	Task Force for Evidence Reports / Clinical Practice Guideline Committee for EBM, the Japan Society for Oriental Medicine
21. Others	
Deference	
I	Obnishi M Hitoshi K Katoh M et al Effect of a Kampo preparation byakkokaniniinto on the
	pharmacokinetics of ciprofloxacin and tetracycline <i>Biological & Pharmaceutical Rulletin</i> 2009: 32:
	1080-4 CENTRAL ID: CN-00704915 Pubmed ID: 19483319 L-STAGE
1	Objectives
1.	To evaluate the effects of co-administered byakkokaniniinto (白虎加人参温) on pharmacokinetics and
	renal excretion of antibiotics (tetracycline or ciprofloxacin
2	Design
	Randomized controlled cross-over trial (RCT-cross over)
3	Setting
	Department of Pharmacy and Pharmacokinetics. Aichi Medical University and Faculty of Pharmacy. Meijo
	University Japan
4	Participants
	Twenty healthy male volunteers (aged 23–36, mean 29.3 years).
5.	Intervention
	Since allocation of patients to these treatment arms is not mentioned, the treatment arms are described in
	terms of treatment regimen.
	Study 1
	Arm 1: oral ciprofloxacin (Ciproxan tablet) 200 mg alone.
	Arm 2: oral ciprofloxacin (Ciproxan tablet) 200 mg + byakkokaninjinto (白虎加人参湯) 3 g.
	Each subject took Ciproxan immediately after taking byakkokaninjinto (白虎加人参湯) with 180 mL of
	water. After a 7-day wash-out period, the treatments were switched.
	Study 2
	Arm 1: oral tetracycline (Achromycin V capsule) 250 mg alone.
	Arm 2: oral tetracycline (Achromycin V capsule) 250 mg + byakkokaninjinto (白虎加人参湯) 3 g.
	The dosing and cross-over were performed in the same manner as Study 1.
	The number of subjects in each arm is not specified.
6.	Main outcome measures
	Plasma and urinary concentrations of tetracycline and ciprofloxacin were measured by HPLC.
7.	Main results
	The peak plasma concentration (C_{max}) and area under the plasma concentration-time curve (AUC) of
	tetracycline and ciprofloxacin were significantly decreased by co-administration of byakkokaninjinto. The
	decrease in bioavailability of ciprofloxacin (15%) was smaller compared with that of tetracycline (30%).
	The co-administration of byakkokaninjinto significantly decreased urinary excretion rate of tetracycline,
	but not that of ciprofloxacin. Byakkokaninjinto had no effect on renal clearance of either antibiotic.
8.	Conclusions
•	Byakkokaninjinto appears to reduce the absorption of tetracycline and ciprofloxacin.
9.	From Kampo medicine perspective
	In this study, it was assumed that byakkokaninjinto was used for treating neat exhaustion and febrile
1	disease.
1	Not mentioned
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1.	This highly suggestive study noted that condministered by akkokaniniinto may reduce the absorption of
	tetracyclines and new guinolone agents (e.g. ciprofloyacin). The authors stated that this reduction may be
	due to the formation of chelates with Ca^{2+} contained in byakkokaninijinto. There remain some problems in
	the study design such as small number of participants inclusion of male subjects only and no description
	of the number of subjects assigned to each arm. Vet the results of this study if confirmed mean that the
	co-administered hyakkokaniniinto may delay the cure of infectious diseases and therefore will have a
	strong impact on clinical practice. An RCT of hyakkokaniniinto in patients with infectious diseases is
	desirable but ethical aspects of such a trial must be considered Alternatively retrospective studies
	including studies with a case-control design might be of some help. Further studies on this topic are
	expected.
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12. Abstractor and date Tsuruoka K, 1 June 2010, 31 December 2013.