

Clinical Report 2 (Kampo Medicine)

Case of Effective Administration of Saikanto for Left Chest Pain

Keiko Ogawa-Ochiai
Kanazawa University Hospital

Case: 43 year old woman

Main complaint: Left chest hurts every time the patient coughed

Past history: 38 year old HELLP syndrome after giving birth to child

Family history: Nothing in particular

Current clinical history: The patient contracted acute bronchitis in September, XXXX year. Antibiotics were prescribed for fever, coughing, and yellow sputum. Fever subsided, but coughing continued. Two weeks after becoming ill, sharp pain in the left chest after coughing and Pressure pain on the axillary line of the 10th thoracic vertebra were experienced. Symptoms intensified with breathing, body movement, and coughing, NSAID was administered, but the analgesic effect was insufficient. A chest fixing band was put on but breathing became difficult, so the band was not worn continuously. A tramadol-acetaminophen combination was administered and the patient could finally sleep. However, when this drug was administered during the day, dizziness, nausea, and fatigue made it difficult to work.

Findings at the initial visit: 166cm, 52kg

Blood pressure: 110/74mmHg Pulse: 72/min.
satO₂ 98%

Pulse: Right: Slightly floating and string-like, slightly soft pressed, thin and rough pulse
String-like, pressed, rough pulse Slightly floating and string-like, slightly soft, pressed, thin and rough pulse

Left: Slightly floating, slightly string-like, pressed, thin and rough String-like, pressed, rough pulse Slightly floating and string-like, soft, pressed, thin and rough pulse

Tongue: Swollen, teeth marks, and white coated

Abdomen: Slightly hard under the heart
Discomfort when pressed in exhalation Tightened rectus abdominis, right-dominant side chest pain.

Clinical course:

Saikanto was administered for chest pain and coughed-up sputum, pain experienced by the patient became 5/10 in numerical rating scale (NRS) immediately after administration, and frequency of coughed-up sputum and coughing also decreased. Sensation of dyspnea disappeared the next day. Two days after administration, tramadol-acetaminophen combination was not needed, and sufficient analgesic effect could be achieved by NSAID alone. Three days later, NSAID was also no longer required.

Discussion

Saikanto used here is a combination of shosaikoto and shokankyoto. It is a traditional prescription first mentioned in 12th Century Chinese literature. Although not well known in China today, it is featured as a Kampo medicine in Japan, inheriting the experience of skilled doctors from 100 years past. Indications include bronchitis and pleurisy, and it is sometimes used for chest pain with unclear cause.

In this case, rib injury occurred due to coughing caused by bronchitis. The impression was that administration of saikanto was effective not only in reducing pain as it decreased coughing, but also was effective on the pain itself.

Pain experienced by this patient was strong and the usual NSAID did not have effect, but could finally be controlled by tramadol-acetaminophen combination. However, by administration of this latest and superior medicine, pain experienced by the patient could be reduced, but side effects such as dizziness, nausea, and fatigue appeared, making her work difficult.

Saikanto was prescribed to reduce coughing and coughed-up sputum in hopes that the patient could return to a normal life. The trial was successful, and the patient could return to the work site within

several days. This prescription was effective to not only reducing coughing and coughed-up sputum, but also to pain itself.

When reviewing this case from the viewpoint of “Yasui Classification of the Indications for Kampo treatment,” the successful combination of NSAID and saikanto satisfies Type 4, by improving the condition of “difficulty in daily life due to the adverse effects of tramadol-acetaminophen combination,” as well as Type 2.