

10. Respiratory Diseases (including Influenza and Rhinitis)**Reference**

Yaegashi H. Efficacy of coadministration of maoto and shosaikoto, a Japanese traditional herbal medicine (Kampo medicine), for the treatment of influenza A infection, in comparison to oseltamivir. *Nihon Hoka Dai Tai Iryo Gakkaishi (Japanese Journal of Complementary and Alternative Medicine)*. 2010; 7: 59–62 (in English with Japanese summary). [J-STAGE](#)

1. Objectives

To evaluate the efficacy of coadministration of maoto (麻黄湯) and shosaikoto (小柴胡湯) for the treatment of influenza A infection, in comparison to oseltamivir.

2. Design

Randomized controlled trial (RCT).

3. Setting

A single clinic, Japan.

4. Participants

Fourteen outpatients (18 years or older) who presented within 48 hours after onset of fever (body temperature above 37.5°C) with influenza-like symptoms (upper respiratory tract symptoms or systemic symptoms) and tested positive for influenza A antigen from December 2007 to March 2008.

5. Intervention

Arm 1: administration of TSUMURA Maoto (麻黄湯) Extract Granules 2.5 g t.i.d. + TSUMURA Shosaikoto (小柴胡湯) Extract Granules 2.5 g t.i.d. for 3 days (n=6).

Arm 2: administration of oseltamivir 75 mg b.i.d. for 5 days (n=8).

6. Main outcome measures

Duration of fever, highest body temperature, and number of doses of antipyretics and cough medicines.

7. Main results

There was no significant between-arm difference in duration of fever after onset (2.8±0.8 [mean±SD] days in arm 1 and 2.9±0.7 days in arm 2), duration of fever after treatment (2.9±0.7 days in arm 1 and 2.0±0.6 days in arm 2), the highest body temperature (39.0±0.7°C in arm 1 and 38.8±0.5°C in arm 2), and the number of doses of antipyretics and cough medicines administered.

8. Conclusions

The efficacy of maoto plus shosaikoto for treating influenza A in adults was comparable to that of oseltamivir.

9. From Kampo medicine perspective

None.

10. Safety assessment in the article

No adverse effects were observed in both arms.

11. Abstractor's comments

This paper reports a randomized controlled trial of maoto plus shosaikoto for treatment of influenza A. The effect of maoto combined with shosaikoto was comparable to that of oseltamivir. To strengthen the evidence, the efficacy needs to be confirmed in a study with a larger sample size. However, coadministration of maoto and shosaikoto is not logical from the viewpoint of Kampo medicine. Patients who did not respond to maoto should be treated with daiseiryuto (大青竜湯), keishinieppiichito (桂枝二越婢一湯), saikatsugekito (柴葛解肌湯), or saikokeishito (柴胡桂枝湯) according their excess or deficiency (虚実) pattern, and not with maoto plus shosaikoto.

12. Abstractor and date

Okabe T, 24 December 2010.