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

19. Anesthesia, Postoperative Pain

Reference

Isai H. Successful control of postoperative pain and hyperidrosis by Kampo medicine after thoracotomy for pulmonary disease. *Itami to Kampo (Pain and Kampo Medicine)* 1997; 7: 29-32 (in Japanese with English abstract).

1. Objectives

To evaluate the efficts of keishikajutsubuto (桂枝加朮附湯) and shakuyakukanzoto (芍薬甘草湯) on postoperative pain and hyperhidrosis following thoracotomy.

2. Design

Randomized controlled trial (RCT).

3. Setting

One hospital, Japan.

4. Participants

Twenty patients who underwent thoracotomy for pulmonary disease (lung cancer in 19 patients and spontaneous pneumothorax in 1 patient).

5. Intervention

All patients were given 4-6 mg of epidural morphine daily for 5 days after surgery. In addition, indomethacin, diclofenac sodium, or buprenorphine hydrochloride suppository was used at the discretion of each patient. Kampo medicine was administered for 4 weeks beginning on postoperative day 7. Arm 1: control group (no Kampo medicine) (n=7).

Arm 2: TSUMURA Keishikajutsubuto (桂枝加朮附湯) Extract Granules 2.5 g t.i.d. (n=7).

Arm 3: TSUMURA Keishikajutsubuto (桂枝加朮附湯) Extract Granules 2.5 g t.i.d. + TSUMURA Shakuyakukanzoto (芍薬甘草湯) Extract Granules 2.5 g t.i.d. (n=6).

6. Main outcome measures

Dose of analgesics, wound pain, hyperhidrosis.

7. Main results

The dose of analgesic suppositories tended to decrease over the first 3 postoperative weeks in all 3 groups, but leveled out in Arm 1 and continued to decrease in Arms 2 and 3 at Weeks 4 and 5, resulting in a significantly higher level in Arm 1 than in Arms 2 and 3. Wound pain was well controlled in all 3 groups including Arm 1, where pain could be controlled by high doses of analgesics. Hyperhidrosis was almost resolved at Week 4 in Arm 2 and at Week 5 in Arm 3, but occurred significantly more often in Arm 1 than in Arms 2 and 3.

8. Conclusions

Kampo preparations administered after thoracotomy, particularly keishikajutsubuto plus shakuyakukanzoto, reduces the use of analgesics as well as the severity of hyperhidrosis. Therefore, this Kampo preparation is recommended after thoracotomy.

9. From Kampo medicine perspective None.

10. Safety assessment in the article

No adverse drug reactions were reported.

11. Abstractor's comments

In the Discussion, it was stated that while keishikajutsubuto is effective for wound pain, shakuyakukanzoto is effective for hyperhidrosis. This was also shown graphically.

12. Abstractor and date

Fujisawa M, 15 October 2008, 1 June 2010.