## Review Research Paper

# The Health Benefits of Tai Chi and Qigong

#### Robert W. McGee

Fayetteville State University, North Carolina, United States. Corresponding authors email: bob414@hotmail.com

Accepted 4th January 2025.

This study reviews the evidence on the effectiveness of tai chi and qigong, two forms of traditional Chinese medicine, on the treatment of the ten most prevalent illnesses – heart disease, cancer, chronic lower respiratory diseases, obesity, Alzheimer's Disease, diabetes, substance abuse disorders, influenza and pneumonia, kidney disease, and mental health conditions. Microsoft Copilot, an artificial intelligence chatbot, was used to identify the top ten diseases. The PubMed database was then used to find case studies for each of the ten most prevalent diseases. A sample of relevant studies was summarized. The findings were that tai chi and qigong have been shown to be effective in treating these ailments in many medical studies.

Keywords: tai chi, qigong, Traditional Chinese Medicine, TCM, artificial intelligence, Microsoft Copilot, common diseases

#### INTRODUCTION

Tai chi is considered both a martial art and a set of health exercises [2, 3, 8]. Its original emphasis was on martial arts. However, in recent decades, the focus has been more on its health benefits than on its martial arts applications. Qigong [pronounced chee gong] is not a martial art, per se, although it is an integral, internal part of tai chi [1]. Both tai chi and qigong are forms of moving meditation that originated in China and have spread to the West in recent decades.

One difference between tai chi and qigong is that the external movements of tai chi form sequential patterns [1-10], much like Japanese katas or Korean poomsae, whereas qigong exercises can be done as individual exercises [1] and need not form any particular pattern or sequence, although the exercises can be structured as a set [11-28], much like yoga exercises can, but need not be performed in a set pattern.

Qigong exercises [1, 18, 20-21] are easier to learn than tai chi patterns. Acquiring proficiency in tai chi takes years, perhaps even a decade or more, whereas qigong exercises can be learned fairly quickly. However, the health benefits of both forms of exercise can begin to accrue after a few practice sessions, even if mastery is never attained.

No one knows for sure who created either tai chi [5, 8, 9] or qigong [1, 20, 21] or when they were created. Their origins are steeped in myth. All we know for sure is that tai chi is several hundred years old and qigong is several thousand years old. They are both considered forms of

Traditional Chinese Medicine [TCM], along with acupuncture, acupressure, herbal medicine and Chinese massage. One thing that differentiates Chinese medicine from Western medicine is its emphasis on illness prevention rather than illness treatment. TCM focuses on strengthening the body's natural immune system so that individuals do not need to be treated for illness.

Many studies have been done on the effectiveness of tai chi and gigong on the treatment of a wide range of illnesses [29-57]. Many of those studies were done in China, with the results published in Chinese. However, in recent decades, the results of many studies have been published in English, making it possible for Western medical professionals to become aware of the possibilities of introducing tai chi and gigong into their medical practices, often as supplemental treatments to those usually provided to their patients. The main purpose of the present paper is to briefly discuss how tai chi and gigong have been used to treat a wide range of ailments, both in China and the West so that medical professionals can learn about the possibilities that tai chi and gigong have to offer. Incorporating them into a medical practice is cost-effective, and there are no serious side-effects.

#### **Some Studies**

Microsoft Copilot [58] is one of the more popular chat bots being used these days. It has a wide range of uses,

including medical research [59-88]. We decided to use it to identify the most frequent serious illnesses in the United States as an initial step in our present research, which is aimed at discovering a sample of medical studies that have incorporated the use of either tai chi or qigong to treat some common illnesses. The instruction we gave it is given below.

**INSTRUCTION:** Make a list of the ten most common serious illnesses in the United States. Include references.

#### **COPILOT REPLY**

Here are the ten most common serious illnesses in the United States, along with references:

- 1. Heart Disease: The leading cause of death in the U.S., heart disease includes conditions such as coronary artery disease and heart attacks [89].
- 2. Cancer: Various forms of cancer, including lung, breast, and colorectal cancer, are among the top causes of death [89].
- 3. Chronic Lower Respiratory Diseases: This category includes chronic obstructive pulmonary disease (COPD), emphysema, and chronic bronchitis [89].
- 4. Obesity: A significant public health issue, obesity is linked to numerous other health conditions, including heart disease and diabetes [89].
- 5. Alzheimer's Disease: A progressive neurodegenerative disease that affects memory and cognitive function [89].
- 6. Diabetes: A chronic condition that affects how the body processes blood sugar (glucose) [1].
- 7. Substance Abuse Disorders: Includes alcohol and drug abuse, which can lead to a range of health issues and fatalities [89].
- 8. Influenza and Pneumonia: Infectious diseases that can be particularly severe for the elderly and those with weakened immune systems [89].
- 9. Kidney Disease: Chronic kidney disease can lead to kidney failure and the need for dialysis or transplantation [89].
- 10. Mental Health Conditions: Includes depression, anxiety disorders, and other mental health issues that significantly impact quality of life [89].

These conditions are major contributors to morbidity and mortality in the U.S., and addressing them requires a combination of medical care, lifestyle changes, and public health initiatives [89].

#### Reference

89 Bryan, Alexis. 10 Most Common Health Conditions in The U.S. In 2024. Talktomira.com, January 1, 2024. https://www.talktomira.com/post/10-most-commonhealth-conditions-in-the-u-s

#### **AUTHOR COMMENTS**

Copilot cited only one reference. However, that reference was sufficient for the purpose of making a list of 10 common diseases. At this time it is worth mentioning that it is a good idea to check the references Copilot and other chat bots provide because some prior studies have found AI to produce inaccurate [90-94] or biased [95-103] results. A due diligence check was made, and it was determined that the information provided by Copilot was accurate in this case. The referenced source provided additional information for those who might be interested in learning more about the top-10 diseases.

The next step was to find studies that have incorporated tai chi or qigong into the treatment of these ten maladies. We went to the PubMed [104] database and searched for studies on these 10 diseases that incorporated either tai chi or qigong. We found hundreds of relevant studies, including some bibliometric studies [105-120]. Space does not permit a full discussion of each of the ten categories. Below is a small sampling.

#### **Heart Disease**

In a Changchun, China study, Li et al. [121] explored the effects of tai chi on coronary heart disease (CHD) risk by measuring miR-24 and miR-25 serum levels. They examined 326 CHD patients who were divided into a control group (CG) and a tai chi TG) group. The tai chi group practiced five movements of the Yang 24 form for an hour, while the control group practiced other exercises for an hour. They then compared their daily living ability and exercise of self-care agency scores. After six months, the exercise of self-care agency, activities of daily living ability, left ventricular ejection fraction and SF-36 scores were significantly higher (p < 0.05) in the tai chi group than in the control group. The tai chi group had significantly lower (p < 0.05) scores for arrhythmia and atrioventricular block recovery, hospital stay, self-rating depression scale and self-rating anxiety scale scores were lower for the tai chi group. Their serum levels were also significantly lower (p < 0.05). The study concluded that the practice of tai chi improved chronic heart disease prognosis "by affecting serum levels of the miR-24 and miR-155." Other studies also found that the practice of tai chi has beneficial effects for patients with chronic heart disease [122-127].

#### Cancer

Huston and McFarlane [127] conducted a literature review on the effect of tai chi on 25 specific conditions, including cancer. They found fair evidence to suggest that the practice of tai chi enhanced the quality of life for cancer patients. Arring et al. [128] conducted a systematic review of literature from 1990-2019, which indicated that qigong and tai chi can be beneficial for Post treatment of cancer survivors. Cheung et al. [129]

concluded that tai chi and aerobic exercise can have a positive effect on patients with lung cancer. Maind et et al. [130] found that the practice of tai chi and qigong could reduce pain intensity in cancer patients. Zeng et al. [131] conducted a literature review and concluded that the practice of tai chi and qigong had a positive effect on quality of life, fatigue, cortisol level and immune system in cancer patients.

#### **Chronic Lower Respiratory Disease**

Huston and McFarlane [127] found six systematic reviews that concluded excellent evidence that tai chi is effective for patients going through COPD rehabilitation. Xiong et al. [132] found that patients suffering from chronic respiratory disease could benefit from exercise training of various kinds, including tai chi, aerobic exercise, aquatic exercise, resistance and high-intensity intermittent exercises. Another study [133] found similar results. Zhang et al. [134] conducted a systematic review and meta-analysis of 39 randomized control trials of studies published between 1999 and 2021involving COPD patients. They concluded that yoga and tai chi resulted in significant improvement in the FEV1% predicted value, and that pulmonary rehabilitation programs improved exercise capacity, dyspnea and quality of life in COPD patients.

Liu et al. [135] conducted a single-blind randomized control trial involving 102 participants who had mild to severe stable COPD. Patients participated in a two-month supervised exercise routine, followed by a 10-month rehabilitation program. The tai chi group fared significantly better than the other groups on the St. George's Respiratory Questionnaire (p < 0.001). Another study [136] concluded that tai chi and yoga improve physical activity, pulmonary function and quality of life of COPD patients.

### Obesity

Siu et al. [137] conducted a randomized, controlled, assessor-blinded trial in Hong Kong of 543 adults over 50 years old who had central obesity. The three groups were evenly split into a control group, which received no exercise intervention, a group that engaged in conventional aerobic exercise and strength training, and a group that practiced tai chi. At the end of the 12-week program, both intervention groups reduced waist circumference compared to the control group (p < 0.001), and also reduced weight significantly compared to the nonintervention group (p < 0.05). The two intervention groups maintained their reduction in waist circumference and weight after 38 weeks, but only the tai chi group maintained the beneficial effect on HDL-C over the 38-week period.

A 12-week Chinese study involving 103 middle-aged and older adults who had type 2 diabetes mellitus (T2DM)

consisted of those who practiced fitness qigong, tai chi and a control group. The authors concluded that qigong exercises might have a better effect on patients with a longer duration of type 2 diabetes, and that tai chi might be risky for people with central obesity. A literature review of studies involving several martial arts, including karate, kung fu and tai chi might have a positive effect on glycemic control, obesity and metabolic diseases [138].

#### Alzheimer's Disease

Huston and McFarlane [127] identified five systematic reviews indicating that tai chi improved cognitive capacity, and two systematic reviews that found tai chi to improve cognitive impairment and dementia. A literature review of neurodegenerative diseases concluded that tai chi has positive benefits for those who suffer from Alzheimer's as well as other diseases such as Parkinson's [139]. Another study provided instructions on how individuals suffering from Alzheimer's or Parkinson's can adapt tai chi practice to improve their daily life [140].

#### **Diabetes**

A study aimed at exploring the optimal exercise parameters for using tai chi to improve glucose and lipid levels for type 2 diabetes mellitus patients examined sixteen randomized control trials and concluded that the Yang-24 form practiced with high frequency and short duration might be optimal for enhancing glucose and lipid metabolism. The study specifically mentioned using the Yang-24 form for 45-60 minutes per session, repeated 5 to 7 times a week for at least four to seven weeks [141]. A study aimed at determining the effects of tai chi practice on glucose and lipid metabolism on patients with type 2 diabetes mellitus concluded that tai chi therapy is significantly superior in improving the FBG, HbA1c, TG and HDL-C in type 2 diabetes patients [142]. It recommended tai chi practice for both prevention and treatment of diabetes patients. It reached this conclusion because the tai chi group was better than the control group at decreasing fasting blood glucose (p < 0.0001), glycated hemoglobin (p = 0.001) and triglyceride (p < 0.0001), and in increasing the concentration of highdensity lipoprotein cholesterol (p < 0.0001). Several other studies have also found that the practice of tai chi can have a beneficial effect on diabetes patients [143-145].

#### **Substance Abuse Disorders**

Breslin et al. [146] described a model outpatient substance abuse treatment program that included tai chi, dance and movement therapy, art therapy, recreational skills and other skills with the intent of increasing the patient's self-confidence and self-esteem. Zhang et al. [147] conducted a meta-analysis of nine studies to determine the impact of qigong and tai chi on the mood of

people with substance abuse disorders. The overall findings were that gigong and tai chi were able to reduce depression (p < 0.01) and anxiety (p < 0.01) significantly. Zhu et al. [148] assessed the effects of tai chi exercise on individuals who had amphetamine dependence. Their study examined 60 male participants from Shanghai over 12 weeks. The control group received standard care that included gesture language exercise, physical activity and self-education. This group did not experience any significant improvement. The tai chi group improved significantly in terms of quality of life for drug addiction test scores in the areas of physiology (p = 0.005), society (0.001), physical symptoms (p = 0.042), and societal interaction (p = 0.001). The study concluded that tai chi is an exercise that has promise for those suffering from stimulant dependence.

Another Shanghai study by Zhu et al. [149] found that mind-body exercises such as yoga, qigong or tai chi were significantly better than conventional rehabilitation exercises for those suffering from substance abuse disorder. Those in the experimental group practiced a mind-body exercise one hour a day, five days a week for three months. Significant differences were found for systolic (p < 0.01) and diastolic (p < 0.01) blood pressure, pulse (p < 0.01), flexibility (p < 0.01), aerobic endurance (p < 0.01) and vital capacity (p < 0.05).

#### Influenza and Pneumonia

Yang et al. [150, 151] conducted a study to determine whether moderate practice of tai chi and qigong would improve immune response to the influenza vaccine in older adults. Participants were injected with the influenza vaccine and half of them did moderate tai chi and qigong exercises over a five-month period. The study found that there was a significant (p < 0.05) increase in the duration and magnitude of the antibody response to the vaccine for the experimental group when compared to the control group.

#### **Kidney Disease**

Not many studies exist on the beneficial or detrimental effects of complementary and integrative medicine (CIM) such as tai chi, yoga or meditation on kidney transplant recipients, although the prevalence of such medicine is thought to be between 12-45 percent. There is a knowledge gap that needs to be filled by more studies on this topic [152]. A consensus has not yet been reached on the efficacy and safety of the utilization of tai chi for patients suffering from chronic kidney disease (CKD), although numerous studies have been unable to find any adverse side effects of using tai chi as a complementary form of treatment for a wide range of diseases and ailments. Ha et al. [153] conducted a systematic review in order to summarize what is already known about the effects of using tai chi in general, as well as using it to

treat patients who suffer from CKD. They found that the practice of tai chi might have a modest influence on the progression of CKD, although the evidence that tai chi has a positive effect on bone density is at present insufficient. They call for more rigorous long-term studies to determine whether tai chi could be an effective complementary medical treatment for CKD.

A Taiwanese study of 46 patients found that a weekly one-hour practice session of tai chi over a 12-week period resulted in significant improvements in the quality of life and physical functioning of end-stage renal disease patients on hemodialysis. The tai chi group fared significantly better than the control group. The Yang style short-form was used in this experiment [154].

An Iranian study of 25 hemodialysis patients found that tai chi significantly improved their quality of life in several ways, including health and functioning (p < 0.001), psycho spiritual (p < 0.001) and socioeconomic (p < 0.001) dimensions, family dimension (p = 0.002) and satisfaction domain (p = 0.008). the total quality of life score for both domains was significant (p < 0.001). The tai chi intervention consisted of one 60-minute class per week for 12 weeks, supplemented by home practice at least twice a week. Patients were given a tai chi CD to take home to assist in their practice [155].

#### **Mental Health Conditions**

Huston and McFarlane [127] found several studies that concluded that the practice of tai chi had a beneficial effect on anxiety, schizophrenia, PTSD and attention deficit disorder. Other studies have also found that using tai chi or qigong as a treatment or supplementary treatment has a beneficial effect on a wide range of health conditions and suggest that these treatments may be effective in reducing symptoms of depression, mood disturbances, anxiety and stress [156, 157]. Other studies have also found qigong to be effective in the treatment of mental disorders [158].

A study of 125 Spanish postmenopausal women found that an exercise program of qigong resulted in significant improvements to sleep latency, sleep quality, sleep efficiency, sleep duration, anxiety and depression compared to those in the control group. The regimen used Ba Duan Jin qiqong over a 12-week period [159].

#### CONCLUSION

The evidence is clear that tai chi and qigong can be effective in treating a wide range of ailments and can be used to strengthen the body's natural immune system. These tools of traditional Chinese medicine have been used for centuries in China and a few other countries. Their use is becoming more prevalent in some Western countries, although their use as supplementary interventions is currently limited by the lack of knowledge on the part of medical professionals.

If any recommendations are to be made, it would be that Western medical practitioners should consider using tai chi or qigong in their own medical practices, since these two Chinese medical procedures have proven to be successful and effective in many prior studies. Most Western studies that have been conducted on the effectiveness of tai chi and qigong have utilized them as supplementary rather than primary treatments. Using these two Chinese medical techniques as supplementary treatments would be safe, since prior studies have found no adverse side-effects have resulted from their use.

#### **REFERENCES**

- 1 Allen, Katherine. (2017). The Qigong Bible. London: Godsfield Press.
- 2 Chen, William C.C. (1973). Tai Chi Chuan: Art of the 60 Movement: Yang Style Short Form. WilliamCCChen.com. 3 Docherty, Dan. (2014). The Tai Chi Bible. Firefly Books. 4 Docherty, Dan. (2015). The Complete Tai Chi Tutor.
- London: Gaia.

  5 Kit, Wong Kiew. (2001). The Complete Book of Tai Chi
- Chuan. Rutland, Vermont: Tuttle Publishing. 6 Liang, Shou-Yu & Wu, Wen-Ching. (2014). Simplified
- Tai Chi Chuan. Wolfeboro, NH: YMAA Publication Center.
- 7 Qiu, Pixiang & Zhu, Weimo. (2013). Tai Chi Illustrated. Champaign, IL: Human Kinetics.
- 8 Tsao, Jesse, with Jason Weil. (2021). Practical Tai Chi Training: A 9-Stage Method for Mastery. San Diego: Tai Chi Healthways.
- 9 Wayne, Peter M. & Fuerst, Mark. L. (2013). The Harvard Medical School Guide to Tai Chi. Harvard Health Publications.
- 10 Yang, Jwing-Ming. (2010). Tai Chi Chuan: Classical Yang Style. Wolfeboro, NH: YMAA Publication Center.
- 11 Chinese Health Qigong Association. (2007). Liu Zi Jue. Beijing. Foreign Languages Press.
- 12 Chinese Health Qigong Association. (2008). Ba Duan Jin. Beijing. Foreign Languages Press.
- 13 Chinese Health Qigong Association. (2008). Wu Qin Xi. Beijing. Foreign Languages Press.
- 14 Chinese Health Qigong Association. (2009). Yi Jin Jing. Beijing. Foreign Languages Press.
- 15 Chinese Health Qigong Association. (2012). Taiji Stick Health Preservation Exercises: Tai Ji Yang Sheng Zhang. Beijing. Foreign Languages Press.
- 16 Chinese Health Qigong Association. (2014). Da Wu. Beijing. London: Singing Dragon.
- 17 Chinese Health Qigong Association. (2014). Daoyin Yangsheng Gong Shi Er Fa. London: Singing Dragon.
- 18 Chinese Health Qigong Association. (2014). Mawangdui Daoyin Shu. London: Singing Dragon.
- 19 Chinese Health Qigong Association. (2014). Shi Er Duan Jin. London: Singing Dragon.
- 20 Frantl Qigong, Volume 1: Health and Energy in Seven Simple Movements. Berkeley, CA: North Atlantic Books.

- 21 Jahnke, Roger. (2002). The Healing Promise of Qi. Contemporary Books.
- 22 McGee, Robert W. (2020). Qigong: A Bibliography of Books and Other Materials, Fayetteville State University, Broadwell College of Business and Economics, Studies in the Economics of Qigong, No. 1, August 25.
- 23 McGee, Robert W. (2020). A Bibliography of Recent Medical Research on Qigong, Fayetteville State University, Broadwell College of Business and Economics, Studies in the Economics of Qigong, No. 2, August 31.
- 24 McGee, Robert W. (2020). Ba Duan Jin as a Treatment for Physical Ailments: A Bibliography of Recent Medical Research, Fayetteville State University, Broadwell College of Business and Economics, Studies in the Economics of Qigong, No. 3, August 31. DOI: 10.2139/ssrn.3685571
- 25 McGee, Robert W. (2020). Wu Qin Xi as a Treatment for Physical Ailments: A Bibliography of Recent Medical Research, Fayetteville State University, Broadwell College of Business and Economics, Studies in the Economics of Qigong, No. 4, August 31. DOI: 10.13140/RG.2.2.15678.61769
- 26 McGee, Robert W. (2020). The Use of Yi Jin Jing to Treat Illness: A Summary of Three Studies, Fayetteville State University, Broadwell College of Business and Economics, Studies in the Economics of Qigong, No. 5, August 31.
- 27 McGee, Robert W. (2020). Qigong and the Treatment and Prevention of COVID-19, Fayetteville State University, Broadwell College of Business and Economics, Studies in the Economics of Qigong, No. 6, September 4. Reprinted in PPRID: PPR245323. Europe PMC. December 17, 2020.
- 28 McGee, Robert W. (2020). Qigong and the Treatment and Prevention of Cancer, Fayetteville State University, Broadwell College of Business and Economics, Studies in the Economics of Qigong, No. 7, September 14.
- 29 McGee, Robert W. (2021). Tai Chi, Qigong and Transgender Health. Fayetteville State University, Broadwell College of Business and Economics, Studies in the Economics of Tai Chi and Qigong, No. 8, April 16. DOI:10.13140/RG.2.2.32202.90567
- 30 McGee, Robert W. (2021). The Use of Yi Jin Jing to Treat Illness: A Summary of Three Studies. Academia Letters, Article 547, April, 2021, DOI:10.20935/AL547.
- 31 McGee, Robert W. (2021). Tai Chi, Qigong and the Treatment of Disease. Biomedical Journal of Scientific & Technical Research 34(2): 26627-26633 (2021). DOI: 10.26717/BJSTR.2021.34.005531
- 32 McGee, Robert W. (2021). Tai Chi, Qigong and the Treatment of Cancer. Biomedical Journal of Scientific & Technical Research, 34(5): 27,173-27,182 (2021). DOI: 10.26717/BJSTR.2021.34.005621
- 33 McGee, Robert W. (2021). Tai Chi, Qigong and the Treatment of Depression and Anxiety. Biomedical Journal of Scientific & Technical Research 36(2): 28350-28354

- (2021) DOI:10.26717/BJSTR.2021.36.005823
- 34 McGee, Robert W. (2021). Tai Chi, Qigong and the Treatment of Arthritis. Biomedical Journal of Scientific & Technical Research 37(5): 29724-29734 (2021). DOI: 10.26717/BJSTR.2021.37.006051
- 35 McGee, Robert W. (2021). Tai Chi, Qigong and the Treatment of Hypertension. Biomedical Journal of Scientific & Technical Research 39(1): 31055-31062 (2021). DOI: 10.26717/BJSTR.2021.39.006256
- 36 McGee, Robert W. (2021). Ba Duan Jin and the Treatment of Illness in General, and Cognitive Impairment in Particular. Biomedical Journal of Scientific & Technical Research 40(2): 32058-32065 (2021). DOI: 10.26717/BJSTR.2021.40.006424 and
- 37 McGee, Robert W. (2022). Qigong and the Treatment of Illness: Recent Case Studies. Biomedical Journal of Scientific & Technical Research, 43(1): 34250-35253 (2022). DOI: 10.26717/BJSTR.2022.43.006852
- 38 McGee, Robert W. (2022). A Suggestion for Treating Amyotrophic Lateral Sclerosis (ALS), Biomedical Journal of Scientific & Technical Research 44(4): 35627-35631 (2022). DOI:10.26717/BJSTR.2022.44.007072
- 39 McGee, Robert W. (2022). Using Tai Chi and Qigong to Treat Cancer Symptoms. Biomedical Journal of Scientific & Technical Research, 45(2): 36333-36336 (2022).
- 40 McGee, Robert W. (2022). Traditional Chinese Medicine and the Treatment of Cancer, Biomedical Journal of Scientific & Technical Research, 47(4): 38.636-38.639. DOI: 10.26717/BJSTR.2022.47.007520
- 41 McGee, Robert W. (2023). Recent Studies in Traditional Chinese Medicine (TCM), Biomedical Journal of Scientific & Technical Research, 50(4), 41817-41820 (2023). DOI: 10.26717/BJSTR.2023.50.007978
- 42 McGee, Robert W. (2023). Some Beneficial Health Effects of Tai Chi and Qigong. Biomedical Journal of Scientific & Technical Research, 52(3), 43813-43817. August, 2023. DOI: 10.26717/BJSTR.2023.52.008268
- 43 McGee, Robert W. (2023). Tai Chi, Qigong and the Treatment of Dementia, Biomedical Journal of Scientific & Technical Research, 53(5), 45080-45085. DOI: 10.26717/BJSTR.2023.53.008452
- 44 McGee, Robert W. (2024). Tai Chi, Qigong and the Treatment of Breast Cancer, Biomedical Journal of Scientific & Technical Research,54(3), 46024-46027 (2024). DOI: 10.26717/BJSTR.2024.54.008566
- 45 McGee, Robert W. (2024). Using Artificial Intelligence to Conduct Research on the Health Benefits of Tai Chi: A Pilot Study. Biomedical Journal of Scientific & Technical Research, 55(2), 46838-46841. DOI: 10.26717/BJSTR.2024.55.008679
- 46 McGee, Robert W. (2024). Tai Chi, Qigong and the Treatment of Lung Cancer: A Study in Artificial Intelligence, Biomedical Journal of Scientific & Technical Research, 55(4), 47220-47225 (2024). DOI: 10.26717/BJSTR.2024.55.008736

- 47 McGee, Robert W. (2024). Incorporating Qigong into a Western Medical Practice: A Study in Artificial Intelligence, Biomedical Journal of Scientific & Technical Research, 55(5), 47401-47405. DOI: 10.26717/BJSTR.2024.55.008756
- 48 McGee, Robert W. (2024).Incorporating Baduanjin into a Western Medical Practice: A Study in Artificial Intelligence and Traditional Chinese Medicine (TCM). Biomedical Journal of Scientific & Technical Research, 56(1), 47739-47744. DOI: 10.26717/BJSTR.2024.56.008802
- 49 McGee, Robert W. (2024). Incorporating Artificial Intelligence and Traditional Chinese Medicine (TCM) into a Western Medical Practice: A Case Study. Biomedical Journal of Scientific & Technical Research, 56(3), 48149-48154. DOI: 10.26717/BJSTR.2024.56.008864
- 50 McGee, Robert W. (2024). Using Chinese Herbal Medicine to Treat Cancer Patients: A Study Incorporating Artificial Intelligence. Biomedical Journal of Scientific & Technical Research, 56(5), 48647-48655. DOI: 10.26717/BJSTR.2024.56.008924
- 51 McGee, Robert W. (2024). Using Tai Chi, Qigong and Chinese Herbs to Reduce Cholesterol: A Study Incorporating Artificial Intelligence. Biomedical Journal of Scientific & Technical Research, 57(1), 48776-48784. DOI: 10.26717/BJSTR.2024.57.008943
- 52 McGee, Robert W. (2024). Incorporating Tai Chi and Artificial Intelligence into a Medical Practice to Treat Dizziness and Vertigo. Biomedical Journal of Scientific & Technical Research, 57(1), 48939-48944. DOI: 10.26717/BJSTR.2024.57.008960
- 53 McGee, Robert W. (2024). Incorporating Artificial Intelligence, Tai Chi and Qigong into a Gynecology & Obstetrics Practice: Some Recent Case Studies. Herculean Research, 4(1), 81-83.
- 54 McGee, Robert W. (2024). The Use of Artificial Intelligence, Tai Chi and Qigong to Treat Post Traumatic Stress Disorder (PTSD). Biomedical Journal of Scientific & Technical Research. 53(4), 49461-49466. DOI: 10.26717/BJSTR.2024.57.009030
- 55 McGee, Robert W. (2024). Using Artificial Intelligence, Tai Chi and Qigong to Treat Ankylosing Spondylitis. Biomedical Journal of Scientific & Technical Research, 57(5), 49823-49831. DOI:
- 10.26717/BJSTR.2024.57.009080
- 56 McGee, Robert W. (2024). Tai Chi, Qigong and the Treatment of Ankylosing Spondylitis. Herculean Research, 1(5), 124-126. DOI: 10.70222/hres31
- 57 McGee, Robert W. (2024). Using Artificial Intelligence in Medical Research: Some Examples Using Tai Chi and Qigong. Herculean Research, 1(5), 127-131. DOI:10.70222/hres32
- 58 Microsoft Copilot. (2024). https://copilot.microsoft.com/ 59 Archana P, Lala Behari S, Debabrata P, Vinita S. Artificial Intelligence and Virtual Environment for Microalgal Source for Production of Nutraceuticals.

- Biomed J Sci & Tech Res 13(5)-2019. BJSTR. MS.ID.002459. DOI: 10.26717/BJSTR.2019.13.002459. 60 Ahmed Asfari. Artificial Intelligence Role and Clinical Decision Support System Extubation Readiness Trail and Etiometry Scoring System. Biomed J Sci & Tech Res 35(1)-2021. BJSTR. MS.ID.005641
- 61 Ashis Kumar D, Harihar Bhattarai, Saji Saraswathy Gopalan. Determinants of Generic Drug Use Among Medicare Beneficiaries: Predictive Modelling Analysis Using Artificial Intelligence. Biomed J Sci & Tech Res 22(1)-2019. BJSTR.MS.ID.003702.
- 62 Bellido-Casado J, Dufrechou-Negreira E and Munizio-Mello FF. Problem Decision Making in Healthcare: Human Decision or Artificial Intelligence Decision? Biomed J Sci & Tech Res 57(4)-2024. BJSTR. MS.ID.009026
- 63 Chris Caulkins. Detection of Psychological Trauma and Suicide Risk among Emergency Medical Services Personnel: An Artificial Intelligence Approach. Biomed J Sci & Tech Res 23(3)-2019. BJSTR.MS.ID.003893
- 64 Kuo Chen Chou. How the Artificial Intelligence Tool iRNA-PseUis Working in Predicting the RNA Pseudouridine Sites? Biomed J Sci & Tech Res 24(2)-2020. BJSTR.MS.ID.004016.
- 65 Philippe Funk. Biomedical Computation Artificial Intelligence Challenges in Cloud Environments. Biomed J Sci & Tech Res 50(4)-2023. BJSTR. MS.ID.007977 DOI: 10.26717/BJSTR.2023.50.007977
- 66 Swati Gupta, Dheeraj Kumar Sharma, Manish Gupta K. Artificial Intelligence in Diagnosis and Management of Ischemic Stroke. Biomed J Sci & Tech Res 13(3)-2019. BJSTR. MS.ID.002398. DOI: 10.26717/BJSTR.2019.13.002398
- 67 Angela Hsu, Robin Zachariah, James Han and William Karnes. Artificial Intelligence for Colonoscopy: Beyond Polyp Detection A Review of where we are Today and where Al
- can Take us. Biomed J Sci & Tech Res 49(3)-2023. BJSTR. MS.ID.007812 DOI: 10.26717/BJSTR.2023.49.007812
- 68 Adrián P Hunis. The Role of Artificial Intelligence in Oncology: Transforming Cancer Diagnosis and Treatment. Biomed J Sci & Tech Res 57(3)-2024. BJSTR. MS.ID.009013.
- 69 Hamid Yahya Hussain. Frailty and Spousal/Partner Bereavement in Older People: A Systematic Scoping Review Protocol. Biomed J Sci & Tech Res 24(4)-2020. BJSTR. MS.ID.004076.
- 70 Hergan Klaus, Zinterhof Peter, Abed Selim, et al. Challenges implementing and running an Al-Lab: Experience and Literature Review. Biomed J Sci & Tech Res 45(4)-2022. BJSTR.MS.ID.007222
- 71 lk Whan G Kwon, Sung Ho Kim. Digital Transformation in Healthcare. Biomed J Sci & Tech Res 34(5)-2021. BJSTR.MS.ID.005603.
- 72 Jyoti Lamba, Taniya Malhotra, Drishti Palwankar, Vrinda Vats and Akshat Sachdeva. Artificial Intelligence

- in Dentistry: A Literature Review. Biomed J Sci & Tech Res 51(1)-2023. BJSTR.MS.ID.008050
- 73 Jae-Eun Lee. Artificial Intelligence in the Future Biobanking: Current Issues in the Biobank and Future Possibilities of Artificial Intelligence. Biomed J Sci & Tech Res 7(3)-2018 BJSTR
- DOI:10.26717/BJSTR.2018.07.001511
- 74 Luca Marzi, Fabio Vittadello, Alessandra Andreotti, Andrea Piccin, Andrea Mega. Will Artificial Intelligence Unveil Hepatocellular Carcinoma? Biomed J Sci & Tech Res 35(4)-2021. BJSTR. MS.ID.005741 DOI: 10.26717/BJSTR.2021.35.005741
- 75 Rosario Megna, Alberto Cuocolo. Mario Petretta. Applications of Machine Learning in Medicine. Biomed J Sci & Tech Res 20(5)-2019. BJSTR.MS.ID.003503.
- 76 Sotiris Raptis, Christos Ilioudis, Vasiliki Softa and Kiki Theodorou. Artificial Intelligence in Predicting Treatment Response in Non-Small-Cell Lung Cancer (NSCLC). Biomed J Sci & Tech Res 47(3)-2022. BJSTR. MS.ID.007497
- 77 Richard M F, Matthew R F, Andrew Mc K, Tapan K C. FMTVDM©®\*\*\* Nuclear Imaging Artificial (AI) Intelligence but First We Need to Clarify the Use Of (1) Stress, (2) Rest, (3) Redistribution and (4) Quantification. Biomed J Sci&Tech Res 7(2)- 2018. BJSTR.MS.ID.001489. DOI: 10.26717/BJSTR.2018.07.001489.
- 78 Purohit Saraswati and Suneel Kumar C N. Al in Health Care: A Comprehensive Review. Biomed J Sci & Tech Res 57(4)-2024. BJSTR. MS.ID.009032.
- 79 Omar Sayyouh. Machine Learning Application to Combat Superbugs in Hospitals: A Primer to Infection Prevention Practitioners. Biomed J Sci & Tech Res 44(5)-2022. BJSTR. MS.ID.007121
- 80 Shivani S, Abhishek A, Rajvardhan A. Prospects of Artificial Intelligence in Ophthalmic Practice. Biomed J Sci & Tech Res 27(5)-2020. BJSTR. MS.ID.004577
- 81 Woo Sung Son. Drug Discovery Enhanced by Artificial Intelligence. Biomed J Sci & Tech Res 12(1)-2018. BJSTR. MS.ID.002189. DOI: 10.26717/BJSTR.2018.11.002189.
- 82 Michael L Carty and Stephane Bilodeau. Artificial Intelligence and Medical Oxygen. Biomed J Sci & Tech Res 51(2)-2023. BJSTR. MS.ID.008062 DOI: 10.26717/BJSTR.2023.51.008062
- 83 Benjamin Wu, Yucheng Liu, Meng Jou Wu, Hiram Shaish and Hong Yun Ma. Usage of Artificial Intelligence in Gallbladder Segmentation to Diagnose Acute Cholecystitis. A Case Report. Biomed J Sci & Tech Res 55(2)-2024.BJSTR. MS.ID.008670
- 84 Min Wu. Modeling of an Intelligent Electronic Medical Records System. Biomed J Sci & Tech Res 19(4)-2019. BJSTR. MS.ID.003326.
- 85 Mingbo Zhang, Huipu Han, Zhili Xu, Ming Chu. Applications of Machine Learning in Drug Discovery. Biomed J Sci & Tech Res 23(1)-2019. BJSTR.MS.ID.003831.
- 86 M Ablameyko, N Shakel. Doctor-Patient-Artificial

- Intelligence Relations in Smart Healthcare. Biomed J Sci & Tech Res 44(5)-2022. BJSTR.MS.ID.007128.
- 87 Marcos A M Almeida and Matheus H C de Araujo. The Use of Artificial Intelligence in the Classification of Medical Images of Brain Tumors. Biomed J Sci & Tech Res 53(4)-2023.BJSTR. MS.ID.008450
- 88 Emmanuel Andrès, Nathalie Jeandidier, Noel Lorenzo Villalba, Laurent Meyer, Abrar Ahmad Zulfiqar, et al. Currents and Emerging Technologies for Diabetes Care. Biomed J Sci & Tech Res 25(2)-2020.BJSTR. MS.ID.004161
- 89 Bryan, Alexis. 10 Most Common Health Conditions in The U.S. In 2024. Talktomira.com, January 1, 2024. https://www.talktomira.com/post/10-most-commonhealth-conditions-in-the-u-s
- 90 McGee, Robert W. (2023). Don't Trust ChatGPT: A Case Study of a Defective Research Tool. Working Paper, November 21. DOI: 10.13140/RG.2.2.27719.68006
- 91 McGee, Robert W. (2023). An Al Interview with Bruce Lee. Working Paper, November 24. DOI: 10.13140/RG.2.2.16672.76803
- 92 McGee, Robert W. (2023). Using ChatGPT and Bing Image Creator to Create Images of Martial Artists: An Application of Artificial Intelligence to Create Art. Working Paper, December 14. DOI:10.13140/RG.2.2.19695.61603
- 93 McGee, Robert W. (2023). Using Artificial Intelligence to Create Art: An Experimental Study Using Martial Arts Examples. Working Paper, December 24. DOI: 10.13140/RG.2.2.30971.08486
- 94 McGee, Robert W. (2024). Creating a Quiz Using Artificial Intelligence: An Experimental Study. Working Paper, April 26. DOI: 10.13140/RG.2.2.28734.29768
- 95 McGee, Robert W. (2023). Is Chat GPT Biased against Conservatives? An Empirical Study. Working Paper, February 14. DOI: 10.13140/RG.2.2.27880.55047 96 McGee, Robert W. (2023). Is It Possible to Be an Affirmative Action Employer and an Equal Opportunity Employer at the Same Time? A ChatGPT Answer. Working Paper, April 8, 2023. DOI: 10.13140/RG.2.2.17946.11205
- 97 McGee, Robert W. (2023). Is ESG a Bad Idea? The ChatGPT Response. Working Paper, April 8, 2023. DOI: 10.13140/RG.2.2.34723.32804
- 98 McGee, Robert W. (2023). Do Institutional Review Boards (IRBs) Violate the Rights of Free Speech and Press? A Study of Artificial Intelligence and Philosophy. Working Paper, May 17. DOI: 10.13140/RG.2.2.31817.11365
- 99 McGee, Robert W. (2023). Comparing Gab's Al Image Generator to Microsoft Bing's Image Maker: An Experimental Study. Working Paper. December 29. DOI: 10.13140/RG.2.2.35153.51049
- 100 McGee, Robert W. (2023). Sex, Politics and Artificial Intelligence: A Comparison of the Gabby and Bing Image Creators. Working Paper. December 29. DOI:

- 10.13140/RG.2.2.16718.23369
- 101 McGee, Robert. W. (2024). Are Chatbots Politically Biased? Four Case Studies. Working Paper, February 15. DOI: 10.13140/RG.2.2.23380.78726
- 102 McGee, Robert W. (2024). Is ChatGPT Biased against Conservatives? A Short Commentary. International Journal of School and Cognitive Psychology, 11(3), 1. Published April 3, 2024. DOI: 10.35248/2469-9837.23.10.349
- 103 McGee, Robert W. (2024). Forbidden Topics in Artificial Intelligence Research: Two Case Studies. Working Paper. July 10. DOI: 10.13140/RG.2.2.20842.53444
- 104 PubMed. (2024). https://pubmed.ncbi.nlm.nih.gov/105 Morandi G, Pepe D. Tai Chi and Qigong in Medical Research: A Comprehensive Bibliometric Analysis. Altern Ther Health Med. 2023 May;29(4):258-265. PMID: 34144532.
- 106 Zhang YP, Hu RX, Han M, Lai BY, Liang SB, Chen BJ, Robinson N, Chen K, Liu JP. Evidence Base of Clinical Studies on Qi Gong: A Bibliometric Analysis. Complement Ther Med. 2020 May;50:102392. doi: 10.1016/j.ctim.2020.102392. Epub 2020 Apr 6. PMID: 32444061.
- 107 Yang GY, Sabag A, Hao WL, Zhang LN, Jia MX, Dai N, Zhang H, Ayati Z, Cheng YJ, Zhang CH, Zhang XW, Bu FL, Wen M, Zhou X, Liu JP, Wayne PM, Ee C, Chang D, Kiat H, Hunter J, Bensoussan A. Tai Chi for health and well-being: A bibliometric analysis of published clinical studies between 2010 and 2020. Complement Ther Med. 2021 Aug;60:102748. doi: 10.1016/j.ctim.2021.102748. Epub 2021 Jun 10. PMID: 34118389.
- 108 Chen J, Xue X, Xu J, Zeng J, Xu F. Emerging Trends and Hotspots in Tai Chi Fall Prevention: Analysis and Visualization. Int J Environ Res Public Health. 2022 Jul 7;19(14):8326. doi: 10.3390/ijerph19148326. PMID: 35886172; PMCID: PMC9320470.
- 109 You Y, Min L, Tang M, Chen Y, Ma X. Bibliometric Evaluation of Global Tai Chi Research from 1980-2020. Int J Environ Res Public Health. 2021 Jun 7;18(11):6150. doi: 10.3390/ijerph18116150. PMID: 34200236; PMCID: PMC8201343.
- 110 Liang L, Zhang M, Li K, Hou J, Wu C. A trend of Tai Chi in osteoporosis research: A bibliometric analysis. Complement Ther Med. 2024 Nov;86:103083. doi: 10.1016/j.ctim.2024.103083. Epub 2024 Sep 14. PMID: 39284420.
- 111 Yang GY, Wang LQ, Ren J, Zhang Y, Li ML, Zhu YT, Luo J, Cheng YJ, Li WY, Wayne PM, Liu JP. Evidence base of clinical studies on Tai Chi: a bibliometric analysis. PLoS One. 2015 Mar 16;10(3):e0120655. doi: 10.1371/journal.pone.0120655. PMID: 25775125; PMCID: PMC4361587.
- 112 Zhang XY, Ye F, Yin ZH, Li YQ, Bao QN, Xia MZ, Chen ZH, Zhong WQ, Wu KX, Yao J, Liang FR. Research status and trends of physical activity on depression or anxiety: a bibliometric analysis. Front

- Neurosci. 2024 Mar 22;18:1337739. doi: 10.3389/fnins.2024.1337739. PMID: 38586196; PMCID: PMC10996447.
- 113 Zhu R, Niu Y, Xu H, Wang S, Mao J, Lei Y, Xiong X, Zhou W, Guo L. Traditional Chinese Exercises for Cardiovascular Diseases: A Bibliometric Analysis. Percept Mot Skills. 2024 Apr;131(2):514-536. doi: 10.1177/00315125241230599. Epub 2024 Feb 13. PMID: 38349750.
- 114 Jiang B, Feng C, Hu H, George D, Huang T, Li Z. Traditional Chinese Exercise for Neurodegenerative Diseases: A Bibliometric and Visualized Analysis With Future Directions. Front Aging Neurosci. 2022 Jun 27;14:932924. doi: 10.3389/fnagi.2022.932924. PMID: 35832067; PMCID: PMC9271864.
- 115 Zeng Q, Liu X, Li L, Zhang Q, Luo C, Yang S, Wu S, Yang A, Li J. Bibliometric Analysis of Research on Traditional Chinese Exercise and Osteoarthritis. J Pain Res. 2024 Feb 8;17:559-569. doi: 10.2147/JPR.S436457. PMID: 38347853; PMCID: PMC10860586.
- 116 Consentino R, Santos MJ, Matos LC, Machado JP. Bibliometric Analysis of Traditional Chinese Medicine Scientific Production between 1982 and 2016 Indexed in PubMed. Medicines (Basel). 2018 May 3;5(2):41. doi: 10.3390/medicines5020041. PMID: 29751517; PMCID: PMC6023452.
- 117 Guan C, Gu Y, Cheng Z, Xie F, Yao F. Global trends of traditional Chinese exercises for musculoskeletal disorders treatment research from 2000 to 2022: A bibliometric analysis. Front Neurosci. 2023 Feb 10;17:1096789. doi: 10.3389/fnins.2023.1096789. PMID: 36845420; PMCID: PMC9950260.
- 118 Zhang J, Yang Z, Fan H. Knowledge structure and future research trends of body-mind exercise for mild cognitive impairment: a bibliometric analysis. Front Neurol. 2024 Jan 23;15:1351741. doi: 10.3389/fneur.2024.1351741. PMID: 38322586; PMCID: PMC10844579.
- 119 Ge LK, Huang Z, Wei GX. Global research trends in the effects of exercise on depression: A bibliometric study over the past two decades. Heliyon. 2024 Jun 7;10(12):e32315. doi: 10.1016/j.heliyon.2024.e32315. PMID: 39183831; PMCID: PMC11341242.
- 120 Li W, Weng L, Xiang Q, Fan T. Trends in Research on Traditional Chinese Health Exercises for Improving Cognitive Function: A Bibliometric Analysis of the Literature From 2001 to 2020. Front Public Health. 2022 Jan 6;9:794836. doi: 10.3389/fpubh.2021.794836. PMID: 35071171; PMCID: PMC8770942.
- 121 Li Y, Zhang H, Wang Y. Tai Chi Ameliorates Coronary Heart Disease by Affecting Serum Levels of miR-24 and miR-155. Front Physiol. 2019 May 29;10:587. doi: 10.3389/fphys.2019.00587. PMID: 31191331; PMCID: PMC6548805.
- 122 Ng SM, Wang CW, Ho RT, Ziea TC, He J, Wong VC, Chan CL. Tai chi exercise for patients with heart disease: a systematic review of controlled clinical trials. Altern

- Ther Health Med. 2012 May-Jun;18(3):16-22. Erratum in: Altern Ther Health Med. 2012 Nov-Dec;18(6):79. Tin-Hung Ho, Rainbow [corrected to Ho, Rainbow Tin-Hung]; Tat-Chi Ziea, Eric [corrected to Ziea, Tat-Chi]; He, J [removed]; Chi-Woon Taam Wong, Vivian [corrected to Wong, Vivian Chi-Woon]; Lai-Wan Chan, Cecilia [corrected to Chan, Cecilia Lai-Wan]. PMID: 22875558.
- 123 Dalusung-Angosta A. The impact of Tai Chi exercise on coronary heart disease: a systematic review. J Am Acad Nurse Pract. 2011 Jul;23(7):376-81. doi: 10.1111/j.1745-7599.2011.00597.x. Epub 2011 Mar 31. PMID: 21696487.
- 124 Lan C, Chen SY, Wong MK, Lai JS. Tai Chi training for patients with coronary heart disease. Med Sport Sci. 2008;52:182-194. doi: 10.1159/000134299. PMID: 18487898.
- 125 Zhang G, Wang S, Gu Y, Song L, Yu S, Feng X. Tai Chi Improves Coronary Heart Disease Risk by Inactivating MAPK/ERK Pathway through Serum miR-126. Evid Based Complement Alternat Med. 2020 Apr 25;2020:4565438. doi: 10.1155/2020/4565438. PMID: 32382289; PMCID: PMC7199556.
- 126 Yu Y, Wu T, Wu M, Liu S, Chen X, Wu J, Guo X, Yang L. Evidence map of traditional Chinese exercises. Front Public Health. 2024 Sep 18;12:1347201. doi: 10.3389/fpubh.2024.1347201. PMID: 39360254; PMCID: PMC11445016.
- 127 Huston P, McFarlane B. Health benefits of tai chi: What is the evidence? Can Fam Physician. 2016 Nov;62(11):881-890. PMID: 28661865; PMCID: PMC9844554.
- 128 Arring NM, Barton DL, Brooks T, Zick SM. Integrative Therapies for Cancer-Related Fatigue. Cancer J. 2019 Sep/Oct;25(5):349-356. doi:
- 10.1097/PPO.0000000000000396. PMID: 31567463; PMCID: PMC7388739.
- 129 Cheung DST, Takemura N, Lam TC, Ho JCM, Deng W, Smith R, Yan Y, Lee AWM, Lin CC. Feasibility of Aerobic Exercise and Tai-Chi Interventions in Advanced Lung Cancer Patients: A Randomized Controlled Trial. Integr Cancer Ther. 2021 Jan-Dec;20:15347354211033352. doi:
- 10.1177/15347354211033352. PMID: 34549648; PMCID: PMC8461121
- 130 Maindet C, Burnod A, Minello C, George B, Allano G, Lemaire A. Strategies of complementary and integrative therapies in cancer-related pain-attaining exhaustive cancer pain management. Support Care Cancer. 2019 Aug;27(8):3119-3132. doi: 10.1007/s00520-019-04829-7. Epub 2019 May 11. PMID: 31076901.
- 131 Zeng Y, Luo T, Xie H, Huang M, Cheng AS. Health benefits of qigong or tai chi for cancer patients: a systematic review and meta-analyses. Complement Ther Med. 2014 Feb;22(1):173-86. doi: 10.1016/j.ctim.2013.11.010. Epub 2013 Dec 18. PMID: 24559833.
- 132 Xiong T, Bai X, Wei X, Wang L, Li F, Shi H, Shi Y.

- Exercise Rehabilitation and Chronic Respiratory Diseases: Effects, Mechanisms, and Therapeutic Benefits. Int J Chron Obstruct Pulmon Dis. 2023 Jun 19;18:1251-1266. doi: 10.2147/COPD.S408325. PMID: 37362621; PMCID: PMC10289097.
- 133 Nolan CM, Rochester CL. Exercise Training Modalities for People with Chronic Obstructive Pulmonary Disease. COPD. 2019 Dec;16(5-6):378-389. doi: 10.1080/15412555.2019.1637834. Epub 2019 Nov 4. PMID: 31684769.
- 134 Zhang H, Hu D, Xu Y, Wu L, Lou L. Effect of pulmonary rehabilitation in patients with chronic obstructive pulmonary disease: a systematic review and meta-analysis of randomized controlled trials. Ann Med. 2022 Dec;54(1):262-273. doi: 10.1080/07853890.2021.1999494. PMID: 35037535; PMCID: PMC8765243.
- 135 Liu W, Liu XM, Huang YL, Yu PM, Zhang XW, Zhao C, Mao B, Min J, Jiang HL. Tai Chi as a complementary exercise for pulmonary rehabilitation in chronic obstructive pulmonary disease: A randomised controlled trial. Complement Ther Med. 2023 Nov;78:102977. doi: 10.1016/j.ctim.2023.102977. Epub 2023 Aug 23. PMID: 37625624.
- 136 Ratarasarn K, Kundu A. Yoga and Tai Chi: a mind-body approach in managing respiratory symptoms in obstructive lung diseases. Curr Opin Pulm Med. 2020 Mar;26(2):186-192. doi: 10.1097/MCP.00000000000000654. PMID: 31895882.
- 137 Siu PM, Yu AP, Chin EC, Yu DS, Hui SS, Woo J, Fong DY, Wei GX, Irwin MR. Effects of Tai Chi or Conventional Exercise on Central Obesity in Middle-Aged and Older Adults: A Three-Group Randomized Controlled Trial. Ann Intern Med. 2021 Aug;174(8):1050-1057. doi: 10.7326/M20-7014. Epub 2021 Jun 1. PMID: 34058100.
- 138 Hamasaki H. Martial Arts and Metabolic Diseases. Sports (Basel). 2016 May 9;4(2):28. doi: 10.3390/sports4020028. PMID: 29910276; PMCID: PMC5968920.
- 139 Wang R, Zhou H, Wang YC, Chang XL, Wang XQ. Benefits of Tai Chi Quan on neurodegenerative diseases: A systematic review. Ageing Res Rev. 2022 Dec;82:101741. doi: 10.1016/j.arr.2022.101741. Epub 2022 Oct 8. PMID: 36220604.
- 140 Klein PJ. Tai Chi Chuan in the management of Parkinson's disease and Alzheimer's disease. Med Sport Sci. 2008;52:173-181. doi: 10.1159/000134298. PMID: 18487897.
- 141 Zhao H, Teng J, Song G, Fu X, Pan X, Shen S, Yan Y, Liu C. The optimal exercise parameters of Tai Chi on the effect of glucose and lipid metabolism in patients with type 2 diabetes mellitus: A meta-analysis. Complement Ther Med. 2023 Dec;79:102995. doi: 10.1016/j.ctim.2023.102995. Epub 2023 Oct 17. PMID: 37858683.

- 142 Xinzheng W, Fanyuan J, Xiaodong W. The effects of Tai Chi on glucose and lipid metabolism in patients with diabetes mellitus: A meta-analysis. Complement Ther Med. 2022 Dec;71:102871. doi: 10.1016/j.ctim.2022.102871. Epub 2022 Aug 26. PMID: 36038033.
- 143 Thukral N, Kaur J, Malik M. A Systematic Review and Meta-analysis on Efficacy of Exercise on Posture and Balance in Patients Suffering from Diabetic Neuropathy. Curr Diabetes Rev. 2021;17(3):332-344. doi: 10.2174/1573399816666200703190437. PMID: 32619175.
- 144 Palermi S, Sacco AM, Belviso I, Marino N, Gambardella F, Loiacono C, Sirico F. Effectiveness of Tai Chi on Balance Improvement in Type 2 Diabetes Patients: A Systematic Review and Meta-Analysis. J Aging Phys Act. 2020 Mar 3;28(5):787-797. doi: 10.1123/japa.2019-0242. PMID: 32131053.
- 145 Wang Y, Yan J, Zhang P, Yang P, Zhang W, Lu M. Tai Chi Program to Improve Glucose Control and Quality of Life for the Elderly With Type 2 Diabetes: A Meta-analysis. Inquiry. 2022 Jan-Dec;59:469580211067934. doi: 10.1177/00469580211067934. PMID: 35282699; PMCID: PMC9111975.
- 146 Breslin KT, Reed MR, Malone SB. An holistic approach to substance abuse treatment. J Psychoactive Drugs. 2003 Apr-Jun;35(2):247-51. doi: 10.1080/02791072.2003.10400006. PMID: 12924747.
- 147 Zhang P, Li Z, Yang Q, Zhou J, Ma X. Effects of Taijiquan and Qigong exercises on depression and anxiety levels in patients with substance use disorders: A systematic review and meta-analysis. Sports Med Health Sci. 2021 Dec 30;4(2):85-94. doi: 10.1016/j.smhs.2021.12.004. PMID: 35782275; PMCID: PMC9219269.
- 148 Zhu D, Xu D, Dai G, Wang F, Xu X, Zhou D. Beneficial effects of Tai Chi for amphetamine-type stimulant dependence: a pilot study. Am J Drug Alcohol Abuse. 2016 Jul;42(4):469-78. doi: 10.3109/00952990.2016.1153646. Epub 2016 May 21. PMID: 27211290.
- 149 Zhu D, Jiang M, Xu D, Schöllhorn WI. Long-Term Effects of Mind-Body Exercises on the Physical Fitness and Quality of Life of Individuals With Substance Use Disorder-A Randomized Trial. Front Psychiatry. 2020 Dec 18;11:528373. doi: 10.3389/fpsyt.2020.528373. PMID: 33391039; PMCID: PMC7775308.
- 150 Yang Y, Verkuilen J, Rosengren KS, Mariani RA, Reed M, Grubisich SA, Woods JA. Effects of a Taiji and Qigong intervention on the antibody response to influenza vaccine in older adults. Am J Chin Med. 2007;35(4):597-607. doi: 10.1142/S0192415X07005090. PMID: 17708626.
- 151 Yang Y, Verkuilen J, Rosengren KS, Mariani RA, Reed M, Grubisich SA, Woods JA, Schlagal B. Effects of a traditional Taiji/Qigong curriculum on older adults'

immune response to influenza vaccine. Med Sport Sci. 2008;52:64-76. doi: 10.1159/000134285. PMID: 18487887.

152 Tafaj-Reddy O, Brar A, Markell MS. Complementary and integrative medicine in kidney transplantation. Curr Opin Organ Transplant. 2019 Feb;24(1):87-91. doi: 10.1097/MOT.000000000000000001. PMID: 30540575.

153 Ha M, Yang Y, Shi Y, Lu Y, Chen K, Zhang S, Luo Y. Efficacy of Tai Chi on Patients With Chronic Kidney Disease. Biol Res Nurs. 2022 Jan;24(1):115-122. doi: 10.1177/10998004211047993. Epub 2021 Nov 26. PMID: 34825589.

154 Chang JH, Koo M, Wu SW, Chen CY. Effects of a 12-week program of Tai Chi exercise on the kidney disease quality of life and physical functioning of patients with end-stage renal disease on hemodialysis. Complement Ther Med. 2017 Feb;30:79-83. doi: 10.1016/j.ctim.2016.12.002. Epub 2016 Dec 7. PMID: 28137531.

155 Shahgholian N, Eshghinezhad A, Mortazavi M. The effect of tai chi exercise on quality of life in hemodialysis patients. Iran J Nurs Midwifery Res. 2014 Mar;19(2):152-8. PMID: 24834084; PMCID: PMC4020024.

156 Abbott R, Lavretsky H. Tai Chi and Qigong for the treatment and prevention of mental disorders. Psychiatr

Clin North Am. 2013 Mar;36(1):109-19. doi: 10.1016/j.psc.2013.01.011. PMID: 23538081; PMCID: PMC3917559.

269

157 Liu X, Clark J, Siskind D, Williams GM, Byrne G, Yang JL, Doi SA. A systematic review and meta-analysis of the effects of Qigong and Tai Chi for depressive symptoms. Complement Ther Med. 2015 Aug;23(4):516-34. doi: 10.1016/j.ctim.2015.05.001. Epub 2015 May 27. PMID: 26275645.

158 Liu X, Clark J, Siskind D, Williams GM, Byrne G, Yang JL, Doi SA. A systematic review and meta-analysis of the effects of Qigong and Tai Chi for depressive symptoms. Complement Ther Med. 2015 Aug;23(4):516-34. doi: 10.1016/j.ctim.2015.05.001. Epub 2015 May 27. PMID: 26275645.

159 Carcelén-Fraile MDC, Aibar-Almazán A, Martínez-Amat A, Jiménez-García JD, Brandão-Loureiro V, García-Garro PA, Fábrega-Cuadros R, Rivas-Campo Y, Hita-Contreras F. Qigong for mental health and sleep quality in postmenopausal women: A randomized controlled trial. Medicine (Baltimore). 2022 Sep 30;101(39):e30897.

10.1097/MD.0000000000030897. PMID: 36181076; PMCID: PMC9524897