

## 2. Cancer (Condition after Cancer Surgery and Unspecified Adverse Drug Reactions of Anti-cancer Drugs)

### Reference

Sato Y, Yamamoto S, Tagami K, et al. Efficacy of Kampo Medicine on Side Effects (muscular pain, arthralgia and paralysis) in TC therapy – Cross-Over study of goshajinkigan and keishikajutsubuto. *Recent Progress of Kampo Medicine in Obstetrics and Gynecology* 2015; 32: 68-71 (in Japanese). [MOL](#), [MOL-Lib](#)

### 1. Objectives

To evaluate the efficacy of goshajinkigan (牛車腎気丸) and keishikajutsubuto (桂枝加朮附湯) for chemotherapy-related muscular pain, arthralgia, and paralysis in patients with ovarian cancer

### 2. Design

Randomized controlled trial (cross over) (RCT-cross over)

### 3. Setting

Study sites not stated (Authors' institution: Gifu Prefectural General Medical Center)

### 4. Participants

Twelve patients on a monthly TC therapy (paclitaxel and carboplatin) postoperatively for ovarian cancer or uterine body cancer

### 5. Intervention

**Arm 1:** Administration of goshajinkigan in the chemotherapy cycle after the onset of muscular pain/arthralgia, followed by administration of keishikajutsubuto in the next cycle (GK group)

**Arm 2:** Administration of keishikajutsubuto in the chemotherapy cycle after the onset of muscular pain/arthralgia, followed by administration of goshajinkigan in the next cycle (KG group)

### 6. Main outcome measures

Intensity of paralysis, muscular pain (VAS), and arthralgia (VAS) associated with the TC therapy

### 7. Main results

Paralysis was lessened in slightly more patients in the GK group than in the KG group.

There were greater muscular pain and arthralgia reductions on the visual analog scale (VAS) in the GK group than in the KG group.

### 8. Conclusions

Keishikajutsubuto is more effective than goshajinkigan for muscular pain and arthralgia as side effects of the TC therapy.

### 9. From Kampo medicine perspective

None

### 10. Safety assessment in the article

None

### 11. Abstractor's comments

This article reports that keishikajutsubuto is more effective for muscular pain and arthralgia after TC therapy than goshajinkigan commonly used currently. This study with a limited sample size provided insufficient results to establish consensus. Further studies, including evaluation of prophylactic use, with larger samples sizes are warranted. Evaluation of long-term use would also be helpful. It is expected that consideration will be given to the clinical use of keishikajutsubuto for muscular pain and arthralgia after the TC therapy.

### 12. Abstractor and date

Kato Y, 18 May 2020