Medicine Insights

Review

Theoretical Elucidation and Clinical Application Exploration of Acupuncture-Moxibustion in "Preventive Treatment of Disease"

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Abstract: The concept of "preventive treatment of disease" constitutes the core of traditional Chinese medicine (TCM) preventive thought, emphasizing proactive management before disease onset to maintain health and well-being. With the global shift toward the bio-psycho-social medical model and increasing public health demands, this concept has garnered significant scholarly and clinical attention. Acupuncture-moxibustion, as an integral component of TCM, exhibits unique advantages in the domain of "preventive treatment of disease" due to its holistic perspective and bidirectional regulatory characteristics. This paper systematically elaborates the core principles of "prevention before disease onset," namely conforming to nature, regulating the mind, and harmonizing yin and yang. It provides an in-depth exploration of specific acupuncture-moxibustion modalities, including winter-disease-summer-treatment (medicinal moxibustion), acupoint catgut embedding, and medicinal spread moxibustion, along with their proposed mechanisms of action. By integrating clinical studies and basic experimental evidence, this paper validates the scientific connotation and clinical value of acupuncture-moxibustion in preventive healthcare. Furthermore, the review discusses the potential of these modalities in addressing sub-health conditions and chronic disease prevention within the context of the western regions of China. The findings aim to provide a comprehensive reference for the scientific application and broader promotion of acupuncture-moxibustion within modern healthcare systems, bridging traditional wisdom with contemporary evidence-based practice.

Keywords: acupuncture-moxibustion; preventive medicine; traditional chinese medicine; disease prevention; clinical application

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1. Introduction

The philosophical principle of 'preventive treatment of disease' is deeply rooted in classical Chinese medical literature, particularly articulated in foundational texts such as the Huangdi Neijing, where it is emphasized that sagacious practitioners prioritize health preservation over reactive disease management [1]. This perspective underscores a fundamental shift in medical orientation—from focusing narrowly on pathology after onset to cultivating physiological equilibrium and resilience prior to clinical manifestation. The analogy of digging a well only after thirst arises serves to illustrate the inherent inefficiency of delayed therapeutic responses, thereby reinforcing the ethical and practical imperative of anticipatory care. In modern biomedical frameworks, this paradigm aligns with growing recognition of the insufficiency of curative strategies alone; instead, sustained health outcomes increasingly depend on early risk identification, functional optimization, and proactive modulation of physiological homeostasis. Subhealth—a state characterized by persistent non-specific symptoms without definitive organic pathology—has emerged as a critical transitional phase between wellness and disease.

Epidemiological surveys indicate that a substantial proportion of the population exhibits subhealth features, making this cohort especially amenable to preventive strategies grounded in traditional medical theory. Acupuncture-moxibustion, as a core modality within the Chinese medical system, operates through systematic engagement with meridian pathways and acupoint specificity. It facilitates endogenous regulatory mechanisms, promotes harmonious circulation of qi and blood, supports dynamic yin-yang balance, and strengthens physiological adaptability. Rather than targeting isolated symptoms or pathogenic agents, this approach engages multiple physiological systems concurrently across the continuum of disease development—from preclinical dysregulation to established dysfunction. This paper undertakes a comprehensive analysis of the theoretical underpinnings of acupuncture-moxibustion in preventive contexts, critically evaluates its application protocols in clinical settings, and synthesizes current empirical findings to clarify its mechanistic plausibility and translational potential for public health advancement.

The principle of "prevention before disease onset" constitutes the foundational and most proactive dimension of preventive healthcare in traditional medical frameworks, emphasizing anticipatory health maintenance rather than reactive intervention [2–4]. This approach prioritizes the cultivation and preservation of healthy qi—the vital functional energy that sustains physiological integrity—through regulated lifestyle practices including balanced diet, moderate physical activity, emotional equilibrium, seasonal adaptation, and mindful daily routines [5, 6]. By reinforcing constitutional resilience, it aims to sustain dynamic homeostasis, conceptualized as yin-yang balance, wherein opposing yet complementary physiological forces remain harmoniously coordinated across organ systems, metabolic processes, and mental-emotional states. Such equilibrium enhances the body's intrinsic capacity to detect, neutralize, and adapt to internal perturbations and external pathogenic influences—including climatic extremes, environmental toxins, and psychosocial stressors—before they manifest as clinically identifiable pathology. Consequently, this paradigm shifts the focus from disease management to lifelong wellness optimization grounded in individualized, evidence-informed self-care.

1.1. Conforming to Nature and Adapting to the Four Seasons

The concept of correspondence between heaven and humans reflects a foundational worldview in traditional Chinese medicine, emphasizing the intrinsic, dynamic interrelationship between human physiological and psychological functions and the cyclical patterns of the natural environment. This perspective holds that human life is not isolated but continuously shaped by cosmic forces—particularly the rhythmic transformations of yin and yang, the five phases, and the seasonal progression governed by solar terms. As articulated in classical medical texts, human beings originate from the vital qi of heaven and earth and are fundamentally regulated by the structural and functional laws inherent in the four seasons. Consequently, health preservation hinges on synchronizing daily behavioral rhythms—including sleep-wake cycles, dietary intake, physical activity, and emotional regulation—with the prevailing energetic qualities of each season. In spring, when yang qi begins to ascend and expand, practices such as rising with the light and engaging in gentle outdoor movement support hepatic free flow and the renewal of vitality [7]. During summer's peak yang phase, extended daylight hours invite greater outward expression and metabolic activity, requiring moderation in exertion to prevent depletion. In autumn, as yin begins to consolidate and the atmosphere turns drier and cooler, early rest and inward focus help safeguard lung qi and mental clarity. Winter, marked by maximal yin and concealed yang, calls for conserving energy through adequate rest, warmth, and nourishing, warming foods. This systematic seasonal adaptation operationalizes the principle of nurturing yang during the expansive seasons and nourishing yin during the contracting ones, thereby sustaining homeostatic resilience. Contemporary chronobiological investigations have further substantiated these time-honored insights, revealing robust circadian and circannual oscillations in core body

temperature, cortisol secretion, melatonin rhythms, immune cell trafficking, and inflammatory cytokine profiles—all of which demonstrate measurable alignment with seasonal environmental cues and corroborate the physiological plausibility of seasonal health cultivation strategies.

1.2. Tranquility and Emptiness, Spirit Retention

Excessive or prolonged emotional fluctuations may adversely affect the functional balance of internal organs and the circulation of qi and blood. Classical medical texts emphasize that cultivating a tranquil and serene mental state—free from excessive preoccupations, agitation, or unbridled desires—supports the harmonious flow of genuine qi and stabilizes the spirit within the body [8]. This foundational principle underscores the importance of psychological composure as a vital component of health preservation. From a contemporary physiological perspective, sustained states of heightened mental arousal, including persistent worry, low mood, and chronic mental strain, have been associated with measurable alterations in autonomic nervous system activity, hormonal secretion patterns, and immune cell responsiveness. These interrelated changes can collectively diminish physiological resilience and compromise homeostatic regulation. Empirical evidence further indicates that individuals reporting long-term exposure to elevated psychological demands exhibit statistically significant increases in the incidence of metabolic dysregulation, including insulin resistance, dyslipidemia, and central adiposity [9, 10]. A large-scale prospective investigation involving over fifteen hundred participants confirmed this association, revealing a substantially higher likelihood of developing metabolic syndrome among those with enduring psychological burden. Consequently, fostering emotional stability, practicing mindful awareness, and sustaining balanced mental habits are integral dimensions of proactive health maintenance—serving as key internal mechanisms that align with the traditional concept of preventing disease before its emergence.

1.3. Moderation in Diet and Regularity in Daily Living

Dietary habits play a pivotal role in maintaining physiological equilibrium within the human body. Excessive intake—whether in terms of caloric volume, flavor intensity, or nutritional composition—can impair the functional integrity of the spleen and stomach, two central organs governing digestion and transformation in traditional medical theory. Overconsumption of rich, greasy, or heavily processed foods may promote the accumulation of pathological substances such as phlegm-dampness and damp-heat, both of which are recognized as key contributors to the onset and progression of chronic disorders. Similarly, irregular patterns of daily activity—including inconsistent sleep-wake cycles, erratic meal timing, and unbalanced physical exertion—can gradually deplete vital qi and blood, disturb the natural circadian regulation of yin-yang dynamics, and compromise the coordinated operation of visceral systems. Classical texts emphasize that sustained strain on specific bodily functions—such as prolonged visual focus, extended periods of recumbency, sedentary posture, upright immobility, or continuous ambulation—may respectively affect blood, qi, muscular tissue, skeletal structure, and tendinous integrity. Therefore, conscious regulation of dietary diversity and moderation across the five flavors, adherence to consistent daily rhythms, and judicious management of physical and mental effort collectively form the cornerstone of preventive health cultivation. Contemporary biomedical evidence further supports these principles, demonstrating that nutritionally balanced diets significantly lower the incidence of metabolic, cardiovascular, and immunological disorders, while structured daily routines contribute substantially to neuroendocrine stability, cellular repair mechanisms, and optimal immune surveillance capacity [11].

1.4. Yin Balance and Yang Stability Ensure Vitality

Yin-yang equilibrium represents the foundational physiological principle underpinning health and functional integrity in traditional Chinese medicine theory. This dynamic interrelationship reflects the complementary, interdependent, and mutually

regulating nature of opposing yet inseparable forces—yin embodying substance, nourishment, coolness, and inward containment, while yang signifies function, activity, warmth, and outward expression. Optimal vitality arises not from static uniformity but from a continuously adjusted, responsive balance wherein yin essence is adequately stored and nourishing, and yang qi remains robust, adaptive, and protective—enabling coordinated organ function, stable mental-emotional states, resilient immunity, and efficient metabolic regulation. When this equilibrium shifts—whether through constitutional predisposition, environmental stressors, dietary imbalances, emotional strain, or irregular lifestyle patterns—the organism's self-regulatory capacity diminishes, leading to pathological manifestations ranging from fatigue and insomnia to inflammation and metabolic dysregulation. Consequently, preventive health strategies emphasize alignment with natural circadian and seasonal rhythms, cultivation of mental tranquility, moderation in physical exertion and sensory stimulation, and mindful attention to dietary quality and timing—all oriented toward sustaining this intrinsic regulatory harmony. Harmonizing yin and yang thus serves not merely as a therapeutic intervention but as the core philosophical and operational framework guiding health preservation, disease prevention, and long-term physiological resilience [12].

2. Specific Applications of Acupuncture-Moxibustion in "Prevention Before Disease Onset"

Acupuncture-moxibustion serves as a foundational therapeutic approach within traditional Chinese medicine for realizing the principle of 'prevention before disease onset.' By precisely stimulating specific acupoints along meridian pathways, this modality induces comprehensive physiological regulation—facilitating smooth flow of qi and blood, restoring dynamic equilibrium between yin and yang, reinforcing the body's inherent functional integrity, and promoting homeostatic resilience [13]. Rather than targeting pathogens directly, its preventive mechanism operates through systemic modulation of neuroendocrine-immune networks, autonomic nervous system activity, and cellular metabolic processes. Contemporary research has increasingly validated these effects using objective biomarkers, including immunoglobulin levels, cytokine profiles, heart rate variability, and hypothalamic-pituitary-adrenal axis responsiveness. Clinical trials have demonstrated consistent improvements in subclinical indicators such as fatigue, sleep quality, digestive regularity, and stress-related physiological parameters among asymptomatic or pre-disease populations. Moreover, longitudinal observational data suggest that regular acupuncture-moxibustion intervention correlates with reduced incidence of common chronic conditions—including metabolic syndrome, mild cognitive decline, and functional gastrointestinal disorders—particularly in middle-aged and elderly cohorts. This integrative, physiology-oriented paradigm aligns closely with modern concepts of health promotion and early risk mitigation, positioning acupuncture-moxibustion as a scientifically grounded component of proactive, personalized wellness strategies.

2.1. Time-Appropriate Intervention: Medicinal Moxibustion (Winter Disease Summer Treatment, Winter Disease Winter Prevention)

Medicinal moxibustion—also referred to as blistering moxibustion or herbal plaster application—represents a distinctive modality within Traditional Chinese Medicine that synthesizes chronobiological principles with external therapeutic techniques. It operationalizes the foundational TCM concept of preventive healthcare by aligning therapeutic timing with natural seasonal rhythms, particularly emphasizing the strategic utilization of climatic and physiological peaks and troughs. This approach is most systematically embodied in two complementary protocols: the summer-based strategy for winter-prone conditions and the winter-based reinforcement protocol, both grounded in classical theoretical frameworks concerning the dynamic interplay between human physiology and environmental qi.

The summer-based strategy, commonly termed 'winter disease summer treatment', draws upon the classical doctrine articulated in the Suwen's Siqi Tiaoshen Dalun, which advocates nurturing yang qi during the spring and summer seasons when atmospheric yang is naturally abundant. This method specifically targets chronic deficiency-cold syndromes—such as recurrent chronic bronchitis, persistent bronchial asthma, and perennial allergic rhinitis—that typically manifest or worsen during cold-dominant periods. The therapeutic window coincides with the traditional 'dog days' of summer, a period marked by maximal ambient yang qi and correspondingly open cutaneous interstices, thereby enhancing transdermal bioavailability. During this phase, finely ground herbal preparations composed of acrid-warm, phlegm-resolving, and meridian-activating substances—including white mustard seed, Asarum heterotropoides, and Euphorbia kansui—are applied topically to key acupoints such as Feishu (BL13) and Dingchuan (EXB1). The combined thermal, pharmacological, and neurocutaneous stimuli promote systemic warming, strengthen constitutional yang, disperse latent cold-damp pathogens retained from prior seasons, and restore unimpeded flow through the lung and bladder meridians. Clinical observations indicate that this integrated stimulation supports pulmonary functional stability, modulates autonomic nervous system balance, and contributes to sustained immunoregulatory homeostasis. In pediatric populations, controlled comparative studies have reported favorable outcomes in asthma remission management, with measurable reductions in pro-inflammatory cytokine profiles—including tumor necrosis factor-alpha, interleukin-4, interleukin-6—and immunoglobulin E concentrations following repeated applications. Furthermore, mechanistic investigations suggest that medicinal moxibustion exerts multi-level regulatory influence in allergic rhinitis: it attenuates parasympathetic overactivity to normalize nasal glandular secretion; stimulates neuropeptide release—including calcitonin gene-related peptide and vasoactive intestinal peptide—to mitigate vasomotor hyperreactivity; and fine-tunes neuroendocrine-immune crosstalk by modulating substance P expression, adrenergic receptor sensitivity, and downstream signaling cascades involving Th2 polarization and mast cell degranulation. These interrelated pathways converge to suppress localized mucosal inflammation and reduce symptom burden without systemic immunosuppression.

The winter-based reinforcement protocol—often described as 'winter disease winter prevention'—functions not as an isolated intervention but as a temporally sequenced complement to the summer regimen. It is administered during the coldest nine-day period following the winter solstice, known traditionally as the 'Sanjiu' period, when environmental yin qi reaches its zenith and human yang qi is physiologically most subdued. This phase represents a critical vulnerability window for respiratory and other chronic conditions characterized by cold-damp accumulation and yang deficiency. Acupoint application during Sanjiu consolidates prior therapeutic gains, reinforces the body's intrinsic capacity to retain warmth, and enhances thermoregulatory resilience through synergistic modulation of mitochondrial biogenesis, brown adipose tissue activation, and hypothalamic-pituitary-adrenal axis tone. The dual-phase strategy—summer initiation followed by winter consolidation—establishes a longitudinal therapeutic rhythm that mirrors the cyclical nature of pathogenic influences and physiological adaptation. Mechanistically, medicinal moxibustion operates through three interdependent dimensions: first, the pharmacokinetic dimension, wherein herbal constituents undergo cutaneous absorption and exert localized or systemic effects either directly on target tissues or via meridian-mediated distribution; second, the dermatoneuroimmunological dimension, wherein controlled cutaneous irritation initiates a regulated inflammatory response that activates dendritic cells, modulates macrophage polarization toward anti-inflammatory phenotypes, and recalibrates cytokine networks; and third, the neuroacupuncture dimension, wherein acupoint stimulation generates afferent neural signals transmitted through spinal and cranial pathways to influence brainstem nuclei, limbic structures, and visceral autonomic centers, thereby producing holistic regulation of cardiopulmonary, endocrine, and immune functions. Collectively,

these mechanisms support long-term functional stabilization rather than transient symptomatic relief, reflecting the TCM paradigm of treating root and branch simultaneously across temporal and physiological scales.

2.2. Acupoint Catgut Embedding Therapy

Acupoint catgut embedding therapy is a specialized modality within traditional Chinese medicine that involves the precise implantation of absorbable surgical sutures—typically composed of purified collagen derived from animal sources—into selected acupoints, including but not limited to Zusanli (ST36) and Guanyuan (CV4). These biodegradable materials function as sustained-release physical stimuli: as they undergo gradual enzymatic softening, hydrolytic decomposition, and physiological absorption over days to weeks, they elicit a prolonged, low-intensity mechanical and biochemical stimulation at the acupoint site. This persistent stimulus mimics the cumulative effect of repeated manual acupuncture needling, thereby promoting continuous activation of meridian qi circulation, facilitating the unimpeded flow of qi and blood through the channel system, and supporting systemic homeostasis. Clinically, this mechanism contributes to reinforcing constitutional deficiencies, alleviating pathological excess conditions, regulating visceral functional activity—including gastrointestinal motility, endocrine secretion, and immune surveillance—and restoring the dynamic balance between yin and yang. Compared with conventional acupuncture, this technique offers distinct operational advantages: extended therapeutic duration per session, reduced frequency of clinical visits, improved long-term adherence due to its convenience and minimal procedural burden, and enhanced feasibility for outpatient-based chronic disease management and subhealth state modulation. Empirical evidence supports its application in conditions such as chronic gastrointestinal dysfunction, metabolic dysregulation associated with overweight and obesity, stable-phase respiratory disorders, and persistent fatigue-related syndromes. Clinical trials have demonstrated measurable improvements in anthropometric parameters—including body weight, body mass index, and waist circumference—as well as favorable shifts in metabolic biomarkers such as fasting glucose, lipid profiles, and adipokine signaling dynamics. Additional investigations highlight its capacity to ameliorate digestive mucosal integrity through multifaceted pathways: modulation of gastric mucus secretion and bicarbonate production, enhancement of microcirculatory perfusion in the gastric wall, stabilization of intracellular signal transduction cascades such as PI3K/Akt and MAPK, suppression of pro-inflammatory cytokine expression, attenuation of oxidative stress markers like malondialdehyde and reactive oxygen species, and regulation of apoptosis-related proteins including Bcl-2 and caspase-3. These integrated physiological effects collectively underpin its preventive and regulatory role in digestive health maintenance.

2.3. Heavy Moxibustion for Warming and Unblocking

Medicinal spread moxibustion is a refined therapeutic modality evolved from classical indirect moxibustion techniques—including ginger-separated and salt-separated moxibustion—and synergistically integrates the thermal properties of moxa, the pharmacological actions of powdered Chinese medicinal substances, and the regulatory functions of meridian-acupoint systems. In clinical application, finely ground herbal powders are uniformly applied over designated treatment zones—most commonly along the Governing Vessel on the dorsal midline, the Conception Vessel on the anterior midline, or at key Back-Shu and Front-Mu acupoints—followed by a thin layer of insulating medium such as ginger paste, garlic paste, or other biocompatible thermal buffers. Moxa cones are then placed atop this layered configuration and ignited under controlled conditions [14, 15]. The sustained thermal energy generated during combustion facilitates deep penetration of warmth into underlying tissues, thereby promoting local microcirculation, enhancing transdermal absorption of active herbal constituents, and stimulating neurovascular and immunomodulatory responses. This integrated mechanism supports multiple physiological effects: warming yang qi and dispelling pathogenic cold, activating the flow of qi and invigorating blood circulation, unblocking

collaterals to relieve pain and stiffness, and reinforcing the body's inherent regulatory capacity. Due to its wide anatomical coverage, high-intensity stimulation, and prolonged thermal duration, medicinal spread moxibustion delivers robust warming and channel-unblocking effects. It is especially indicated for conditions rooted in yang deficiency accompanied by cold congealing, or qi stagnation coexisting with blood stasis—such as early-stage spondyloarthropathies, chronic inflammatory joint disorders, and constitutional patterns characterized by persistent coldness, fatigue, and diminished functional resilience. The Governing Vessel, recognized in traditional medical theory as the 'sea of yang meridians,' governs the yang qi of the entire body; therefore, applying spread moxibustion along this vessel—commonly termed 'long-snake moxibustion'—produces pronounced tonification of yang qi and contributes meaningfully to strengthening physiological homeostasis and adaptive capacity.

Contemporary research employing metabolomic profiling has revealed that long-snake moxibustion induces measurable shifts in fecal metabolic signatures among individuals with spondyloarthropathies, suggesting modulation of gut microbiota–host metabolic crosstalk. Observed alterations include normalization of metabolites involved in riboflavin metabolism, sphingolipid biosynthesis, aromatic and branched-chain amino acid pathways, and mitochondrial energy metabolism via the citric acid cycle—all of which correlate with reduced systemic inflammation and improved clinical outcomes. Beyond rheumatic conditions, long-snake moxibustion has demonstrated consistent therapeutic benefits across diverse functional disorders [16–18]. Clinical observations indicate marked improvement in subjective sleep parameters and daytime alertness among patients presenting with insomnia associated with heart-spleen disharmony, with outcomes comparable to or exceeding those achieved with conventional herbal formulations administered orally. Additional evidence supports its utility in managing chronic fatigue syndromes characterized by persistent exhaustion and diminished recovery capacity, gastrointestinal dysfunctions including functional dyspepsia and irritable bowel syndrome subtypes, and various musculoskeletal and neuropathic pain syndromes. These collective findings underscore the modality's versatility and reinforce its role within the broader framework of preventive healthcare—emphasizing early regulation of physiological imbalance before overt pathology manifests. Its capacity to simultaneously influence autonomic nervous system tone, endocrine responsiveness, and immune surveillance positions it as a multimodal intervention aligned with integrative principles of health maintenance and functional restoration.

3. Conclusion

The theory and practice of acupuncture-moxibustion in the context of preventive health strategies are grounded in foundational principles of traditional East Asian medicine, particularly its emphasis on systemic integration, dynamic equilibrium, and individualized responsiveness to physiological and environmental change. Rather than functioning solely as a reactive therapeutic modality, acupuncture-moxibustion embodies a proactive paradigm of health cultivation—oriented toward sustaining homeostatic resilience before clinical manifestations emerge. Its preventive mechanisms operate through precise neuromodulatory, neuroendocrine, and bioenergetic effects elicited by stimulation of acupoints, thereby enhancing autonomic regulation, optimizing circulatory and metabolic function, and reinforcing immunological surveillance. These physiological adjustments collectively support the maintenance of internal harmony—characterized by balanced qi and blood flow, stable yin-yang interaction, and coherent organ system coordination. Complementary modalities such as medicinal moxibustion, acupoint catgut embedding, and medicated topical moxibustion offer differentiated temporal profiles and physiological targets: some provide sustained modulation over weeks, others deliver acute regulatory signals, and still others integrate herbal pharmacokinetics with thermal and mechanical stimulation. In contemporary public health landscapes marked by escalating burdens of noncommunicable diseases and demographic shifts toward older populations, integrating these time-tested approaches into evidence-informed preventive

frameworks presents a promising avenue for diversifying health promotion strategies. Such integration may contribute meaningfully to evolving models of care that prioritize functional capacity, adaptive reserve, and longitudinal wellness—moving beyond episodic disease management toward continuous, person-centered health optimization. Further rigorous translational research is warranted to clarify dose-response relationships, standardize application protocols, and elucidate underlying biological pathways across diverse population subgroups.

References

1. G. Li et al., "Subhealth: definition, criteria for diagnosis and potential prevalence in the central region of China," *BMC Public Health*, vol. 13, no. 1, p. 446, 2013.
2. M. R. Irwin and S. W. Cole, "Reciprocal regulation of the neural and innate immune systems," *Nature Reviews Immunology*, vol. 11, no. 9, pp. 625–632, 2011.
3. W. C. Willett and M. J. Stampfer, "Current evidence on healthy eating," *Annual Review of Public Health*, vol. 34, no. 1, pp. 77–95, 2013.
4. W. C. Kuo et al., "The association between psychological stress and metabolic syndrome: A systematic review and meta-analysis," *Obesity Reviews*, vol. 20, no. 11, pp. 1651–1664, 2019.
5. W. A. N. G. Hua and F. X. Liang, "Analysis on the features of preventive treatment with acupuncture and moxibustion," *Journal of Traditional Chinese Medicine*, vol. 28, no. 4, pp. 281–285, 2008.
6. J. Yan et al., "Function of moxibustion therapy in disease prevention and healthcare," *Journal of Acupuncture and Tuina Science*, vol. 8, no. 4, pp. 218–221, 2010.
7. X. U. Jing, "Exploration on the feasibility of moxibustion in prevention and treatment of COVID-19 from the perspective of modern medical mechanism," *World Journal of Acupuncture-Moxibustion*, vol. 30, no. 2, pp. 81–84, 2020.
8. W. A. N. G. Fang and H. A. O. Yang, "Understanding of guidance for acupuncture and moxibustion interventions on COVID-19 issued by CAAM," *World Journal of Acupuncture-Moxibustion*, vol. 30, no. 1, pp. 1–4, 2020.
9. Z. Yaoa and X. Guob, "The Application of Moxibustion in the Concept of 'Preventive Treatment'."
10. Y. Du et al., "Pre-moxibustion and moxibustion prevent Alzheimer's disease," *Neural Regeneration Research*, vol. 8, no. 30, pp. 2811–2819, 2013.
11. Y. Xin et al., "A brief analysis of clinical studies on acupuncture moxibustion and massage in health preservation," *Longhua Chinese Medicine*, vol. 3, 2020.
12. D. Liangyue et al., *Chinese Acupuncture and Moxibustion*, Tradit Med Asia, 2001, p. 75.
13. C. Liu et al., "Discussion on the advantages of acupuncture and moxibustion in the prevention and treatment of COVID-19," *Journal of Hainan Medical University*, vol. 26, no. 20, 2020.
14. M. Xia et al., "Moxibustion for COVID-19: a systematic scoping review," *Acupuncture and Herbal Medicine*, vol. 2, no. 3, pp. 162–171, 2022.
15. X. Y. Lyu et al., "Evidence map of systematic reviews on acupuncture and moxibustion for prevention and management of cancer-related conditions," *World Journal of Acupuncture-Moxibustion*, vol. 35, no. 4, pp. 290–302, 2025.
16. S. P. Zhu et al., "Effects of preventive acupuncture and moxibustion on fat accumulation, blood lipid, and uterus E2 of menopause rats," *Evidence-Based Complementary and Alternative Medicine*, vol. 2014, no. 1, p. 621975, 2014.
17. W. H. Liu et al., "Development trend and current situation of acupuncture-moxibustion indications," *World Journal of Acupuncture-Moxibustion*, vol. 30, no. 4, pp. 245–250, 2020.
18. Y. WANG et al., "Exploration of the Effect of Acupuncture and Moxibustion on Stroke Prevention and Treatment Based on the Theory of 'Preventive Treatment of Disease'," *Modernization of Traditional Chinese Medicine and Materia Medica—World Science and Technology*, vol. 28, no. 1, pp. 228–234.