

## How Do You Treat *Hyperhidrosis* in Your Practice

**H**YPERHIDROSIS, OR EXCESS SWEATING, can be a vexing problem. It may affect the feet, palms, underarms, or the whole body. In addition, the usual treatments, such as aluminium hydroxide applications and/or botulinum toxin, can prove to be less than ideal.<sup>1</sup> Assuming secondary conditions—such as hyperthyroidism, diabetes, neurologic disorders, and/or medications—have been ruled out, then the condition is considered to be “primary” or “essential.” Such sweating is often related to sympathetic overdrive rooted in emotional stress. In addition, given that excess sweating in itself can be stressful, the sympathetic overdrive may be related to both cause and effect. Either way, energetic issues are a significant factor, so acupuncture may be a useful option for treating this condition

In Traditional Chinese Medicine (TCM), the full classification of hyperhidrosis can be quite complex.<sup>2</sup> However, it can be simplified down to a mix of Excess and Deficiency, both rooted in Liver Qi disharmony, which has invaded the Spleen. The Excess is generally Damp Heat; while the Deficiency may be of the Spleen, Lung, and/or Yin. And although Damp Heat might appear to be an Excess condition, when one looks at the underlying root, it is often a Spleen Deficiency.

Therefore, a simple acupuncture approach might be to use general points to reduce anxiety, together with a few specific points directed at the main energetic configuration. For anxiety, the Four Gates are always a good option (LI 4 & LR 3). If a more-powerful treatment is indicated, the Excess in the *Jue Yin* can be reduced by tonifying the *Yang Ming* and *Shao Yin* as described by Helms.<sup>3</sup> For the *Yang Ming*, apply low frequency electrical stimulation (2–8 Hz) between LI 11 (black lead) and ST 25 (red lead), decussating the leads; for the *Shao Yin*, apply the same between KI 3 (black) and KI 10 (red).

Add specific points for the predominant pattern: For this, an appraisal of the pulse can be quite helpful. For Damp Heat, add LR 2, GB 34, and SP 6; for Deficient Spleen and Stomach add SP 6 or 9 and ST 36 (with moxa or electrical stimulation); and for Kidney Yin Deficiency add KI 6 or 7 (Table 1).

Herbs too, can be a useful adjunct. For general anxiety *Xiao Yao San* is always a good staple formula (*Relaxed Wanderer* from Kan Herbs). For deficient Spleen/Lung Qi and Yin, try *Astra 8* from Health Concerns Herbs; for Damp Heat, try a short 2–4 week course of *Long Dan Xie Gan Wan* (*Quell Fire* from Kan Herbs) followed by *Astra 8*; and for

TABLE 1. POINTS & HERBS FOR ADDRESSING SWEATING

<i>General anxiety</i>	<i>LR 3 &amp; LI 4</i>	<i>LI 11 (black)→ST 25 (red) Decussate leads, 2–8 Hz</i>	<i>KI 3 (black)→KI 10 (red), 2–8 Hz</i>	
<i>Pattern</i>	<i>Symptoms</i>	<i>Pulse</i>	<i>Specific points</i>	<i>Herbs</i>
Damp Heat	Armpit & palm sweating	Full, slippery	LR 2, GB 34 & SP 6	<i>Long Dan Xie Gan Wan</i> (short course), <i>Astra 8</i>
↓Heart/Kidney Yin	Night sweating, hot palms/soles	Thin, rapid	KI 3,6, SP 6 & CV 4	<i>Liu Wei Di Huang Wan</i>
↓Spleen/Lung Qi	Spontaneous sweating, any time	Weak, slippery	SP 6,9, ST 36 & LU 9	<i>Astra 8</i>

*Medical Acupuncture* is pleased to continue this regular feature, *Clinical Pearls*, which we have found to be very useful for, and practical to, the readership, and very popular. All of us are confronted with clinical challenges, especially when dealing with therapeutic strategies. We hope this ongoing collection of *Clinical Pearls* will be easily accessible and ready to put into action for the benefit of our patients, and even ourselves. How often do we ask our colleagues: “How do you treat...?” This time, we posed the question: “How do you treat hyperhidrosis in your practice?” Herein lie your contributions. We trust that our readership will continue to participate in this section by either asking the questions or supplying the “Pearls.” If you have a “question” you would like to see answered, please send it to our managing editor, Yael Benporat, at: yaelbenporat@me.com We encourage and welcome your input and participation. Please address your answers to “Pearls” to our managing editor, Yael Benporat, at: yaelbenporat@me.com

night sweats try: Liu Wei Di Huang Wan (*Quiet Contemplative* from Kan Herbs).

A course of 12 acupuncture treatments once per week would seem reasonable for gauging success. Of course, the above protocol should be grounded in a holistic program that involves stress reduction with regular meditation; attention to precipitating factors in the diet, such as garlic and onions; and reducing stimulants such as caffeine, alcohol and other drugs.

## DISCLOSURE STATEMENT

No competing financial interests exist.

## REFERENCES

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**H**YPERHIDROSIS IS CHARACTERIZED by an increase in the production of sweat that is disproportionate to compensation for environmental conditions or thermoregulatory needs.<sup>1</sup> The condition affects 3% of the population,<sup>2</sup> with both genders being equally affected. A dysfunction of the sympathetic nervous system is postulated. When the sweating is associated with a fetid odor, caused by the presence of bacteria or yeast, it is called bromhidrosis.<sup>2</sup>

Hyperhidrosis can be categorized as generalized or focal (axillae, palms, soles and face).

Generalized hyperhidrosis is usually idiopathic, but one has to exclude endocrine disorders (hyperthyroidism, hypoglycemia, hyperpituitarism), pregnancy, menopause, various drugs, carcinoid syndrome, autonomic neuropathy, and central nervous system disorders). Nocturnal generalized sweating may be benign but can be caused by anxiety, malignancy, or infections such as tuberculosis.

Focal hyperhidrosis is usually idiopathic but may be caused by spinal injuries or neuropathies. Gustatory sweating occurs after seeing or eating food.

Treatment in conventional Western medicine involves use of topical aluminium chloride hexahydrate, tap water iontophoresis, botulinum toxin A, anticholinergic drugs such as oxybutyrin,<sup>3</sup> and, in extreme cases, surgery.

## Hyperhidrosis in Chinese Medicine

Excessive sweating following physical exercise, hot weather, after spicy food, or in emotional strain is considered to be normal. Any sweating apart from the above is considered to be pathologic. These conditions are shown below:

- *Daytime sweating* involves loss of fluids from the space between the skin and muscles, where defensive Qi circulates, and is caused by Yang Deficiencies.
- *Night-time sweating* involves a loss of fluid from deeper levels—Yin essences—and is caused by Yin Deficiencies.
- *Whole-body sweating* is caused by Lung Qi Deficiency.
- *Sweating only on the head* is caused by Heat or Damp Heat in the Stomach.
- *Sweating only on the arms and legs* is caused by Stomach and Spleen Deficiency.
- *Sweating only on hands* is caused by Lung Qi or Heart Qi Deficiency.
- *Sweating on palms, soles, and chest* is caused by Yin Deficiency. (See Table 1 for commonly involved Yin Deficiencies)
- *Sweating in the axillae* (Liver and Heart channels involvement) is caused by Liver Yin Deficiency, Damp Heat in the Liver and Gall Bladder, Heart Yin Deficiency, and Heart Fire.

## Treatment

Best results are obtained using auricular points based on tenderness or using an electronic-point detector combined with body acupuncture to correct disharmony patterns as shown in Table 1. Chinese herbs (Table 1) are often necessary to compliment acupuncture and maintain improvement. A better potentiation in the current author's experience is obtained by using homeopathic medicines—including acid nitric, belladonna, *Veratrum album*, *Sumbucus nigra*, and Sanguinaria, all 30c in combination daily; and 30 c of kali carb and 30 c of Lachesis once per week, 3 days apart from each other—and tapered off when improvement occurs. All medicines should be used only under medical supervision of a suitably qualified physician. A mind-over-matter approach—imagining that one is standing in a mountain valley with a cool breeze drying the sweat—practiced twice per day for 20 minutes has been promoted by some psychiatrists.