

### Clinical Report 3

#### *One Case of Uterine Adenomyosis Responsive to Daiobushito-Based Decoction*

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Case: Female, 28 years old

First visit: September 3 of the year X

Chief complaint: Menstrual cramps and constipation

History of present illness: Menstrual cramps began to become severe about three years ago. Abdominal pain developed from the first day of her periods and she could hardly stand it. Although the patient used analgesics (loxoprofen) when the onset developed, she gained no relief of the pain and had to receive a pentazocine injection. During the first half of the day, the cramps were so severe that she lost consciousness sometimes. Bleeding on the first days was heavy with clots. She had a diagnosis of “uterine adenomyosis” by an OB/GYN doctor and received *tokishakuyakusan* without any effects.

Appetite: Ordinary

Sleep: Good

Urination: 5 times/day, night urination - once

Bowel movement: 3 times/day with the use of laxatives (sodium picosulfate, sennocide) for constipation. Hard stools. *bofutsushosan* was effective only when used for the first time.

The body felt cold, especially extremities. No hot flashes.

Present symptoms: 154cm, 54kg

Pulse: Deep, thready, and wiry

Tongue: Pale colored with white furs and moist.

Abdomen: Strong resistance and oppressive pain in both paraumbilical areas. Epigastric distress and hardness (+).

Diagnosis: Stagnation of Qi and blood stasis due to accumulation of cold

Therapeutic strategy:

The underlying clinical condition was considered

to be an accumulation of cold caused by the invasion of cold from outside and yang deficiency. The present condition was also considered such that this cold accumulation caused the stagnation of Qi and blood stasis, inducing the blockage of the flow of large intestine Qi leading to the accumulation. Therefore, the treatment is required to basically release and eliminate the accumulation of cold to allow the circulation of stagnant Qi and the removal of blood stasis.

Course:

Firstly, *daiobushito* (*Rhei* Rhizoma-2g, *Aconiti* Radix Processa-2g, *Asiasari* Radix-4g) was experimentally administered to get rid of the accumulation of cold. A ten-day administration of the formula improved bowel movements and the body became warm. Two weeks after the start of the administration, menstruation resumed. However, pain was still severe so that the patient could not endure it without having an injection of pentazocine. Bleeding still had clots mixed. The blood clots meant the existence of stagnant blood. As this formula works to improve the accumulation of cold but does not work on Qi stagnation and blood stasis, the result is logical. So, on September 20, drugs for activating the blood and eliminating the stagnation were added and the formula was modified as follows.

*Rhei* Rhizoma 2g

*Aconiti* Radix Processa 2g

*Asiasari* Radix 4g

*Persicae* Semen 4g

*Cinnamomi* Cortex 4g

*Corydalis* Tuber 4g

*Angelicae Acutilobae* Radix 4g

*Cnidii* Rhizoma 4g

*Paeoniae* Radix Rubra 4g

*Glycyrrhizae* Radix 2g

*Poria* 4g

Right after the administration of this modified drug, the pain improved slightly, so the patient was maintained on the same drug. On November 2, in order to strengthen the action on Qi stagnation,

*Ciperi* Rhizoma 4g was added. Subsequently, menstrual cramps gradually became less severe. On March 30 of year X+1, to further increase the effect on cramps, the amounts of *Aconiti* Radix Processa, *Ciperi* Rhizoma, *Corydalis* Tuber, and *Paeoniae* Radix Rubra were increased. On the April 17<sup>th</sup> visit, the patient claimed that cramps abated greatly and felt well every day. During her May period, an injection of pentazocine was unnecessary. And then the severity of cramps gradually reduced to the extent that she could lead a normal life. Currently (June of year X + three years) cramps further abated and the patient lives a life of comfort. She has become vigorous without cold extremities.

Consideration:

Traditional Chinese medicine classifies menstrual cramps into five types and has different approaches and prescriptions prepared that fit to individual types. The case of the patient falls under the type of accumulation of cold in the uterus. The patient's constitutional predisposition is yang-deficiency, upon which cold from outside was piled up inside the body. This caused the obstruction of the flow of large intestine Qi and thereby the accumulation occurred, leading to severe constipation. An ideal treatment was to disperse and resolve the accumulation of cold by warming. The use of a cold type of rhubarb, despite the presence of the strong internal cold, was aimed at resolving the accumulation while the use of warm types of aconite and Asiasarum root was aimed at counteracting the act of the cold of rhubarb. The drugs for activating the blood and eliminating the stagnation were used in combination with the drugs for regulating Qi to respond to the Qi stagnation and blood stasis which were caused by the accumulation of cold. These drugs worked in cooperation to improve the pathological condition. The core element of this formula is no less *daibushito*.