

# Examination of the Relationship between Emotional Disturbance and Tumors: Introduction to Emotional Soothing Therapy through Two-Case Studies of Uterine Fibroids

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**Abstract:** The role of emotional disturbance in the development of tumors have been well documented and verified in both theoretical and empirical studies among Chinese and Western medicine. However, there has been little work addressing emotional disturbance through therapy that focuses on emotional releasing in the treatment of tumors in general. We believe a lack of clinical evidence for the improvement of a patient's physical condition through effective emotional releasing or guidance may be a key reason for the absence of psychologists in most existing tumor treatment protocols. Providing clinical evidence in emotion-disease association may be an important first step to enhancing existing treatment modalities with emotional-focused components. As an example, this paper describes two case studies of uterine fibroids, with the primary focus on the emotional pathogenic mechanism of tumor growth. In both cases, Emotional Soothing Therapy (EST) is used to help the patients shrink their uterine fibroids in one to two short treatments. The treatment procedures and dialogue between the patient and the therapist are provided to demonstrate how the EST was used to defuse negative emotions, reduce emotional disturbance, and help ease physical and psychological pain. In both cases, the uterine fibroids shrank significantly (by 50% and 90% respectively) after 1-2 EST sessions. These documented clinical cases provide an important reference for future clinical treatment of tumors, and warrant further randomized controlled trials on the EST, as well as the association between emotions and tumor reduction.

**Keywords:** Emotional disturbance, tumor, treatment methods, case study, uterine fibroids, emotional soothing therapy.

## INTRODUCTION

The relationship between human emotion and diseases has long been a subject of continuous research and exploration in both traditional Chinese medicine (TCM) and Western medicine. With the improvement in research methods and technology, the results of a series of empirical research have suggested that emotional distress or disturbance might have real physical harm or manifestations (such as tumors), and that there is a corresponding relationship between different emotions and various diseases [1-3]. These results have helped us to go beyond the previous trend of excessive focusing on treatment of physical symptoms in contemporary medical practice, to better understand the mind-body connection from a holistic point of view, and to explore new ways to treat physical disease with psychological approach. However, neither traditional Chinese medicine nor western medicine offers a clear clinic guideline on how to apply emotional element in actual treatment of diseases, partially due to the lack of clinical evidence in improving physical conditions through emotion-focused therapy.

In our clinical observation and practice, we have noticed a series of associations between types of emotional disturbance and the possible types of physical diseases. More importantly, through our newly-developed "Emotional Soothing Therapy" (EST), we are able to explore-then-apply the past traumatic life experience (related to certain negative emotions) as a breakthrough point in emotional guidance, and help patients overcome or reduce the physical symptoms through effectively releasing the negative emotions related to the physical disease. The clinical application of EST is accompanied by the meridian theory from TCM through soothing or cleansing the energy blockages in the key acupoints related to emotional elements. A close examination of medical reports before and after the short intervention by EST among the patient of uterine fibroids shows significant reduction in the size of tumor, which provides the preliminary clinical evidence that emotional intervention can significantly reduce physical diseases with an emotional root.

As this paper would be the first one in a series of studies to examine the clinical associations between emotional disturbance and disease development, we would like to briefly summarize the theoretical basis on the relationship between emotions and diseases. Then we will discuss some known mechanisms on how

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emotional disturbance can lead to certain diseases before we introduce our specific EST and two successful cases report that EST helped patient with uterine fibroids to shrink the tumor dramatically after 1-2 sessions.

## THE RELATIONSHIP BETWEEN EMOTIONS AND DISEASES

Since the founding of traditional Chinese medicine (TCM), the physicians have paid close attention to the effect of emotional changes on the development of visceral diseases. In the "*Yellow Emperor's Internal Classic*," the earliest medical book in TCM, which elaborates the overall foundation and main concepts of Chinese medicine, it states, "The human body is centered with five internal organs, and links all bodily tissues and organs together through meridians, essence, qi, blood and bodily fluids so as to create a unified entity and maintain life activity" [4]. It also points out the relationship among emotions, qi (vital energy), and organs. For example, in "Plain Questions: A Treatise on Pain" it states that, "We know that all diseases result from qi disorders; anger leads to qi ascending, joy leads to qi calm, grief causes qi depression, fear causes qi collapse, fright causes qi disorder, and contemplation (over thinking) causes qi stagnation" [4]. In "Plain Questions --the Great Treatise on the Correspondences and Manifestations of Yin and Yang" It states that, "anger impairs the liver, over-joy hurts the heart, anxiety harms the spleen, melancholy impairs the lungs, fear hurts the kidneys". In addition to the five emotions, "*Yellow Emperor's Internal Classic*" also expresses perspectives on the sixth and seventh emotions, and shows a deep understanding of TCM in body visceral lesions caused by psychological distress or disturbance related to emotions.

Emotion is an important subject in modern medicine and psychology. Research suggests that certain types of diseases or physical changes could be the result of emotional disturbance or stress responses in the neuro-endocrine system. "Stress", or negative emotions during stress, can activate a series of chain reactions in the body, traditionally known as "fight or flight response", which stimulates or activates the physiological changes through two distinguished pathways -- hypothalamic-pituitary-adrenal axis (HPA) and sympathetic nervous system (SNS), the former works via bloodstream, while the later works via neural pathway. The stress response will be passed down through the mesh structure, and cause an overall physical reaction in the body, including increased heart

rate, respiration rate and blood pressure, increased muscle tension and sweat, increased insulin and blood glucose, with decreased immune function, growth hormone, and productive function, accompanied with gastrointestinal suppression, and other physical disorders, and resulting in multiple abnormal hormone levels [5]. After review the literature on stress response, Qiao and Wang suggested that emotional states can have casual links with physical health through the biological, psychological, and social routes, and can affect people's awareness of physical symptoms, choice of health behaviors, and adaptation to illness through changing the level of perceived comfort when information reaches the brain [6,7].

The laboratory studies have also confirmed the relationship between emotions and physical disorders. Yan *et al.* [8] established an animal model of "anger impairing the liver" by the method of enraging rats. The experimental results showed that after being stimulated with rage or stress, there was a significant reduction in the ability of peritoneal macrophages to release H<sub>2</sub>O<sub>2</sub>, indicating that the rat's immune reaction was inhibited. In other experiments by Liu [9] and Sun [10], the relationship between emotion and liver disease was replicated by animal models. Through research on the impact of anger expression and its characteristics on the autonomic nervous system during emotional recovery, Zhan *et al.* [11] found that compared with anger characteristics, the impact of anger expression on the autonomic nervous system during emotional recovery is more extensive, and showing the slower recovery and the longer period of impact on. Therefore, it is necessary to prevent excessive venting from damaging high levels of sympathetic activation and to avoid excessive repression from causing more enduring subsequent damage to the body. Through study of the relationship between bronchial asthma and emotions, Song *et al.* [12] found that if a person is often in a tense state of mind, his psychological pressure will be increasingly strong, which inevitably affects the body's immune function through the nervous and endocrine systems, and even induces or aggravates asthma. Through investigating the influence of emotional stress on blood glucose levels, insulin levels, and islet cell apoptosis in NOD mice, Tao *et al.* [13] found that emotional stress can cause the occurrence of insulinitis and apoptosis of islet cells in NOD mice, which may accelerate the occurrence of insulinitis in NOD mice susceptible to diabetes and significantly increase apoptosis of pancreatic islet cells, thus playing an important role in the development of type 1 diabetes.

As seen from the research, the role of emotions in the physical body exists objectively and can lead to various diseases. TCM and Western medicine discuss the path of emotional effects on the human body in different ways, but on the whole, they still follow the overall path of “social environment → emotional changes → dysfunction → cell disease → changes in organizational structure” [14].

Since emotional changes or disturbance can cause physical change or disease development, emotional releasing, channeling and guidance should improve people's health and become an effective clinical treatment. However, in current practice of Western medicine, clinical treatments focus mainly on the bodily symptoms, while psychological support or counseling is just an auxiliary means, and has not been given sufficient attention. As “TCM pays more attention to the whole-person health with less attention to the detail or symptoms.... as a part of natural philosophy and living, the unique TCM theory of seven emotions and emotion-led disease cannot be spelled out easily in modern medicine language, and as a result, it is not effectively applied in clinical psychosomatic illness” [15]. Therefore, the exploration of an effective treatment method based on emotional guidance is the key to a better understanding of the relationship between emotion and diseases, and a key to a more complete recovery and health in medical practice.

#### **POSSIBLE EMOTIONAL PATHOGENESIS OF GYNECOLOGICAL DISEASES LIKE UTERINE FIBROIDS**

Everyone has a limit to how much pressure one can withstand. Major life events as the main source of psychological distress can lead to negative emotions and physiological responses [16]. If these negative emotions were not released or channeled out properly, they would be stored in the human mind or consciousness, forming an emotional memory in the subconsciousness. Emotional memory refers to the process of encoding and storing emotional information and response patterns, and searching for coping response or extracting it under certain circumstances [17]. This emotional memory will continue affecting the human body. “Although suppression response may reduce the effect of strong negative emotions caused by traumatic events in a short term, it would cause the person withstanding long-term post-traumatic stress or disorders” [18]. In the early 1920s, psychoanalysis studies found that many cancer patients had experienced extreme psychological trauma, such as

family separation or loss of loved one, prior to the illness [19]. The trauma remains deeply in the memory, fails to be resolved, and acts on the body to possibly induce carcinogenesis.

There is a well-documented relationship between emotion and gynecological diseases, especially the depressive emotions, in TCM classic works. In the ancient TCM book, “Gynecology Collections” (*Fuke Yuchi*) of the Qing dynasty it states that: “Gynecological diseases are mostly related to blood issues. Women might often be anxious and angry, which impairs the liver; while the liver stores blood; women are often worried, which impairs the heart, while the heart commands blood; if the heart and liver are hurt, the blood would lose order and overflow.” When investigating the association between marital status and immunity, behavioral scientists and immunologists found that, among the women who are separated and divorced, immune functions work less effective than those in married women [20]. Many empirical studies of the relationship between breast cancer and depressive or anxiety emotion also suggested that patients with breast cancer have a higher degree of depression and anxiety [21-24].

During our clinical treatment of patients with gynecological disease, we have noticed that gynecological pathogenic depression stems mostly from an unhappy family life, such as that the marital relationship might not be harmonious, the children's education is not going as expected, or self-gender-identity is misaligned; in these situations the women would experience negative emotions like frustration, depression, and anxiety. The gynecological disease may often be the natural way for her to express or channel subconscious discontent, anxiety, pain, anger, guilt, repentance, depression, humiliation and other emotions related to marital life (especially sex), fertility, gender and other aspects. For example, a patient found that she had uterine fibroids two weeks after she learned that her husband was having an affair. During this period, she continued to quarrel with him and was constantly accompanied by anger, grievance, rage, depression, and other emotions. Another patient who had an abortion and felt a strong sense of guilt, was often affected by this sense and could not forgive herself, so her cervical disease was very difficult to be treated.

Therefore, during the treatment of tumors related to gynecological diseases we need to focus specifically on patient's inner emotional factors. As the TCM

believes that "Medicine can treat only half of the disease, while the other half lies not in the prescription, but in the treatment of the mind." When a patient's mind is in a rigid state, the inner self is troubled by strong negative emotions. When these long-accumulated emotions are not released and resolved, they would continuously act on the body and are reflected as physical disease. Under the guidance of this concept and tradition, an important method in treating gynecological disease is to discover the traumatic life experience which might be the cause behind the excessive emotion(s). Once the patient could ease her inner psychological distress, let go of the negative emotion, and relieve the pressure on body by resolving the emotional backlog brought by these traumatic life experiences, her physical symptoms such as tumor would be significantly reduced as well.

### **EMOTIONAL SOOTHING THERAPY AND TWO CASE STUDIES**

Western psychologists have used Cognitive-Behavior Therapy (CBT) in treatment of emotional disorders like depression or anxiety, which helps individuals with emotional issues to transit from the previous object-processing model to a cognitive-behavior processing model, so as to achieve a reorganization of faith and behavior pattern [25]. The CBT mainly serves to change the individual's understanding of events or surrounding things, and to resolve the possible negative emotions. It reshapes the patient's state of mind, but is not directly connected with treatment of physiological disease.

There are three common types of diagnosis-treatment methods in TCM, namely "differentiate symptoms through response to treatment", "understand it through similarity" and "summarize symptoms into one key point", namely abduction, analogy, induction [26]. The treatment method described here, Emotional Soothing Therapy (EST), is a combination of these three TCM treatment methods. Created by Feng-yuan Bao from his clinical experience and special training, EST is a unique treatment or system based on close emotion-disease relationship by applying TCM meridian theory, energy balance, and psychotherapy to help channeling patient's emotional suppression or disturbance through energy-blockage points and inner dialogues so as to reduce or eliminate the emotion-related physical disease or discomfort. EST mainly focuses on the patient's inner mind status, discovers the past traumatic life experiences that might cause emotion disturbance, compares different cases in

which a variety of similar experiences lead to the similar diseases, and come to the conclusive understanding of root source of the specific type of disease. The frequently used methods or steps include emotional-disturbance identification, emotional-channeling dialogue, emotional release, and energy-blockage dredge, etc.

EST starts with interviewing the patient with some key life experiences that may be related to the physical disease or symptom, then crack the root emotional cause for the symptom through key acupoint (energy points) examination, and then apply effective psychotherapy (let go and let out) and acupressure to treat and ease the symptoms. Since EST is relatively new in clinical application, we would like to use two examples to explain how the EST have been applied to treat patients with uterine fibroids as an illustration of this new treatment method.

#### **Case 1**

Ms. Ye is a 46-year-old business woman, living in Guangdong with her own supermarket business. She has an associate degree, married with one child. Generally speaking she had a good health previously, and did not have any serious sickness except for occasional flu (cold) or stomach discomfort. In May 2016 she felt discomfort, went to hospital for a check-up, and found out she had large fibroids in her back uterine. She took some pills from the doctor after the visit, but did not take any medicine after June 30 (when the latest Ultrasound exam took place before her treatment by EST).

She came for treatment of uterine fibroids on July 9, 2016. The only treatment session lasted about 30 minutes. First, the therapist let the patient lie facing down on a treatment table, and asked her to close her eyes and relax. Following the principle of TCM meridian theory and treatment concept, the therapist applied light force to press one specific acupoint (EX-B7), the possible energy-blockage point that is related to uterine fibroids. The patient immediately reported that it was quite painful. Next, the following dialogue was carried out between therapist and the patient (as part of the emotional channeling dialogue to explore the key life-experience of emotional disturbance).

Therapist: "What kind of family event had made you feel this type of pain before?"

Patient: "When I realized my husband was having an affair."

Therapist: "How did you find out?"

Patient: "I found some long hair in the car, and asked him how it got there; he said he didn't know."

Therapist: "How did you feel at that time?"

Patient: "I felt pain in my heart, and it was very painful."

Therapist: "What did you want to say to him at that moment?"

Patient: "I wanted to Say 'Please don't do this to me, OK?'"

Therapist: "Please repeat that."

Patient: "Please don't do this to me, OK?"

The patient broke into tears, crying during the repetition of what she wanted to say, and looked very sad. Under the therapist's guidance and encouragement, she further expressed her resentment of her husband regarding this matter for many years. After repeated expression and channeling, her resentful emotions were gradually released, she stopped crying and slowly calmed down.

When the therapist pressed the same energy blockage point again, the patient reported no more pain there. Then the therapist continued to lightly press another acupoint, a different energy blockage point also related to uterine, the patient said it was as painful as the first point. The therapist continued the conversation as following:

Therapist: "What do you think about this time?"

Patient: "I'm thinking about how my husband would always go out and return home very late."

Therapist: "How did you feel when you found out he came home so late?"

Patient: "Very angry."

Therapist: "What do you want to say to him?"

Patient: "If you don't want to come home, don't come back. Go ahead and die out there!"

The therapist repeated the channeling and releasing treatment process as they did in the first acupoint relief, and help her let go of the sense of suffering. The patient continued lamenting the pains of working hard in taking care of her home and children, but she could not get her husband's care and help, therefore she felt very much hurt.

Then, the therapist pressed another acupoint, no discomfort was reported. While pressing the fourth acupoint, the energy blockage point related to uterine, the therapist found out that the patient felt some pain, and associated that with her dissatisfaction with her child due to his disobedience. Then, the therapist led the patient to repeat the following contents, sentence by sentence: "My child, thank you for coming to my life. Your existence let me see my own shortcomings clearly. The child's problems are actually the parents' problems. Your growth depends on my consciousness, and on my ascension. All situations you are confronted with are also what I need to confront with, make progress and work hard for. I will love you in the appropriate way. I will grow a better person through the experience. From now on, I will no longer complain. I want to grow up with you together. I will love myself and love my child more." With repetition of these sentences, the patient's voice became more powerful and firm.

After the channeling and releasing session, the patient's face looked brighter and she became much more cheerful. She was encouraged to go back to the same hospital for a follow-up medical exam (ultrasound image) the next day. The results in Table 1 show that the size of her fibroids were significantly smaller after just one session of EST (shrank about 30%). Without any additional treatment from either the doctor or the EST session, she went through the third medical exam on August 9, and found out the fibroids continued shrinking by 32% (a total fibroids reduction of 59% in size).

**Table 1: Measurements of Uterine Fibroids before and after the EST**

Measurement \ Date	June 30 (prior EST)	July 10	August 9
Hypochoic processing of mass size	97x72 mm	80x62x65 mm	76x47x61mm
Endometrial thickness conditioning	7mm	6mm	5mm

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 科室: 门诊部 床号: 住院号:  
 检查部位: 泌尿系 设备型号: 检查日期: 2016-06-30 13:46:51



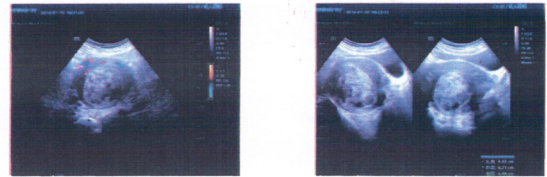
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 双侧输尿管无明显扩张。  
 膀胱充盈良好, 壁连续光滑, 内透声清。  
 子宫前位, 体积增大, 形态失常, 轮廓清楚, 包膜光滑, 肌层回声不均匀, 肌层见两个低回声团, 大者位于后壁, 大小约97\*72mm, 边界清, 内回声不均, 内膜厚7mm, 居中。  
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 子宫肌瘤。  
 双肾、膀胱未见明显异常; 双侧输尿管未见明显扩张。  
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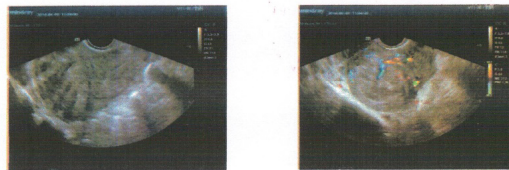
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 双侧附件区未探及异常肿物回声。  
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 检查部位: 彩超子宫附件 设备型号: mindray 检查日期: 2016-08-09 11:13:40



超声描述: (计量单位: 长度为毫米; 面积为平方厘米; 体积为立方厘米; 速度为厘米/秒; 流量为毫升/分)  
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 子宫肌瘤。  
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Figure 1: Ultrasound images & medical report for case 1.

## Case 2

Ms. Guo from Beijing is 47 years old, married with one child. She works as a department manager in a luxury hotel. She had considered herself in very good health until recently, when the company arranged all employees to go through a regular physical examination. She was found having a medium-size fibroids in the back wall of uterine. She came on July 30<sup>th</sup>, two days after her last medical exam, and asked for help by EST. She underwent two sessions of EST, 40 minutes for the first session, and 30 minutes for the second one.

The process of the first therapy session on July 30 went as follows:

The patient was asked to stand naturally and relax completely. First, the therapist applied some pressure on *Guan-yuan* (RN-4) point, very light force but enough to feel pressure, the patient reported some qi-sensation inside body. Then therapist pressured *Zhong-wan* (RN-12) point, patient had no response. When therapist pressed the *Tian-shu* (ST-25) point, she reported a sense of soreness and pain.

Then therapist asked the patient to close her eyes, and began to ask the following questions: "How is your relationship with your parents?"

Patient: "About normal. I had a better relationship with my father."

Therapist: "Are there any grievances or uncomfortable spots in your relationship with your father?"

Patient: "When my father passed away, I was not around and didn't get the chance to exchange any last words with him."

Therapist: "What happened then?"

Patient: "When my father was ill, he told me and my uncle that we were the main source of his suffering. Although these words was from a terminally-ill person, it's always in my mind and make me feel very uncomfortable."

After applying EST technique to help her release the uncomfortable sensation, the therapist continued asking: "Do you have any guilt feeling toward your father?"

Patient: "Yes. When my father was ill, I had been trying to take care of him; however, at the time when he died, it happened that I was out of town to run some errands, and was unable to say last goodbye to him, so I always felt very guilty."

The Therapist continued to help her release her guilt feelings with emotional channeling, and helped her make an effective connection with her father's spirit through the awakening technique. This EST session helped her make up for the final regret, and she felt much better after the session.

A few days later, she came back for the second session (August 4), which involved the following process:

Therapist asked: "How is your relationship with your mother?"

Patient: "Just so-so, my mother is very nice to my younger brother. Once I had an argument with my mother because of my young brother."

This time the therapist did not use the awakening technique to help release the emotions, instead, they talked about things related to her mother and then therapist applied energy-channeling technique (a type of Qigong therapy) to break the fibroid energy blockage point. After the energy channeling and conversation, the patient's body become obviously softer than it was at the last visit. When energy in the body is activated and flowing smoothly again, people won't feel so rigid, and their thoughts will become more open. After the second session, the patient's face looked much brighter, her body was more relaxed, and she became cheerful.

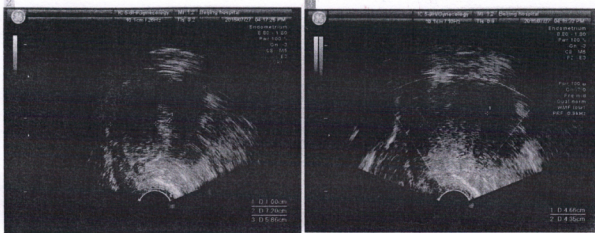
Next, when therapist pressed her *yao-yan* (EX-B7) point, the patient reported strong soreness and pain, very uncomfortable. Therapist asked her what she was thinking of, she said she thought of a childhood experience. When she really expected the care and support from her parents, her parents were not around for her, but away from home, and she felt very sad and dissatisfied about that. Therapist applied emotion-releasing technique to help her let go of the sadness, and accept what is, she had a great sense of relief. The pressure on her *yaoyan* (EX-B7) point did not make her feel soreness or pain any more.

Two days later, the patient went through a follow-up medical exam with ultrasound image in the same hospital. Without any medication or other therapy in-

Measurement \ Date	July 28, 2016	August 6, 2016
Hypochoic processing of mass size	4.7X4.6X4.3cm	1.7X1.6X1.5cm

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妇产科超声诊疗报告单

姓名: 郭 性别: 女 年龄: 47岁 科别:   
病历号: 住院号: 设备型号: GE V730 孕周:



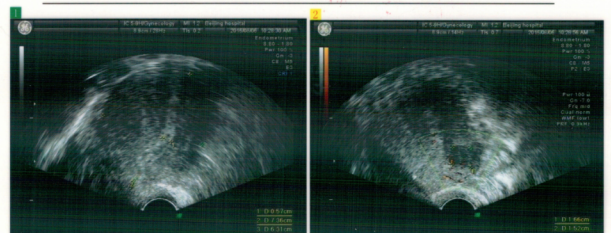
**检查所见:**  
**检查所见:**  
**经阴道超声检查:**  
 子宫中位, 大小为7.2×6.9×5.8cm。子宫球形增大, 形态不规整, 肌层回声实质性不均, 以后壁为主, 肌层可见多个偏低回声团, 最大位于后壁, 壁间大小为4.7×4.6×4.3cm, CDFI其周边少许半环状血流信号, RI高阻。  
 子宫内膜厚约1.0cm, 回声均匀。  
 双侧附件: 左侧卵巢大小为2.2×1.5 cm。右侧卵巢大小为2.3×1.2 cm。  
 盆腔未见明显游离液。

**超声提示:**  
 子宫腺肌症待除外  
 子宫肌瘤多发

报告日期: 2016-07-27 报告医师: 妇科  
 本次报告仅供本院医师临床参考。

北京医院  
妇产科超声诊疗报告单

姓名: 郭 性别: 女 年龄: 47岁 科别:   
病历号: 住院号: 设备型号: GE V730 孕周:



**检查所见:**  
**检查所见:**  
**经阴道超声检查:**  
 子宫前位, 大小为7.4×7.3×6.3cm。子宫球形增大, 形态不规整, 肌层回声实质性不均, 以前壁为主, 肌层可见多个偏低回声团, 最大位于前壁, 壁间大小为1.7×1.6×1.5cm, CDFI其周边可见半环状血流信号, RI高阻。  
 子宫内膜厚约0.6cm, 回声均匀。  
 双侧附件: 左侧卵巢大小为1.8×1.8 cm。右侧卵巢大小为2.2×1.4 cm。  
 盆腔未见明显游离液。

**超声提示:**  
 子宫腺肌症合并肌瘤

报告日期: 2016-08-06 报告医师: 妇科  
 本次报告仅供本院医师临床参考。

Figure 2: Ultrasound images & medical report for case 2.

between, the ultrasound image showed that the size of uterine fibroids was reduced from original 47 x 46 x 43 mm (on July 28) to 17 x 16 x 15 mm on August 6 after two sessions of EST, a significant reduction of 95% in tumor size.

**DISCUSSION**

Through the two cases of EST for uterine fibroids we have demonstrated that the growth of uterine fibroids in female patients might be closely associated with emotional disturbance and traumatic life experience in them, which may include the emotional relationship with their husband, their children, and their parents. The appropriate treatment on emotional soothing and channeling can significantly relieve and reduce the symptoms of uterine fibroids. Therefore, we may come to the hypothesis that, in addition to the

existing treatment methods used in TCM and Western medicine, EST can add the emotional factor into the treatment of uterine fibroids, and EST has demonstrated the clinical effect on significant reduction of uterine fibroids in our clinical observation.

Although study has reported the association between sexual and physical abuse and gynecologic disorders, [27] this is probably the first direct observation that the therapy focusing on emotion alone can significantly reduce uterine fibroids after 1-2 short treatments. This could be a clinically significant breakthrough in health and medicine as emotional factors have not been applied in most existing treatment protocols for tumor, or for most diseases of the body. According to TCM, many diseases are simply external or physical manifestations of the inner emotional disturbances, and may be the result of emotional suppressions that have not been effectively



released, alleviated, and removed [4,5]. Therefore, treatment of certain diseases can start with resolving the emotional blockage or suppression, just as Ghant *et al.* noticed the effect of uterine fibroids on women's emotional and psychosocial health [28]. The EST, combining the energy dredge, acupuncture from TCM, and emotional dialogues and counseling from psychotherapy, can effectively help patients let go of the harmful emotions or emotional suppression, and regain inner peace and energy balance. The EST may open the door to a new era of research on the relationship between emotion and diseases, and of clinical application of emotional channeling and soothing for both physical and mental health.

Furthermore, by classifying the numerous clinical cases, we have started to find the potential sources of emotions corresponding to certain types of diseases or disorders, which will greatly enhance the theory of disease development in medicine. We can apply the information or knowledges to directly guide patients to relieve and let go of the emotions caused by traumatic life experiences, therefore, achieve the goal of easing their pain and symptoms related to that emotion, and therefore, live a healthier life without the invasive treatments coming with multiple side effects.

Of course, we need to be very careful in applying or deducting the findings from the preliminary case study. This study is limited by multiple shortcomings: (1) a very small sample size (of 2), which cannot reach convincing conclusion yet; (2) lack of other clinical data collection and evaluation, especially the psychological data such as depression, anxiety and stress levels, which can be critical in understanding how the old negative emotions based on traumatic life experience may mediate the physical sickness through mood disorders. (3) Since it is not a well-designed research, the operators in ultrasound equipment in hospital were actually different persons, which may introduce some measurement errors in tumor size. Future clinical research should take these points into consideration.

In summary, the well-documented clinical cases of EST provide an important reference for future clinical treatment of tumor (and disease of the body), and warrant further randomized controlled trials on Emotional Soothing Therapy. Although EST is very easy to learn and transferable for clinicians, we have not made a standard manual yet. We plan to further study and standardize the EST with a therapist manual, and make it easy to train new therapists to master the EST and basic skills so that we can carry out a large

scale of randomized controlled trials with vigorous design and more accurate measurements. Combining with other existing treatments and psychotherapies, EST will play a vital role in people's health and healing.

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