Clinical Report 2 (Kampo Medicine)

Headache 1

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[Introduction]

Headache is a symptom frequently encountered in an outpatient office specialized on Kampo.

Generally, this condition is classified into primary headache, which in turn is classified into 1) migraine, 2) tension headache, 3) cluster headache, 4) headache associated with overuse of the medications, and secondary headache occurring in the presence of an underlying disease. Even though remarkable progress has been achieved regarding the pharmacotherapy of headache, the number of patients suffering from headache still remains high. The migraine guidelines of the American Headache Society® (AHS) recommend that "treatment of acute conditions should be individualized". Moreover, regarding the ideal pharmacotherapy for the prevention of attacks.

The relationship between diagnoses according to the above described classification and specific "patterns" has not yet been clarified. Yet, through integration of TCM diagnostic methods a useful concept pertaining to the "individualized therapy" can possibly be provided.

Practicing Kampo therapy and looking back at cases with chronic headache, it appears that often several patterns are involved. So far there has been a tendency of patterns like cold, blood deficiency, blood stasis and phlegm being rather frequent, but I believe the heat excess patterns are also on the rise. Moreover, in cases of headache associated with refractory diseases or overuse of the medications, I have often experienced that the use of the formula that expel blood stasis led to an early alleviation of the symptoms.

In the present paper I would like to briefly discuss a few cases of tension headache and migraine I have seen in our outpatient department. Each case will be discussed focusing on the qi-blood-body fluids aspects, trying to keep the terminology as simple as possible.

■ Cases

<Tension headache; prolonged cold, phlegm>

Case (1): 46 years, female, housewife, clinic visit in January XX

Chief complaint: right shoulder pain, headache, dizziness (floating feeling), pollinosis

Anamnesis: at age 35: enucleatic myomectomy

At age 45: total hysterectomy because of myoma induced anemia

At this time there were adhesions of the small intestines, requiring reoperation, during which a portion of the small intestines was removed.

At age 45: pollinosis

Present illness:

Development of a chronic sense of fatigue following the total hysterectomy, at rest discomfort that felt like the right were about to solidify and pain of the right shoulder joint was so severe, that it prevented sleep; chilling around the waist and the thighs and a generalized feeling of edema over the entire body. Considering the presence of pain as if from pinching the right upper arm and stagnation of liver qi as well as blood deficiency into account, the formula nijutsuto and kamishoyosan were prescribed. After 4 months of treatment the shoulder pain had been alleviated almost completely and the pollinosis considerably.

By the sixth months of the treatment the headache and sense of floating grew worse and symptoms were highly sensitive to low atmospheric pressure. The headache was reportedly associated with a slightly depressive heaviness. Recurrence of the temporarily relieved edema of the legs. The patient originally has a tendency towards

indigestion. The husband is currently living alone abroad because of his work.

Findings:

Moderate build, skin slightly brown. Good appetite, bowel movements and micturition normal, but has a tendency towards constipation when nervous. During bathing the patient felt on the contrary cold. She was the type of person that does not sweat. Her physical condition used to deteriorate in spring. Pulse was deep, slippery and wiry / weak right cun pulse, the tongue was pale red but had a thick white fur coating its entire surface and teeth marks, sublingual veins were somewhat engorged. Mild degree of fullness, tenderness or discomfort of the hypochondrium.

Pattern: Spleen – stomach deficiency -> phlegm, upward harassment of wind phlegm

Prescription: hangebyakujutsutenmato

Following the third day of taking the prescription the perceived fog in the head cleared and left the patient feeling reportedly invigorated. heavyheadedness too improved. She experienced regular bowel movements, became able to sweat when bathing and thus felt fine. Temporarily switching the prescription to ryokeijutsukanto resulted in recurrences of the headache, regular administration of hangebyakujutsutenmato twice daily and an additional dose when symptomatic allowed to control the symptoms and the patient is currently continuing this schedule. The patient reported that taking the medication helps to brace her physically and makes her feel lighter both physically and mentally.

<Tension headache; spleen deficiency, countercurrent of phlegm>

Case (2): age 47, female, dental assistant Chief complaint: headache, stomach disharmony, amyloidosis of the skin

Anamnesis:

After the death of her husband she became

nervous and anxious. At that time she was diagnosed with amyloidosis of the skin and Sjörgren syndrome. Headache often developed in case of fatigue or when she had been under stress; endurance of the symptom generally led to a gradual increase in the pain, so that she had to take analgesics and lie down. The stomach responded sensitively to the mental status and she complained about heartburn, stomach disorder and a sense of distention.

Findings upon first visit:

Fair-skinned and leptosomatic habit, sloping shoulders. Visible amyloid depositions on the abdomen and lumbar regions. Easily sweats on the palms. Poor sleep. Occasionally soft stools. Thin and weak pulse, the tongue being pale red with a thick, greasy white fur, stickiness within the mouth. Engorgement of sublingual veins. Abdominal palpation reveals clapotage and tension of the abdominal wall.

Pattern: spleen deficiency, qi stagnation, countercurrent of phlegm

Prescription: bukuryoingohangekobokuto

Course:

She started to enjoy her meals, the severity of the headaches decreased and often she even forgot about them. No use of analgesics. Use of single doses of *goreisan* produced marked relief in case she had a headache. Later, targeting the easy fatigability, xerophthalmia, poor sleep and the skin symptoms her condition improved using a combined prescription with *ninjinyoeito*, she could sleep soundly and the headaches disappeared.

Four years later, after she finally came to terms regarding the death of her husband and her stomach maintained a good functional condition, treatment with *bukuryoingohangekobokuto* was discontinued. The nature of her work facilitated the development of high tension and easily led to the development of posture induced shoulder stiffness,

which resulted in headaches (dull pain), but since the condition of her stomach had improved, the effects of *goreisan* had weakened, while *shakuyakukanzoto* now had become markedly effective. It turned out to be a medication, which in single doses provided refreshing relief and bestowed upon her a feeling, as if the neck were straightening and sometimes even extended to the head.

<Tension headache; spleen deficiency, cold phlegm, blood deficiency >

Case (3): age 40 years, female. Assistant in former family business (restaurant)

Chief complaint: headache, anxiety

Anamnesis:

At the age of 20 iron deficiency anemia (she sometimes takes iron supplements)

At the age of 37 hypertension (initiation of antihypertensive pharmacotherapy)

Present illness:

From the age of 38 her nervousness increased, a sense of her body floating and palpitations she benzodiazepine appeared; used tranguilizers 2 to 3 times a day; from the age of 39 she took ryokeijutsukanto for about one year after which the symptoms had almost be alleviated. The use of western medications was reduced to about once per month for preventive purposes and she started to work as a kindergarten assistant. Yet, she used to complain about headaches lasting 2-3 weeks. The headaches were located on the forehead like a headband, producing a pain as if this headband were tightened, so that she used to press down on the painful areas while taking deep breaths and reported that warmth provided some relief of the symptoms. Severity of the symptoms increased in the evening with increasing fatigue. On this occasion the symptoms had appeared 5 days ago on the last day of her menstruation.

Findings:

Fair-skinned obese, normal appetite, sleep and excretion. Becomes easily nauseated. Her condition used to vary with the menstrual cycle. The tongue was enlarged, pale white, had teeth marks, sublingual veins had disappeared, the pulse was deep and thin, the abdomen showed a generalized hardness and was mildly tender, there was fullness, tenderness or discomfort of the hypochondrium and chilliness of the lower abdomen.

Pattern: blood deficiency, phlegm

Prescription: ryokeijutsukanto plus tokishakuyakusan

Headaches tended to become worse during the latter half of the menstrual cycle and the lingual findings too suggested the necessity to take blood deficiency into account, but since the so far prescribed *ryokeijutsukanto* could not be expected to have any blood supplementing effects, *tokishakuyakusan* was added. After the ingestion marked improvements were observed and four days later the symptoms had disappeared. Later, while the dose was adjusted according to the findings, after continued treatment using the combined formulation with *tokishakuyakusan* the headaches did not occur any longer.

And yet, severe headaches occurred on days typhoons hit the country and on these occasions the patient complained, that she would on the contrary like to cool her head. The body felt hot and she became restless and nervous. Originally she did not like the summer. *senkyuchachosan* was prescribed and had marked effects, leaving her feeling refreshed and comfortable.

After that the administration of *tokishakuyakusan* from autumn through spring and a combined formulation with *senkyuchachosan* from the rainy season through summer prevented aggravation of the headaches and stabilized the patient both physically and mentally.