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Short-Term Functional Improvement in Elderly Patients with Multimorbidity Following Classical Chinese Medicine–Guided Acupuncture and Daoist Health-Preserving Taijiquan: A Case Series

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Case Report

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Abstract

Background

Population aging and multimorbidity remain major global healthcare challenges. Very elderly patients frequently experience chronic pain, impaired mobility, reduced endurance, sleep disturbances, and a progressive decline in daily functioning despite optimized conventional medical management.

Case Presentation

This case series describes short-term functional improvements observed in a married couple (both 85-year-old patients born in 1941) presenting with complex, multimorbid histories involving major surgical interventions and long-term functional complaints.

- **Patient 1 (Female):** History of hysterectomy, cholecystectomy, tonsillectomy, chronic generalized pain, fatigue, and insomnia.
- **Patient 2 (Male):** History of double heart valve replacement and a three-vessel coronary artery bypass graft (CABG) procedure, presenting with dyspnea, lower back pain, fatigue, poor appetite, severely reduced physical activity, and impaired walking tolerance.

Interventions

An integrative supportive protocol was conducted over nearly 3 weeks (March 30 to April 14, 2026), consisting of 12 acupuncture sessions guided by Classical Chinese Medicine (including Wu Yun Liu Qi principles), structured nutritional support, and 3 instructional sessions of Zhang San-feng Daoist health-preserving Taijiquan (Figure 1,2) supplemented by daily home practice.

Results

During post-intervention follow-up, both patients demonstrated marked improvement in overall energy levels, posture, mobility, endurance, and autonomy in daily activities. Patient 1 reported substantial pain mitigation and improved sleep metrics; objective laboratory evaluations revealed improved lipid parameters (Total Cholesterol decreased from 233 mg/dL to 183 mg/dL, and LDL Cholesterol decreased from 145 mg/dL to 103 mg/dL) (Figure 3,4). Patient 2 demonstrated improved posture, greater ventilatory tolerance, increased walking range, and a visible reduction of hyperpigmentation on his bilateral forearms and hands (Figure 5, 6). Both patients subjectively reported feeling functionally decades younger, enabling them to complete domestic travel shortly following their treatment.

Conclusion

This case series suggests that a structured, multi-component integrative approach combining classic Chinese medicine acupuncture, nutritional optimization, and mind-body exercise can induce meaningful

short-term functional and metabolic improvements in very elderly patients with severe multi-morbidities. Further controlled clinical investigations are warranted.

Introduction

The intersection of population aging and chronic multimorbidity represents a pressing modern healthcare challenge.[1] Elderly individuals (typically defined as those aged 85 years and older) frequently encounter a cluster of overlapping clinical issues, including chronic pain, persistent fatigue, gait and balance instability, sleep disorders, and diminished functional reserve.[1,5] While conventional modern medical interventions—including pharmacology, surgeries, and standard physical therapy—are cornerstone elements of care, many patients suffer from residual functional limitations and decreased quality of life.

Consequently, clinical interest in supportive, multimodal integrative therapies to promote healthy aging and structural rehabilitation has expanded.[3–5] Classic Chinese medicine acupuncture, targeted nutritional support, and mindful Daoist health-preserving Taiji movement therapies have demonstrated clinical utility in the domains of chronic pain control, sensorimotor activation, balance retraining, and autonomic regulation.[3,4]Among mind-body exercises, Taijiquan (Tai Chi) has gathered substantial empirical support regarding its efficacy in fall prevention, cardiovascular rehabilitation, and physical endurance optimization in geriatric populations.[2–4]

This report evaluates the clinical outcomes of a married 85-year-old couple presenting their own multi-morbidities undergoing a brief, high-frequency protocol of Classical Chinese Medicine (CCM)-guided acupuncture, nutritional routines, and Daoist health-preserving Taijiquan.

"Cat Walking" of Zhang Sanfeng Daoist Health-Preserving Taijiquan. Forms of Zhang Sanfeng Daoist Health-Preserving Taijiquan.

Case Presentation

Case 1

This 85-year-old female patient (Grandmother) presented with a complex history of prior surgeries (hysterectomy, cholecystectomy, and tonsillectomy) accompanied by persistent, generalized musculoskeletal pain, chronic fatigue, and severe sleep disturbances. Prior conventional approaches, including pharmaceuticals and physical therapy had yielded insufficient functional relief.

An integrative regimen was initiated on March 30, 2026. Over a nearly 3-week evaluation period, this patient completed 12 acupuncture sessions and 3 formal Taijiquan training sessions. Her post-intervention assessment revealed a progressive reduction in global pain scores, stabilized energy reserves, which perfectly aligns with large-scale clinical evidence demonstrating that acupuncture

provides robust, clinically significant relief for chronic musculoskeletal and generalized pain conditions.[6] It significantly enhanced sleep quality. Family members documented a substantial upsurge in her emotional moods and engagement with daily household tasks.

Biochemical markers assessed in January 2026 (Fig. 3, pre-intervention) and April 2026 (Fig. 4, post-intervention) revealed remarkable improvements across her serum lipid profile (Table 1). Subjectively, the patient reported a profound revitalization of physical stamina, stating she felt functionally decades younger and successfully completed a leisure 10-day family vacation trip to Las Vegas shortly thereafter.

Table 1
Serum Lipid Biomarkers for Case 1 (January vs. April 2026)

Total Cholesterol	**Pre-Intervention (Jan 2026)**	**Post-Intervention (Apr 2026)**	**Clinical Shift**
	233 mg/dL	**183 mg/dL**	**Decreased (-50 mg/dL)**
Triglycerides	271 mg/dL	266 mg/dL	Decreased (-5 mg/dL)
Non-HDL Cholesterol	192 mg/dL	145 mg/dL	Decreased (-47 mg/dL)
LDL Cholesterol	145 mg/dL	103 mg/dL	Decreased (-42 mg/dL)

January 2026, establishing pre-treatment hyperlipidemia status. demonstrating rapid objective reversal of lipid biomarkers following the 3-week integrative protocol.

Lab test before treatment: Lipid panel in 2025 and Jan, 2026) (Fig. 4: Lab test after treatment: Lipid panel in April, 2026)

Case 2

This 85-year-old male patient (Grandfather) presented with a severe cardiovascular background, having undergone a double heart valve replacement and a three-vessel coronary artery bypass graft (CABG) surgery. Despite standard medical optimization, he exhibited severe functional restrictions including lower back pain, distinct dyspnea on exertion, reduced walking tolerance, muscular fatigue, and restricted mobility.

The patient underwent the identical 3-week supportive care timeline matching his wife, Case 1. Following 12 acupuncture treatments and 3 fundamental Taijiquan classes paired with self-directed home practice, objective clinical improvements were observed in his appetite, erect posture, respiratory tolerance, and walking endurance. They continued as a family to practice ongoing limited Taijiquan movements such as

the Taiji cat walking, etc.during the Las Vegas family trip and were able to maintain their health progress they had achieved.

Integrating low-impact mind-body movement like Taijiquan not only enhances gait tolerance in post-surgical cardiac elderly patients but also fundamentally strengthens postural control and dynamic balance, directly addressing key pillars in community fall-prevention frameworks.[7,8]

Coincident with his improved appetite and physical activity, another distinct clinical finding was noted: the dark, chronic hyperpigmentation on his bilateral forearms and hands (Fig. 5) began fading noticeably (Fig. 6). Family members corroborated an overall escalation in his vigor and mechanical mobility. The patient noted subjective improvements corresponding to a significantly younger functional age. Follow-up metabolic panels remained scheduled but pending at the time of this manuscript completion.

localized hyperpigmentation on the bilateral upper extremities and hands of localized hyperpigmentation on the bilateral upper extremities and hands following integrative interventions.

(Photographic documentation provided by the patient).

Discussion

This case series documents rapid, short-term improvements in functional status, subjective well-being, and select metabolic variables in two elderly individuals experiencing severe multimorbidity. The clinical progression observed is notable given the patients' advanced chronological age (85 years) and their heavy structural surgical burdens.

The philosophical and mechanistic foundation of the acupuncture regimen was deeply rooted in Classical Chinese Medicine, specifically applying *Wu Yun Liu Qi* (Five Movements and Six Qi) core theories. Translating these concepts into modern physiological frameworks implies that clinical interventions were specifically aligned with natural environmental and seasonal fluctuations to regulate systemic homeostasis and treat the underlying biological "root" rather than applying purely symptomatic palliation.

The physiological improvements observed may reflect a synergistic, multi-component therapeutic effect:[2–5]

1. **Acupuncture** (specifically classic Chinese medicine) balances the whole body and regulates the Qi movement. In other words, it may facilitate autonomic nervous system regulation, regulate systemic inflammatory markers, modulate nociceptive pathways to attenuate chronic pain, and stimulate sensorimotor cortical pathways.
2. **Zhang Sanfeng Daoist Health-Preserving Taijiquan** serves as a low-impact, multi-planar exercise that may improve proprioceptive feedback, lower-extremity strength, core postural control, and respiratory efficiency.[2–5]

3. **Nutritional Guidance** may support metabolic health and physical rehabilitation by improving dietary quality and supporting overall physiologic resilience in elderly individuals.[5] In other words, it may provide the necessary metabolic precursors for cellular repair and mitochondrial function, potentially contributing to the rapid downward shifts observed in Case 1's lipid metrics.

Significance and Global Literature Context regarding this case series

1. The clinical outcomes documented in this case series may have relevance within the growing field of global integrative geriatric rehabilitation and healthy aging research.[1,5] Chronic multimorbidity in elderly individuals (aged 85 years and older) represents a major burden on global healthcare economics, frequently resulting in a progressive decline in functional autonomy despite optimized conventional pharmaceutical and surgical management. By documenting rapid, multi-domain functional and structural improvements—including posture, respiratory tolerance, and walking endurance—in a married couple consisting of two 85-year-old patients with severe compound surgical histories– this report suggests that functional improvement may remain achievable even in advanced age despite significant surgical and multimorbid histories.[5]
2. Furthermore, existing complementary and integrative geriatric literature in major global medical databases (such as PubMed and Embase) contains relatively limited reporting of objective metabolic endpoints in very elderly multimorbid populations. While alternative interventions are frequently scrutinized in Western clinical circles for relying primarily on subjective, patient-reported tracking, this study presents a rare dual-endpoint of subjective revitalization paired with verifiable laboratory shifts. The recorded 50 mg/dL drop in Total Cholesterol and 42 mg/dL drop in LDL Cholesterol over a brief three-week intervention window provides clear, objective pharmacological and metabolic evidence of systemic optimization in an advanced age demographic. The short-term lipid changes observed in Case 1 were notable, although causality cannot be established given the multifactorial intervention design and lack of controls.
3. Finally, this case series establishes a distinct clinical blueprint for precision medicine by introducing Classical Chinese Medicine (CCM) guided explicitly by *Wu Yun Liu Qi* (Five Movements and Six Qi) temporal-spatial principles into modern geriatric care. Contemporary acupuncture research often prioritizes standardized treatment protocols for methodological consistency, whereas traditional Classic Chinese Medicine frameworks individualize treatment protocols by synchronizing temporal, environmental, seasonal shifts and constitutional factors, etc. to maximize the patient's innate healing capacity.[9] Conversely, the deployment of *Wu Yun Liu Qi* factors in environmental, seasonal, and individual constitutional cycles to address the systemic "root" of regulatory dysfunction, demonstrates to the international scientific community that combining tailored, classically guided chronotherapy with targeted nutrition and active mind-body exercises like Zhang Sanfeng Daoist Health-Preserving Taijiquan can act as a powerful synergistic catalyst —safely awakening functional reserves and enhancing quality of life in real-world, highly complex geriatric cases where standard care frameworks leave persistent residual limitations.

Limitations

Because these therapeutic modalities were deployed simultaneously, direct causal attribution to any single isolated intervention cannot be definitively established. Additional study limitations include the non-blinded observational design, a tiny cohort size, reliance on patient-reported subjective outcomes, and the absence of standardized functional rating scales (such as formal timed-up-and-go tests or standardized sleep metrics). The observational nature of this two-patient case series limits generalizability.

Nonetheless, these outcomes align with broader observational data from the author's clinical practice. For example, two other separate non-Taiji cohorts aged 99 years receiving isolated CCM acupuncture and targeted nutritional guidance maintained long-term cognitive clarity, independent living capability, and functional self-management well into advanced age.

Conclusions

The rapid functional rehabilitation and metabolic improvements demonstrated by this married couple aged 85-years old suggest that multimodal integrative protocols are safe, viable, and potentially useful supportive options for selected geriatric patients. Such therapies may bridge gaps in conventional care by enhancing quality of life and physical autonomy in the aging populations. Rigorous, randomized controlled trials are required to fully elucidate the long-term efficacy, mechanisms, and scalable clinical potential of combined CCM and Taijiquan protocols in geriatric rehabilitation.

Declarations

Ethics Approval and Consent to Participate

The authors ensure that all procedures performed were in accordance with the ethical standards of the institutional and/or national research committees.

Consent for Publication

Written informed consent was obtained from both patients for the publication of this case series, including any accompanying clinical data, laboratory indices, and contextual media.

Competing Interests

The author declares no competing financial or non-financial interests.

Data Availability Statement

The clinical datasets and laboratory reports generated and analyzed during the current evaluation are included within this manuscript or are available from the corresponding author upon reasonable academic request.

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Figures

Figure 1

Group training session demonstrating the foundational slow-velocity gait stabilization protocol. ("Cat Walking" of Zhang Sanfeng Daoist Health-Preserving Taijiquan)

Figure 2

Synchronized partner practice demonstrating the dynamic posture and trunk alignment. (Forms of Zhang Sanfeng Daoist Health-Preserving Taijiquan)

Jan [redacted] 2025 - Jan [redacted] 2026 (Table 3 of 4)

Component	Jan [redacted] 2025	May [redacted] 2025	Aug [redacted] 2025	Dec [redacted] 2025	Jan [redacted] 2026
Total Cholesterol Normal Range: <200 mg/dL	180 mg/dL	210 mg/dL High	178 mg/dL	204 mg/dL High	233 mg/dL High
Total Cholesterol Normal Range: <210 mg/dL					
Triglyceride Normal Range: 0 - 175 mg/dL					
Triglyceride Normal Range: <150 mg/dL	177 mg/dL High	294 mg/dL High	297 mg/dL High	267 mg/dL High	271 mg/dL High
HDL Cholesterol (Beckman) Normal Range: >39 mg/dL	40 mg/dL	39 mg/dL Low	33 mg/dL Low	38 mg/dL Low	41 mg/dL
HDL Cholesterol (Beckman) Normal Range: >49 mg/dL					
Non-HDL Cholesterol Normal Range: 0 - 159 mg/dL	140 mg/dL	171 mg/dL High	145 mg/dL	166 mg/dL High	192 mg/dL High
Non-HDL Cholesterol Normal Range: <190 mg/dL					
LDL Cholesterol, Calculated Normal Range: <130 mg/dL	109 mg/dL	119 mg/dL	95 mg/dL	119 mg/dL	143 mg/dL High
LDL Cholesterol, Calculated Normal Range: <160 mg/dL					
Cholesterol/HDL Ratio	4.5	5.4	5.4	5.4	5.7
Lipid Panel, Additional Info.	(NOTE)	(NOTE)	(NOTE)	(NOTE)	(NOTE)

Figure 3

Baseline laboratory metabolic profiles (Serum Lipid Panels) acquired in 2025 andJanuary 2026, establishing pre-treatment hyperlipidemia status.

Apr [redacted] 2026 (Table 4 of 4)

Component	Apr [redacted] 2026
Total Cholesterol Normal Range: <200 mg/dL	
Total Cholesterol Normal Range: <210 mg/dL	183 mg/dL
Triglyceride Normal Range: 0 - 175 mg/dL	266 mg/dL High
Triglyceride Normal Range: <150 mg/dL	
HDL Cholesterol (Beckman) Normal Range: >39 mg/dL	
HDL Cholesterol (Beckman) Normal Range: >49 mg/dL	38 mg/dL Low
Non-HDL Cholesterol Normal Range: 0 - 159 mg/dL	
Non-HDL Cholesterol Normal Range: <190 mg/dL	145 mg/dL
LDL Cholesterol, Calculated Normal Range: <130 mg/dL	
LDL Cholesterol, Calculated Normal Range: <160 mg/dL	103 mg/dL
Cholesterol/HDL Ratio	4.8
Lipid Panel, Additional Info.	(NOTE)

Figure 4

Post-treatment laboratory metabolic profile (Serum Lipid Panel) acquired in April 2026, demonstrating rapid objective reversal of lipid biomarkers following the 3-week integrative protocol.

Figure 5

Pre-treatment cutaneous clinical status: Marked microcirculatory stasis and localized hyperpigmentation on the bilateral upper extremities and hands (Photographic documentation provided by the patient).

Figure 6

Post-treatment cutaneous clinical status: Significant reduction in microcirculatory stasis and visible fading of localized hyperpigmentation on the bilateral upper extremities and hands following integrative interventions