

Ba Duan Jin and the Treatment of Illness in General, and Cognitive Impairment in Particular

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ABSTRACT

This article cites numerous studies that have found qigong and tai chi to be effective in treating a wide range of illnesses, then proceeds to review several studies where Ba Duan Jin, a popular set of qigong exercises and a tool of traditional Chinese medicine (TCM), has been used to treat cognitive impairment.

Keywords: Qigong; Tai Chi; Taiji; Ba Duan Jin; Baduanjin; TCM; Traditional Chinese Medicine; Treatment of Disease; Cognitive Impairment

Abbreviations: TCM: Traditional Chinese Medicine; RCTs: Randomized Control Trials; CI: Cognitive Impairment; MMSE: Mini-Mental State Examination; MoCA: Montreal Cognitive Assessment; CSR: Cervical Spondylotic Radiculopathy; PCI: Percutaneous Coronary Intervention; CS: Cervical Spondylosis

Introduction

Qigong (pronounced chee gong) is a tool in the toolbox of traditional Chinese medicine (TCM). It is used to treat and even cure a wide range of diseases [1-54]. Ba Duan Jin (baduanjin) is the most popular set of qigong exercises. Zhang, et al. [55] examined the results of 886 clinical studies in 14 countries and discovered that Ba Duan Jin was used in 492 (55.5%) of them. Some of the diseases and ailments that have been treated with qigong exercises include:

- i. Ankylosing Spondylitis [56]
- ii. Anxiety [38,57-58]
- iii. Arthritis [39,59-61]
- iv. Attention Deficit [62]
- v. Autism [63]
- vi. Back Pain [64]
- vii. Blood Pressure [40,65-66]
- viii. Cancer [36,47,67-84]

- ix. Chronic Fatigue Syndrome, Cognitive Impairment and COPD [85-101]
- x. Covid-19 [46,102-104]
- xi. Depression [38,105-114]
- xii. Fibromyalgia [115]
- xiii. Frailty [116-118]
- xiv. Heart Disease [119]
- xv. Hypertension [40,65-66]
- xvi. Immune System [120]
- xvii. Parkinson's Disease [121-126]
- xviii. Quality of Life [127-131]
- xix. Rheumatism [132]
- xx. Schizophrenia [133]
- xxi. Stress [134]

xxii. Stroke [135-138]

xxiii. Substance Abuse [139]

xxiv. Unilateral Vocal Fold Paralysis [140]

Ba Duan Jin consists of a series of 8 qigong exercises. The version promoted by the International Health Qigong Federation [9] takes about 12 minutes to perform. Qigong is similar to yoga, in that it involves physical movement, breathing and moving meditation, but it is not yoga. Qigong is actually gentler than yoga. It is a close cousin of kung fu and other martial arts, but it is not quite a martial art. It involves unblocking the flow of energy in the body, like acupuncture and acupressure, but it is not acupuncture or acupressure. It is an internal component of tai chi, which is a martial art. When one does tai chi properly, one is also doing qigong, perhaps unknowingly. It is a form of meditation as well as exercise, and can be performed from a standing or seated position.

Ba Duan Jin Studies

Wang, et al. (2021) [141]

Wang, et al. [141] systematically evaluated the effects of Baduanjin on global cognitive function and specific cognitive domains of middle-aged and elderly individuals. They searched multiple data bases, looking for randomized control trials (RCTs) that utilized Baduanjin exercises. They found that Baduanjin exercises resulted in significant benefit for global cognitive function and parts of specific domains of cognition, including immediate and delayed memory, executive function, and processing speed. However, no significant difference was found in attention function, visual-spatial ability or long-term memory. None of the studies reported any adverse effects. They concluded that Baduanjin is safe and effective in enhancing global cognitive function and memory, and might be beneficial for other cognitive domains, such as executive function and processing speed.

Eleven of the RCTs compared Baduanjin to non-exercise control; 3 compared Baduanjin and other no-exercise treatments to the same no-exercise treatment. Duration of the studies varied between 1.5 and 12 months. Frequency of the sessions varied between 3-7 per week. Sessions lasted 30-60 minutes. In most studies, participants were older than 60. In four studies, participants were between 45-55. Global cognitive function was tested in 13 studies that included 938 participants. Cognitive function was measured by the MMSE, MoCA and LOTCA scales. The results from 6 pooled studies of 444 participants found that Baduanjin significantly improved the MMSE scores without heterogeneity ($p < 0.001$). In 9 other studies involving a total of 628 participants, it was found that Baduanjin improved MoCA scores, although heterogeneity was present among the studies ($p < 0.001$). A smaller study involving 60 participants measured global cognition using the LOTCA scale. That study found

significant improvement ($p < 0.001$).

Specific cognitive domain was also examined. Significant improvement was found in general memory function in two studies involving 157 participants ($p < 0.001$). Four studies examining immediate memory showed significant improvement ($p < 0.001$) in the Baduanjin group compared to the control group. Several studies of delayed memory found that MD values increased significantly in the Baduanjin group. Two studies involving 109 participants found that the Baduanjin group's executive function using the TMT improved significantly ($p = 0.05$) over that of the control group. However, Baduanjin had no significant effect on the Go/No Go reaction-time test and the correct-number test. Two studies on processing speed found that Baduanjin significantly improved DSC scores ($p = 0.0008$). One study on the effects of Baduanjin on visual-spatial ability found no significant difference between the Baduanjin and control groups. No serious adverse events were reported by any of the studies during the Baduanjin training. The findings suggest that Baduanjin is safe and effective for enhancing global cognitive function and memory in middle-aged and older adults, and may benefit other cognitive functions.

Yu, et al. (2020) [142]

Yu, et al. [142] reviewed 16 randomized control trials (RCTs) involving 1054 participants on the effect of Baduanjin on patients having mild cognitive impairment. They found that Baduanjin combined with conventional therapy produced significantly better results than conventional therapy alone after six months of treatment in terms of the Montreal Cognitive Assessment and Mini-Mental State Examination scores ($p < 0.00001$). There was also significant improvement in some dimensional scores on the Wechsler Memory Scale and the auditory verbal learning test scores after six months ($p < 0.05$).

Zheng, et al. (2020) [143]

Zheng, et al. [143] conducted a randomized control trial (RCT) on the effects of Baduanjin on cognitive function in patients with post-stroke cognitive impairment. It was a randomized, two-arm parallel controlled trial with allocation concealment and assessors blinding, and was conducted in the community center of Fuzhou city, China. Forty-one participants completed the study (22 Baduanjin and 19 control group), which consisted of 24 weeks of Baduanjin training, 3 days a week, 40 minutes per day. The control group maintained their original medication and rehabilitation regimen. Mean scores were significantly different between the two groups for global cognitive function, execution, memory (immediate recall), short-term and long-term delayed recognition, attention response time, and activities of daily living. The study concluded that regular Baduanjin training is associated with less loss of cognitive function in patients after a stroke.

Li, et al. (2021) [144]

Li et al. [144] studied the effects of four kinds of traditional Chinese exercise (TCE) on patients with cognitive impairment. They found that Baduanjin may be the most effective of the four exercises for significantly improving cognitive function, followed by tai chi, Liuzijue and qigong. They examined 27 randomized control trials (RCTs) involving 2414 patients with sample sizes ranging from 10-194. The groups consisted of 1133 in the TCE groups and 1281 in the control groups. The breakdown of the 4 TCE groups was as follows:

- i. Tai chi 644
- ii. Baduanjin 386
- iii. Liuzijue 75
- iv. Qigong 28

Participants had the following diagnoses:

- i. Dementia 4
- ii. Mild cognitive impairment 17
- iii. Cognitive impairment (CI) 6

The RCTs were conducted in the following countries:

- i. China 22
- ii. Thailand 1

- iii. USA 1
- iv. England 1
- v. France 1
- vi. Not disclosed 1

The intervention lengths varied from 7 weeks to 25 months, between 1 and 6 times per week, from 30 to 90 minutes per day. The scales used for cognitive assessment were the Mini-Mental State examination (MMSE), the Chinese version (CMMSE), and the Montreal Cognitive Assessment (MoCA). Pairwise comparisons of the four types of TCE found that all four had significant improvements in global cognition, as measured by the MMSE or MoCA. The p-values for the four TCEs were:

- i. Baduanjin $p < 0.00001$
- ii. Tai Chi $p < 0.00001$
- iii. Liuzijue $p = 0.003$
- iv. Qigong $p = 0.02$

Li, et al. [144] ranked the probability of the efficacy of the different interventions. Baduanjin was most likely to rank first (53%); tai chi was most likely to rank second (40%), etc. The full rankings, taken from the study, are given below. Li, et al. [144] cited several other studies that reached similar conclusions regarding the use of Baduanjin and tai chi to improve cognitive function [145-147] (Table 1).

Table 1: Rank Probability of the Efficacy of Different Interventions.

Intervention	Rank 1	Rank 2	Rank 3	Rank 4	Rank 5
Baduanjin	0.53	0.32	0.12	0.02	0.00
Control	0.00	0.00	0.06	0.38	0.56
Liuzijue	0.14	0.15	0.26	0.27	0.18
Qigong	0.22	0.13	0.20	0.20	0.26
Tai Chi	0.12	0.40	0.35	0.13	0.00

Concluding Comments

It is clear that Baduanjin and other traditional Chinese exercises can aid in the treatment of cognitive decline. Many studies have found that TCE can be beneficial in the treatment of many other ailments as well. Several studies are now in process that are examining the effects of Baduanjin on other ailments. The results of those studies are not yet available as of this writing. Chen, et al. [148] searched several data bases to find controlled trials that evaluated the effects of Baduanjin on postoperative rehabilitation of breast cancer patients. The goal of their study will be to offer a guideline for clinical workers. The results have not been published as of this writing. Dai, et al. [149] are searching several databases to determine the effectiveness of baduanjin on

the treatment of cervical spondylotic radiculopathy (CSR). Li, et al. [150] plan to conduct a systematic review and meta-analysis to determine whether Baduanjin is an effective intervention in post percutaneous coronary intervention (PCI) patients. Zou, et al. [151] are conducting a study, the aim of which is to evaluate the safety and effectiveness of Baduanjin for patients having cervical spondylosis (CS).

Conflict of Interest

There is no conflict of interest.

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