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

10. Respiratory Diseases

Reference

Suzuki S, Furukawa H, Ami H, et al. Experience with TSUMURA Saibokuto (TJ-96) in patients who underwent thyroid or parathyroid surgery^{*}. *Progress in Medicine* 1994; 14: 2254–8 (in Japanese). Ichushi Web ID: 1995247312

1. Objectives

To determine the efficacy of saibokuto (柴朴湯) for relieving complaints after thyroid or parathyroid surgery.

2. Design

Randomized controlled trial (RCT).

3. Setting

Single institution: the outpatient clinic of the Second Department of Surgery, Fukushima Medical University, Japan.

4. Participants

Seventy-seven patients who underwent excision via a collar incision for thyroid or parathyroid disease at the above institution.

5. Intervention

Arm 1: oral treatment with TSUMURA Saibokuto (柴朴湯) Extract Granules 1 pack (2.5 g) t.i.d. before meals for 90 days after the surgery (n=40).

Arm 2: no treatment with Kampo medicines (n=37).

6. Main outcome measures

Clinical examination: flap blood flow at 4 sites on the body surface and flow index (by a laser tissue blood flowmeter) were measured before and 1, 4, 7, and 90 days after surgery.

Improvement in clinical symptom scores: neck and systemic symptoms were evaluated on a 4-point scale using a health questionnaire at 1, 2, and 3 months after surgery.

7. Main results

The improvement in neck tenderness and pain on swallowing was significantly greater in arm 1 than in arm 2 at 2 months after surgery (P<0.01 and P<0.05, respectively). The improvement in the systemic symptoms (fatigue and insomnia) tended to be greater in arm 1. The between-arm differences in improvements disappeared by 3 months after surgery. For patients who underwent subtotal thyroidectomy or parathyroidectomy, flap blood flow was increased significantly at 4 and 7 days after surgery in arm 1 (P<0.05), and there was a trend of increase in flow index at 90 days in arm 2. For patients who underwent total thyroidectomy, there were no significant between-arm differences in flap blood flow and flow index after surgery.

8. Conclusions

Saibokuto is effective for relieving neck symptoms after cervical surgery, possibly by increasing not only flap blood flow at the wound site but also systemic blood flow.

9. From Kampo medicine perspective None.

10. Safety assessment in the article

Not mentioned.

11. Abstractor's comments

After cervical surgery, symptoms considered as targets of saibokuto treatment, including neck tenderness or discomfort and difficulty swallowing, frequently develop. The aim of the present study was to evaluate the efficacy of saibokuto for relieving those symptoms. The main feature of this study is that all the enrolled patients had undergone thyroid or parathyroid surgery. The improvements in neck symptoms were obviously greater in the saibokuto-treated group at 2 months but not 3 months after surgery. From this, it is speculated that saibokuto may accelerate healing and thereby increase blood flow. Future investigations are expected to be from an oriental medicine perspective and to include i) oriental medical pathology during the period of maximum efficacy and ii) a study of the dependence of efficacy on *sho* (\overline{i} E, pattern).

12. Abstractor and date

Ushiroyama T, 6 August 2008, 1 June 2010, 31 December 2013.