kr

therapies.

CASE REPORT

A 51-year-old female was diagnosed with CML at August, 2001. At that time of diagnosis, she was told that 95% of her bone marrow showed evidence of disease. A bone marrow transplant was not an option because both her brother and her sister had died of blood-related cancers some years earlier and she had no other siblings.

She attended the Sydney Ki-Health International Centre for QT after one month of conventional treatment. She received QT to facilitate reduction of side effects from Chemotherapy and with the aim of preventing spread of disease. She was treated with QT (average 2 times a week for about 20 min per visit) by a Qi masters (who had undergone Qi training at least over 5 years and had qualification to perform QT) combined with self-healing Qi training. The Qi master attempted to emit Qi with a positive intention to restore harmony and balance to her energy systems. She received QT while lying down. The hand of the Qi master was moved about 3-10 cm from the body in a pattern from head to toe for 20 min, with the master becoming aware of changes in sensory cues. She received 114 QT treatments in totalaverage twice a week (average treatment time of 20 min per each), combined with self-healing Qi training.

Her doctors had increased the chemotherapy medication dosage, which had made her ill with side effects such as anmia, fatigue, pain, fever and nausea. However, these symptoms had decreased by the duration of QT. After five months QT, a second bone marrow test revealed that 38% of her marrow was normal. The dose of medication was reduced by half, and her subjective sense of wellbeing was improved. Her CML symptoms were greatly reduced after 6 months of QT combined with self-healing Qi training. A third

bone marrow test revealed that 50% of her marrow was normal (9 months after QT) and a subsequent test showed that 83% of her bone marrow was normal (11 months after QT). Her last bone marrow test, 12 months after QT, revealed that her bone marrow no longer produced any cancer cells. A test provided molecular evidence that 0.04% of her genes still carried markers for CML. Her symptoms of CML and other complications were almost cured after 12 months of QT combined with self-healing Qi training.

DISCUSSION

This case suggests that Qi therapy may have beneficial effects on CML, reducing severe side effects of chemotherapy. According to our recent report, a single Qi therapy session can improve psychological symptoms, pain and fatigue in cancer patients (Lee and Jang, 2005). Our previous reports show that Qi therapy modulates psychological, neurohormonal and immunological functions in vivo and in vitro (Lee, 2001a and c 2003c). Other practitioners of Chinese medicine have reported that external Qi therapy improves the symptoms of many types of cancer (Chen and Yeung, 2002). Chen and Yeung (2002) reviewed the effects of external Qi therapy and reported that subjects treated with Qi therapy in combination with conventional methods improved moreor had a better survival rate than subjects treated with conventional methods alone.

Although these results cannot be extrapolated to patients with CML, this case study provides a basis for exploring further the potential of Qi therapy as a complementary therapy in the treatment of CML. Despite these promising findings, we cannot completely discount the possible influence of her excellent response to chemotherapy. The more objective clinical measures are required to confirm the efficacy of Qi therapy in the studies, we intend to use well-controlled clinical trials to

assess the efficacy of Qi therapy in detail and the underlying mechanisms of its actions.

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