

Editorial

Kampo Medicine Seen from the Viewpoint of Clinical Reasoning – Part 2

In the Editorial of the previous issue, I mentioned the application of Clinical Reasoning System 1 to Kampo medicine. In this traditional medicine, the decision of making a correct prescription is important, numerous clinical pearls and evidence data such as from randomized control trials are extremely fundamental for intuitive reasoning, and Japanese Kampo doctors are skillful in this point.

Then, what is the application of System 2 to Kampo medicine? It is to understand the logically constructed structure which this traditional medicine originally possesses and to diagnose Kampo pathological conditions by utilizing them to derive the optimal prescription. Several methods have been proposed for this approach.

The most common method is modern Traditional Chinese medicine (modern TCM) that originates in ancient China. This diagnostic and therapeutic method reaches the final decision of prescription by repeating hypothesis formation and hypothesis verification from the patient's symptoms. This is a typical System 2 model.

A different method is advocated by the Japan Society for Oriental Medicine which is the most common approach in Japan. It aims to assist prescription selection by making full use of concepts such as: yin/yang; exterior/interior; cold/heat; excess/deficiency; qi, blood and fluid; Six stage pattern. This is similar to modern TCM, whereas TCM performs "analysis" of disease states, the Japanese approach is "category classification" of disease.

Recently, another theory which deserves attention has emerged in Japan. Yoichiro Ebe invented "Keiho Theory" based on the content of Kampo classics; "*Shang Hang Lun*" and "*Jin Gui Yao Lue*", especially focusing on the movement of qi (ki). It describes physiology / pathology / therapeutics in the time of creation of these classics. He also describes the principles of Kampo medicine. It can be expected that this field will be further researched in future.

In any case, System 2 in Kampo medicine requires a high-load of thought work and takes time to reach the final objective, but it can be verbalized and conveyed to other people hence verifying the thought process.

In this way, it can be said that more accurate prescription decisions are made by using both Systems in Kampo medicine rather than by using only one of the Systems.

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