

**15. Ante/Post-partum Diseases****Reference**

Wada H, Wada K, Motoyama K. Usefulness in postpartum control by kyukichoketsuin. *Sanfujinka no Sekai (World of Obstetrics and Gynecology)* 2003; 55: 1057-61. Ichushi Web ID: 2004022822

**1. Objectives**

To evaluate the clinical usefulness of kyukichoketsuin (キユウ婦調血飲) for “postpartum restoration”

**2. Design**

Randomized controlled trial using sealed envelopes for allocation (RCT-envelope).

**3. Setting**

Single facility (Wada Obstetric and Gynecologic clinic), Japan.

**4. Participants**

Sixty multiparas who visited the above facility between January and the end of December 2001 and had a normal delivery.

**5. Intervention**

Arm 1: administration of Kanebo Kyukichoketsuin (キユウ婦調血飲) Extract Granules (EK-230) 2.0 g t.i.d. (before meals) from immediately to 2 weeks postpartum in 30 patients.

Arm 2: administration of methylergometrine maleate (MME) 0.125 mg t.i.d. (after meals) from immediately to 5 days postpartum in 30 patients.

**6. Main outcome measures**

Uterine subinvolution: evaluated based on the length of the uterine fundus at 1 and 4 days postpartum and the amount of lochia at 1 month postpartum.

Amount of lactation: evaluated based on the amount of lactation at 4 days postpartum and the amount of lactation expressed as a percentage of the lactation amount after the previous delivery.

Clinical symptoms: complaint of afterpains evaluated by interview.

Drug compliance: evaluated on a 4-point scale by interview.

**7. Main results**

There was no between-group difference in the length of uterine fundus ( $11.4 \pm 0.7$  cm [kyukichoketsuin] vs  $11.8 \pm 2.8$  cm [MME]) at 4 days postpartum and lactation at 4 days postpartum. The lactation index (i.e., amount of lactation in relation to the amount for the previous delivery of 100) was  $81.7 \pm 15.0$  with MME and  $136.7 \pm 71.0$  with kyukichoketsuin, showing a lactation-promoting effect of kyukichoketsuin, although the difference was not significant. There were more complaints of afterpains in the MME group (46.7%) than in the kyukichoketsuin group (23.3%). Drug compliance was significantly higher in patients receiving kyukichoketsuin ( $P < 0.001$ ).

**8. Conclusions**

Compared with MME, kyukichoketsuin (“a medicine for postpartum restoration”) is a better restorer of postpartum health and some physiological functions in puerperants.

**9. From Kampo medicine perspective**

None.

**10. Safety assessment in the article**

Not mentioned.

**11. Abstractor’s comments**

This study follows up a randomized study published in 2002 that verified the efficacy of kyukichoketsuin for “postpartum restoration” as described in *Wanbinghuichun* (萬病回春, *Recovery from All Ailments*) using objective parameters. The present results showing that kyukichoketsuin has clinical efficacy support the results of the previous study. The psychosomatic condition of postpartum health is referred to as “*qiketsukyoson* (気血虚損, qi and blood deficiencies)” in Kampo medicine, for which kyukichoketsuin is indicated. It is hoped that “*qiketsukyoson*,” a Kampo medical pathology, will be scientifically elucidated based on objective clinical parameters as in the present study.

**12. Abstractor and date**

Ushiroyama T, 1 April 2008, 8 August 2009, 1 June 2010, 31 December 2013.