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Research Article

Scientific Traditional Chinese Medicine for Low-Cost and Effective Prevention, Detection, and Treatment of Infectious Diseases

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Abstract

This paper is a formal publication of the oral presentation by this author in the Nineth World Congress on Infectious Diseases, Orlando, October 23-25, entitled "Scientific traditional Chinese medicine for low-cost and effective prevention, detection, and treatment of infectious diseases." Traditional Chinese Medicine (TCM) is based on the conceptual theory of qi (or chi) stating that the vitality of human body relies on adequate qi continuously circulating and permeating throughout the entire body. Today, TCM is included in the national health care systems of major countries in East Asia, used by 60-75% of the populations. Elsewhere TCM operations are still in back alleys. TCM's dilemma is rooted in its inability to meet the standards of modern sciences and evidence-based modern medicine. In 2018, this author began to develop a scientific theory of Chee and its field equations based on modern sciences. ("Chee" was coined to differentiate from the commonly used "qi.") Theoretical results were presented and published during 2022-2023. Empirical validation and preliminary characterization of Chee succeeded on November 25, 2024. Scientific TCM and validations on the theory of Chee, with Chee as a biomarker are giving rise to new and fundamental visions for biology, physiology, and psychology, which should have broad impacts on diagnosis, treatment, and prevention of many diseases. This paper is focused on infectious diseases.

Keywords: Traditional chinese medicine, TCM, Biomarker, Chee, Theory of Chee, Tests of Chee, Scientific TCM, Field equations, Qi, Qi-therapy, Qi-gong, Neuron emission, Chi, Physiology, Diagnosis, Medicine, Modulation of biomarker, Spectral technology

Abbreviations: AC: Alternating Current; BC: Biochemical; EM: Electromagnetic; ME: Mechanical; STCM: Scientific TCM; TCM: Traditional Chinese Medicine; TH: Thermal

Introduction

The COVID-19 Pandemic started in November 2019 in China and officially ended in April 2025 in Malaysia, is estimated to have caused 19.1 to 36 million deaths worldwide-and is still lingering. Surprisingly, death rates in East Asian countries were by far lower-about one sixth (1/6) that of USA. Many medical scholars and clinicians began to credit this strange phenomenon to the 47-century old Traditional Chinese Medicine (TCM) for strengthening immunity against COVID-19.

Since 1990, healthcare systems in advanced nations have been degrading rapidly, with rising costs, rampant chronic diseases, and aging demographics. In response, governments and private sectors have been seeking solutions from untapped fields, such as the 47-century old TCM. Today, TCM is included in the national health care systems of major countries in East Asia, used by 60-75% of the populations. Elsewhere, TCM operations are still in back alleys. TCM's dilemma is rooted in its inability to meet the standards of science and evidence-based modern medicine.

TCM is based on the concept that human vitality relies on "qi" (or chi). (氣) being circulated and permeated adequately throughout human body via networks called Jing Luo (經絡). ("qi" and "Jing Luo" are phonetic translations for Chinese words 氣 and 經絡, respectively.) In 2018 this author began to develop a scientific theory of Chee for TCM based on modern sciences and seven postulates. ("Chee" was coined to differentiate from the commonly used "qi" and "chi.") The first postulate of the theory of Chee is that Chee, as the canonical biomarker of TCM, is a vector power intensity containing four components: Electromagnetic (EM), Mechanic (ME), Thermal (TH), and Biochemical (BC), denoted by χ^{EM}, χ^{ME}, χ^{TH}, and χ^{BC}, respectively. Theoretical results were presented [1-4] and published [5,6] during 2022-2023. Empirical validation and preliminary characterization of Chee were published recently [7-10].

We have been distilling and synthesizing TCM procedures, one by one, to metamorphose TCM to Scientific TCM (STCM). TCM research in against infectious diseases has been vigorously conducted mostly in China and South Korea. This paper is a formal publication of the oral presentation by this author in the Nineth World Congress on `Infectious Diseases, Orlando, October 23-25, 2025 [11], which contained some materials from a pending patent application filed on November 11, 2025 [12].

Results and Discussions

This author is not aware of any previous empiric data for the EM component of biomarker Chee, χ^{EM}, before his successful tests on November 25, 2024, as indicated earlier [7,8]. The technical difficulties are highly challenging due to the weakness and extremely-low frequency of emissions of Chee, whose sources are the neurons. A cursory review on the literature revealed that these difficulties had been recognized in a major research program in which a large number of experts and scholars in China tested qi with an oscilloscope and analysed the data [13]. They had tested 10 qigong masters and practitioners, among others, without success; thus reported the recording as a type of discharged electromagnetic fields with frequencies approximately 0.3-200 MHz, without naming it as qi per se.

Our method of attack began with a close look into the theory of Chee, and concluded that Chee ought to be tiny in intensity and extremely low in frequency since it is an emission from a cluster of neurons, which is within 0.1-200 Hz. This problem is very similar to several previous design projects encountered by this author, and resolved by using spectral technology, which can detect a very weak low-frequency peak which would surely have escaped our attention without spectral analysis.

Thus, we set up a 1992 oscilloscope to detect the (*modulated*) canonical biomarker Chee (*modulated with a carrier wave of 60 Hz*) emitted from humans in 1-200 Hz range. Within several days we captured a robust periodic signal, on 25 November 2024. In the next few weeks, we purchased several modern calibrated oscilloscopes and performed various tests to characterize the *modulated* biomarker Chee. The data showed that the *modulated* EM component of Chee, χ^{EM}, is a robust periodic function with a stable frequency of 60 Hz. At any point in time, both amplitude and frequency of χ^{EM} are essentially identical throughout the *skin surface* of the human under test, as shown in Figure1. Note that Figure 1 displays oscilloscope screen displaying modulated EM Chee in time domain, showing 20.0 mV at level "1" over 16.75ms) and "freq=59.7 Hz").

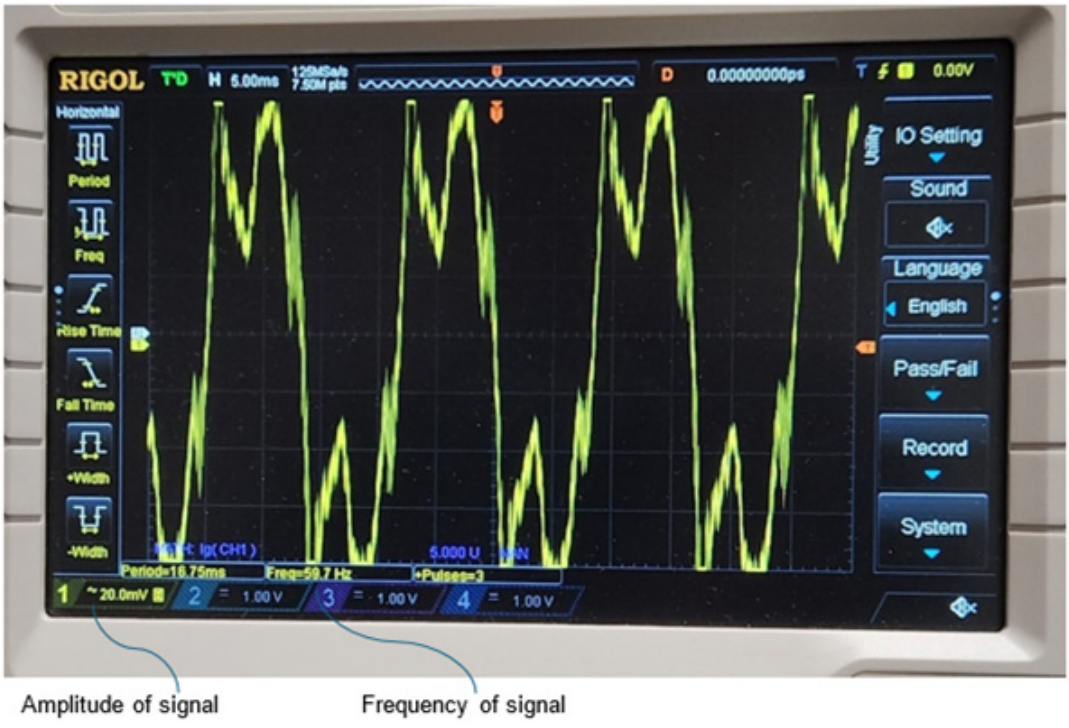

Figure 1: Oscilloscope screen displaying EM Chee in time domain showing 20.0 mV at level "1" over 16.75ms) and "freq=59.7 Hz."

We noted that the amplitude of χ^{EM} varies from person to person-and within a person-from time to time, driven by his/her mind, emotion, activity, etc., as shown in Fig.2. Note the difference in the vertical scale for amplitude in Figure 2: (a) Energized Chee (200 mV/div) and (b) Relaxed Chee (50 mV/div).

(a) Energized Chee (200 mV/div) (b) Relaxed Chee (50 mV/div)

Figure 2: Oscilloscope screen displaying EM Chee in time domain showing (a) Energized Chee (200 mV/div) and (b) Relaxed Chee (50 mV/div).

We reason that these findings reflect the outcome of the biological evolution process over many millions of years, which can be logically extended to other vertebrates; this point of view has been confirmed empirically by testing house pets. With Chee theory as the laws governing TCM, TCM readily metamorphoses to STCM. The process is tedious, must be applied to each TCM procedure, one by one. Some procedure would fail; some procedure might survive after modifications; and some might survive and go through independent clinical trials. (It was noted that clinical trials conducted in China from 2013 to 2021 totalled 965 items.) (Figure 1,2).

Accurate quantitative measurement and manipulation on vital power Chee can facilitate and enhance accurate diagnosis and therapy on humans and other vertebrates in many medical fields, exemplified briefly, for example, as follows:

Infectious Diseases and Allergies in Respiratory System and Skin

Over the past five decades, about 160,000 patients worldwide suffering from chronic rhinitis, asthma, lung, and skin diseases-regardless of the cause, whether infection, cancer, or otherwise-have recovered after treatment for a period using a proprietary pill made of TCM herbs invented by Dr. Seo Hyo-Seok of Pyunkang Korean Medicine Hospital [14]. This inventor has been following up its published reports in newspapers for over ten years, noting that its patients mostly have had a long history of failed treatments elsewhere by other professionals for their chronic symptoms.

Another notable case involves fungal skin and nail infection (Tinea corporis and Tinea unguium) diagnosed by symptoms, microscope, and lab test. While modern medicine treats them as chronic skin and nail diseases, STCM theory recognizes their possibility to expand along the networks of Jing Luo. Indeed, as each Jing Luo either begins or ends at the tip of toe or finger, it provides certain fungi routes for transmission inside the human body via subcutaneous infections.

This perspective from STCM theory appears to be consistent with the recently discovered interconnected fascial network below the skin. The new definition of fascia has been broadened to include all collagenous based soft tissues in the body, including certain tendons, ligaments, bursae, endomysium, perimysium, and epimysium cells that create and maintain the extracellular matrix [15,16]. Figure 3 displays modern fascia data. On diagnosis and treatments, we have many approaches at various stages of development. Figure 4 shows an embodiment of an electric serial impulse generator, which is an Electrotherapy (EA) machine, "Measuring and manipulating vital power Chee via modulation and spectroscopy for medical diagnoses and therapies." Pending U.S. Provisional Patent Application, App. No:63/915,354; Filed 11/11/2025 [12] (Figure 3,4).

Figure 3: Modern fascia data.

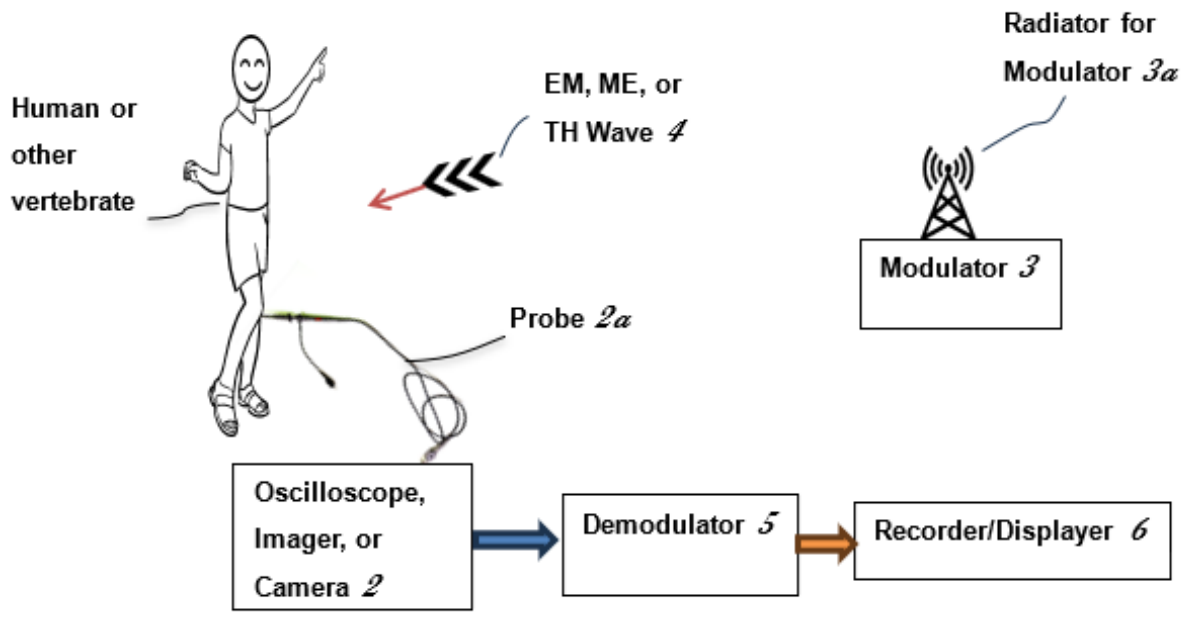

Figure 4: An embodiment of an electric serial impulse generator, which is an Electrotherapy (EA) machine.

Concluding Remarks

Our findings on Scientific TCM and validations on the theory of Chee and Chee as a modulated biomarker are giving rise to new and fundamental visions for biology, physiology, and psychology, which should have broad impact on diagnosis, treatment, and prevention of diseases, allergies, cancers, among others. This optimistic outlook is encouraged by the large efforts and significant advances in other TCM research and clinical trials worldwide. Clinical trials conducted in China from 2013 to 2021 totalled 965 items. A TCM clinician/pill-producer in South Korea reported satisfactory treatments on sixteen-thousand patients worldwide with respiratory diseases, including cancer, over the past fifty years.

Our findings are generating new and fundamental visions for biology, physiology, and psychology, thus could lead to new scientific discoveries new diagnostic and therapeutic instrumentation/treatments for major illnesses, including infectious diseases. Our findings are elevating TCM to a corner stone of Integrative Medicine for Whole-Body Health-the dream of most governmental agencies in the world, such as US NIH-since early 1990s.

Acknowledgement

This paper was orally presented in Nineth World Congress on Infectious Diseases, Orlando, October 23-25, entitled "Scientific traditional Chinese medicine for low-cost and effective prevention, detection, and treatment of infectious diseases."

Conflict of Interest

None.

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