

21. Others

References

Imazato S, Kai S, Koizumi K, et al. A Clinical Study of shakuyaku-kanzo-to (Kampo) as a preparation for double contrast barium enema. *Therapeutic Research* 1997; 18: S505-10 (in Japanese). MOL, MOL-Lib

Imazato S, Kai S, Koizumi K, et al. A clinical study of shakuyaku-kanzo-to (Kampo) as a preparation for double contrast barium enema. *Kampo Igaku (Science of Kampo Medicine)* 1998; 22: 87-92 (in Japanese).

1. Objectives

To evaluate the effectiveness of Shakuyakukanzoto (芍薬甘草湯) for complaints and distress related to pre-enema treatment.

2. Design

Randomized controlled trial (RCT).

3. Setting

One general hospital, Japan.

4. Participants

Sixty patients who visited the hospital to undergo an enema X-ray examination..

5. Intervention

Arm 1: modified Brown method + TSUMURA Shakuyakukanzoto (芍薬甘草湯) Extract Granules 2.5 g before evening meal and sleep on the day before examination, and in the morning before examination (n=30).

Arm 2: modified Brown method (n=30).

6. Main outcome measures

Subjective symptoms (questionnaire).

7. Main results

Subjective symptom scores in arm 1 and arm 2 were 96.7% and 46.7% (respectively) for “not so much” abdominal pain the night before; 86.7% and 6.7% for “usual” sleep the night before; 90% and 66.7% for “no problems” referring to distress associated with enema examination pretreatment when visiting the hospital; and 66.7% and 0% for “easier than last time” referring to a previous occasion. Daily stool frequency was reduced in arm 1 (time range: 0~6 AM).

8. Conclusions

Shakuyakukanzoto reduces distress associated with enema examination pretreatment.

9. From Kampo medicine perspective

None.

10. Safety assessment in the article

Not mentioned. The examination itself was reported to have no ill effects and barium adhesion was reported to be satisfactory in arm 1.

11. Abstractor’s comments

This RCT is worthy of praise for having evaluated the effects of shakuyakukanzoto on pain and distress associated with pretreatment for the barium enema X-ray examination using a large number of participants. The evidence could have been made easier to understand by giving subjective symptoms numerical values and by comparing the two groups in greater detail.

12. Abstractor and date

Kogure T, 8 August 2008, 1 June 2010, 31 December 2012.