11. Gastrointestinal, Hepato-Biliary-Pancreatic Diseases

Reference

Mori H, Iwamoto M. Comparison study of keihito and trimebutine maleate for irritable bowel syndrome. *Therapeutic Research* 1999; 20: 2179-85 (in Japanese). Ichushi Web ID: 2000030973 MOL, MOL-Lib

1. Objectives

To evaluate the efficacy and safety of keihito（啓脾湯）in patients with irritable bowel syndrome.

2. Design

Quasi-randomized controlled trial (quasi-RCT).

3. Setting

One hospital (department of internal medicine) and one clinic (the author belongs to Yokohama Sotetsu-naika), Japan.

4. Participants

Patients aged ≥15 years who presented with a complaint of diarrhea between March 1, 1998 and February 28, 1999, in whom irritable bowel syndrome with diarrhea (IBS-D) was diagnosed after exclusion of organic intestinal diseases. Patients were excluded from the study if they were pregnant, possibly pregnant, had serious hepatic or renal disorder or other diseases, had abnormal bowel movements due to other causes than irritable bowel syndrome, were contraindicated for anticholinergics, or had used oral trimebutine maleate or anticholinergics before participation in the study. (n=13)

5. Intervention

Arm 1: TSUMURA Keihito（啓脾湯）Extract Granules 2.5 g three times daily orally after meals for 2–4 weeks (n=6).

Arm 2: Trimebutine maleate 100 mg three times daily orally after meals for 2–4 weeks (n=7).

6. Main outcome measures

The following parameters were evaluated before and at 2 weeks of treatment (if not possible, at 3 or 4 weeks of treatment): stool volume, stool characteristics, frequency of stools per day, subjective symptoms (i.e., feeling of residual stools, diarrhea, constipation, abdominal pain, bloating, abdominal discomfort, heavy stomach feeling, inappetence, nausea/vomiting, and borborygmus). In addition, global improvement was rated on a 5-level scale as “Very much improved”, “Much improved”,“Minimally improved”, “No change”, or “worse”, based on the frequency of stools, stool characteristics, and the symptoms over time.

7. Main results

Since 1 patient in Arm 1 and 3 patients in Arm 2 were lost to follow-up, the analysis was conducted on 5 patients in Arm 1 and 4 patients in Arm 2. The stool volume, stool characteristics, frequency of stools per day, subjective symptoms, and global improvement rating showed no significant inter-group differences between Arm 1 and Arm 2.

8. Conclusions

Keihito and trimebutine maleate did not differ in the effectiveness on irritable bowel syndrome with diarrhea, suggesting that keihito can be effective in treating the disease.

9. From Kampo medicine perspective

From the viewpoint of Kampo medicine, irritable bowel syndrome represents *Ura no Kyosho* (*裏の虚証*, interior deficiency pattern). This study thus evaluated the effectiveness of keihito used to treat interior deficiency.

10. Safety assessment in the article

According to the article, no adverse effects were reported in either group, but blood tests were performed only at the start of treatment.

11. Abstractor’s comments

From the viewpoint of Kampo medicine, irritable bowel syndrome represents *Ura no Kyosho* (*裏の虚証*, interior deficiency pattern). This clinical study thus evaluated the effectiveness of keihito used to treat interior deficiency, compared with trimebutine maleate classified as a gastrointestinal motility regulator. Given that keihito is used relatively uncommonly, this clinical study is important in that it was conducted to determine keihito’s clinical effectiveness. However, because of the small sample size of the study, it is unclear whether the absence of an inter-group difference was due to the similar effectiveness between keihito and trimebutine maleate or due to the small sample size. Furthermore, although the article states that keihito and trimebutine maleate had similar effectiveness because both groups showed improvement in the global improvement rating and other parameters, influence of placebo effect can be prominent in some conditions like irritable bowel syndrome, and thus warrants consideration. As the authors stated in the article, the sample size was small in this study. Searching for effective therapies is important for irritable bowel syndrome and other diseases that affect many people, and further continuation of the research is desired.

12. Abstractor and date

Goto H, 5 September 2019.