

# Clinical Efficacy Analysis of Breast Sanjie Decoction in the Treatment of Benign Breast Diseases

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**Abstract:** Objective: to analyze the clinical efficacy of breast Sanjie Decoction in the treatment of benign breast diseases. Methods: 68 patients with benign breast disease were selected in our hospital from January to December 2025 for data analysis, and were randomly divided into two groups, 34 patients in each group. The experimental group was treated with breast Sanjie decoction, while the control group was treated with external application of traditional Chinese medicine plaster, and the data between the two groups were compared. Results: compared with the control group, the total effective rate of the experimental group was significantly higher, the breast pain relief time, the softening and shrinking time of the nodules were significantly shorter, and the average maximum diameter of the breast nodules after treatment was significantly smaller,  $P < 0.05$ ; The maximum diameter and mean value of breast nodules before treatment were compared between the two groups,  $P < 0.05$ . Conclusion: the clinical efficacy of breast Sanjie Decoction in the treatment of benign breast diseases is high, the relief time of breast pain, the softening and shrinking time of nodules are significantly shorter, and the average value of the maximum diameter of breast nodules is significantly smaller, which is worthy of clinical promotion and use.

**Keywords:** Breast Sanjie Decoction; Benign breast disease; Clinical effectiveness

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## 1. Introduction

The main types of benign breast diseases in women are breast hyperplasia, breast fibroadenoma, breast cyst and so on. The clinical manifestations are breast pain, breast lumps, nipple discharge and so on. Its pathogenesis is related to liver depression and qi stagnation, phlegm and blood stasis, Chong Ren imbalance and other TCM pathogenesis, as well as female endocrine disorders, emotional disorders, irregular life schedule and other factors. Although it is a benign disease, it has a long course<sup>[1]</sup>. The disease is easy to repeat, which will affect the patient's physical health, and the patient's quality of life will be reduced due to breast discomfort and psychological concerns. In the clinical treatment of patients with benign breast disease, external application of traditional Chinese medicine patches is often used, and local percutaneous absorption is used to help patients relieve pain, but the effect is slow, and the effect of deep nodules is limited<sup>[2]</sup>. Therefore, this study proposes to use breast Sanjie Decoction for patients, which is consistent with the core pathogenesis of benign breast disease, and can conduct overall conditioning for patients. Its efficacy is to soothe the liver and regulate qi, dissipate phlegm and Sanjie, and promote blood circulation and remove blood stasis. In this study, 68 patients were selected to

analyze the clinical efficacy of breast Sanjie Decoction in the treatment of benign breast diseases.

## 2. Data and methods

### 2.1. Data

68 patients with benign breast disease were selected in our hospital from January to December 2025 for data analysis, and were randomly divided into two groups with 34 patients in each group. The experimental group was 22-48 ( $35.26 \pm 4.18$ ) years old, and the control group was 23-49 ( $35.85 \pm 4.34$ ) years old. Compared the two groups of data,  $P > 0.05$ .

Inclusion criteria: the diagnostic methods were breast ultrasound and molybdenum target examination, which were in line with the relevant diagnostic criteria in the diagnostic efficacy criteria of traditional Chinese medicine; The main clinical manifestations were breast pain, palpable breast nodules, clear nodule boundaries, and good activity; Informed consent.

Exclusion criteria: breast cancer; Severe heart, liver, kidney and other organ diseases; During pregnancy and lactation; Allergic to the drugs used in the research; Poor compliance, unable to complete the standard course of treatment.

### 2.2. Method

Both groups were treated with photoelectric ion therapy instrument, preset for 30min. The treatment head was placed at the treatment site of the patient, press the start button, and adjust the infrared radiation intensity combined with the patient's comfort, once a day, 30min once, for 2 weeks.

The control group was treated with external application of traditional Chinese medicine plaster. Before treatment, the patients' breast hyperplasia sites were scrubbed with warm water, and rutongkang plaster prepared with traditional Chinese medicine was applied. The ingredients were honeysuckle, borneol, Phellodendron amurense, frankincense, Coptis chinensis and rhubarb, once a day, for 2 weeks.

The experimental group was treated with mammary gland Sanjie decoction. The prescription was composed of Coix seed and malt 30g each, seaweed, Salvia miltiorrhiza and oyster 20g each, fried orange seed, Fritillaria thunbergii, peach kernel and Paeonia lactiflora 15g each, turmeric 12g, Bupleurum chinense and green peel 10g each. If breast pain was obvious, increase Paeonia lactiflora 30g, Chuanxiong 10g and jasmine 9g (lower back); If the infection is vigorous, add 15g of peony peel and 12g of fried Gardenia; if the nipple bleeds, add 3G of Radix notoginseng; if the stool is not smooth or dry, add 20g of rehmannia and 12g of Fructus aurantii Immaturus, decocted, 1 dose/D, for 2 weeks, and pay attention to the withdrawal of drugs during menstruation.

### 2.3. Observation indexes

- (1) The total effective rate of the two groups was compared. After treatment, the symptoms of mass and breast pain disappeared, and there was no recurrence of disease 3 months after drug withdrawal, which was judged to be cured; If the maximum diameter of the mass is reduced by 50% or more, and the breast pain disappears, it is effective; If the mass disappeared within 50% and the symptoms were alleviated, or if the mass disappeared more than 50% but the symptoms were not significantly alleviated, it was judged to be effective; In other cases, it is determined to be invalid. Total effective rate =  $100\% - \text{ineffective rate}$ .
- (2) The relief time of breast pain and the softening and shrinking time of nodules were compared between the two groups.
- (3) The maximum diameter of breast nodules in the two groups were compared.

### 2.4. Data statistics

Statistical SPSS 28.0 software was used to complete the data calculation. The measurement data were described by  $\bar{x} \pm s$ ,

t-test, count data were described by % and  $\chi^2$  test,  $P < 0.05$ , There was statistical significance.

### 3. Results

Compared with the control group, the total effective rate of the experimental group was significantly higher, the breast pain relief time and the softening and shrinking time of the nodule were significantly shorter, and the average value of the maximum diameter of the breast nodule after treatment was significantly smaller, and the data difference between the groups was statistically significant,  $P < 0.05$ ; There was no significant difference in the data between the two groups,  $P > 0.05$ .

**Table 1.** Comparison of the total effective rate of the two groups (%)

Group	Recovery	Markedly effective	Effective	Invalid	Total effective rate
Experimental group (n = 34)	15(44.12)	12(35.29)	5(14.71)	2(5.88)	32(94.12)
Control group (n = 34)	7(20.59)	10(29.41)	8(23.53)	9(26.47)	25(73.53)
$\chi^2$	-	-	-	-	5.3142
P	-	-	-	-	< 0.05

**Table 2.** Comparison of breast pain relief time and nodule softening and shrinking time between the two groups ( $\bar{x} \pm s$ , d)

Group	Breast pain relief time	Nodule softening and shrinking time
Experimental group (n = 34)	5.26 ± 1.15	14.82 ± 2.36
Control group (n = 34)	8.95 ± 1.62	22.56 ± 3.18
<i>t</i>	10.8302	11.3967
<i>P</i>	< 0.05	< 0.05

**Table 3.** Comparison of the mean maximum diameter of breast nodules between the two groups ( $\bar{x} \pm s$ , CM)

Group	Before treatment	After treatment
Experimental group (n = 34)	1.86 ± 0.53	0.62 ± 0.21
Control group (n = 34)	1.91 ± 0.56	1.15 ± 0.35
<i>t</i>	0.3781	7.5714
<i>P</i>	> 0.05	< 0.05

### 4. Discussion

Gynecological high-risk benign lesions include benign breast diseases. Breast pain and breast nodules are the core symptoms. Pay attention to both symptoms and signs in the treatment of patients' conditions. Clinical practice shows that<sup>[3-4]</sup> external application of traditional Chinese medicine plaster for patients has poor therapeutic effect. Therefore, this study

increased the use of oral formula breast Sanjie Decoction to help patients soothe the liver and regulate qi, resolve phlegm and Sanjie. This study fully confirmed that the application of this scheme is feasible.

The results of this study showed that the total effective rate of the experimental group was 94.12%, which was significantly higher than that of the control group ( $P < 0.05$ ), and the difference between the two groups was statistically significant. The results confirmed that the application of breast Sanjie Decoction in the treatment of benign breast diseases had significant clinical advantages, which could eliminate the symptoms of mass and breast pain, and the prevention and control effect of recurrence 3 months after drug withdrawal was more ideal. Analysis of the causes of the results: the rutongkang paste used in the control group has the effects of clearing heat and detoxification, local swelling and pain relief. It can only have an effect on the superficial breast tissue of patients, can not penetrate into the deep breast glands and ducts of patients, is difficult to melt the nodules formed by phlegm and blood stasis, can not regulate the blood and viscera of patients' whole body, and can not effectively solve the core pathogenesis of liver depression and qi stagnation. Therefore, the overall treatment effect is not ideal. Instead, the breast Sanjie decoction is used for patients, administered orally, and the effective components of the drug are absorbed through the gastrointestinal tract, and distributed throughout the body after entering the blood circulation. It can disperse and remove blood stasis for the local lesions of patients' breast, and can also regulate the liver, spleen and other visceral functions of patients. From the essence of the pathogenesis therefore, the root cause of benign breast disease can be solved, so the patients have a high cure rate and total effective rate. Both groups used photoelectric ion therapy instrument, whose infrared radiation can significantly improve the local microcirculation of patients' mammary glands<sup>[5]</sup>, providing auxiliary conditions for the drug effect, but the experimental group cooperated with the oral formula of systemic conditioning and local targeting effect, the treatment effect of patients was further amplified, and the total effective rate was significantly higher.

The relief time of breast swelling and pain in the experimental group was  $(5.26 \pm 1.15)$  d, and the softening and shrinking time of nodules was  $(14.82 \pm 2.36)$  d, which were significantly shorter than those in the control group ( $P < 0.05$ ). The data difference between the two groups was statistically significant. The results confirmed that the application of breast Sanjie Decoction in the treatment of benign breast diseases had faster onset and faster improvement of lesions. The analysis results show that: liver depression and qi stagnation lead to blood stasis in breast meridians and induce breast pain. In clinical treatment of patients' conditions, Bupleurum chinense and green bark can play the role of soothing liver and regulating qi in breast Sanjie decoction. The effect of Yujin is to promote qi and relieve depression, promote blood circulation and relieve pain. After compatibility, it can help patients quickly relieve liver depression and unblock breast meridians<sup>[6]</sup>, and fundamentally relieve the pain of patients. The external application medicated plaster used in the control group can only temporarily relieve the pain of patients through local drug effect, but can not solve the fundamental problem of blood stasis, so the pain of patients is slow to relieve and easy to repeat. The interaction of phlegm, blood stasis and Qi in the breast will lead to the formation of breast nodules. Breast Sanjie decoction is used for patients. Fritillaria thunbergii, oyster and seaweed are effective in resolving phlegm, softening hardness and resolving nodules. Salvia miltiorrhiza and peach kernel can help patients effectively promote blood circulation, remove blood stasis, unblock collaterals and eliminate symptoms. The clinical efficacy of Coix seed and wheat germ is to strengthen the spleen and remove dampness. The selection of the above medicinal materials involves three dimensions of resolving phlegm, removing blood stasis and regulating qi, which can be treated according to the pathological basis of the formation of nodules<sup>[7]</sup>, and the lesions can be treated quickly to promote the softening and absorption of nodules in patients. External application of medicated plaster for patients can only slightly soften the superficial nodules, so patients will significantly prolong the softening and shrinking time of nodules. In addition, the use of breast Sanjie Decoction for patients can be combined with specific symptoms, such as increasing the dosage of Paeonia lactiflora and adding Ligusticum chuanxiong Hort and Jasminum flower for patients with obvious breast pain, which can help patients with Qi and pain relief, and promote faster remission of symptoms and faster improvement of lesions by using individualized medication.

After treatment, the average value of the maximum diameter of breast nodules in the experimental group decreased to  $(0.62 \pm 0.21)$  cm, which was significantly less than that in the control group ( $P < 0.05$ ). The results confirmed that the

application of breast Sanjie Decoction in the treatment of benign breast diseases had a more significant ablation effect. Analysis of the causes of the results: in the prescription compatibility of breast Sanjie decoction, the principles of both attack and supplement and treating both symptoms and signs are strictly implemented. The use of core drugs can help patients target Sanjie, and adjuvants can take care of viscera conditioning. Oysters and seaweed are soft and firm. *Fritillaria thunbergii* is used to clear away heat and phlegm, disperse nodules and eliminate carbuncle. It is a drug for core ablation of nodules, and can have a direct effect on patients' lesions with phlegm and blood stasis. *Salvia miltiorrhiza* and peach kernel are used to activate blood circulation and remove blood stasis, which can unblock breast meridians, and promote the operation of blood stasis in patients. *Bupleurum*, green bark and *Curcuma* are used to soothe the liver and regulate qi, which can help patients smooth the Qi mechanism of the whole body. Fundamentally avoid the recurrence of phlegm and blood stasis in patients. The use of *Coix seed* for patients can promote the strengthening of spleen and eliminating dampness<sup>[8]</sup>, eliminate the endogenous phlegm and dampness, and reduce the pathological products of nodule formation in patients. The use of malt for patients can soothe the liver and stomach. The application of *Paeonia Alba* can help patients to nourish blood and soften the liver, take into account the spleen and stomach and liver yin, avoid the damage of aggressive cutting drugs to the healthy qi of patients, and ensure the safety of medication. At the same time, this prescription can complete syndrome differentiation and subtraction according to the patient's concurrent symptoms. For example, if the patient's infection is strong, it can increase the use of peony peel and fried gardenia, which has the effect of clearing heat and cooling blood. For example, patients with nipple bleeding can increase the use of *Radix notoginseng*, which can help patients remove blood stasis and stop bleeding. Patients with dry stool need to increase the use of *rehmannia* and *Fructus aurantii Immaturus*, which has the effect of nourishing yin and moistening intestines. This individualized medication scheme can accurately match each patient's condition and maximize the drug efficacy, so the experimental group can more effectively reduce the maximum diameter of breast nodules. The rutongkang patch used in the control group was fixed, which could clear away heat and toxin locally, and could not effectively treat the core pathogenesis of the nodules, so the effect of improving the objective indicators of breast nodules in the control group was poor.

This study has certain limitations. It belongs to a single center study, with a sample size of 68 cases, so the extrapolation of the results of this study is limited. This study was followed up to 3 months after the withdrawal of the drug, and did not further explore the long-term efficacy and recurrence prevention and control effect of breast Sanjie decoction. At the same time, this study did not carefully detect the levels of sex hormones, inflammatory factors and other indicators of patients before and after treatment, and did not further reveal the mechanism of breast Sanjie decoction from the perspective of modern medicine. In the follow-up study, a multi center, large-scale clinical study can be carried out to extend the follow-up time of patients and further verify the long-term clinical efficacy of breast Sanjie decoction. At the same time, combined with experimental research, the levels of serum estradiol, progesterone, prolactin and other sex hormone indicators and related inflammatory factors in patients before and after treatment can be carefully detected, and the mechanism of action can be revealed from the molecular level, which will provide more sufficient modern medical basis and promote the clinical promotion of the formula.

## 5. Conclusion

In conclusion, breast Sanjie decoction is highly effective in the treatment of benign breast diseases, with significantly shorter breast pain relief time, nodule softening and shrinking time, and significantly smaller mean maximum diameter of breast nodules, which is worthy of clinical promotion and use.

## Disclosure statement

The author declares no conflict of interest.

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