

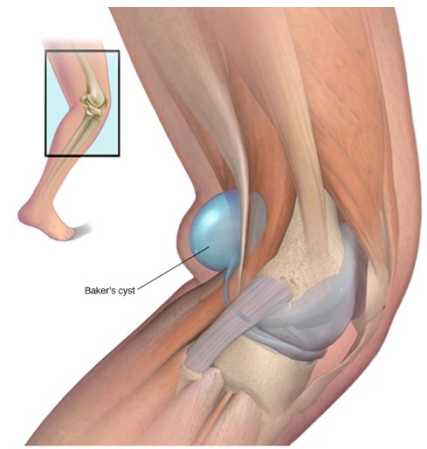
Cysts are closed capsule or sac-like structures, typically filled with a liquid, semisolid, or gaseous material. They can vary in size from microscopic to very large. Although the majority of cysts are benign, some cysts can be cancerous or precancerous. Cysts are common and can occur anywhere on the body. The most common causes of a cyst include infection, clogged sebaceous glands, or piercings. Other causes include tumors, genetic conditions, a fault in an organ of a developing embryo, a defect in the cells, chronic inflammatory conditions, blockage of ducts, or an injury that breaks a vessel.

The main symptom is a non-painful lump beneath the skin. Different types of cysts can appear in different areas of the body. A cyst is not a normal part of the tissue where it is located. They have a distinct membrane and are separated from nearby tissues.

### Baker's Cyst

A Baker's cysts, also called a popliteal cyst, is a fluid-filled cyst that causes a bulge behind the knee. A Baker's cyst can cause a feeling of tightness behind the knee and the pain usually gets worse when the knee is fully extended or during physical activity. Knee arthritis or a cartilage tear can lead to a cyst formation. This is because both conditions can lead to increased fluid production in the knee joint causing a Baker's cyst.

In some cases, a Baker's cyst causes no pain but in other cases it may cause symptoms of swelling behind the knee and/or leg, knee pain, and inability to fully extend the knee. Symptoms can become worse during physical activity or during long periods of standing.



Intraarticular knee disorders, such as osteoarthritis and meniscus tears, are commonly found in association with a Baker's cyst. There is a valvular opening of the posterior capsule that is a 1-way valve which allows fluid to pass into the gastrocnemius-semimembranosus bursa. It is common for effusion to occur in intraarticular knee disorders leading to the hypothesis that a Baker's cyst formation is likely occurring to provide protection for the knee. By transporting the excess fluid to the back of the knee decreases the hydraulic pressure within the knee through this 1-way valve. This supported by a study that showed that the volume of the Baker's cyst is associated with the size of the knee effusions. The cyst wall resembles synovial tissue with fibrosis as well as characterized by chronic inflammation.

Conventional treatment of Baker's cysts typically results in surgery. Although surgical excision can remove the cyst, there is a 63% reoccurrence rate since treatment for intraarticular knee disorders are difficult.

For more information, please reference the Baker's Cyst Protocol.

### Epidermoid Cyst

An epidermoid, or epidermal, cyst is a small, movable lump under the skin. It forms when surface skin cells move deeper into the skin and multiply. These cells form the wall of the cyst and secrete a soft, yellowish substance called keratin, which fills the cyst. Most epidermoid cysts are caused when epidermal cells move under the skin surface, or are covered over by it instead of shedding. These cells continue to multiply, like skin does normally. They then form a wall around themselves and secrete keratin.

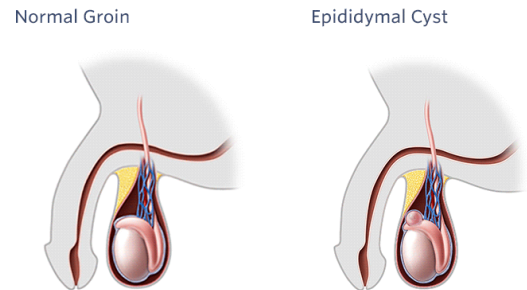
Symptoms of an epidermoid cyst can include a small, round bump under the skin, usually on the face, neck, or trunk and a tiny blackhead plugging the central opening of the cyst.

### Sebaceous Cyst

Sebaceous cysts form out the sebaceous gland which secretes sebum that coats the hair and skin. They are usually found on the scalp, face, neck, and back. These cysts can develop if the gland or duct becomes damaged or blocked. The main cause of this is usually trauma to the area. The trauma may be a scratch, wound, or skin condition such as acne. These types of cysts grow slowly and may occur weeks or months after the initial trauma. Other causes of sebaceous cysts include deformed duct, damage to the cells, or a genetic condition.

### Epididymal Cyst

An epididymal cyst (also called a spermatocele) is a fluid-filled sac that grows in the epididymis - a tightly coiled tube about 20 feet long where the sperm matures as it passes through. Epididymal cysts vary in size. They typically don't hurt, but they could cause pain if they grow too large. Epididymal cysts can be smooth. They might also be filled with a whitish, cloudy fluid. Sometimes, they hold sperm. Often, epididymal cysts develop for no specific reason at all. Sometimes they might happen when one of the tubes that transport and store sperm gets blocked.

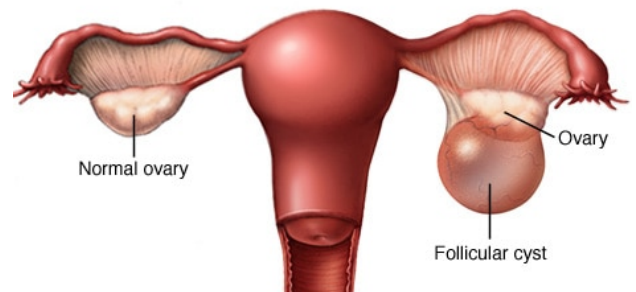


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In TCM, the cause of the cyst is due to Damp and Blood Stasis. Both of which would cause the narrowing or blockage of the epididymal duct and cause epididymal fluid discharge and the resulting cyst.

### Ovarian Cyst

Ovarian cysts are fluid-filled sacs that form in or on the surface of the ovaries. The most common type of ovarian cyst, called a functional cyst, form during the menstrual cycle. The most common types of functional cysts are either follicular cysts or corpus luteum cysts. Follicular cysts form when the follicle that usually releases an egg doesn't break open causing the follicle to continue growing into a cyst. Corpus luteum cysts form when the follicle sac that usually shrinks into a mass of cells called the corpus luteum doesn't shrink. Instead, the sac releases itself after the egg is released, and then fluid builds up inside. Other types of ovarian cysts which are less common are endometriomas, dermoids, and cystadenomas.



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Most ovarian cysts do not cause symptoms. In some cases, a cyst can cause symptoms of pressure, bloating, swelling, and pain in the lower abdomen. If a cyst ruptures, very severe symptoms occur such as sudden and sharp pain.

For more information, please reference the Women's Health Protocol.

### **Wellness Recommendation**

#### Baker's Cyst

The wellness recommendation for a Baker's cyst include the WHITEE Patch and LC Balancer. The WHITEE Patch addresses intraarticular knee disorders like osteoarthritis or a meniscus tear. The WHITEE Patch increases blood flow and lymphatic circulation and helps enhance chondrocyte ability to synthesize required collagen and proteoglycans to restore the damaged joint cartilage matrix, eliminate joint pain, and improve its functionality. It also helps reduce joint inflammation and matrix metalloproteinase activity to reverse joint degeneration. By converting the chondrocyte phenotype to its healthy state, the WHITEE Patch helps reverse the bone-on-bone conditions. The LC Balancer functions to open the smallest blood vessels to enhance whole body microcirculation and accelerate healing. The enhanced microcirculation also improves nutrient absorption from the digestive tract to assist in healing and combat the aging process.

Through addressing the disorder causing the effusion, the hydraulic pressure within the knee will be decreased. The WHITEE Patch should also be applied to the cyst area at the back of the knee to help the cyst wall which may lose its fibrotic tissue and excess synovial tissue by enhancing the activities towards cyst wall damage repair. The required WHITEE Patch size should match with the size of the cyst. 1-3 months of the protocol is required for significant improvement of the Baker's cyst.

Please refer to the Baker's Cyst Protocol for more information on patch placement.

#### Epidermoid Cyst

The wellness recommendation for an epidermoid cyst includes the WHITEE Patch and LC Balancer. The WHITEE Patch should be applied to the cyst area to help breakdown the cyst wall. The WHITEE Patch helps to enhance the breakdown of the built-up epidermal cells. Herbal ingredients in the WHITEE Patch are effective in breaking down the stasis. 1-3 months of the protocol is required for significant improvement.

If the patient doesn't experience symptom improvement in 1-2 weeks or if improvement reaches a plateau, the Gold Patch is recommended. The Gold Patch activates cell mediated immune function and helps dissolve cell masses due to abnormal cell growth or hardened plaque, scars, or protein deposits in the tissue. 1-3 months of the protocol is required for significant improvement.

#### Sebaceous Cyst

The wellness recommendation for a sebaceous cyst includes Acne Cream. This all-natural formula is a topically applied cream that helps to remove Heat on the skin. Acne Cream works to clear inflammation and infection on the skin to help resolve the blockage that is causing the cyst. The herbal ingredients in Acne Cream have been shown to reduce inflammation through inhibiting tumor necrosis factor-alpha as well as subsides swelling and discharge of pus, nourishes the skin, restrain bacteria, and promote skin metabolism.

If the cause of sebaceous cyst is due hormonal acne issues, then additional formulas may be required to prevent future cysts from occurring. For acne caused by an increase in sebum production due to menstruation, Sissy in combination with the Acne Cream is recommended. Sissy helps clear uterine heat and removes blood stagnation. Sissy help clear uterine inflammation and infections. Through decreasing the inflammatory state that occurs in PMS, Sissy can help to lower the production of acne causing bacteria. Patients can experience symptom improvement with 3 days of treatment before menses; and have sustained results with 4 weeks of treatment. If improvement plateaus with the use of Sissy, Brown and LC Balancer is recommended to improve the liver health to help balance the hormonal levels.

For acne caused by an increase in sebum production due to a liver deficiency, the wellness recommendation includes Brown and LC Balancer in combination with the Acne Cream. Brown helps improve liver Yin. Through improving liver health and repairing liver damage, Brown helps to enhance liver function and balance the hormonal levels. When the liver is function properly, it can metabolize the proper amount of estrogen, and therefore, increase SHGB production. This helps to lower the amount of free testosterone in the blood to decrease sebum production and the resulting acne. LC Balancer helps improve systemic microcirculation and improves kidney Yin. The increased circulation will help filter the excess testosterone out of the bloodstream. Patients can experience symptom improvement in the first 1-3 days and 1-2 weeks of the product is recommended or significant improvement.

Usage – Apply a layer of the cream to the affected area and wash off after 1-2 hours. Use once daily.

If the patient does not experience symptom improvement with Acne Cream, then Dermaticin B is recommended. Dermaticin B is an externally applied cream that removes damp heat and helps clear gram-negative and mycobacterial infections from the skin. Herbal ingredients in Dermaticin B have been shown to have strong antibacterial effects on gram-negative bacteria. Patients can experience symptom improvement in the first 1-3 days and 1-2 weeks of the product is recommended or significant improvement.

Usage – Apply a layer of the cream to the affected area and massage into skin while blowing warm air using a hair dryer. May need to apply additional cream 3-5 times. Wash off after 20 min. Use once daily.

### Epididymal Cyst

The wellness recommendation for an epididymal cyst includes Epididym. Epididym clears Heat and Blood Stasis in the epididymal duct. The herbal ingredients work to clear inflammation and pathogens in the epididymis which may have triggered the cyst formation. LC Balancer, Brown, and Xcel are also recommended to support the liver and kidneys to expel the excess waste. Patients can experience symptom improvement in 2 weeks and 4-6 weeks of the protocol is recommended for significant improvement.

### Ovarian Cyst

The inability to initiate apoptosis to remove the damaged cells occurring in ovarian cysts is called a Cold Uterus condition in TCM. The recommendation for ovarian cysts includes MayMay, Brown, and LC Balancer. MayMay warms up the uterus and improves blood supply to the female reproductive system and increases metabolism which helps to dissolve cyst. As the cyst dissolves there can be an increased amount of waste. Brown and LC Balancer will help to support the liver and kidneys to expel the excess waste. Patients should experience symptom improvement with reduced cyst size in 1 month. For mild cases, 1-2 months of the protocol is recommended. For severe cases, 3-6 months of the protocol is recommended for significant results.

If the trigger for the formation of the ovarian cyst is pathogens such as mycobacteria, Genecin, Mycocin, U-2, and Sissy with Brown and LC Balancer are required. Genecin helps to clear stasis in the uterus and dissolve the granulomas in the female reproductive tract. Mycocin helps clear infections by mycobacteria in the urinary and genital tracts. U-2 helps clear infections by gram-negative bacteria in the female reproductive system. Sissy helps reduce inflammation. Brown and LC Balancer will help to support the liver and kidneys to expel the excess waste.

Patients should experience symptom improvement with reduced cyst size in 1 month. For mild cases, 1- 2 months of the protocol is recommended. For severe cases, 3-6 months of the protocol is recommended for significant results.

## **Selected Case Studies**

### Case 1: Resolvent of Epididymal Cyst

*Dr. Christopher Lewis, DC, TN*

A 67-year-old patient was diagnosed with an epididymal cyst that caused a constant dull pain and prevented him from biking as he would like. The options presented to the patient were surgery, in which it could grow back, or an injection which may cause other issues.

Instead, he started using Epididym from Wei Laboratories recommended by Dr. Lewis. After only 2 weeks, the patient reported an 80% decrease in the size of the cyst and had absolutely no pain, even while biking. After another two weeks, the cyst is undetectable by touch and he is shocked at how well the formula worked. He is back to exercising and biking at 100%.

### Case 2: Successful Reduction in Uterine Fibroids

*Li Liu, Lac, Atlanta, GA*

A 49-year-old female patient was diagnosed with multiple uterine fibroids. The patient had two on her left side and one on her right, each the size of a grapefruit. They were very visible when she was lying down and she had frequent urination and suffered from lower back pain.

I started her with nutrition response testing and found some food sensitivity. This led to a diet change and whole food supplements, as well as, I performed acupuncture twice a week for a couple of months. I also started her on Wei Laboratories herbs including MayMay capsules. She had an ultrasound performed 5 to 6 months later which

showed that all her fibroids went down to half of the size they were at the start of treatment. When the patient was lying down you could no longer see the fibroids and they were difficult to find even when palpating the area. The patient is very pleased with her results.

### Case 3: Increased ROM in Bakers Cyst Patient

*Marla Evans, NT, TX*

When Marla was younger, she tore her medial meniscus and had it removed. It is very common for patients who have had meniscus injuries to have Baker's cysts develop later in life, this was the case for Marla. As the cyst began to grow, Marla gradually lost her ability to bend her knee and walking was excruciatingly painful. To treat the swelling in her knee, she sought out cold laser treatment. On her best days, Marla was only able to bend her knee ~80°. Long walks or any exercise on foot for Marla was out of the question.

In Marla's search for alternative treatments, she found Wei Labs. The recommended treatment was medium WHITEE Patches for the medial side of the knee and medium WHITEE Patches for the posterior side of the knee as well as the full dosage of LC Balancer. In the first 3 days of treatment, the cyst decreased so that she was able to bend her knee 90°, a 10° increase in Range of Motion (ROM). On top of the improved flexibility, Marla's pain from walking was reduced.

Accompanied by Wei Lab patches and herbal intake formulas, Marla has been going to physical therapy. After 4 weeks of treatment, Marla had a 20% improvement in her ROM. The normal ROM for a knee is 135°. Before Marla started her treatment, she had 60% knee movement at around ~80°, now she has 80% knee movement at 108° with the size of the cyst reduced by 99%. At the end of Marla's treatment, she was ecstatic with her results and is going to start treating an injury in her other leg.

	Prior to Protocol	Start of Protocol	Post-Protocol
ROM (Marla)	<80°	>90°	108°
ROM (Control)	135°	135°	135°
Size of Cyst (%)	100	10	1