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Review

Applications of artificial intelligence in the research of molecular mechanisms of traditional Chinese medicine formulas



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ABSTRACT

Traditional Chinese medicine formula (TCMF) represents a fundamental component of Chinese medical practice, incorporating medical knowledge and practices from both Han Chinese and various ethnic minorities, while providing comprehensive insights into health and disease. The foundation of TCMF lies in its holistic approach, manifested through herbal compatibility theory, which has emerged from extensive clinical experience and evolved into a highly refined knowledge system. Within this framework, Chinese herbal medicines exhibit intricate characteristics, including multi-component interactions, diverse target sites, and varied biological pathways. These complexities pose significant challenges for understanding their molecular mechanisms. Contemporary advances in artificial intelligence (AI) are reshaping research in traditional Chinese medicine (TCM), offering immense potential to transform our understanding of the molecular mechanisms underlying TCMFs. This review explores the application of AI in uncovering these mechanisms, highlighting its role in compound absorption, distribution, metabolism, and excretion (ADME) prediction, molecular target identification, compound and target synergy recognition, pharmacological mechanisms exploration, and herbal formula optimization. Furthermore, the review discusses the challenges and opportunities in AI-assisted research on TCMF molecular mechanisms, promoting the modernization and globalization of TCM.

1. Introduction

Traditional Chinese medicine (TCM) embodies millennia of medical knowledge and maintains a crucial role in preserving the health of the Chinese population throughout history. Traditional Chinese medicine formulas (TCMFs), characterized by their multi-component, multi-target, and multi-pathway properties, demonstrate particular effectiveness in treating complex and chronic diseases¹. A notable example is artemisinin, a sesquiterpene lactone extracted from *Artemisia annua*, which has exhibited significant anti-malarial properties and saved numerous lives globally². During the COVID-19 pandemic, TCMFs play a significant role in patient care. A key aspect of this contribution is the implementation of the “three medicines and three formulas” (San Yao San Fang). These interventions effectively alleviated clinical symptoms and accelerated recovery among SARS patients^{3,4}. In modernizing TCMFs, researchers have proposed various strategies to understand the holistic regulatory mechanisms underlying their therapeutic efficacy. Academics Boli Zhang and Yongyan Wang advocate a component compatibility-based

strategy for TCM formulation⁵. This approach emphasizes “identifying primary components, enhancing principal therapeutic effects, and reducing adverse effects” to develop new formula compositions guided by component compatibility. Professor Weidong Zhang’s research team⁶ presents a system-oriented strategy for TCMF pharmacology investigation, aiming to analyze pharmacological effects through integrated modern analytical technologies, including chemical substance profiling, compound pharmacokinetic (PK) assay, and component PK-pharmacodynamic (PD) correlation analysis. Dean Guo’s team⁷ establishes a systematic analytical framework for active component identification in TCMFs, utilizing spatial metabolomics based on mass spectrometry imaging to comprehensively analyze component distribution and tissue-specific metabolic patterns *in vivo*. Nevertheless, understanding the pharmacological mechanisms remains challenging due to the multi-component, multi-target, and multi-pathway nature of TCMFs.

Since the 1990s, artificial intelligence (AI) techniques, including natural language processing (NLP)⁸⁻¹³, machine learning (ML)¹⁴⁻¹⁸, computer vision (CV)¹⁹⁻²⁴, and robotics²⁵⁻²⁹, have achieved significant breakthroughs. AI technologies demonstrate substantial impact in the biopharmaceutical sector, influencing drug discovery, efficacy monitoring, pharmacological analysis, and health promotion³⁰⁻³⁴. For instance, ML models incorporating na-

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ive bayes (NB), decision tree, logistic regression, and support vector machine (SVM) algorithms have been employed to identify anti-psychotic DDIs³⁵. ML and knowledge graph (KG) technologies facilitate new indication discovery for approved drugs by integrating various information, including structural characteristics, affected pathways, and molecular mechanisms^{36, 37}. Deep learning (DL) demonstrates particular advantages in drug development, enhancing discovery efficiency, cost effectiveness, and success rates in identifying potential drug candidates³⁸⁻⁴⁰. Exscientia developed a PKC theta inhibitor for immunology and inflammation diseases within 11 months using DL technology⁴¹. In-silico Medicine identified a novel inhibitor (ISM001-055) targeting anti-fibrotic pathways in just 9 months using their DL-driven drug discovery pipeline⁴². This acceleration in drug R&D stems from AI's efficient handling of multi-dimensional data, enabling probabilistic modeling of polypharmacological interactions.

AI applications in TCM modernization encompass the four diagnostic methods, syndrome differentiation, and digital preservation of TCM knowledge (Table 1). AI advances have enhanced the Chinese medicine industry's intelligent processes, particularly in ingredient identification, component validation, herb cultivation, quality standardization, auxiliary diagnosis, health management, target prediction, mechanism dissection, clinical efficacy evaluation, and personalized formulation (Fig.1). DL has accelerated multi-omics data analysis and scientific law discovery, enabling precise therapeutic effect assessment for TCMFs^{43, 44}. However, TCMFs' holistic nature and complex component-target interactions present significant challenges in elucidating their molecular mechanisms. AI shows promise in addressing these challenges through analyzing ingredient combinations, interpreting component-target interactions, and revealing multi-target synergistic effects⁴⁵⁻⁴⁷.

This review explores the applications of AI in studying molecular mechanisms of TCMFs. Key area of focus include compound ADME prediction, molecular target identification, synergy effect elucidation, pharmacological mechanism interpretation, and formula component optimization. The discussion delves into the challenges and future prospects of AI-assisted mechanistic investigations of TCMFs. By integrating ancient wisdom (TCM) with modern technology (AI), this approach has the potential to significantly enhance human healthcare.

2. Applications of AI in the study of molecular mechanisms of TCMFs

2.1. ADME prediction of components for TCMFs

The PK behavior of drugs in the human body can be charac-

terized by key parameters related to ADME, such as solubility, permeability, plasma protein binding (PPB), oral bioavailability, blood-brain barrier (BBB) permeability, human intestinal absorption (HIA), area under the plasma concentration-time curve (AUC), urinary excretion, and half-life. These parameters are essential in determining the viability of candidate drug development⁵⁵. In the context of TCM formulas, ADME and PK studies serve a vital role in elucidating their PD material basis and underlying therapeutic mechanisms⁵⁶⁻⁵⁸. However, the spatial conformation complexity and physicochemical property diversity of natural products (NPs) and formula components present significant challenges for the systematic analysis of their PK characteristics.

In recent years, AI-driven methods have demonstrated significant potential in addressing these challenges, facilitating efficient identification of TCM components. For example, Zhang et al. developed a BBB permeability prediction model through ML algorithms, specifically designed for NPs derived from TCM⁵⁹. This model addressed the limitations of conventional models based on synthetic drugs in TCM small molecules prediction. By combining the SVM and random forest (RF) algorithms, the model achieved an accuracy of 81% in predicting BBB permeability for TCM-derived compounds. Furthermore, the model utilized key factors affecting BBB permeability (such as lipophilicity, hydrogen bond count, and molecular polarity) to accurately predict differences in permeability between predecessor and descendant metabolites. Guo et al. employed the admetSAR platform to conduct virtual ADME property screening on 159 compounds identified from Xiao'er Fu Pi Granules (XEFP), encompassing flavonoids, glycosides, alkaloids, and other components⁶⁰. The analysis identified 129 out of 159 compounds with favorable absorption and low toxicity profiles. Wang et al. developed TCM-ADMEpred, a novel multi-component PK prediction model for TCM formulas⁶¹. By integrating PK data and the structure information of TCM components, the model employed the trapezoidal rule to calculate the AUC time curves of seven components from Yuanhu Zhitong Formula (YZP). Additionally, the introduction of $\Gamma +$ was used to quantify PK correlations among structurally similar components, enabling the successful prediction of the metabolic behavior of three alkaloids in YZP. This study demonstrates the potential of incorporating structural information into PK modeling to provide quantitative insights into the complex pharmacokinetics of TCMFs.

While traditional ADME prediction methods, such as PBPK models, can simulate compound absorption, distribution, and metabolism, their application to TCM systems remains limited due to sophisticated components and intricate pharmacokinetics of these systems. For instance, the absorption and transport (CAT) model within the PBPK framework can simulate drug absorption across different anatomical regions of the small intest-

Table 1 Applications of AI in TCM.

Application	Algorithm	Description	Reference
Tongue diagnosis	Faster R-CNN	A model is constructed using the Faster R-CNN algorithm, which infers the clinical syndromes of subjects by learning the local features of teeth-marked tongues and cracked tongues from tongue image data.	Liu et al., 2019 ⁴⁸
Tongue diagnosis	GoogleNet, ResNet	DL modeling is employed to classify and assess three primary tongue features in clinical patients: teeth marks, cracks, and tongue coating thickness.	Song et al., 2021 ⁴⁹
Face diagnosis	DL	An automatic TCM facial complexion diagnosis algorithm based on multi-feature fusion of facial characteristics, addressing the issue of TCM facial complexion classification.	Lin et al., 2021 ⁵⁰
Eye diagnosis	GAN	A retinal vessel segmentation method combining with the generative adversarial network (GAN) is proposed for the classification and diagnosis of patient eye images.	Li et al., 2020 ⁵¹
Syndrome Classification	KNN, FCNN, and 1D-CNN	Three AI algorithms (i.e., multi-label k-nearest neighbors, fully connected neural networks, and one-dimensional convolutional neural networks) are utilized to explore 28 common clinical syndromes of TCM zang-fu differentiation.	Du et al., 2023 ⁵²
Knowledge integration	KG	A large-scale KG is built to reflect characteristics of Yin Deficiency Syndrome through integrating medical texts and physicians, principles and methods, prescriptions and medicinals, as well as syndrome differentiation and treatment.	Zeng et al., 2023 ⁵³
Knowledge integration	KG	A KG about the Shanghan Lun is designed and constructed, utilizing TCM named entity recognition (NER) technology to mine literature related to Yangming disease.	Kuang, 2022 ⁵⁴

Note, CNN: Convolutional Neural Network; KNN: K-nearest neighbor; BP: Back Propagation; GAN: Generative Adversarial Network; KG: Knowledge Graph; FCNN: fully connected neural network.

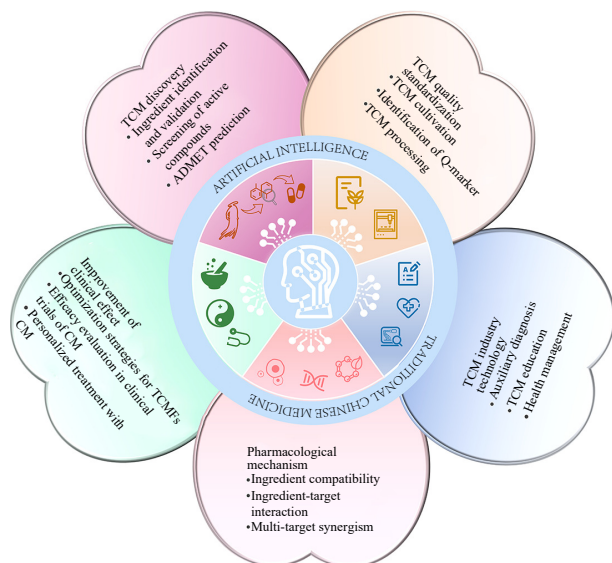


Fig. 1 Applications of AI in the TCM industry.

ine but lacks accuracy in accounting for dynamic factors, such as dissolution rate, pH-dependent solubility changes, first-pass effects, and drug degradation. These limitations result in reduced predictive accuracy for drugs with low solubility or permeability⁶². In contrast, AI technologies, particularly graph neural networks (GNNs)^{63,64}, excel in capturing dynamic molecular behaviors of compounds, such as physicochemical properties, molecular representations, and drug-like characteristics. For instance, Yang et al. demonstrated that GCNN models surpassed traditional RF models in PD studies (e.g., rat PPB, human PXR activation), achieving a 14% improvement in R^2 values⁶⁵. Similarly, Liu et al. applied multi-task GCNN models to solubility and PXR-related investigations, consistently outperforming Cubist models across various metrics⁶⁶. Comparisons between traditional and AI-based compound ADME prediction are summarized in Table 2⁶⁷⁻⁶⁹. AI-based ADME prediction approaches are more appropriate for PD study of TCM components since these approaches are superior to

traditional methods in data processing, mathematical modeling, and dynamic prediction. Currently, several online platforms that integrate AI technologies have been developed for ADME/PK research for TCM (Table 3)⁷⁰⁻⁷⁷. Although the reliability of ADME models in identifying the PD material basis of TCMFs remains a subject of debate, particularly regarding their ability to capture interactions among complex components, such platforms have significantly accelerated PK studies of TCMFs. AI models predict the dynamic behavior of TCM components through incorporating molecular and conformational information (e.g., molecular interaction forces, conformational energy), thereby enhancing model generalization and predictive accuracy. This approach accelerates investigations into the PD material basis of TCMFs and facilitates the elucidation of their mechanisms of action, ultimately supporting their clinical translation and application.

2.2. Molecular target prediction for TCMFs

Current ADME prediction models facilitate the efficient identification of compounds with favorable PK profiles, forming a critical foundation for constructing component–target interaction networks and dissecting the molecular mechanisms underlying TCMFs. Fully elucidating the “multi-component, multi-target” nature of TCMFs requires explicit characterization of the interactions between bioactive compounds and their corresponding molecular targets⁷⁸⁻⁸⁰. Traditionally, molecular targets of TCM compounds are identified through biological experiments, which is a time-consuming and costly process. Moreover, conventional experimental methods often encounter difficulties in systematically identifying the multiple molecular targets associated with the various active compounds of formulas, limiting understanding of the target clusters and their synergistic interactions.

Biological processes induced by TCMFs can be modeled *via* heterogeneous molecule networks, facilitating network-driven identification of therapeutic targets for these formulas. During the network construction process, TCMFs-related disease symptoms, compatibility herbs, active components, molecule targets, and multi-omics information are retrieved from public databases (Table 4). In detailed investigations, Qi et al. utilized structure-

Table 2 Comparisons between traditional and AI-based methods for compound ADME prediction.

Metric	Traditional methods	AI-based methods	Reference
Data Processing	Relies on manually curated datasets and handcrafted feature selection	Employs automated data preprocessing and feature extraction	
Mathematical Modeling	Captures low-level feature interactions using linear or basic non-linear regression approaches	Learns complex, high-order non-linear relationships via advanced neural networks	67-69
Dynamic Prediction	Restricted to static, single-timepoint measurements	Enables dynamic, time-resolved PK simulations	

Table 3 Platforms for compound ADME property investigation.

Name	Description	Website	Reference
DrugBank	A comprehensive database of drugs, presenting bioinformatic and cheminformatic data of compounds and their targets.	https://go.drugbank.com/	Wishart et al., 2006 ⁷⁰
TCMSP	A unique systemic pharmacology platform of Chinese herbal medicines that captures the relationships between drugs, targets, and diseases.	https://tcmsp-e.com/	Ru et al., 2014 ⁷¹
PkCSM	A ML-based online tool for PK and PD property prediction for compounds.	https://biosig.lab.uq.edu.au/pkcsml/	Pires et al., 2015 ⁷²
CancerHSP	A database contains 2439 anticancer herbal medicines with 3575 tumor suppressive ingredients. For each ingredient, the molecular structure and nine key ADME parameters are provided.	https://lsp.nwu.edu.cn/rj1/CancerHSP2.htm	Tao et al., 2015 ⁷³
Swiss ADME	An ADME prediction toolkit comprising a suite of computational models for assessing key pharmacokinetic and safety-related properties of compounds, including solubility, plasma protein binding, hepatic metabolism, renal excretion, CYP450 interactions, toxicity, and overall safety profiles.	http://www.swissadme.ch/	Daina et al., 2017 ⁷⁴
ADMETlab 2.0	A platform for systematical evaluation of ADMET properties, as well as physicochemical and medical characteristics for compounds.	https://admetmesh.scbdd.com/	Xiong et al., 2021 ⁷⁵
TCMIP	An integrative pharmacological research platform of TCM, including standardized information on the widely used herbs and formulas of TCM.	http://www.tcmip.cn/TCMIP/index.php	Wang et al., 2021 ⁷⁶
ADMETlab 3.0	An updated web-based platform for evaluating ADMET properties, physicochemical parameters, and medicinal chemistry features, offering improved accuracy, expanded data coverage, API access, and uncertainty estimation to streamline drug discovery.	https://admetlab3.scbdd.com	Fu et al., 2024 ⁷⁷

similarity prediction methods to construct interaction networks between active compounds and molecular targets of Xuefu Zhuyu Decoction (XFZYD) and Gualou Xiebai Banxia Decoction (GLXBD)⁸¹. They subsequently collected disease target sets of coronary heart disease (CHD) and identified the top ten molecular targets for XFZYD and GLXBD in CHD treatment through network topology analysis. Liu et al. employed network pharmacology to investigate the molecular mechanisms and therapeutic targets of Huangqin Decoction (HQD) in treating ulcerative colitis⁸². Through combining HQD's active compound data, gene differential expression data, and protein-protein interaction (PPI) data, they identified interleukin-6 (IL-6), tumor necrosis factor (TNF), IL-1B, PTGS2, ESR1, and PPARG as core targets, revealing key signaling pathways (TNF signaling, IL-17 signaling, and Th17 cell differentiation) in ulcerative colitis treatment. Huali et al. constructed a target-pathway network for Yupingfeng Decoction (YFPD) and employed centrality metrics to evaluate target importance, ultimately selecting the top 10% key targets to demonstrate the formula's pharmacological mechanisms. Liu et al. developed an ingredient-target network for Danggui Niantong Decoction (DGNTD) and expanded it into a "herb-compound-pathway-target" network, identifying main active compounds (quercetin, kaempferol, paeoniflorin, wogonin, and nootkatone) and core targets (CASP8, CXCL8, FOS, IL-1B, IL-6, JUN, PTGS2, STAT1, and TN) for the formulas.

2.3. Synergistic effect revelation for TCMFs

Following molecular target recognition for active components, elucidating component and target coordinated interactions and deciphering their collective therapeutic effects are essential for the mechanistic exploration of TCMFs. Modern medical research shows that combination therapies are more effective than single-drug treatments. This is because they can regulate multiple key aspects of diseases, including various pathogenic targets, compensatory signaling pathways, and complex molecular networks⁹⁴. This approach reduces drug resistance and side effect risks while enabling lower drug doses to achieve equivalent or superior therapeutic effects (Fig. 2)⁹⁵⁻⁹⁶. Synergistic effects

primarily fall into two categories: drug combination and target synergy^{97,98}. Drug combination represents a therapeutic strategy where multiple drugs interact synergistically, producing effects exceeding their expected additive impact^{99,100}. Target synergy occurs when multiple drug targets are simultaneously activated or inhibited, resulting in a combined therapeutic effect that surpasses the sum of their individual actions¹⁰¹. Synergistic effects align closely with TCM's "Qi Qing He He" (Harmony of Seven Emotions) compatibility theory, where multiple formula components work together through multi-target and multi-pathway synergies to produce therapeutic effects. Compared to Western medicine, drug synergy in TCMFs encompasses broader implications. TCM synergy involves both micro-level active compound interactions and macro-level medicinal herb synergies. Additionally, the extensive target range affected by TCMFs' multiple components significantly increases the complexity of understanding synergistic mechanisms within their target networks. Consequently, innovative research strategies are necessary to better elucidate TCMFs' overall synergistic mechanisms.

With rapid development of AI, network pharmacology and ML techniques^{40,102} have increasingly been applied to investigate TCMFs' complex synergistic effects (Fig. 3). These methods provide a comprehensive framework for exploring TCM molecular mechanisms and may help unravel the mysteries of "Yi Yin Tang Ye" (TCMFs). Current studies typically begin by constructing network models that connect drugs, targets, and diseases using public data. In these models, core drugs, key target nodes, and their interactions are analyzed using network topological metrics such as node degree, betweenness centrality, and clustering coefficient to reveal drug synergies^{103,104}. Wang et al. implemented a network pharmacology framework to explore herbal compatibility and identify synergistic compound interactions through network topology analysis¹⁰⁵. By integrating herb, compound, and target relationships, they developed herb-herb distance metrics (nearest, shortest, and central distances) to evaluate herb-ingredient and ingredient-target interactions in binary networks, investigating herb pairs' molecular mechanisms. Gan et al. mapped disease-specific and TCM-associated targets into the human PPI network to examine synergistic effects, clarifying

Table 4 Commonly used databases in the pharmacological study of TCMFs.

Database Name	Description	Data Source	Reference
TCMID	A comprehensive database providing correlated information between Traditional Chinese Medicine and modern life sciences.	Text-mining TCM-ID; HIT; TCM@Taiwan; HIT; STITCH; OMIM; DrugBank; OMIM; STITCH;	Wishart et al., 2013 ⁸³
TCMSP	A system pharmacology platform presenting herbal chemical constituents, ADME properties, and multi-dimensional drug-target-disease network information of TCM.	Chinese pharmacopoeia; PubChem; ChEMBL; ChemSpider; DrugBank TTD; PharmGKB; HIT	Ru et al., 2014 ⁷¹
BATMAN-TCM	An integrative platform about TCM pharmacological mechanisms	TCMID; TCM-Suite; LTM-TCM; ITCM; TCMID; TCM-Suite; HERB; ITCM TCMID; TCM-Suite; HERB; ITCM; SWISS-PROT; KEGG; Gene Ontology; OMIM/TTD DrugBank; KEGG; TTD; HIT; HERB	Liu et al., 2016 ⁸⁴
ETCM	A system pharmacology database offering standardized clinical profiles, multi-omics results, and quantitative ingredient data.	Text-mining; Pubchem; HPO; OMIM; DisGeNET; ORPHANET; Reactome; HPRD; MINT; IntAct Molecular Interaction Database; DIP	Xu et al., 2019 ⁸⁵
SymMap	A TCM database providing massive information on herbs, ingredients, targets, as well as clinical symptoms and diseases.	Chinese pharmacopoeia; TCMID; TCMSP; HIT; HPO; DrugBank; OMIM; MeSH; SIDER; UMLS; Text-mining	Wu et al., 2019 ⁸⁶
HERB	A high-throughput experiment- and reference-guided database of traditional Chinese medicine.	SymMap; TCMSP; TCM-ID; SciFinder; PubChem; text mining; GeneCards; TTD; DisGeNET; HPO; Disease Ontology databases; HIT	Fang et al., 2021 ⁸⁷
ITCM	A bioinformatics platform combining multi-modal TCM research data, featuring literature mining, small-molecule expression profiling, and computational toolkits.	SYMMAP; TCMID; TCMSP; ETCM; NPASS; CMAUP; TCMIO; HERB; DisGeNET; DrugBank; TCGA; DGIdb; CTD	Tian et al., 2021 ⁸⁸
DCABM-TCM	A database collecting blood constituents of TCM prescriptions and herbs.	Text-mining; TCMID; Entrez Gene databas; KEGG; OMIM; CTD; Swiss-Prot; BATMAN-TCM	Liu et al., 2021 ⁸⁹
TCMbank	A standard TCM data platform encompassing herbs, active ingredients, disease associations, and gene targets.	TCMID; TCMSP; SymMap; HERB; ETCM; text-mining	Lv et al., 2023 ⁹⁰
ccTCM	A quantitative platform presenting the distribution, similarity, and molecular mechanism of components and compounds	the Chinese Pharmacopoeia; PubChem; ChEMBL; ZINC	Yang et al., 2023 ⁹¹
IGTCM	A multi-omics platform bridging TCM and molecular biology through herb-genome-constituent networks	NCBI; GPGD; SymMap; HERB	Ye et al., 2023 ⁹²
TCMM	A TCM database encompassing prescription, ingredient, target, and biological relation information	PrimeKG; PharMeBINet; TCMbank; SymMap; CPMCP; TCMID	Ren et al., 2024 ⁹³

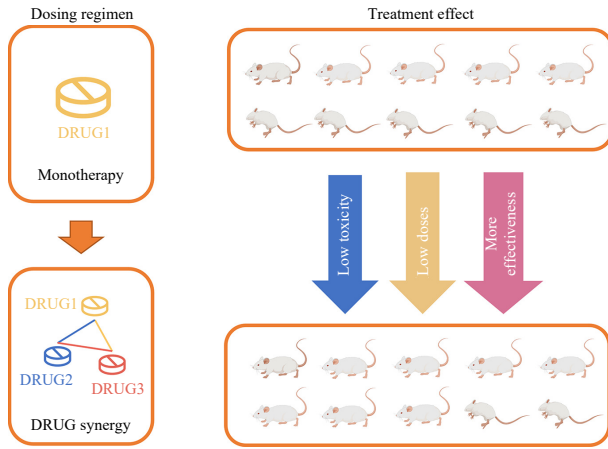


Fig. 2 Advantages of drug combination therapy.

system-level mechanisms underlying herb-symptom interactions¹⁰⁶. Syn-COM represents a novel multi-layer collaborative framework integrating network pharmacology and AI inference for TCM investigation¹⁰⁷. This framework screens effective ingredient combinations and synergistic effects of herbs for treating gouty arthritis (GA), utilizing Si and Ec indices to represent the “Emperor, Minister, Assistant, and Envoy” principles of herb compatibility, exploring active compounds’ primary and secondary roles in TCMFs.

Deep Learning (DL), with its capabilities in feature extrac-

tion, automatic modeling, and correlation prediction, provides an effective approach for understanding the complex interactions between multiple drugs and targets^{44,101,108}. In synergy studies of TCMFs, DL models help identify key compounds and targets that contribute to synergistic effects. While traditional TCM theories interpret specific herb pairs in TCMFs based on their medicinal properties in clinical applications, the molecular mechanisms underlying these synergistic effects remain in early research stages¹⁰⁹. Xue et al. implemented DL methods to examine herb pairs, incorporating decoction properties, taste, and meridian attributes into the dataset. The knowledge-enhanced semantic representation (ERNIE) model analyzed the contextual information on herb pairs¹¹⁰. The ERNIE model demonstrated superior accuracy in identifying potential herb pairs from TCM datasets compared to CNN, RNN, and BERT models. Yang et al. developed an association graph connecting TCM herbs, compounds, and proteins for SARS-CoV-2 treatment¹¹¹, establishing a heterogeneous “herb-compound-protein” (HCP) network through meta-path embedding. The HCP network identified candidate herbs targeting structural, non-structural, and accessory proteins of SARS-CoV-2. Subsequently, the variational graph autoencoder (VGAE) model recommended 20 herb pairs as potential COVID-19 treatments.

Most existing computational models focus on predicting synergistic effects between two synthetic drugs or compounds, limiting their effectiveness when applied to multiple components of TCMFs. To overcome this limitation, researchers have developed new approaches integrating diverse data types (including chemical structures, biological data, and textual information) to

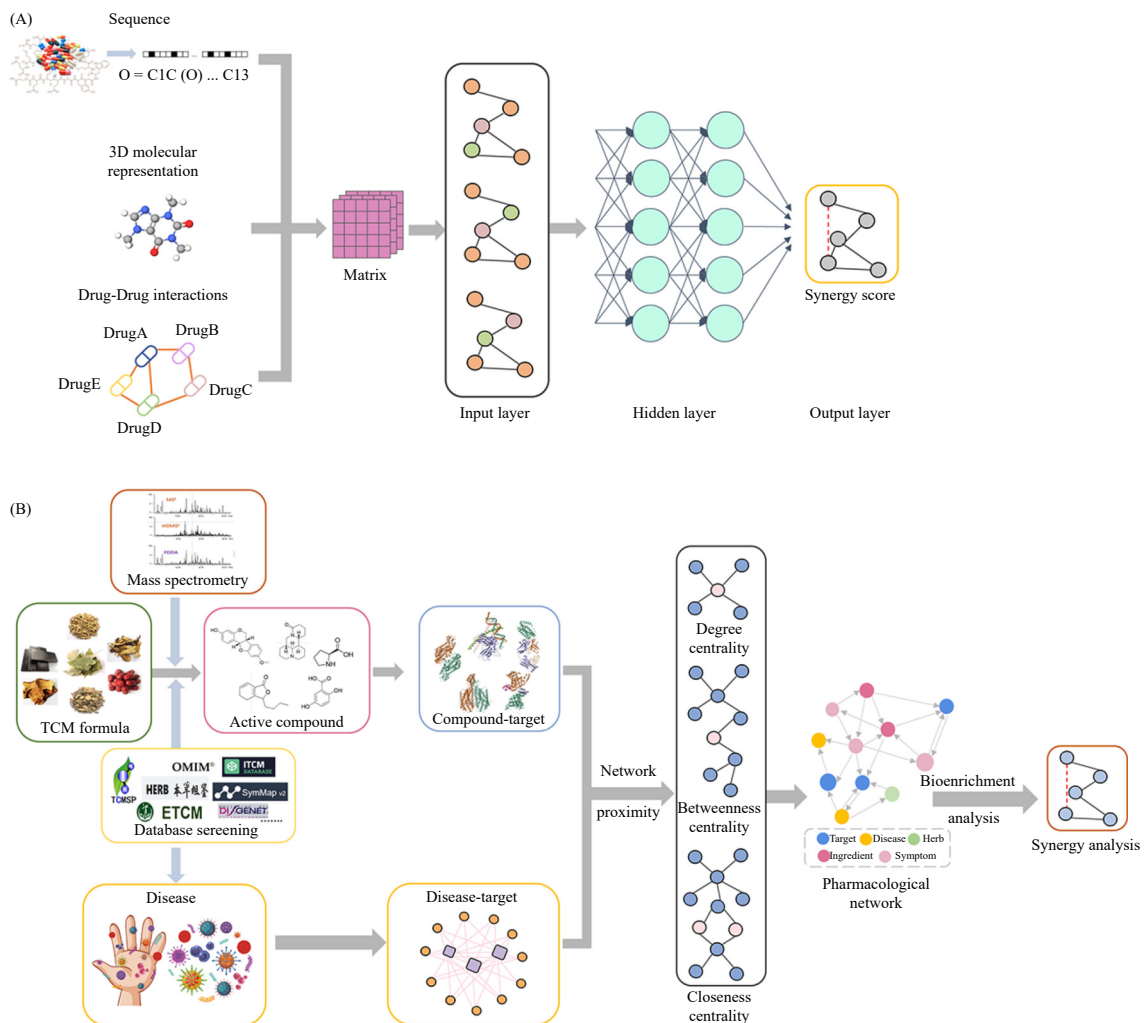


Fig. 3 Strategy of synergistic effect investigation in TCMFs based on DL algorithm (A) and network pharmacology approach (B).

comprehensively evaluate multi-component combinations in TCM¹¹²⁻¹¹⁵. Guo and colleagues introduced a novel framework to demonstrate the synergistic effects of multiple TCMF components⁶⁰. Their approach utilized unsupervised ML algorithms to establish connections between compound modules and cellular functions based on FDA-approved drugs, identifying active components in Xiao'er Fupi Granules. They extracted "compound-target-cell-drug" meta-paths from compound modules with similar functions, correlating these modules with cellular functions to elucidate synergistic effects. Sun and colleagues developed a heterogeneous network method for analyzing compound combination mechanisms, drawing inspiration from complex networks and overlapping community detection¹¹⁶. They employed the Doc2vec model to represent compound semantic properties and utilized the Jaccard index to measure compound attribute similarities, providing insights into synergistic patterns between traditional Chinese and modern medicines.

AI methodologies promote synergistic effect studies between components and targets, particularly in predicting specific interactions. These correlated interactions serve as intermediate information for mechanism exploration of TCMFs.

2.4. Pharmacological mechanism exploration of TCMFs

Network models have been widely used to uncover the pharmacological mechanisms of traditional Chinese medicine formulations (TCMFs). By leveraging holistic organism-level data obtained through multi-omics technologies during TCM interventions, these models provide valuable insights into how TCMFs work^{117,118}. Xiong et al. developed an integrated strategy combining serum chemistry, metabolomics, and network pharmacology to identify the material basis and mechanisms of Danggui Shaoyao San (DSS) in treating premenstrual dysphoria (PD)¹¹⁹. Lu et al. combined network pharmacology and transcriptomics to elucidate the active ingredients, targets, and potential therapeutic mechanisms of Ningfei Pingxue Decoction (NFPX) for acute respiratory distress syndrome (ARDS) treatment¹²⁰. Jiang et al. investigated Shentong Zhuyu Decoction (STZYD) mechanisms against rheumatoid arthritis (RA) using metabolomics and network pharmacology, identifying 10 key metabolites, targets and pathways¹²¹. Ma et al. utilized a multi-omics integration approach (incorporating transcriptomics, proteomics, and metabolomics) to reveal the molecular mechanisms of Qijiao Shengbai Capsules (QSC) in treating leukopenia¹²². Moreover, intelligent network models have played a significant role in advancing the prevention and treatment of COVID-19 and provided valuable insights into understanding the disease^{123,124}. Zhao et al. developed an integrated biological model to explain the molecular mechanisms of Qingfei Paidu Decoction (QFPDD) in treating COVID-19 by incorporating data on blood-migrating components, metabolic pathways, target organs, and clinical symptoms¹²⁵.

To overcome the limitations of traditional network models in analyzing node and edge properties without enabling generalized predictions, Qi et al. developed a GNN-based framework that employs multi-label classification and link prediction models to explore the pharmacological basis and mechanisms of Xuefu Zhuyu Decoction (XFZYD)¹²⁶. In practice, they conceptualized the material basis of XFZYD in treating both stable and unstable angina as a multi-label classification problem involving GNN nodes and framed the action mechanisms as a link prediction task between edges. They constructed a correlative network representing compound, target, and pathway relationships through node similarity calculations and applied the Node2Vec algorithm for network embedding. Subsequently, they employed the multi-label classification model to explore potential therapeutic mechanisms of XFZYD. DeepDGC, a DL-based network pharmacology framework incorporating ADMET predictions, molecular docking,

molecular dynamics simulations, and compound and target structure modeling, was developed to investigate licorice's molecular mechanism in treating COVID-19¹²⁷. Zhang and colleagues performed a systematic analysis of Danshen and Chuanxiong's chemical composition in Guanxinning Tablets, identifying more than 40 major chemical components¹²⁸. Using AI-based network pharmacology methods, they predicted these components' potential targets and investigated the associated signaling pathways. They found that Danshen and Chuanxiong's chemical components primarily affect VEGF and HMGB1 pathways, regulating glucose and lipid metabolism, inhibiting myocardial fibrosis, preventing thrombosis, and reducing inflammation and cell necrosis. Furthermore, their examination of multi-scale biological effects revealed that salvianolic acid inhibits COX-1 expression, reduces platelet aggregation, and limits myocardial infarction extent, while ligustilide blocks the coagulation cascade, inhibits thrombosis, and works synergistically with tanshinone to enhance blood circulation¹²⁸.

Network pharmacology typically integrates multi-omics data (e.g., transcriptomics, proteomics, metabolomics) to elucidate molecular mechanisms through which active compounds and their targets produce therapeutic effects. However, multi-omics data integration presents several challenges, including data incompleteness, complexity, and model opacity. Data incompleteness, often resulting from poor sample quality and insufficient sample sizes, can be addressed through AI-based data imputation methods. For example, Eltager et al. developed a K-nearest neighbors (KNN) variant algorithm that utilizes single-cell RNA sequencing (scRNA-seq) data to impute missing single-cell assays for transposase-accessible chromatin (scATAC-seq) profiles¹²⁹. Data complexity can lead to the "curse of dimensionality" when integrating various omics data¹³⁰. To address this challenge, researchers have developed AI-based graph linking strategies to reduce data dimensionality and incorporate features from various omics¹³¹. Regarding model opacity, KG technology has been introduced to TCM research, as it enhances model interpretability when combining omics data. A KG represents a semantic network revealing entity relationships, depicting concepts and their connections in symbolic form. Its fundamental unit consists of an "entity-relation-entity" triple, where relationships link entities to form a knowledge web¹³²⁻¹³⁴. TCM-KGs consolidate extensive information from classical texts and modern literature, encompassing TCM theories, terms, syndromes, diseases, prescriptions, herbs, compatibility, usage, and dosage. These KGs address the challenge of fragmented knowledge and facilitate various information integration in TCM, thereby enhancing TCM knowledge accessibility and applicability¹³⁵⁻¹³⁷. KG construction involves extracting valuable data from heterogeneous sources and integrating them into a unified semantic network, encompassing data acquisition, information extraction, and knowledge fusion and representation. For instance, TarKG was developed through the integration of 7 biomedical KGs, 9 public databases, and 11 TCM knowledge repositories, incorporating multiple TCM-specific relationships, including herb-compound, TCM symptom-symptom, herb-gene, herb-disease, TCM formula-disease, TCM symptom-disease, and TCM syndrome-disease associations¹³⁸. These relationships across TCM entities provide substantial information for exploring TCMF mechanisms. Additionally, Zhu et al. developed HerbKG, focusing on four key entities: herbs, compounds, genes, and diseases¹³⁹. This graph addresses gaps in existing TCM-KGs, which primarily focus on diagnostic and treatment knowledge while often overlooking molecular-level information. Using a deep transfer learning framework, HerbKG integrated 53,754 TCM-related triples, providing a comprehensive knowledge network for molecular research in TCM. Notably, recent DL advances have enabled TCM KG construction without manually annotated features. Named entity recognition

(NER) models, incorporating various TCM resources (such as books, articles, and records), employ self-attention mechanisms to automatically identify TCM entities, significantly enhancing KG construction efficiency and accuracy¹⁴⁰.

2.5. Optimization of composition for TCMFs

In the theoretical framework of TCM, the concept of *Qi Qing He He* (Harmony of Seven Emotions) encompasses both individual herb applications and compatibility principles between medicinal materials, reflecting TCM's holistic and dialectical philosophy while aligning with modern medicine's approach to synergistic drug combinations for toxicity reduction and efficacy enhancement^{103, 104}. Unlike Western medicine's straightforward drug combinations, TCMFs are formulated based on extensive clinical experience and compatibility principles, wherein multiple herbs function synergistically to treat diseases through syndrome differentiation. The inherent complexity of multi-component, multi-target formulas present significant challenges in identifying and validating herbal combination efficacy and safety. The component-based Chinese medicine research paradigm, introduced by Academics Boli Zhang and Yongyan Wang, marks a crucial shift from traditional macro-level TCMF optimization to precise micro-level component quantification. This approach establishes a solid theoretical foundation for modernized TCMF optimization^{5, 80}. Following the paradigm's "two well-defined aspects" principle (well-defined material basis and mechanism of action), the material basis encompasses: (1) active components that provide the foundation for pharmacological effects, and (2) functional components that serve auxiliary roles such as solubilization, toxicity reduction, or efficacy enhancement. The well-defined mechanism of action requires modern scientific methods to elucidate relationships between active components and molecular targets, as well as component interactions, establishing scientific evidence for TCM efficacy. The paradigm suggests that formula optimization centers on designing optimal relationships between component dosage, ratio, and pharmacological efficacy, considering toxicity and side effect predictions. The application of advanced AI technologies in component-based TCMF optimization represents a crucial pathway for advancing beyond traditional empirical formulation approaches and innovating modern Chinese medicines, offering a breakthrough direction for new TCMF development¹⁰⁴⁻¹⁰⁷.

TCM's theoretical framework emphasizes the principle of complementary drug use while avoiding antagonistic combinations, suggesting that when toxicity occurs, counterbalancing agents should be employed. This principle acknowledges that while adverse effects may occur in compound formula applications, they can be mitigated. Approximately 230 000 TCM-related adverse reaction cases are reported globally annually¹⁴¹, emphasizing the necessity of identifying toxic components in herbal formulas to optimize prescriptions, minimize toxicity, and enhance efficacy. He et al. addressed this challenge by integrating 13 molecular fingerprint features and implementing eight ML algorithms to develop compound toxicity prediction models¹⁴². Their methodology incorporated recursive feature elimination (RFE) for optimal feature subset selection in model construction, successfully identifying hepatotoxic compounds in TCMFs through a herb-hepatotoxic compound network using the HILI dataset. Wu et al. developed an innovative multi-task deep neural network incorporating element-specific persistent homology (ESPH) for quantitative compound toxicity prediction. ESPH maintains essential chemical features during topological abstraction, addressing small molecule representation challenges¹⁴³. Their findings demonstrated that combining compound topological and physical descriptors with advanced ML algorithms, such as DNN, RF, and gradient boosting decision trees, achieved superior per-

formance across various tasks related to compound toxicity prediction. Liu et al. applied DL techniques to predict compound toxicity and side effect, with a particular focus on safety assessment in COVID-19 treatment¹²⁴. In recent years, AI models such as DeepHit, FP-ADMET, and ResNet18DNN (a variant of deep neural networks) have successfully been implemented to predict various toxicological properties such as hERG inhibition, LD50, drug-induced liver injury (DILI), Ames mutagenicity, carcinogenicity, skin sensitization, and Tox21 assay endpoints¹⁴⁴.

A comparative analysis of representative AI models in compound toxicity prediction is shown in Table 5 highlighting their methodological innovations, performance benchmarks, and practical applications in TCM research. Collectively, AI models offer valuable insights into ensuring the safe application of Chinese medicine while also contributing to the optimization of TCMFs.

2.6. Intelligent recommendation of TCMFs

In the field of TCMF recommendations, FordNet, an advanced intelligent system, has garnered significant academic attention¹⁴⁸. This system utilizes CNNs to extract high-level features from over 20 000 medical case records collected between 2013 and 2020, subsequently establishing a heterogeneous network of herbs, ingredients, and targets. Through NE techniques, FordNet identifies underlying patterns of TCMFs and recommends new formulas tailored to specific diseases. Compared to models utilizing only macro-level data, FordNet incorporates both macro- and micro-level information for active ingredients, achieving an 17.3% increase of hit rate compared to the baseline method. To assess the clinical application potential of FordNet, formula recommendations were conducted for 50 gastrectasia patients based on electronic health records (EHRs). The results indicate that FordNet can effectively recommend appropriate formulas aligned with TCM expert experience. Beside, the MGCN recommendation model of TCMFs enhances predictive accuracy by employing multiple GNNs to model the relationships between symptoms, physiological states, and TCM syndrome patterns¹⁴⁹. This model consists of two main modules: a TCM feature aggregation module and an herbal medicine prediction module. The TCM feature aggregation module establishes a symptom-state element-symptom graph (Se) and a symptom-symptom graph (Ts), effectively modeling the complex multivariate relationships between symptoms and prescriptions. The herbal medicine prediction module, utilizing state elements, syndrome types, and symptom data, employs a multi-layer perceptron (MLP) to generate formula recommendations. Despite these advances, AI-driven TCM prescription systems encounter several critical challenges. First, data quality remains a significant concern, as incomplete or inaccurate data may result in incorrect recommendations. Moreover, access to high-quality clinical datasets in TCM remains limited. Another major challenge is model interpretability—non-transparent AI models impede user understanding and diminish trust. Additionally, clinical validation of AI-recommended TCM prescriptions is essential for ensuring safety and efficacy. To address these challenges, researchers increasingly focus on enhancing the transparency and accuracy of AI models in TCM prescription recommendations. Jin et al. introduced the Metapath-guided graph attention network (MGAT) to improve the interpretability of herbal medicine recommendations¹⁵⁰. The model contributes to their broader initiative of transitioning TCM from an empirical medicine framework to an evidence-based system, integrating modern pharmacological findings with traditional TCM knowledge into a comprehensive KG. MGAT employs predefined KG metapaths to guide network neighbor selection during information propagation, identifying long-distance paths with high attention weights to support various fine-grained, interpretable herbal medicine recommendation

Table 5 Comparisons between representative AI models in compound toxicity prediction.

TCM-specific applications	Name	Method	Advantages	Authors
Liver Toxicity	-	Multitask Ensemble(NB, LibSVM, KStar, AdaboostM1-J48, Bagging-IBK, J48, and RF)	The first instance of a computational toxicology to screen the hepatotoxic ingredients in TCMs.	He et al. ¹⁴²
Toxicity prediction for CM small molecule components	ESTD	DNN, RF, and GBDT	For quantitative toxicity analysis and prediction of small molecular.	Wu et al. ¹⁴³
Toxicity and Side effects for COVID-19 treatment	-	OSPF, ANN	An advanced approach to the evaluation of TCM prescriptions for treating flu-like diseases.	Liu et al. ¹²⁴
hERG Cardiotoxicity	DeepHIT	DNN/GCN	Multi-model architectures are utilized to enhance the predictive accuracy of cardiotoxicity, hepatotoxicity, and genotoxicity assessments in CM.	Ryu et al. ¹⁴⁵
Liver Toxicity/hERG Cardiotoxicity	FP-ADMET	RF	Generalizable molecular fingerprinting method to predict the toxicity of CM components.	Venkatraman et al. ¹⁴⁶
Liver Toxicity/hERG Cardiotoxicity	ResNet18DNN	DNN	DNNs leverage representation learning on the molecular structures of Chinese medicine (CM) components to accurately predict toxicity endpoints, including carcinogenicity and hepatotoxicity.	Chen et al. ¹⁴⁷

Note, OSPF: ontology-based side-effect prediction framework; NB: Naive Bayes; RF: Random Forest; DNN: Deep Neural Networks; GCN: Graph Convolutional Networks; ANN: Artificial Neural Networks; GBDT: Gradient Boosting Decision Tree

tasks. In practice, the model recommends dried ginger to warm the middle-jiao and dispel cold based on the metapath “symptom of vomiting”. Practical applications demonstrate that MGAT excels in explaining mechanisms of TCMFs and provides superior interpretability.

3. Challenges and prospects

The rapid advancement in artificial intelligence (AI) has provided a significant impetus to the innovation and modernization of traditional Chinese medicine, offering new perspectives on studies of TCMFs. However, the AI-assisted research on molecular mechanism of TCMFs still faces many challenges, calling for the development of innovative approaches to address these issues.

3.1. Standardizing TCM data for AI model construction

The incorporation of AI and TCM faces some obstacles about data scarcity and complexity ¹⁵¹. Effective training of AI models depends on access to large-scale, well-structured, and standardized datasets, whereas datasets in TCM research are often fragmented, heterogeneous, and lacking in uniform data standards. While comprehensive, high-quality datasets typically produce more reliable AI models, smaller, unrepresentative datasets tend to result in overfitting ¹⁵². Current TCM-related datasets suffer from several limitations, including insufficient volume, incomplete types, and poor quality ¹⁵³. Besides, existing TCM databases exhibit limited data variety, non-standardized protocols, and significant redundancy. A thorough analysis by Wang et al. identified notable inconsistencies in medicinal herb and ingredient annotations across different databases, particularly regarding TCMF structural information ¹⁵⁴. Additionally, most Chinese medicine databases lack crucial molecular fingerprint data for TCM components and high-throughput transcriptomic data for compounds, herbs, and formulas. To address the scarcity and quality issues of TCM datasets, NER algorithms are introduced for automatic entity identification instead of manual extraction. TCMNER, a NER-based model, has been implemented for the construction of TCM entity dataset ¹⁴⁰. It employs a word-character integrated self-attention mechanism to effectively manage variable-length entities, yielding enhanced character-level representations. Similarly, a BERT-BiLSTM-CRF-based NER framework has been applied to TCM terminology identification ¹⁵⁵, combining transfer learning techniques with classical machine learning algorithms. Data augmentation techniques generate synthetic samples to expand and diversify existing datasets. Veit Sandfort’s team proposed a CycleGAN-based approach that integrates spatial feature

transformation into the generative adversarial network (GAN) framework, thereby enhancing image segmentation performance in scenarios with limited CT imaging data ¹⁵⁶. These approaches expand both the quantity and diversity of training data available to ML algorithms, thereby enhancing predictive accuracy and reliability. In TCM research, studies often face challenges such as limited sample sizes and highly heterogeneous data types. To address these limitations, data augmentation techniques are utilized to generate diverse samples, including molecular graphs of ingredients or targets ¹⁵⁷⁻¹⁵⁸. This approach facilitates the development of more robust models with enhanced generalization capabilities. Additionally, this strategy improves classification and recognition performance, enabling models to differentiate more precisely among the components and ingredients of TCMFs.

In the future, data standardization represents the fundamental prerequisite for AI model construction in TCM research. TCM data standardization necessitates a comprehensive approach across multiple dimensions. This includes standardizing terminology for herbal origins, decoction processing, and formula compatibility (e.g., establishing a formal framework for “sovereign-minister-assistant-envoy” compatibility relationships), as well as standardized representations of chemical component structures, target protein sequences, and PK parameters at the molecular level. Furthermore, it requires quantified definitions for syndrome classification and efficacy evaluation indicators in clinical data. Standardized TCM data provides an essential foundation for pharmacological investigation and facilitates the effective implementation of component-based research paradigms for TCMFs.

3.2. Developing interpretable models for the mechanistic investigation of TCMFs

DL is frequently characterized as a black-box model due to its non-interpretable internal structure and computational processes regarding input-output relationships. Despite their strong performance, these models’ lack of interpretability prevents domain researchers from understanding their decision-making processes, diminishing trust in their reasoning, particularly in TCM contexts requiring clear elucidation of pharmacological mechanisms and component interactions. Consequently, developing interpretable AI models for TCM is crucial for future advancement. These models have the potential to enhance reliability and explainability while offering deeper insights into the mechanisms of TCM. Some researchers improve AI model interpretability by leveraging knowledge graphs (KGs), which effectively integrate heterogeneous and discrete data from the TCM domain, establishing structured relationships between data entities. ^{135, 159}

(Fig. 4). For instance, the DL architecture combined with KGs can effectively integrate relationships between TCM and clinical symptoms, enabling more comprehensive node feature representation and providing holistic, higher-order feature information for TCM target prediction¹⁶⁰⁻¹⁶¹. Moreover, KG-embedded models, such as KGCN¹⁶² and KGAT¹⁶³, offer valuable insights into compound-target interactions through more accurate node representations, achieving enhanced prediction performance. Zhuo et al. developed a KG relational path network (KGRN) for target prediction in TCMFs, combining KG embeddings and GNNs to extract semantic and structural information, capturing formula-target correlations¹⁶⁴. KGRN emphasizes relational dependencies in paths during information aggregation, enhancing formula-target relationship prediction. The DL-based formula target prediction framework, HTINet2, comprises three key modules: TCM and clinical KG embedding, residual graph representation learning, and supervised target prediction¹⁶⁵. Its effectiveness derives from two primary factors: the constructed KG contains comprehensive TCM clinical treatment information, providing precise herb and target embedding vectors; and the novel residual graph effectively integrates complex biomolecular characteristics, capturing sophisticated herb-target interactions.

Building upon innovations in KGs and the integration of TCM theoretical frameworks, future interpretable TCM models should address several developmental directions. First, incorporating domain-specific interpretability architectures grounded in TCM foundational theories—such as translating the “sovereign-minister-assistant-envoy” compatibility principle¹⁶⁶ into algorithmic constraints for target prediction and mechanism analysis¹⁶⁷⁻¹⁶⁸—establishes theory-compatible explanatory frameworks. These frameworks connect data-driven statistical patterns with TCM’s multi-component/multi-target synergy logic. Second, addressing the limitations of text-centric KGs requires the development of multi-modal representations. This approach incorporates herbal imagery (morphological/microscopic features), chemical spatial conformations, and clinical imaging biomarkers (e.g., tongue/pulse diagnostics)¹⁶⁹⁻¹⁷⁰. Such integration captures TCM’s inherent multidimensionality and facilitates clinically grounded AI applications. Finally, integrating KG symbolic reasoning, DL numerical modeling, and expert validation into a theory-data-expert tripartite framework may enhance the analysis of TCM’s complex mechanisms.

In conclusion, developing AI models with KGs represents an important direction for intelligent TCM research, offering interpretable and comprehensible models for mechanistic investigation of TCMFs.

3.3. Building up graph-based AI models for TCM multi-omics data integration

Multi-omics approaches, including genomics, transcriptomics, proteomics, and metabolomics, utilize high-throughput detection technologies to comprehensively examine molecular profiles across various levels. These methods reveal the complex signatures of physiological processes. The holistic, dynamic, and spatiotemporally specific characteristics of multi-omics align with the comprehensive therapeutic principles of TCM, offering a critical perspective for understanding the molecular mechanisms underlying TCMFs¹⁷¹. Through AI integration of multi-omics data, researchers can better understand the multi-component, multi-target, and multi-pathway mechanisms of TCMFs. Current multi-omics data integration methods primarily represent multi-layered information within omics datasets through biological networks. These networks illustrate relationships between cells, molecules, and their interactions. For instance, Sun et al. developed the Scissor algorithm, which determines phenotype-cell associations through a network-regularized sparse regression model on correlation matrices, integrating large-scale phenotype and single-cell expression data¹⁷².

The application of graph-based AI models for TCM multi-omics data integration represents a crucial approach with significant potential for advancing TCM understanding and implementation in modern healthcare. These models effectively capture complex interactions between components, targets, and pathways by representing biological relationships as graphs, providing comprehensive insight into TCMFs’ mechanisms of action.

The integration of multi-omics data, encompassing genomics, proteomics, metabolomics, and transcriptomics, enables researchers to elucidate the “multi-component, multi-target, and multi-pathway” characteristics of TCMFs. Graph-based AI models identify essential nodes (e.g., active compounds or critical pathways) and modules within these networks, facilitating novel therapeutic target discovery and optimizing formula compositions for enhanced efficacy. This approach supports precision medicine through personalized treatment strategies based on individual molecular profiles. Graph-based AI models guide new drug development with well-defined mechanisms and reduced side effects by predicting drug-target interactions and identifying biomarkers associated with TCMFs’ effects.

Furthermore, the integration of multi-omics data through graph-based AI facilitates the connection between traditional medicine and modern science, advancing TCM standardization and internationalization. This approach enhances understanding

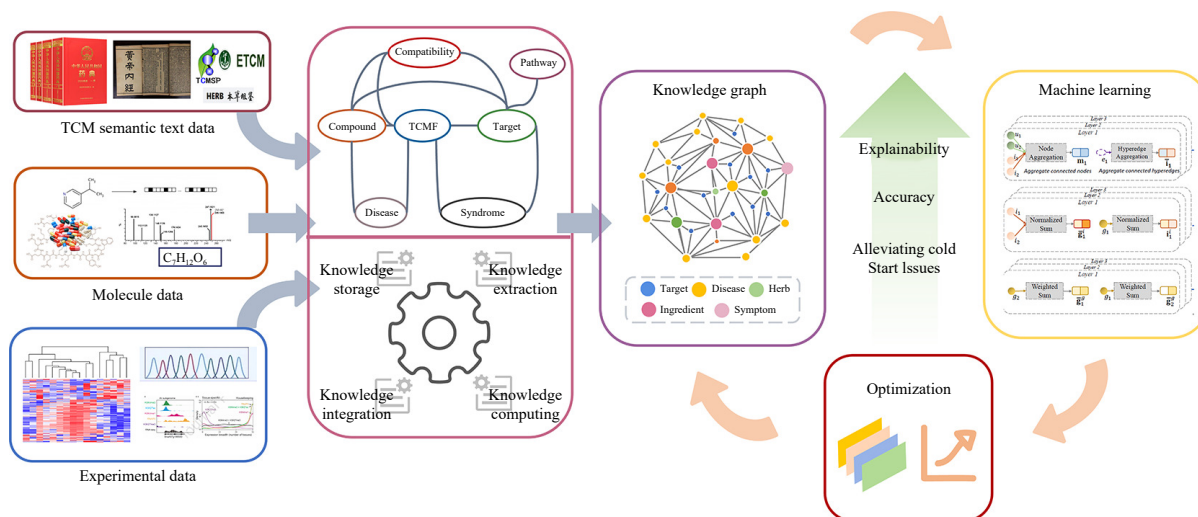


Fig. 4 Knowledge graph plays an important role in AI models of TCM.

of TCMFs' molecular foundations while accelerating the translation of TCM into evidence-based therapies for global health applications.

4. Conclusion

This paper presents a comprehensive review of AI applications in elucidating the mechanisms of TCMFs. It examines practical implementations of AI models in TCM research, including ADME prediction, target identification, synergistic effect characterization, pharmacological mechanism exploration, and formula optimization and recommendation. Collectively, these studies highlight AI's potential to discover novel targets in TCMFs, elucidate synergistic interactions among multi-components, and refine composition of compound formulas. However, current AI-assisted mechanism research of TCMFs remains in its early stages and still faces many challenges, including poor data quality, insufficient algorithm transparency, and limited application scenarios. To deepen the mechanistic investigation of TCMFs through AI models, future efforts should prioritize improving dataset quantity and quality in accordance with TCM data standards, enhancing model interpretability via knowledge graphs and developing graph-based method for omics data integration. Applying advanced AI technologies in the research of molecular mechanisms of TCMFs accelerates the modernization and globalization of Chinese medicine.

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Declarations Conflict of interest

The authors have no competing interests to declare that are relevant to the content of this article.

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