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TEACHING INNOVATION

Teaching reform of the *Warm Disease Studies* course in military academies: A focus on broadening clinical perspectives

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Abstract

Warm Disease Studies, a core course in traditional Chinese medicine (TCM), integrates physicians' historical experience and theoretical achievements in the prevention and treatment of warm diseases, demonstrating remarkable clinical practical value. Its theoretical system has shown distinct advantages in the management of infectious diseases (e.g., acute epidemics and febrile conditions) in modern times. To meet the demand for versatile military TCM professionals and military medical support, this study addresses the current status and challenges of *Warm Disease Studies* teaching in military medical academies. Guided by the principle of "synergy between medicine and education, combat-oriented development", a four-dimensional integrated teaching model—encompassing theory, clinical practice, research, and extension—is proposed. This model highlights the characteristics of military medical support and achieves the organic integration of professional education and ideological education.

Keywords: *Warm Disease Studies*, Teaching reform, Clinical perspective, Military academies

Highlights

- Based on the current state of teaching, a new model for reforming the Warm Disease Studies course in military medical academies is proposed.
- The reform adheres to a student-centered approach and integrates multiple dimensions into the teaching model.
- This new teaching model represents a fundamental departure from traditional Chinese medicine curriculum and instruction.

1 INTRODUCTION

As one of the four great classical courses of traditional Chinese medicine (TCM) and the core carrier for theoretical research on exogenous febrile diseases, *Warm Disease Studies* functions both as a clinical and a foundational course, embodying a tight integration of theory and practice [1]. Its theoretical system demonstrates remarkable advantages in preventing and treating infectious diseases (including various acute contagious illnesses) as well as febrile disorders. In terms of disciplinary content and nature, this course is highly consistent with the collective lifestyle of military personnel, the characteristics of military operations, and the requirements of military medical support in the new era. As the sole principal institution for cultivating TCM professionals in the entire military, the Naval Medical University undertakes the fundamental mission of nurturing high-quality, professional, and comprehensive military talents needed by the armed forces [2]. Consequently, *Warm Disease Studies* plays an irreplaceable and pivotal role in the training system for advanced TCM talents in the military. Based on the characteristics of the military TCM medical system and the demands of its mission tasks, this paper focuses on the goal of

cultivating high-quality, professional, and comprehensive TCM talents. Guided by the clinical perspective of addressing common military diseases, controlling the prevalence of military injuries and illnesses, and preventing and treating epidemics in both peacetime and wartime, this study promotes the teaching reform of the *Warm Disease Studies* course in military academies.

2 CURRENT STATUS AND CHALLENGES IN TEACHING THE *WARM DISEASE STUDIES* COURSE IN MILITARY ACADEMIES

2.1 Unidimensional teaching approach in the *Warm Disease Studies* course

In recent years, military medical academies have proactively advanced teaching reforms for *Warm Disease Studies*, extensively embracing diverse pedagogical approaches—including case-based learning, scenario-based instruction, heuristic inquiry, and flipped classroom models. However, these methods are currently confined largely to the dissemination of theoretical knowledge in classroom settings, as clinical practice teaching has not yet been fully integrated into the overall curriculum. From the standpoint of instructional design systematicity, the scope of existing teaching reforms remains relatively narrow, and a cohesive multi-dimensional integrated teaching model is still lacking [3]. As a result, such reforms present certain limitations in broadening students' clinical horizons, enhancing their practical competencies, and nurturing their scientific research and innovative capacities. More importantly, they struggle to keep pace with the evolving training demands for comprehensive TCM talents in the military in the new era, thus rendering systematic teaching restructuring and innovation an urgent imperative.

2.2 Outdated teaching philosophy in the *Warm Disease Studies* course

Within the undergraduate TCM education framework of military medical academies, *Warm Disease Studies* constitutes one of the core classical theoretical courses, distinguished by its classical and traditional attributes [1]. Correspondingly, the prevailing pedagogical philosophy is predominantly textbook-centric, emphasizing theoretical instruction that interprets classical texts through their own contextual framework. Practical training, meanwhile, is primarily conducted via clinical clerkships. Since *Warm Disease Studies* is inherently a practice-oriented discipline, the current pedagogical philosophy and instructional modalities fail to fully comply with the national core standards for classical TCM education in cultivating TCM professionals—specifically in terms of fostering students' clinical competency and scientific research innovation capacity. The study of Chinese medicine classics should run through the whole undergraduate program, from start to finish [4]. Moreover, as a classical TCM course tailored to the needs of military academies, its curriculum design and instructional process incorporate insufficient real-world case studies pertaining to common and endemic military-specific conditions, such as wartime infectious diseases, epidemic prevention and control during peacetime and combat operations, and exertional heat illness. This gives rise to a conspicuous lack of "military relevance" and "combat readiness orientation". This pedagogical lag hinders students from effectively translating their command of warm disease theory into clinical practice, thereby resulting in deficiencies when they apply traditional Chinese medicine theories and skills to solve real-world clinical problems [5].

2.3 Inadequate integration of the *Warm Disease Studies* course with ideological and political education

The formation and evolution of *Warm Disease Studies* represents an innovative development in how TCM practitioners diagnose and treat exogenous febrile diseases. While this course is rich in ideological and political educational resources, it has not yet achieved effective integration of such elements in actual teaching. First, as a core approach to moral education and talent development in higher education, ideological and political education is only stated in the general teaching objectives yet inadequately implemented in chapter-based teaching. As a result, ideological and political content remains poorly integrated with professional knowledge. Second, teachers lack sufficient ability to identify and utilize the ideological and political values embedded in the course. For instance, the scientific spirit, sense of social responsibility, and professional ethics of leading physicians in the history of *Warm Disease Studies*; the inheritance and innovation of TCM culture; and the important role of warm disease theories in the management of modern infectious diseases—all of these can serve as core themes and classic examples for ideological and political education in this course. In current teaching practice, these contents are often not fully explored. Teachers tend to focus primarily on delivering professional knowledge, which makes it difficult to embed ideological and political elements throughout the course or to achieve an organic integration of value guidance with professional instruction [6]. As a result, the educational effect of "nurturing students quietly" is hard to realize. To some extent, this also limits the broadening of students' clinical horizons and the overall improvement of their professional competence.

3 TEACHING REFORM MEASURES: FOUR-IN-ONE INTEGRATION FOR EXPANDING CLINICAL HORIZONS

3.1 Establish the four-in-one integrated teaching philosophy

In response to the current situation and challenges in the teaching of *Warm Disease Studies* in military academies, we have established a teaching philosophy fundamentally oriented

toward broadening clinical horizons. Its core objectives are to strengthen students' clinical reasoning in differentiating and treating warm diseases, as well as their ability to address practical issues in military medicine.

By reorganizing and restructuring the curriculum system, integrating three key modules—basic theories, clinical diagnosis and treatment, and classic medical works—and aligning instruction with military and research requirements, we have formed a four-dimensional integrated framework: theory, clinical practice, scientific research, and expanded competence [3]. This approach carries distinct military characteristics, embodies the concepts of "medicine-education coordination and combat-oriented education", and integrates professional education with ideological and political education, thereby enhancing the application of TCM in military medical practice.

The teaching reform follows two principles:

First, integration of "classics and modern medicine": Warm disease theory encompasses a wide range of acute infectious and communicable diseases in Western medicine [7]. We integrate classic warm disease theories from works including *Discourse on Warm Diseases*, *Detailed Analysis of Warm Diseases*, and *Treatise on Damp-Heat Diseases* with modern therapeutics in infectious diseases and epidemiology. This approach enables students to bridge ancient and contemporary knowledge, thereby forming a comprehensive cognitive framework for treating febrile diseases through integrated Chinese and Western medicine.

Second, the integration of classroom and battlefield. Grounded in real military mission scenarios, we design teaching content around practical demands such as common military diseases, epidemic control, prevention and treatment of infectious diseases in peacetime and wartime, and medical support for field operations. This firmly upholds the goal of "cultivating personnel for combat" and effectively improves students' professional competence and practical ability to serve the battlefield and support the troops [8].

3.2 Establish a four-in-one teaching model with distinctive military health service features

3.2.1 Theoretical dimension—integrating Chinese and Western medicine with a focus on military health services

Theoretical teaching constitutes the foundation and core of the entire teaching model. In line with the new standards and requirements proposed by the state and military for the cultivation of TCM talents, this module systematically integrates and reconstructs the knowledge system of *Warm Disease Studies*. First, it deeply integrates the classic theories of *Huangdi Neijing* (*The Yellow Emperor's Inner Canon*), *Shanghan Lun* (*Treatise on Cold Damage Disorders*), *Jingui Yaolue* (*Synopsis of Prescriptions of the Golden Chamber*), and *Warm Disease Studies*; combs the curriculum knowledge structure; and clarifies the key connection points between theoretical teaching, clinical practice, scientific research capability, and the expansion of military needs [9]. Second, based on practical cases such as common and frequently occurring diseases in the military, as well as modern emerging and sudden infectious diseases, it explores classic clauses and prescriptions closely related to modern medicine and military medicine, and elaborates in depth on the essential knowledge of original works such as *Discourse on Warm Diseases* and *Treatise on Damp-Heat Diseases*.

Meanwhile, in the teaching of the general introduction to *Warm Disease Studies*, as well as the syndrome differentiation, treatment, and prevention of common diseases, cutting-edge hotspots in disciplines such as modern microbiology, epidemiology, and military medicine are actively introduced to enrich teaching resources and materials, improve the two core teaching modules of basic theories and classic original works, and thus construct the theoretical dimension.

3.2.2 Clinical dimension—diversified practical training with a focus on actual combat

Clinical practice is a key link connecting theoretical teaching, clinical education, and military health service support in actual combat. To comprehensively enhance cadets' capabilities in clinical diagnosis and treatment, battlefield adaptation, and emergency rescue, this module establishes a multi-scenario integrated clinical teaching system closely aligned with actual combat, which consists of four specific interrelated aspects: First, outpatient observation with teachers is conducted to strengthen clinical thinking. Cadets are organized to follow teachers in outpatient settings for clinical practice and prescription copying, focusing on mastering clinical thinking for applying warm disease theories to differentiate and low-grade fever of unknown origin and military operations (e.g., fever, pestilence, and damp-heat diseases) [9]. Special emphasis is placed on extracting strategies for preventing and treating infectious diseases in peacetime and wartime from defense-qi-nutritive-blood and triple-jiao syndrome differentiations, laying a solid foundation for subsequent practical training. Second, independent practice of the four diagnostic methods is conducted to improve syndrome differentiation ability. Under simulated battlefield rescue and public health emergency scenarios, cadets independently perform four diagnostic data collection, comprehensive analysis, and prescription formulation. This process focuses on transforming theories into practical combat skills in complex environments and enhancing their capabilities in syndrome differentiation, treatment, and rapid decision-making under pressure. Third, ward bedside teaching is carried out, focusing on the treatment of acute, severe, and war-related injuries. Building on the previous training, this component cen-

ters on acute and severe warm diseases (e.g., high fever with coma, convulsions, macular eruption, and rashes), highlighting the comprehensive application of integrated Chinese and Western medicine rescue technologies in military medical scenarios (e.g., war wound infections and severe infectious diseases), and strengthening cadets' emergency response and team collaboration in managing acute and critical illnesses. Fourth, military and local resources are integrated to conduct multi-environment drills and training, which serves as the final practical verification link. Relying on military combat readiness hospitals, local medical institutions, and emergency drill bases, a joint rotation training mechanism is established to organize cadets in practical exercises (e.g., simulated battlefield rescue, disaster emergency response, and epidemic prevention support), tempering their abilities in warm disease differentiation and health service support through diverse tasks.

Collectively, these systematic, multi-level clinical teaching arrangements—closely aligned with actual combat and logically connected—enable cadets to deepen their understanding and application of warm disease theories while significantly improving their comprehensive adaptability in real military medical contexts, make greater contributions both to the inheritance and development of traditional Chinese medicine and to the cause of socialist modernization [10].

3.2.3 Research dimension—innovation-oriented and serving the battlefield

Research serves as an important pillar for enhancing cadets' innovative thinking and military medical research capabilities. It aims to guide cadets in identifying problems from clinical practice, exploring solutions through scientific methods, and ultimately transforming research achievements into military health service support capabilities. This dimension includes two core modules: clinical practice and research exploration. Focusing on the integration of Chinese and Western medicine, the combination of classic theories and modern technologies, and military health service needs, it constructs a multi-level, combat-oriented research training system, specifically as follows: First, consolidate research foundations and standardize scientific thinking. Through learning clinical epidemiology, evidence-based medicine, medical statistics, and related disciplines, students are able to strengthen their ability to design research, analyze data, and communicate academically, thereby cultivating a scientific mindset that values rigor and integrity [11]. Second, advocate interdisciplinary integration and innovate research approaches. Cadets are encouraged to conduct scientific research on the cross-transplantation and infiltration of warm disease theories with internal medicine, surgery, gynecology, pediatrics, and other disciplines. Relying on the TCM literature room, systematically explore and sort out classic military medical cases of warm diseases; carry out objective research on diagnostic methods with the support of the TCM four diagnostic methods teaching platform; and introduce basic laboratory research methods to deeply elaborate on the mechanisms of action of warm disease prescriptions and medicines, thus realizing multi-dimensional research training from literature to experiments and from theory to empirical evidence. Third, carry out thematic research integrating classic theories with modern medicine, and set up research on the military application of classic warm disease theories. Examples include "Study on the evolution law of defense-qi-nutritive-blood syndrome differentiation in war wound infections" and "Evaluation of the preventive and therapeutic effects of prescriptions in *Detailed Analysis of Warm Diseases* in humid and hot environments". In TCM treatment of epidemic diseases, volatile herbs play a key role in "dispelling evil qi and safeguarding the body", guiding cadets to interpret the scientific connotation of classic theories by means of modern scientific and technological methods [12]. Fourth, focus on military medical hotspots and promote application transformation. Centering on practical military needs—such as the research and development of special drugs for troops, the prevention and treatment of diseases in special environments (e.g., high temperature, high humidity, extreme cold), and TCM epidemic prevention strategies for sudden outbreaks—cadets are organized to carry out practical research explorations, including new TCM dosage forms, emergency diagnosis and treatment protocols, and intelligent auxiliary diagnosis systems. Fifth, strengthen military-civilian integration and build a collaborative innovation platform. Relying on military TCM research institutions, local TCM research laboratories, and university-enterprise cooperation projects, "undergraduate supervisor-cadet" research teams are established to participate in relevant special research. Meanwhile, cadets are encouraged to attend forums and conferences related to military TCM, thereby advancing the second classroom, expanding clinical horizons, and cultivating research ideas that promote the transformation of research achievements into actual combat capabilities.

Through systematic research training, cadets not only develop critical thinking and innovative awareness but also comprehensively improve their research capabilities in applying warm disease theories to solve practical military medical problems, providing talent support for the inheritance and innovation of TCM in the military.

3.2.4 Expansion dimension—integrating cutting-edge advances and broadening horizons

Consistent with its title "Integrating cutting-edge advances and broadening horizons", the expansion dimension serves as the fourth component of the "theory–clinical practice–scientific research–expansion" four-dimensional teaching model, with exploration as its core activity. It breaks the boundaries of traditional classrooms and comprehensively improves cadets' systematic understanding of the modern development of *Warm Disease Studies* by introducing cutting-edge academic trends and practical combat experience. First, With a focus on the

macro-condition regulation methods of traditional Chinese medicine, we aim to provide practical theories and approaches for the rapid response to emerging and sudden infectious diseases. Teaching activities are carried out in a variety of formats [13]. For example, frontline anti-epidemic experts from the military or local areas, as well as renowned scholars in *Warm Disease Studies*, are regularly invited to deeply analyze the specific strategies and efficacy mechanisms of warm disease syndrome differentiation in epidemic prevention and control through real cases, via multiple channels such as classroom lectures, online seminars, and academic conferences. Second, it introduces the application of defense-qi-nutritive-blood theory in the staging differentiation and treatment of mild, ordinary, and severe stages of modern infectious diseases and epidemiology; the research and development background and efficacy evaluation of integrated Chinese and Western medicine anti-epidemic prescriptions; and the practice of combining "disease differentiation–syndrome differentiation" in epidemic prevention and control—all of which help cadets build a bridge between theory and practice and strengthen clinical insight.

To further fulfill the goal of broadening horizons, interdisciplinary and inter-university academic exchanges are organized, and cadets are encouraged to participate in warm disease-related seminars, military medical forums, and case debates. This not only guides them to pay attention to modern research hotspots of warm diseases and military application scenarios but also broadens their clinical and scientific research horizons while stimulating their innovative thinking and ability to solve complex military health service support problems.

3.3 Adhere to the educational philosophy of placing equal emphasis on professionalism and ideological-political education

3.3.1 Systematic integrated professional teaching

Focusing on the reform of teaching models, this course aims to achieve the thorough mastery of classic TCM theories and the comprehensive cultivation of clinical thinking. To this end, it strives to promote the organic integration of *Warm Disease Studies* with other classic courses such as *Huangdi Neijing* (*The Yellow Emperor's Inner Canon*), *Shanghan Lun* (*Treatise on Cold Damage Disorders*), and *Jingui Yaolue* (*Synopsis of Prescriptions of the Golden Cabinet*), constructing a mutually referential and multi-dimensional interactive teaching system. The specific systematic integration strategies are as follows: To start, referring to the Huangdi Neijing helps strengthen the theoretical base. By integrating ideas like "if vital qi remains within, pathogenic factors cannot invade" and "the interplay of yin and yang" with the disease mechanisms of warm diseases and the wei-qi-ying-xue differentiation framework, students gain a deeper understanding of the causes, mechanisms, and treatment principles of warm diseases, thereby underscoring the coherence and integrity of the TCM theoretical system.

Second, the six-meridian differentiation in Shanghan Lun extends and develops the six-meridian syndrome differentiation in Neijing. In turn, the differentiation of wei, qi, ying, xue and sanjiao in the warm disease school continues and further develops the six-meridian differentiation [14]. By systematically comparing the six-meridian pattern differentiation with the defense-qi-nutrient-blood and triple-burner differentiations-in terms of syndrome classification, patterns of transmission and progression, and the corresponding formulas-students can better grasp how the warm disease school continues and extends the Treatise on Shang han system. In doing so, they build a more comprehensive diagnostic framework for externally contracted diseases.

Third, complementing the above two strategies, this integration strategy focuses on cross-referencing knowledge in *Jingui Yaolue* (*Synopsis of Prescriptions of the Golden Cabinet*) to expand the vision of syndrome differentiation and treatment for miscellaneous diseases. By combining the principles of treating miscellaneous diseases from *Jingui Yaolue*, this strategy explores the evolution rules and treatment approaches for pathogenic factors such as damp-heat, phlegm-fluid retention, and static blood throughout the course of warm diseases, further strengthening cadets' ability to analyze complex pathogenesis and apply comprehensive treatment methods.

In addition to realizing inter-course integration, the content of this course is organized into three core teaching modules—basic theories, clinical syndrome differentiation and treatment, and classic original works—to strengthen the logical connections and content alignment between modules. In teaching practice, module units are flexibly combined according to the training stage and objectives, allowing teachers to carry out cross-module teaching around specific themes (e.g., syndrome differentiation and treatment of damp-heat type warm diseases and warm-heat type warm diseases). This approach truly realizes a new integrated teaching pattern characterized by "integration of classic and modern, connection of theory and clinical practice, and mutual promotion of teaching and military research", which aligns with the core requirement of systematic integrated professional teaching.

3.3.2 In-depth integrated curriculum ideological and political education

In May 2020, the Ministry of Education issued the *Guidelines for the Construction of Curriculum Ideological and Political Education in Institutions of Higher Education* [15]. Subsequently, curriculum ideological and political education entered a new stage of comprehensive, systematic, and refined advancement. It is an educational philosophy that promotes the concerted development of various courses alongside ideological and political courses within the framework of "all-round education, whole-process education, and all-staff education", taking "fostering virtue through education" as the fundamental

task of education and teaching model [16, 17]. One of the key points of teaching reform is how to adhere to the foundation of excellent traditional Chinese culture and TCM philosophical thoughts, and systematically integrate curriculum ideological and political education into the entire process of *Warm Disease Studies* teaching.

In theoretical teaching, we focus on organizing the unique theoretical, prescription, and methodological systems developed by TCM in the prevention and treatment of epidemics throughout past dynasties—particularly in the context of military health service support—so as to strengthen cadets' recognition of the academic value of TCM and their cultural confidence.

We deeply explore the ideological and political resources embedded in *Warm Disease Studies*. By presenting the experiences of medical experts in their growth and academic pursuits—such as Wu Youke's innovative breakthrough in the pestilential qi theory, Ye Tianshi's comprehensive clinical achievements in warm heat theory, and Wu Jutong's systematic construction in *Detailed Analysis of Warm Diseases*—we carry forward their academic spirit of "respecting clinical practice, upholding integrity and innovating, and being diligent and sincere". Furthermore, by highlighting the important role of TCM in combating major public health events such as SARS and COVID-19 in modern times, as well as in military epidemic prevention and rescue, we introduce the advanced deeds of frontline medical workers and military medical personnel who marched forward bravely and made selfless contributions. This guides cadets to deeply understand the professional connotation of "great medical sincerity" and "healer's benevolence", establish a sense of mission and family-country feelings of "serving officers and soldiers and ensuring victory", and achieve the high unity of knowledge impartment, ability cultivation, and value guidance.

4 CONCLUSION

Set against the call for a strong and modernized military, this teaching reform of Warm Disease Theory is oriented toward broadening clinical perspectives. It integrates three major modules—basic theory, clinical pattern differentiation and treatment, and original classics—while weaving together military and research needs. A four-in-one teaching model is thus formed, combining "theory, clinical practice, research, and exploration", with equal attention to professional competence and ideological-political education [3]. This model achieves a deep synthesis of classic theory with modern medicine and military requirements, cultivating a new type of TCM talent capable of handling contemporary medical demands while also meeting the needs of health service support [18]. These reform measures are interlinked and work in synergy. They not only create a new ecosystem for teaching TCM classics that adapts to the current landscape and offer a valuable paradigm for deepening specialized course reform in military academies, but also further optimize the cultivation of military TCM personnel, providing robust support for the realization of a strong military [19, 20].

DECLARATIONS

Author contributions

Lingling Bai was responsible for the conceptualization and drafting of the manuscript. Yuan Bai performed the analysis of military education research and Completed each English translation revision task. Guoyin Zheng conducted the analysis of Warm Disease Studies teaching, and Yanlong Yang carried out the analysis of clinical practice teaching. Additionally, Jin Yu provided the English language analysis and proofreading of the manuscript, while Lina Wang contributed to the constructive discussion and analysis of the manuscript framework.

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