

Kampo Formula Developed in Japan (2)

Jumihaidokuto

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Profile

Jumihaidokuto is a modified formula of the original *Schizonepeta Antiphlogistic Decoction* described in the chapter of “Yoso (malignant skin boils)” of “Manbyo Kaishun.” Seishu Hanaoka (1976-1835) modified the original prescription 200 years ago for the treatment of pyosis of the skin. Hanaoka was a competent Japanese surgeon and is well known for the excision of breast cancer under general anesthesia with a Kampo drug. Today, *jumihaidokuto* is applied to a wide variety of skin disorders including purulent skin lesions, eczema, dermatitis, and hives (urticaria).

This prescription developed for ethical use consists of the following:

Platycodi Radix 3 g

Bupleuri Radix 3 g

Cnidii Rhizoma 3 g

Poria 3 g

Saposhnikoviae Radix 1.5 g

Glyzirrhizae Radix 1 g

Schizonepetae Spica 1 g

Zingiber Rhizoma 1 g

Quercus Cortex 3g

Araliae Cordatae Rhizoma 1.5 gm.

Note: For the original formula, *Notopterygii* Rhizoma was used instead of “*Araliae Cordatae* Rhizoma.” For *Quercus* Cortex, which is a crude drug often used in Japan, barks of deciduous broad leaved trees such as oak are used. Some makers use *Pruni* Cortex instead of the *Quercus* Bark.

[Efficacy] Dispel wind, relieve toxins, and expel puss/dispel sores and relieve itching

[Indications] External contraction of cold / wind-moist-heat toxin

[Drug actions] Fineleaf *Schizomepeta* Herb, Divaricate *Saposhnikovia* Root, Double-teeth Pulbescent *Angelica* Root, and Ginger work to dispel wind and cold of the skin surface by the action of dispelling wind and releasing the exterior. *Bupleurum* Root having the action of releasing the exterior with pungent-cool has the ability of clearing heat produced by skin pyrosis. Balloonflower Root and *Quercus* Bark, which has the action of releasing toxins and dispelling pus, are also effective for skin suppuration. *Cnidium* Rhizome activates blood and frees the collateral vessels, by which enhances local circulation is enhanced and pure is promoted. Tuckahoe eliminates internal moist and deals with lesions caused by moist in collaboration with the drugs that have the action of eliminating external moist, such as Divaricate *Saposhnikovia* Root and Double-teeth Pulbescent *Angelica* Root. Licorice Root has the action of clearing heat and releasing toxins and concurrently works to harmonize various drugs.

Wild Cherry Bark and *Quercus* Bark have been put to civilian use and said to be effective for furuncles, hives, dermatitis, and athlete’s foot. The drug actions of these two drugs are not much different each other. From the past experiences, however, it is thought that Wild Cherry Bark has the action of dispelling pus, whereas *Quercus* Bark is good for relieving itching. The medical properties of these two, however, are not clear. It is thought, however, that they are used in the formula mainly for the purpose of dispelling pus as they do not have a strong action of clearing heat.

Indications

Jumihaidokuto has effects of dispelling wind and cold, moving qi and harmonizing the blood and it has also the effects of healing through expelling pathogenic factors from the exterior of the skin. From this point of view, indications of this formula become as follows:

First, because of the action of dispelling wind, relieving toxins, and draining pus, it has the indications for pus-related disorders of any kind in the initial stage. Second, by releasing exterior pathogens, this formula can remove exterior moist-heat (eczema, etc.) and water-moist (hives, etc.). However, only few drugs in the formula have the action to stop itching. Third, because of the action of dispelling wind, the formula has the indication for common cold in the initial stage.

1. Pyosis of the skin

This formula can be effectively applied from the condition in which the affected areas turn red and become swollen in the early stage of skin disorders such as folliculitis and furuncle to the condition in which inflammation becomes localized and infiltrations are indurated or hardened. It is often the case that continued use of the formula gradually decreases the emergence and over time the symptoms do not appear.

Moriya Okuma used *jumihaidokuto* for the protection of cellulitis observed in lymphatic edema in a female of 58 years old and reports that cellulitis that used to appear once a month could be suppressed¹⁾. Ryosaburo Senaga reports that he used this formula for furunculosis and pyoderma of infant's heads in the pediatric field with successful results²⁾.

Case 1: Furuncle

A woman, 36 years old, had furuncles on the face and nape of the neck all through the year. Soon after one was cured, another one appeared. Although she used various kinds of antibiotics, furuncles did not become better. The patient was of average height and weight. Her complexion was not very good. No diabetes. Due to the nature of her business, the patient drank alcohol a little every night.

I used *jumihaidokuto* for furuncles. After

about one month of administration, furuncles did not develop, so the medication was suspended. In a month, however, they began to appear. The medication was resumed and continued for further about three months and a cure was achieved.

(Keisetu Ootuka, **Shoko ni yoru Kampo Chiryō no Jissai** P499 Nanzando 1963)

2. Eczema/Dermatitis

Kobayashi, et al. report that they administered *jumihaidokuto* to 17 patients with chronic eczema, with the results of markedly improved in 4 patients, improved in 7, slightly improved in 3, remained unchanged in 3 with the improving rates of 64.7% of more than improved and 82.4% of more than slightly improved. They further report that the effectiveness levels between the formula and clemastine fumarate used for comparison were similar with no differences of statistical significance. However, the group of *jumihaidokuto* showed marginally high levels with the result of “more than improved3).”

Kimura, et al. report that they used *jumihaidokuto* for 18 patients with chronic eczema with the results of markedly effective in 2 patients (11%), effective in 5 (27%), effective in 7 (39%) and remained unchanged in 4 (23%). They also used the formula for four patients with asteatotic eczema with the results of markedly effective in 1 (25%), effective in 1 (25%), and remained unchanged in 2 (50%)⁴⁾.

Case 2: Persistent eczema

One day, a well-built plump man in his 40s who suffered from rashes/eczema visited me for a clinical examination. The size of a lesion was about the head of a match stick and the eczema was slightly tinged with red and bumpy. The areas of hands, legs, and the lower abdomen to the lower back were severely affected. Tolerating

itching brought him a shivering. He was cautious not to scratch the affected areas during the night so that he asked his family to tie both hands to the bed. He received various injections and used various ointments without results. No abnormalities in urination, bowel movements, and appetite. I previously had used *Pueraria Decoction* for this type of a patient and this medication had exacerbated the condition. Therefore, I decided to use *jumihaidokuto*.

This formula was very effective. Itching rapidly disappeared and a cure was attained within about two months. After this, whenever drinking beer, he had a recurrence indication. Therefore, the formula was used for 2 to 3 days after drinking beer to prevent a recurrence. In the meantime, the formula was not required at all. This patient visited me after a 10 year-interval and said that rash-like something slightly appeared. This could be recovered by the two-week use of the formula.

(Keisetu Ootuka, “**Kampo Shinryo 30-nen**” p166 - 167 Sogensha 1959)

3. Seborrheic dermatitis

Yamamoto pointing out that adult seborrheic dermatitis is one of good indications of *jumihaidokuto* says⁵⁾ as follows: “I use *jumihaidokuto* for seborrheic dermatitis in adults. If it is an extract form, the daily dosage is 10g to 20g or more. It is very effective and a cure can be achieved quickly. However, with the use of only about 7g/day, it takes many days for treatment or the skin disorders cannot be cured,” and if the extract formula cannot be modified, “I combine *orengedokuto* if inflammation is intense, such as a red flare. Skin rashes in the arm pits and the umbilical region become wet from sweat and swelling becomes intense during the summer season. In that case, I combine *shofusan*⁵⁾.”

Case 3: Seborrheic dermatitis

[Patient] Male of 60 years

[Initial visit] April 28, 1983

[Past medical history] Present condition and course

He had an itchy scalp with a lot of dandruff. In recent days, from 5mm-1cm of the hairline of the forehead towards the hair of the head there were erythemas with a clear boundary line where, in particular, there were pityroid scales.

Under the both arm pits, there were also erythemas having a relatively clear boundary and there were pityroid scales in the boundary area.

And there were keratotic papules (raised rashes) and erythemas on the dorsal surface. Diagnosis was seborrheic dermatitis and Extract Powder of *jumihaidokuto* 10g/day divided into equal 3 portions was administered. After one week, rashes on the trunk area disappeared and those on the head and armpits also improved. However, the central parts in the armpit areas were difficult to cure and tended to become exacerbated. So the volume of Extract Powder of *jumihaidokuto* was increased to 15g/day from May 26. Because a flare-up in the central part was intense and it was not easy to cure, Extract Powder of *orengedokuto* 5g/day was concomitantly used from June 9. On June 30, a cure was mostly achieved.

The reason of selecting the prescription is as follows:

Diagnosis was seborrheic dermatitis. As the patient's condition was relatively mild, the extract preparation of *jumihaidokuto* was used. From my experiences, seborrheic dermatitis in adults can be cured with modified *jumihaidokuto* regardless of age, sex, being fat or thin, pulsation, and abdominal conditions.

As the patient's condition was comparatively mild, the extract preparation was used. In some cases, 6-7 gm per day yields effects. But with this dose amount, treatment often becomes prolonged,

recurrent, or intractable.

In the case of this patient, the starting dosage was 10g/day, which was increased as necessary according to the progress of the condition to determine the effective dosage. The dosage of about 20g/day as a standard would markedly improve the effectiveness.

(Iwao Yamamoto, Clinical Lecture of Department of Dermatology THE KANPO Vol.4, No.2 P13 - 14 1986)

4. Atopic dermatitis

jumihaidokuto is sometimes applied to atopic dermatitis but its application is limited to a very narrow range. Ninomiya says that “the formula is good for suppurative eruptions in the individuals having a moderate degree of physical strength.⁶⁾”

Kinuko Kobayashi, et al. report that they administered *jumihaidokuto* to 18 patients with atopic dermatitis and the results showed markedly improved in 2 patients, improved in 7, slightly improved in 7, and remained unchanged in 2 with the overall improvement rates of 50% of more than improved and 88.9% of slightly improved. They further reports that the formula had similar levels of effectiveness to those of clemastine fumarate used for comparison⁴⁾.

Case 4: Atopic dermatitis

[Patient] Male of 19 years

The patient had a moderate degree of atopic dermatitis. There were erythemas and papules mostly all over the body with mild **lichenification**, desquamation, and rupture scars. According to the enveloped method, clemastine fumarate was given orally from August 1992. Eight weeks later, effectiveness was assessed as mildly improved. Although the internal administration was continued for a while, I thought the symptoms of the patient seemed to be the “sho” of *jumihaidokuto* because he tended to become constipated and has a muscular build. In

December of 1992, Tsumura *jumihaidokuto* was started. After two weeks of administration, itching and skin rashes improved significantly. After a few months, the skin disorder was nearly recovered. Then, the skin condition is well managed only with the internal use of TJ-6.

(Kinuko Kobayashi, et al. , Treatment Effect of *jumihaidokuto* for Chronic Eczema and Atopic Dermatitis, 12th Hifu-ka Toyo Igaku Kenkyu Kai Kiroku p29-30, 1994)

5. Prurigo

Case 5: *Modified jumihaidokuto* for **urticaria perstans**

[Patient] 26 years old, female, company employee

[Initial visit] May, 1985

[Past Medical history] Summer rashes developed when she was a kindergarten child.

[Current medical history] Last summer, the patient had mosquito bites on both upper extremities, which became indurated like warts and felt itchy. That is, **urticaria perstans**. **Bowel movements were twice a day and normal. No abnormalities in menstruation.**

[Present condition] Height 158cm, weight 54kg. White furs on the tongue. No special mention from the abdominal diagnosis..

[Course] *jumihaidokuto* 6.0g divided into equal 2 portions and *Rei Rhizoma* powder 0.1g were administered.

June 1985, itching was eased.

August of the year, the condition was mostly good, but there were new traces of mosquito bites. The overall skin, however, was becoming clear. By October of the year, the same medications continued.

In November of the year, the patient claimed that the number of wart-like indurations increased. *jumihaidokuto* 6.g with an addition of Coix Seed Extract 3.0, both divided into equal

two portions, was administered.

February 1986, a cure was achieved and the medication was discontinued.

[Comment] Urticaria *perstans* is quite persistent but *jumihaidokuto* is often effective for the disorder. It takes time for the treatment. In the case of this patient, it took nine months.

(Kunio Matsuda, *Shorei ni yoru Kampo Chiryō no Jissai*, P331, Sogensha 1992)

6. Urticaria

Nakai, et al. report that they administered Extract of *jumihaidokuto* to 26 patients with chronic urticaria and obtained an effective rate of 65% including “slightly effective”⁷. Maeda, Morita, et al. report that they administered *jumihaidokuto* to nine patients with urticaria from their experience of using Kampo preparations in the field of dermatology and the results showed complete cure in 3 patients and relieved in 3, and no effects in 3 with an effectiveness rate of 66% (6/9 patients)⁸. Koga administered Tsumura *jumihaidokuto* to 30 patients of over 15 years old with the diagnosis of chronic urticaria in the departments of dermatology in eight university hospitals in the regions of Kyushu and Okinawa with the results of markedly improved in 6 patients (20%), more than useful in 19 (63.3%), and slightly more than useful in 28 (93%)⁹. Yamaguchi, et al. used Kampo preparations for ethical use for various dermatological diseases. And they report that in the patients for whom *jumihaidokuto* was used according to the sho, 42.9% of the group of chronic urticaria (with an addition of Rhubarb tablets) showed more than effective and 85.7% of the group of eczema and dermatitis showed more than effective¹⁰. Horiguchi, et al. used *jumihaidokuto* for 11 patients with urticaria persistent for more than one month with the results of 91% of slightly more than effective¹¹.

Case 6 Chronic urticaria

The patient was a female of 19 years old. According to the patient, in her childhood, she had repeatedly had autotoxication and her constitution was fragile. However, over the years, she was gradually becoming fat. She had ruddy cheeks and obese. Appetite and bowel movements are normal, but mouth dryness was intense. Her main complaint was urticaria, which had been persistent for about a year since last summer. The abdomen distended with almost no bloated feeling in the chest and hypochondriac regions. Menstruation was normal. I administered *jumihaidokuto* with an addition of *Gypsum Fibrosum* for these symptoms and a cure was achieved with three weeks administration. However, in end June of this year, urticaria began to develop again and the same medication was given. About one month later, full recovery was achieved.

(Otsuka, **Keisetsu, “Kampo Shinryō 30-nen”** P166 Sogensha 1959)

7. Acne

Jumihaidokuto cannot be used for acne very extensively. It can, however, be applied if acne has a strong tendency of becoming prulent.

Makoto Tanaka reports that he administered this formula together with Minomycin (100 mg/day) the subjects of 35 patients with acne and had the result of effectiveness in 23 patients (66%). Subsequently, he added 135 subjects, making a total of 170, who were assigned to the group of *jumihaidokuto* alone, the group of minomycin alone, the group of Lurid alone, the group of *jumihaidokuto* + minomycin, and the group of *shosaikoto* + Lurid and obtained the result that the group of *jumihaidokuto* + minomycin showed the most excellent result¹².

Moriya Okuma performed the treatment of 128 patients with acne vulgaris who were assigned to

three groups; the group of *jumihaidokuto* alone, the group of *jumihaidokuto* + external medication, and the group of external medication alone. As a result, the group of *jumihaidokuto* alone had a complete disappearance of skin rashes with markedly effective in 22 patients, effective in 13, slightly effective in 6 and remained unchanged/exacerbated in 5. He further says that *jumihaidokuto* is adequately effective without the use of other external medicines (steroids, sulfur compounds, Clindamycin)¹³⁾.

Case 7: Modified *jumihaidokuto* for pimples

[Patient] 23 years old female

Initial visit: December 12, 1978.

[Present medical history] Around February 1978, a large number of pimples developed and were treated by a dermatologist for three months and recovered at the time. In around September of the year, pimples recurred and treated by the same dermatologist. However, they were not cured and rather became reddened, swollen, and map-like rashes. The patient's face looked pitiful. She was recommended extract tablets of *shosaikoto* and *keishibukuryogan* by a Kampo pharmacist and took them with no effect.

[Present condition] The physical frame and nourishment were moderate. The whole body seems to contain excessive water. The patient was fatigable, irritable, and easily became angry. The face had many rashes that were map-like and swollen. Other conditions were ringing in the ears, congested nose, stiff shoulders, stuffy stomach, sweater (face), cold hands and legs, constipation, irregular menstruation (delayed), good appetite, can eat anything, and eat much raw vegetable.

The tongue was covered with white furs, moist and there was an accumulation of saliva in the mouth. The pulse was sunken and weak. The abdomen was soft in general and there was a bloated feeling in the chest and hypochondrium on

both sides. Right and left rectus muscles were hardened.

[Treatment and course]

When *jumihaidokuto* plus *Forsythiae Fructus*, *Coicis Semen* and *Rei Rhizoma* was administered for about seven days, pimples worsened and began to discharge pus.

The patient was told to continue the medication with a sense of security as "this is the sign that the prescription was working." When about 40 days passed, pimples mostly disappeared.

Then, the medication was continued for 90 days, by the time the purulent tendency completely disappeared. However, as there were scars/spots after pimples treated by the previous dermatologist, the patient was continuously on the medication. As of end January, 1980, her face regained a clear complexion.

(Genpo Ogata, Kampo Chiryō Shorei Senshu I P289-290 Gendai Shuppan Planning Co., Ltd. 1988)

8. Rosacea

Nakanishi reports that he administered *jumihaidokuto* to 50 patients with diffuse erythema (redness) of rosacea and had the results of markedly improved in 46 patients (92%), moderately improved in 1 (2%), slightly improved in 1 (2%), and no effect in 2 (4%). As for the 42 patients (91%) out of 46 who had marked improvements, the effects appeared within 7 days after the start of the administration¹⁴⁾. He further reports that there was no big difference in the rates of marked improvement between the combination group of *jumihaidokuto* and doxycycline, which was combined due to the presence of rosacea-like papules, and the group of no combination. In the meantime the rate of marked improvement in atopic dermatitis with a complication of rosacea was 90%, a similar rate to that of the group without the complication¹⁵⁾.

9. Palmoplantar pustulosis

Kaneuchi reports that he administered *jumihaidokuto* to 38 patients with Palmoplantar pustulosis and the overall results of the formula for skin lesions were markedly improved in 3 individuals (7.9%), effective in 7 (18.4%), slightly effective in 9 (23.7%), remained unchanged in 13 (34.2%), and exacerbated in 6 (15.8%), whereas, relating to subjective symptoms, markedly improved was in 4 (10.5%), effective in 12 (31.6%), slightly effective in 12 (31.6%), remained unchanged in 7 (18.4%), and worsened in 3 (7.9%)¹⁶⁾.

Case 11: *Jumihaidokuto* for palmoplantar pustulosis

Male, 50 years old. A rash began to develop on the palms and soles 1.5 years ago. Nails became dirty colored. It was Palmoplantar pustulosis.

He had a medium build. Abdominal strength was slightly weak or intermediate. Under the right hypochondrium, weak resistance and oppression when compressed were felt, which was considered as a light bloated feeling (fullness) in the chest and hypochondriac region.

jumihaidokuto was administered and about one month later, effects appeared and three months later, a rash mostly disappeared. So the patient stopped the medication but a rash recurred after 1.5 months. He hastily visited the clinic and received the same medication for four weeks. He has not visited the clinic since then. He might possibly have had a cure.

I think that there are a substantial number of patients who will have similar effects of *jumihaidokuto* as this patient did.

(Koin Yamada, Katsu Vo. 22, No. 12, 1981)

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