Ambrosia
Ambrosia dumosa and others
Asteraceae
Ambrosi Dumocae herba seu flos
Other names: Ragweed
Favor and Qi: acrid, bitter, warm
Channels Entered: lung, large intestine, urinary bladder
Actions: diaphoretic, aromatic, decongestant

Functions & Indications:
- **Courses wind, diffuses the lung, and unblocks the nasal passages.** Ambrosia is used for sinus congestion due to external wind invasion inhibiting the lung’s ability to diffuse and downbear, causing an accumulation of snivel in the nasal passages. It courses wind with acridity, and downbears with bitterness. Although it is warm, it can be used for warm conditions with the appropriate herbs.

- **Diffuses the lung, transforms phlegm and calms panting.** Ambrosia is used for wheezing and panting with hasty breathing, difficulty taking full breaths, anxiety and even panic. This is mainly in the form of what we know today as “allergic asthma.” For a discussion on allergic asthma and how it fits into Chinese medicine please see the Commentary below. The commentary in the following monograph on Blue Curls also relates to this discussion.

- **Aromatically transforms dampness for damp accumulation due to kidney and spleen vacuity.** This is a suggestion based on the scant literature available about this herb. I have no direct experience using this medicinal in this manner, but, based on my experience and the literature cited below, it seems probable that there is room for expanding its usage to this area. See the Commentary for further discussion on this matter.

Cautions:
None noted, but it may be prudent to exercise caution with those known to have “ragweed” allergies.

Dosage and Preparation:
Fresh plant tincture 0.5-3ml, light decoction 2-6g. The herb is best when prepared fresh as a tincture, however the dried plant is also very useful.

Major Combinations:
- Combine with Yerba Mansa, xīnyíhuā, and Yerba Santa for sinus congestion with clear or white phlegm. This can be administered for phlegm that is either copious and runny or difficult to discharge. For yellow or green phlegm, add Echinacea, huángqín, and Goldenseal.

- Use by itself for acute relief from seasonal allergies or hay fever. Combine with Tincture of Cāng Er Zǐ Sān for relief from seasonal allergies with clear or white discharge.

- Combine with Xiǎo Qīng Lóng Tāng for non-diffusion of lung qi with chronic cold phlegm or rheum congesting the lung channel, with symptoms of panting, cough, sinus congestion, and copious clear or white phlegm and snivel. This fits neatly into what we often refer to in the clinic as allergic asthma.
Commentary:

The genus *Ambrosia* is native to North America but a couple of species are native in other places in the world, and several species have become successful weeds worldwide (see below). The common name, Ragweed, is well known to those who suffer from allergies because the pollen from many of the species in this genus is the culprit for seasonal (mostly spring and early summer) allergies. Ironically, this plant appears to be, in the author’s experience, the most potent plant available for the effective amelioration of symptoms associated with hay fever, including itching eyes and sinus congestion, sneezing, scratchy throat, etc. Some Western herbalists swear by the prophylactic application of *Ambrosia* sp., providing a moderate dose (15-45 drops) of the tincture a couple of months prior to the patient’s allergy season.

The primary plant in the monograph, *Ambrosia dumosa*, is the species with which I have the most experience, and I consider it to be more potent than other species. Nevertheless, many of my colleagues who have more experience with other species have suggested that those species are more than adequate for the above use. One of these, *A. artemesiifolia*, is probably the most commonly used species, and I have also found it to be useful in the same way as the primary species described above. However, my experience with *A. artemesiifolia* is far too limited to compare them in specific ways. This species (*A. artemesiifolia*) has the added benefit of having a far greater range, including naturalization in China. While *A. dumosa* is only found in the southeastern portions of California, southern Nevada, most of western Arizona, and only the furthest southwestern portion of Utah, as well as northwestern Mexico, *A. artemesiifolia* is found throughout the United States, and *A. psilostachya* can be found throughout much of North and Central America, part of South America, as well as Western Europe, Australia, and South Africa.

The use of organoleptic observation will provide insights into the potency of the various species. From my observations, the more acrid and aromatic species tend to be more drying and fast acting, both in the treatment of phlegm and in coursing wind. The species listed in descending order from most to least bitter and acrid are *A. dumosa*, *A. psilostachya*, and *A. artemesiifolia*. However, differences in growing conditions, ecologies, etc. may produce higher or lower levels of any of the bitter and acrid compounds.

“Allergic asthma” is a disease name that more or less fits a mixed repletion and vacuity panting pattern in Chinese medicine. According to The Asthma and Allergy Foundation of America, “Allergic asthma is the most common form of asthma, affecting over 50% of the 20 million asthma sufferers. Over 2.5 million children under age 18 suffer from allergic asthma. Many of the symptoms of allergic and non-allergic asthma are the same (coughing, wheezing, shortness of breath or rapid breathing, and chest tightness).”

The term *chuàn* (喘) in Chinese medicine is translated as “panting” and is defined as, “Hasty, rapid, labored breathing with discontinuity between inhalation and exhalation, in severe cases with gaping mouth, raised shoulders, flaring nostrils, and inability to lie down.” (Wiseman & Ye 1998) There is both vacuity and repletion panting, and in Zhāng Jǐng-yuè’s (張景岳) late Ming Dynasty book *Jing Yue’s Complete Compendium* (1624) he differentiates them as follows:

“I suggest that repletion panting has an evil, an evil qi repletion; vacuity panting is without evil, a yuan qi vacuity. In repletion panting the breath is long and there is enough, in vacuity panting the breath is short and is not continuous. In repletion panting the chest is distended and the breathing is rough, there is a loud voice and turbulent breathing, and expanding as if the lungs are unable to contain the breath with a rapid exhalation; in vacuity panting there is flusteredness and timidity, the voice is low and the breathing short, there is a state of panic as if the breath will be cut off...”
He goes on to say,

“In repletion panting patterns, the repletion evil lays within the lungs, [this is] repletion evil of the lungs, without wind-cold then it must be fire evil. I suggest the evil of wind-cold must be received from the body hair [exterior], so it enters the lung and becomes panting, in intense fire, metal must receive damage, therefore also is disease of the lung becoming panting. The treatment of repletion panting of wind-cold, it is suitable to use warming and dissipation; the treatment of repletion panting of fire-heat, treat using cold and cooling. On the other hand, it is said if there is phlegm panting, those who came before us all said ‘treat phlegm,’ if you don’t know phlegm, how could you have panting?”

Zhū Dān-xī, in his Zhū Dān-xī’s Heart Methods (mid-14th Century) states of panting, “Although, phlegm-fire internally constrained can never not be the cause, yet [it is] wind-cold externally binding that is the trigger.”

Allergic asthma tends to have similar symptoms as outlined in the vacuity panting above, but this is certainly not always the case. However, it clearly has an acute nature about it, which suggests an external attack, and we know there is an external trigger. So, I suggest that whether the internal pattern is vacuity or repletion, it is the invasion of wind-cold that is the trigger, which can be treated with Ambrosia. See Commentary in Blue Curls monograph for further discussion.

The following passage is from William Cook’s 1869 classic Physio-Medical Dispensatory:

“The leaves are stimulating and astringing, bitter, and permanent in action. An infusion is useful in diarrhea and dysentery of a passive character; in uterine, gastric, and pulmonic hemorrhages; and in degenerate leucorrhea as an injection and drink. A use of a strong decoction influences the kidneys considerably, sustains the tone of the stomach, and slowly elevates the circulation; and these actions render it useful in the treatment of chronic dropsies, especially when combined with hepatics and stimulating diaphoretics. A very strong decoction, used freely, is reputed among the people in some sections to be a reliable antiperiodic; and many of the actions of the agent certainly suggest properties analogous to Cinchona. It is said to be useful in poultices to phagedaenic ulcers – checking putrescence; and I do not doubt but such is the case. The article is too much overlooked by the profession.”

The above quote is specific to A. artemisiafolia, but Cook also states that A. trifida is likely analogous. This offers an extension of the use of this medicine beyond my experience with it, but may also support the monograph above, particularly the last function and indication to “aromatically transform dampness.” Although we can’t be exactly sure what Cook was seeing when he says, “diarrhea and dysentery of a passive character” and “degenerate leucorrhea”, these symptoms do suggest a vacuous nature to the pathology, such as “spleen vacuity with damp encumbrance”, or perhaps even “spleen-kidney yang vacuity.” I mention the latter specifically because Cook lists a combination of Ambrosia 30g and Ginger (gānjiāng) ~3.5g to be infused in a quart (nearly 1 liter) of water to be used for these conditions. Further evidence from this quote suggesting Ambrosia’s action on the spleen is that it is used, “in uterine, gastric, and pulmonic hemorrhages.” This could, in fact, be due to the spleen unable to manage the blood. Finally, this medicinal may prove useful in conditions that include both spleen vacuity and liver constraint. This combination pattern could originate from either spleen vacuity or liver constraint. Cook notes that “dropies” (an old name for a condition that include swelling and excessive fluid in the tissues and abdomen) are treated with this medicinal, “especially when combined with hepatics and stimulating diaphoretics.” Many herbs that Cook used as “hepatics” are herbs that resolve constraint, such as Bareberry bark, Chelone, Boneset, and others. Use of a stimulating
diaphoretic, such as the use of guìzhī in Fú Líng Tāng, is not an unusual methodology employed by Chinese medicine to improve a formula’s ability to rid the body of dampness.

Cook finishes his monograph by noting that this medicinal is “too much overlooked by the profession,” which, to a certain extent, is still true nearly 150 years later. However, there have been recent mentions of it by a number of herbalists, and it may be that Ambrosia has found its time in the history of herbal medicine to shine.

While there are a number of research papers on other species in this genus, I could only find one species, *A. maritime*, that is known to treat asthma.¹