

## Clinical Report 2

### *Severe Pain on the Right Side of the Chest and Hypochondrium—No Abnormalities Found in Tests*

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Case: 17 year-old female (2<sup>nd</sup> year student of junior high school)

Chief complaint: Right side of the chest and hypochondrium regions

Present history: The patient began to have strong pain on the right side of the chest and hypochondrium regions half a year ago and had to take a leave of absence from school 3 to 4 days a week. She underwent blood tests and even CT scan at the internal medicine, surgery, and gynecology of Y municipal hospital. However, no abnormalities were found. She was told “no appendicitis” and “the cause of the pain was unknown.” For treatment, Loxoprofen, Timentidum bromide, and Lac-B were prescribed in case of the onset. She had stomach medicines prescribed by other clinic. With these medicines, relief was not attained and she visited our clinic.

Oriental medical findings

Objective-signs:

Inspection: Dark circles around her eyes. Auscultation

and Olfaction: No special mention. Tongue

diagnosis: Dark red tongue with dark spots and only a

few sublingual veins. Pulse diagnosis: Strong-like,

slippery, and rapid. Also, when chi-pulse (尺脈) is deep

pressed in, will slightly wiry. Abdominal diagnosis:

Oppressive pain along the epigastric region to the

right under-arm (the place of the pain complained).

Oppressive pain also in the right lower abdomen (the point of blood stasis).

Subjective-symptoms: Stressful (had to juggle both

studies and activities of the brass band club). Late

menstruation sometimes. Sleep 3:00 to 6:00 without

dreaming. Normal defecation. Normal diet- 3

times/day. No sensations of cold and heat.

Diagnosis: Liver qi stagnation and bad blood circulation

Therapy: *shigyakusan + keishibukuryogan* (Tamura Pharmaceutical Co., Ltd., 7.5 g each 3 times a day)

Course: Relief of pain was observed on the second

visit, 14<sup>th</sup> day from the commencement of the administration, during which term the patient commuted to school without a leave of absence. Mild pain appeared only when she was tired. Pulse became stable. The tongue still had spots but the color became light. The abdominal diagnosis indicated relief to the extent that the patient felt only slight oppressive pain in the same regions when oppressed strongly. The 14 days doses of the same formula were prescribed and instructions were given to the patient not to push herself beyond the point of fatigue. Then the treatment completed and thereafter no abdominal pain has occurred.

Discussion: The patient is a typical case of the stagnation of liver qi in terms of Kampo medicine. Usually patients with liver qi stagnation do not present such strong pains that prevent them from commuting to school. The patient was presumed to have severe pains due to the presence of not only the stagnation of qi but also blood stasis. In sum, the patient suffered severe stress because she tried to take balance between studies and club activities, which induced the obstruction of the movement of diaphragm qi, causing “stagnation-caused pain” – which was then followed by the non-circulation of the blood, and symptoms such as late menstruation periods, dark circles around the eyes, and dark tongue spots appeared.

These conditions that Western medicine is unable to diagnose are often seen in functional diseases rather than in organic diseases, and often need a mental approach. For the case of the patient, it was considered necessary to prioritize pain procedures before providing counseling. The prescribed *shigyakusan* removed the pain with bupleurum root that worked on soothing and regulating liver qi in combination with the added younger immature bitter orange that worked on breaking the stagnation of qi to promote the flow of qi. And peony root and licorice root worked on removing acute pain. *Keishibukuryogan* worked on the circulation of qi and the blood with cassia bark and peony root; and on activating blood and resolving stasis with peach seed and tree peony bark; and on invigorating the spleen and calming the mind with tuckahoe. The author considers that

the combination drugs may have enabled the circulation of qi and blood resulting in the prompt relief of pain. “As long as circulation is being done, there is no pain.”