Evidence Reports of Kampo Treatment

Task Force for Evidence Reports / Clinical Practice Guideline Committee for EBM, the Japan Society for Oriental Medicine

21. Others

Reference

Saida Y, Nagao J, Nakamura Y, et al. Dai-kenchu-to and mosapride in combination with precolonoscopy bowel preparation with polyethylene glycol electrolyte lavage: results of a prospective randomized controlled trial. *Nihon Daicho Kensa Gakkai Zasshi (Journal of the Japan Society of Colon Examination)* 2005; 22: 145-8 (in Japanese). Ichushi Web ID: 2007146750

1. Objectives

To evaluate the bowel cleansing effect of precolonoscopy bowel preparation with polyethylene glycol electrolyte lavage solution (PG solution) combined with daikenchuto (大建中湯) and mosapride.

2. Design

Randomized controlled trial (RCT).

3. Setting

None (the authors belong to the Third Department of Surgery, Toho University School of Medicine and/or Tohokamagaya Hospital), Japan.

4. Participants

Two hundred and twenty-two patients (155 males and 67 females) who underwent colonoscopy between April 2004 and October 2004 and gave informed consent, including consent to disclose relevant information.

5. Intervention

Arm 1: treatment with 2 L of polyethylene glycol (PG) solution plus daikenchuto (大建中湯) (7.5 g; manufacturer, not specified) (n=116).

Arm 2: treatment with 2 L of PG solution plus daikenchuto (大建中湯) (7.5 g; manufacturer, not specified) and mosapride (15 mg; 3 tablets) (n=106).

PG solution was administered orally for about 2 hours, at least 6 hours prior to the colonoscopy. Daikenchuto (大建中湯) and mosapride were administered in three divided doses, starting at noon one day before colonoscopy.

6. Main outcome measures

Number of bowel movements, duration time of defecation, presence and severity of abdominal pain and nausea, ease/difficulty of taking the combined medication, adequacy of bowel preparation, and cecal intubation time.

7. Main results

The mean number of bowel movements was significantly higher in arm 2 (7.8) than in arm 1 (7.0). Defecation time tended to be slightly longer in arm 2 (3 h 18 min) than in arm 1 (2 h 59 min). No between-arm differences in abdominal pain (13% of patients in arm 1 and 17% in arm 2) and nausea (24% and 25%, respectively) were observed. The percentage of patients who reported that taking the combined medication was "difficult" or "slightly difficult" was significantly higher in arm 2 (38%) than in arm 1 (28%). No between-arm differences in mean bowel preparation scores (0.9 in both arms) and median cecal intubation times at colonoscopy (6 minutes in both arms) were observed.

8. Conclusions

The addition of mosapride offers no benefit to precolonoscopy bowel preparation with PG solution plus daikenchuto alone.

9. From Kampo medicine perspective

None.

10. Safety assessment in the article

Not mentioned.

11. Abstractor's comments

This paper follows up a previous paper that discussed the efficacy of precolonoscopy bowel preparation with PG solution plus daikenchuto: Saida Y, Sumiyama Y, Nagao J, et al. Dai-kenchu-to, an herbal medicine, improves precolonoscopy bowel preparation with polyethylene glycol electrolyte lavage: results of a prospective randomized controlled trial. *Digestive Endoscopy* 2005; 17: 50-3. The present trial had a large sample size and was well-designed. There are yet some drawbacks, including the following: 1) possible dependence of some results on skills of the colonoscopist is not mentioned; and 2) the method used for scoring bowel preparation quality was not described. Further studies, like this one, are anticipated.

12. Abstractor and date

Arai M, 19 January 2009, 1 June 2010.