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Clinical Experience of Professor Bian Weihe in Treating Triple-Negative Breast Cancer

Jianhong He, Weihe Bian*

Breast Surgery Department, Wujin Hospital of Traditional Chinese Medicine, Changzhou 213161, Jiangsu, China

*Author to whom correspondence should be addressed.

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Abstract: Triple-negative breast cancer (TNBC) is marked by its high degree of malignancy and challenging treatment outcomes. While Western medicine predominantly relies on chemotherapy, issues such as drug resistance and toxic side effects remain prevalent. Drawing on the traditional Chinese medicine (TCM) principle of "treating the same disease with different methods," Bian devises individualized therapeutic strategies tailored to the unique syndrome patterns of TNBC patients, adhering to the core tenets of "treatment based on syndrome differentiation" and "simultaneous regulation of the liver and spleen." Through an analysis of clinical cases involving TNBC patients, this paper summarizes Bian's clinical experience, which emphasizes foundational approaches such as strengthening the body's resistance and soothing the liver to regulate qi, combined with personalized therapies including clearing heat and draining dampness, pacifying the liver and subduing yang, and resolving phlegm to unblock collaterals. The study highlights a diagnostic model of "multiple prescriptions for one disease, tailored to individual conditions," providing valuable insights for the personalized TCM treatment of TNBC.

Keywords: Triple-negative breast cancer (TNBC); Treating the same disease with different methods; Holistic perspective; Syndrome differentiation and treatment; Simultaneous regulation of the liver and spleen

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1. Introduction

Breast cancer ranks first among malignant tumors in women, with its incidence rate rising year by year. Triple-negative breast cancer (TNBC) is a molecular subtype characterized by negative expression of the estrogen receptor (ER), progesterone receptor (PR), and human epidermal growth factor receptor 2 (HER-2)^[1]. As a subtype of breast cancer, TNBC presents significant clinical challenges due to its highly invasive nature, high metastatic potential, and early postoperative recurrence. Chemotherapy remains the primary treatment for TNBC; however, it is associated with a range of side effects. In traditional Chinese medicine (TCM), TNBC falls under the category of "Ru Yan" (breast rock), and its formation is attributed to deficiencies in vital energy, disharmony in the functions

of the liver, spleen, and kidneys, as well as the interplay of phlegm, toxins, and blood stasis, compounded by the invasion of pathogenic factors that obstruct the breast meridians [2,3]. Professor Bian Weihe from the Breast Surgery Department of the Affiliated Hospital of Nanjing University of Chinese Medicine, who has extensive clinical experience in TCM oncology, proposes a treatment approach centered on "treating the same disease with different methods." Through comprehensive analysis based on the four diagnostic methods (inspection, auscultation and olfaction, inquiry, and palpation), extensive research, and clinical experience, it has been demonstrated that TCM can enhance the patient's immunity, mitigate the toxic and side effects of radiotherapy and chemotherapy, and ultimately benefit patients more when used as an adjunct therapy for TNBC. Professor Bian, with years of clinical practice in TCM oncology, advocates for "treating the same disease with different methods" as the core principle. By employing the four diagnostic methods and tailoring prescriptions to different syndromes in patients, he balances strengthening the body's resistance and eliminating pathogenic factors, achieving remarkable therapeutic effects. This article systematically summarizes his diagnostic and treatment strategies, as well as his medication characteristics, by integrating his clinical cases. The author had the privilege of apprenticing under Professor Bian in outpatient clinics, gaining invaluable insights from his rich clinical experience. Now, the study presents Professor Bian's clinical experience in treating TNBC with the approach of "treating the same disease with different methods."

2. Etiology and pathogenesis

Fundamentally, it is due to a deficiency of vital Qi, while superficially, it is caused by pathogenic factors. As stated in the Inner Canon of the Yellow Emperor, "When the vital Qi is abundant within the body, pathogenic factors cannot invade." Patients with triple-negative breast cancer (TNBC) often experience a prolonged disease course, leading to the depletion of vital Qi, particularly with marked weakness of the spleen and stomach and stagnation of liver Qi. Bian believes that the onset of TNBC is rooted in "deficiency of vital Qi," allowing pathogenic factors such as phlegm, blood stasis, heat, and toxin to invade and establish a vicious cycle of "deficiency of vital Qi and lingering pathogenic factors." Research indicates that the constitutional patterns of TNBC patients are predominantly characterized by Qi stagnation, Yang deficiency, and Yin deficiency, with recurrence and metastasis closely related to an imbalance between the liver and spleen.

Disharmony between the liver and spleen, along with stagnation of Qi circulation, affects the foot-Jueyin liver meridian, which traverses the breasts. When liver Qi is stagnated, the mammary meridians become obstructed, leading to the accumulation of fire and blood stasis over time. The spleen and stomach are the sources of Qi and blood production. Spleen deficiency leads to the internal generation of phlegm and dampness, which, when combined with blood stasis, accumulates in the mammary meridians, ultimately resulting in cancerous toxicity. Techer Bian emphasizes that "breast cancer is attributed to the liver and spleen," and treatment should focus on soothing the liver and strengthening the spleen to regulate Qi circulation, as well as resolving stasis and dispersing nodules to eliminate cancerous toxicity.

3. Diagnostic and therapeutic philosophy

3.1. Syndrome differentiation under the guidance of "Same Disease, Different Treatments"

Bian adopts "same disease, different treatments" as the guiding principle, categorizing and treating Triple-Negative

Breast Cancer (TNBC) based on patients' constitutions, disease courses, and syndrome characteristics. Common types include:

- (1) Damp-heat internal accumulation type: Manifests with yellow and greasy tongue coating, fatigue, and heaviness of the body. Treatment involves clearing heat and resolving dampness, using herbs like Yinchen (Capillary Wormwood) and Chuipencao (*Sedum sarmentosum*) combined with spleen-invigorating and dampness-resolving herbs.
- (2) Liver yang hyperactivity type: Presents with dizziness, headaches, irritability, and insomnia. Treatment aims to calm the liver and subdue yang, using herbs like Gouteng (*Uncaria rhynchophylla*) and Tianma (*Gastrodia elata*) supplemented with heart-clearing and fire-purging herbs.
- (3) Phlegm and blood stasis intermingling type: Characterized by hard lumps and a combination of phlegm and stasis. Treatment focuses on resolving phlegm and unblocking meridians, using herbs like Jianghuang (Turmeric) and Luoshiteng (*Trachelospermum jasminoides*) combined with blood-breaking and stasis-removing herbs.
- (4) Shaoyang meridian disharmony type: Exhibits alternating chills and fever, chest and hypochondrium distension. Treatment aims to harmonize the Shaoyang meridian, using modified Xiaochaihu Decoction.

3.2. Combination of general therapeutic principles and individualized adjustments

Strengthening the body's resistance and consolidating the foundation are crucial. Formulas often include Dangshen (Codonopsis pilosula), Chaobaizhu (fried Atractylodes macrocephala), Fuling (Poria), and Gancao (Glycyrrhiza uralensis) to invigorate the spleen and replenish Oi, thereby strengthening the foundation of acquired constitution. Women are more prone to emotional influences during the process of visceral Qi and blood changes. As stated in the Orthodox Manual of External Diseases, "Melancholy injures the liver, and overthinking injures the spleen... leading to the accumulation of nodules... known as breast cancer." This highlights the close relationship between emotional internal injuries and the occurrence of breast diseases. Bian, in treating patients with triplenegative breast cancer, observed that they tend to be more anxious than other patients. Therefore, she emphasizes addressing patients' physical and mental well-being, regulating their anxiety, and often incorporating herbs like Chaihu (Bupleurum), Hehuanpi (Albizzia julibrissin bark), and Foshou (Citrus medica var. sarcodactylis) to soothe the liver and regulate Qi, thereby alleviating Qi stagnation and blood stasis caused by emotional constriction. These two aspects represent the general therapeutic principles. Considering individual differences among patients, Bian gathers disease information through the four diagnostic methods of "observation, auscultation and olfaction, inquiry, and pulse feeling and palpation," identifying subtle clues of the disease. Through patient communication, she comprehensively grasps patient information and prescribes medications with confidence. Personalized adjustments should be made in medication use: for those who are restless, Lingzhi (Ganoderma) and Fushen (Poria with Hostwood) should be prescribed to support the body's vital energy and calm the mind; for those with obvious blood stasis, Maozhacao (Ranunculus ternatus) and Ezhu (Curcuma zedoaria) should be added to break up blood stasis and disperse masses; for those experiencing dizziness, headaches, and irritability, Gouteng (*Uncaria* rhynchophylla) and Tianma (Gastrodia elata) should be added. Bian's detailed inquiries not only provide strong evidence from the perspective of medication use but also offer great psychological comfort to patients, which is more conducive to alleviating their tense and anxious emotions.

3.3. Integration of the holistic concept of traditional Chinese medicine throughout the treatment process

The holistic concept is one of the fundamental characteristics of Traditional Chinese Medicine (TCM), reflecting its unique worldview and elucidating the integrity of the human body itself as well as its unity with nature and society [4]. The "Su Wen · Bao Ming Quan Xing Lun" states, "Humans are born from the Qi of heaven and earth and are formed by the laws of the four seasons." The "Su Wen · Sheng Qi Tong Tian Lun" mentions, "At dawn, human vitality arises; at noon, Yang Qi is at its peak; in the evening, Yang Qi becomes weak, and the pores close [5]. These statements indicate that humans and nature form a unified entity. In the diagnosis, treatment, prevention, and even health preservation of diseases, TCM emphasizes considering the relationship between nature and the human body, avoiding isolated and one-sided views of symptoms, and tailoring treatments according to the time, place, and individual to identify accurate causes and formulate appropriate plans [6]. The human body is centered around the five internal organs, which are connected through meridians to the six fu-organs, nine orifices, five body components, limbs, and bones, forming an integrated whole. Qi and blood, as well as body fluids, are the sources that nourish the body, while meridians serve as channels for the circulation of Qi, blood, and body fluids. The internal organs, meridians, qi, blood, and body fluids form a complex and rigorous information network structure, each performing its own function and jointly completing the overall physiological activities of the body [7]. The statement "When the liver is diseased, knowing that it may affect the spleen, one should first strengthen the spleen" reflects the interconnected and mutually restrictive relationships among the internal organs of the human body.

Bian believes that the holistic concept is the foundation of "treating the same disease differently," which is a dynamic expression of the holistic concept and a specific application of it in syndrome differentiation. Together, they construct the clinical thinking of TCM, achieving a dialectical unity of "disease-syndrome-treatment." By analyzing the etiology and pathogenesis through the holistic concept, precise interventions can be achieved through "different treatments." The practical principle of "tailoring treatments according to the three factors (time, place, and individual)" is a model example of combining the holistic concept with treating the same disease differently. In clinical practice, cultivating the ability to combine global thinking (holistic concept) with microscopic syndrome differentiation (individual differences) truly achieves "adhering closely to the pathogenesis and assigning responsibilities accordingly." In the treatment of breast cancer, attention is paid to the connection between the external physique and internal spirit, which rely on each other to form an organic whole.

3.4. Emphasizing the preservation and protection of vital Qi

Bian believes that patients who have undergone surgery for breast cancer suffer from impaired Qi and blood, disrupted Yin-Yang balance, and compromised organ function due to the lack of nourishment from Qi and blood. This leads to dysfunction in digestion and further obstructs the circulation of Qi and blood, preventing them from mutually supporting each other and resulting in a deficiency of vital Qi. TNBC patients who continue to receive chemotherapy or radiotherapy may experience a series of side effects, such as nausea, vomiting, loss of appetite, gastrointestinal dysfunction, myelosuppression, and other digestive tract reactions. Patients requiring further intensive treatment, such as oral capecitabine, may suffer from prolonged bodily damage, leading to a continuous decline in vital Qi. Bian focuses on preserving and protecting the patient's vital Qi and restoring the balance of Yin and Yang through medication. Only when the body is strong can it resist diseases and achieve the goal of strengthening the body to expel pathogenic factors.

3.4. Equal emphasis on traditional Chinese and Western medicine

Bian believes that although we are practitioners of traditional Chinese medicine (TCM), we should also firmly grasp the advanced concepts of Western medical treatment, keep pace with the times, and wield both the spear of TCM and the shield of Western medicine to remain invincible. While Western medical treatment for TNBC can bring certain side effects and varying degrees of damage to the body, such as digestive symptoms, liver and kidney function impairment, myelosuppression, cardiac damage, fatigue, insomnia, etc., the proper application of TCM can gradually improve the patient's symptoms, enhance their quality of life in the short term, and potentially prolong their survival time in the long term.

4. Typical cases

- (1) Ms. Zhu, female, aged 54, has been suffering from triple-negative breast cancer for over three years. Her syndrome differentiation indicates a pattern of internal damp-heat accumulation. Prescription: Fried Codonopsis pilosula 10 g, fried Atractylodes macrocephala 10 g, poria 20 g, licorice 5 g, Platycodon grandiflorum 6 g, Lysimachia christinae 15 g, lotus leaf 10 g, fried white peony root 10 g, fried white hyacinth bean 10 g, fried Coicis semen 20 g, tangerine peel 6 g, purple Salvia miltiorrhiza 10 g, Ligusticum chuanxiong 10 g, fried Atractylodes lancea 10 g, Artemisia capillaris 20 g, Schisandra chinensis 10 g, raw hawthorn 10 g, Alisma orientale 10 g, Sedum sarmentosum 15 g
- (2) Patient Yin, female, aged 56, with a history of triple-negative breast cancer for over 5 years, was diagnosed with a syndrome of hyperactivity of liver yang. Prescription: *Uncaria rhynchophylla* 10 g (added later), *Coptis chinensis* 3 g, *Nelumbinis plumula* 5 g, *Albizia cortex* 10 g, poria 10 g, *Ramulus mori* 10 g, *Prunella vulgaris* 10 g, *Poria cocos* 10 g, *Rhizoma atractylodis macrocephalae* 10 g (fried), *Ganoderma lucidum* 10 g, *Lophatheri herba* 10 g, *Desmodii styracifolii herba* 15 g, *Phragmitis rhizoma* 30 g, *Gastrodia elata* 20 g, *Pueraria lobata* 20 g, *Ligusticum chuanxiong* 10 g, bamboo shavings 10 g (ginger-processed), and *Citrus reticulata* 10 g.
- (3) Patient Shen, female, aged 57, with a history of triple-negative breast cancer for over 1 year, was diagnosed with a syndrome of intermingled phlegm and blood stasis. Prescription: *Rhizoma atractylodis macrocephalae* 10 g (fried), *Poria cocos* 10 g, Tangerine peel 6 g, *Curcuma longa* 10 g, *Codonopsis pilosula* 10 g (fried), *Platycodon grandiflorum* 6 g, *Glycyrrhiza uralensis* 5 g, *Ranunculus ternatus* 15 g, *Lablab semen album* 15 g (fried), *Coicis semen* 20 g, *Salvia miltiorrhiza* 10 g, *Curcuma zedoaria* 10 g (vinegar-processed), *Paeonia veitchii* 10 g, *Moutan cortex* 10 g, *Atractylodes lancea* 10 g (fried), *Magnolia officinalis* 10 g (ginger-processed), *Eupatorium fortunei* 10 g, *Caulis trachelospermi* 10 g, and *Achyranthes bidentata* 10 g.
- (4) Patient Jia, female, aged 44, with a history of triple-negative breast cancer for over 2 years, was diagnosed with a syndrome of impaired Shaoyang channel function. Prescription: *Bupleurum chinense* 10 g, *Pinellia ternata* 6 g (ginger-processed), *Codonopsis pilosula* 20 g (fried), *Glycyrrhiza uralensis* 6 g, *Scutellaria baicalensis* 6 g, *Zingiber officinale* 2 g (dried), Jujube 15 g, *Cinnamomum cassia* 10 g, *Paeonia lactiflora* 10 g (fried), *Os draconis* 20 g (decocted), *Concha ostreae* 20 g (calcined, and decocted), *Poria cocos* 20 g, *Schisandra chinensis* 10 g (vinegar-processed), *Tritici levis fructus* 30 g, *Ligusticum chuanxiong* 10 g, *Cyathula officinalis* 10 g, *Albizia cortex* 20 g, Poria with hostwood 20 g, and *Polygala tenuifolia* 10 g (honey-processed).

5. Discussion

In the aforementioned medical cases, Bian's experience fully embodies the principle of "changing the prescription according to the changing syndrome." Although all patients have TNBC, the treatment methods vary significantly due to differences in syndrome types, aligning with the essence of syndrome differentiation in "Treatise on Febrile Diseases," which states, "Observe the pulse and symptoms, identify the pathogenic factors, and treat according to the syndrome." It also reflects the holistic view of harmonizing the liver and spleen. The prescriptions share a common basis of soothing the liver and strengthening the spleen, regulating Qi flow, and nourishing the source of Qi and blood production, providing support for long-term anti-tumor treatment. Drugs such as fried Codonopsis pilosula, fried Rhizoma atractylodis macrocephalae, Poria cocos, and Glycyrrhiza uralensis are commonly used, emphasizing the importance of strengthening the spleen and replenishing Qi to enhance the body's resistance. Patients with triplenegative breast cancer often have a long disease course and depleted vital energy. These drugs can replenish the middle jiao and nourish Qi and blood, providing a foundation for eliminating pathogenic factors. Drugs such as Bupleurum chinense, Albizia cortex, and Citrus reticulata 'Fingered,' which soothe the liver and relieve depression, appear multiple times, reflecting the emphasis on addressing liver Qi stagnation. Breast cancer is closely related to emotional factors. Soothing the liver can alleviate anxiety and depression in patients and improve the pathological basis of Qi stagnation and blood stasis. Drugs such as Ligusticum chuanxiong, Salvia miltiorrhiza, Curcuma zedoaria, Paeonia lactiflora, and Moutan cortex are incorporated into multiple prescriptions, aiming to activate blood circulation, remove blood stasis, and disperse masses.

Triple-negative breast cancer (TNBC) is highly malignant, and blood stasis obstruction is one of its core pathological mechanisms. These drugs can improve local microcirculation and inhibit tumor progression. Sedative drugs such as *Os draconis*, *Concha ostreae* (calcined), Poria with hostwood, and *Polygala tenuifolia* target emotional issues like insomnia and anxiety in patients, reflecting the concept of "simultaneously treating the body and mind." The "differentiation in treating the same disease" is embodied in individualized dialectical modifications. In the case of Patient Zhu, heat-clearing and dampness-eliminating drugs such as *Artemisia capillaris*, *Sedum sarmentosum*, *Lysimachia christinae*, and *Alismatis rhizoma* were the main components of the prescription, complemented by stir-fried *Coicis semen* and *Lablab semen albus* to strengthen the spleen and resolve dampness, reflecting the approach of "separating and eliminating damp-heat," suitable for patients with yellow and greasy tongue coating, heaviness, and fatigue.

In the case of Patient Yin, *Uncaria rhynchophylla*, *Gastrodia elata*, and *Pueraria lobata* were used to soothe the liver and extinguish wind, supplemented by *Coptis chinensis* and *Nelumbinis plumula* to clear heart fire, suitable for symptoms of liver-yang hyperactivity such as dizziness, headache, irritability, and insomnia. In the case of Patient Shen, drugs such as *Curcuma longa*, *Trachelospermum jasminoides*, and *Ranunculus ternatus* were added to resolve phlegm and unblock collaterals, combined with *Curcuma zedoaria* and *Paeonia lactiflora* to enhance the power of breaking blood stasis, targeting patients with phlegm-stasis coagulation and hard masses. In the case of Patient Jia, Minor Bupleurum Decoction (*Bupleurum chinense*, *Scutellaria baicalensis*, and *Pinellia ternata*) was used as the basis to harmonize the Shaoyang channel, supplemented by *Cinnamomi ramulus* and *Paeonia lactiflora* to harmonize the nutrient and defensive aspects, suitable for patients with mixed cold and heat symptoms and fullness in the chest and hypochondrium.

6. Conclusion

In Western medical treatment, chemotherapy remains the mainstay for TNBC. However, the side effects of chemotherapy deter patients, imposing significant psychological stress and leaving them in a state of anxiety, fear,

and pessimism for extended periods. Many patients often abandon chemotherapy due to intolerance to its toxic side effects, affecting treatment outcomes. Traditional Chinese medicine (TCM) offers increasing benefits to patients by assisting in alleviating toxic side effects and enhancing their immune function. Bian treats TNBC with the core principle of "differentiation in treating the same disease," achieving individualized treatment through syndrome differentiation and classification, balancing tonification and elimination, and considering the whole body and local conditions. With "simultaneous regulation of the liver and spleen" as the guiding principle, he dynamically diagnoses and treats TNBC through comprehensive analysis of the four diagnostic methods. His experience suggests that TCM treatment of TNBC should focus on the liver and spleen as pivotal points, with syndrome-based treatment reflecting the flexibility of "changing medications according to syndrome changes." It emphasizes strengthening the spleen and soothing the liver to fortify the foundation, supplemented by resolving blood stasis and dispersing masses to eliminate pathogenic factors, while also addressing both physical and emotional aspects. Based on the holistic view of TCM and combined with the characteristics of Western medical treatment stages (such as deficiency after chemotherapy), it aims to enhance efficacy and reduce toxicity in a targeted manner, optimize drug combinations based on modern pharmacological research, and attach importance to emotional regulation and disease staging. This provides a "holistic + individualized" paradigm for TCM treatment of TNBC, worthy of clinical promotion and in-depth research.

Disclosure statement

The authors declare no conflict of interest.

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