

Editorial

The Importance of Case Reports

A certain patient's certain clinical conditions were improved by a certain Kampo prescription. Some say it was a coincidence, others say the patient's condition would have improved even if left alone. Still others say any drug would have improved the patient's conditions by around 30% anyway, so the improvement was not necessarily a result of Kampo. There may also be people who say the case is not credible, as it is not based on evidence. Different people say many different things, because the case that was reported was but a single example.

Nangai Yoshimasu, a practitioner of Kampo medicine who was active during the end of the 18th century, used goshuyuto to treat a patient with severe headache attacks. He included this case in a collection of case reports that he published. Around 150 years later, Dr. Keisetsu Otsuka (Kampo practitioner who was active during the mid-20th century), who read the case report, used the same prescription to treat many patients who suffered from headaches and migraines, and wrote a paper on the types of headaches the prescription is effective against (see *Journal of KAIM* Vol. 10, No. 3, p.4-5). Physicians of later generations considered this paper as secret guidelines for using goshuyuto.

During the days of Dr. Otsuka, the concept of evidence-based medicine (EBM) did not exist, and computers were not at the practical level. Moreover, the International Classification of Headache Disorders had yet to be formulated. Having no such tools, Otsuka collected data on the symptoms of headache patients (including patients with migraines) and performed something similar to multivariate analysis in his brain. Generally speaking, people's brains cannot objectively process data as accurately as a computer. Dr. Otsuka was a genius, but in hindsight, some of the symptoms goshuyuto was indicated were also general symptoms of migraines, so his guidelines were not perfect.

Nevertheless, many physicians have read Dr. Otsuka's cases and used them as secret guidelines for treating patients with headaches and migraines with goshuyuto, and have reported numerous cases as a result. It is owing to these numerous cases that a general consensus has been reached in regard to the indication of goshuyuto against headaches and migraines. The statistical study by Dr. Odaguchi et al. (see *Journal of KAIM* Vol. 10, No. 3, p.5-6) is built on this past history, and clinical studies of an even larger scale are expected to be performed in the future.

What I wish to emphasize here is that the abovementioned story all began with a single case report. Thereafter, the accumulation of more case reports led to the establishment of helpful tips, and clinical studies have begun to be conducted as a result thereof. Well-written case reports embody a predictive view of future clinical studies. In Kampo medicine, treatment is based on oral guidelines and evidenced data in many cases, instead of on traditional medical theories. This was made possible by Japan's unique system of Ho-sho So-tai (Japanese Kampo Diagnostic System) that was established by Todo Yoshimasu, but more important than anything was the existence of outstanding case reports.

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