

Clinical Report 2 (Kampo Medicine)

Headache 2

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< Tension headache; spleen and stomach deficiency
cold, deficiency of heart and spleen >

Case (4): age 49, female, visited our clinic in
February XY.

Chief complaint: headache, anxiety, discomfort in
the gastric region, arthralgia of multiple joints

Present illness:

At the age of 27, triggered by a pregnancy, the patient
started to suffer from frequent headaches. She is
regularly using commercial analgesics, but since half
a year ago their effects were declining. The headaches
were a sort of pinching pain from the back of the head
down the back of the neck and at the same time
associated with ocular pain, repeating cycles of
alleviation and aggravation almost daily. The anxiety
influenced the gastric discomfort, so that she could
eat, but felt nauseated on an empty stomach and
therefore constantly ate little portions. She had no
sense of satiety. Another doctor diagnosed reflux
esophagitis and prescribed a protective agent for the
gastric mucosa, but its effect was obscure. Moreover,
about 1 year earlier the patient had been diagnosed
with chronic rheumatoid arthritis and is currently
under treatment. Three months ago development of
frozen shoulder. Three years ago she worried about
family matters and this problem now got worse about
half a year ago, so that *saikokaryukotsuboreito* was
recommended in a pharmacy, which she is currently
using.

Findings upon first visit:

The facial complexion was yellowish-white and the
patient had a leptosomatic habit, she was occupied
by worries about her symptoms and described the
circumstances of their development with
dissatisfaction. She repeatedly asked: "What should

I do?" This gave the impression that she had started
to panic because of what was going on with her both
mentally and physically. There was a mild degree of
chilliness of both hands and feet, recently her visual
acuity deteriorated and she had nocturnal urination
and dryness of the mouth during the night. One bowel
movement every three days. No feeling of exhaustion.
The pulse was thin and slippery, the tongue had a
thick white fur and she had a bitter taste in the mouth.
The abdomen showed chilliness and increased
resistance of the epigastric region and a mild degree
of fullness, tenderness or discomfort of the
hypochondrium, softness of the lower abdomen,
tenderness of both inguinal regions, marked
palpitation above the umbilicus were observed.

Pattern: deficiency of both heart and spleen,
deficiency cold (stagnation of liver qi)

Prescription: *kamikihito*, *keishininjinto*

Course: The patient expressed strong anxiety regarding
discontinuation of the *saikokaryukotsuboreito* she was
using so far, so that the prescription was first changed
to *keishikaryukotsuboreito*, taking her feelings into
account. This helped to overcome her anxiety and
settle down, but still left the symptoms incompletely
controlled, with no changes in the incidence of
headaches and gastric discomfort. After persuading
the patient to use a prescription with added
keishininjinto the incidence of the headaches
decreased to once per week. Later, using *kamikihito*
as the main formula and reducing the dose of
keishikaryukotsuboreito to 1/3 both headaches and
gastric discomfort improved and after three weeks
were almost completely alleviated. The arthralgia
and anxiety also improved and the patient now
presents with a calm expression.

< Tension headache; liver qi stagnation, transverse
invasion of the stomach >

Case (5): age 41, female, employee

Chief complaint: headache, gastrointestinal
weakness

Present illness:

From the time she became employed the patient

repeatedly experienced stomach disorders, belching, abdominal distention, a bitter taste in the mouth and reduced appetite, occasionally gastric pain. After examination she was diagnosed with neurotic gastritis and was prescribed western medicine, but later visited our clinic, because the symptoms did not improve. The headaches developed at the same time and were characterized by a slowly progressive and continuous dull pain.

Findings upon first visit:

Intermediate build, the skin appeared slightly yellowish brown and there was some edema. She had difficulties waking up in the morning and felt exhausted and headheavy from morning; usually did not have any appetite in the morning. Although she had one bowel movement a day, there was always a sense of incomplete evacuation. The menstruation was regular, but prior to the onset of the menstruation the headaches grew worse. She complained about shoulder stiffness. The pulse was thin and wiry, the tongue was faintly dark red and had a thick white fur and teeth marks, the abdomen showed a marked degree of fullness, tenderness or discomfort of the hypochondrium.

Pattern: liver qi stagnation, transverse invasion of the stomach

Prescription: *saikokeishito*

Course:

After about 2 months of treatment, the ease with which she could wake up in the morning improved and both the sense of exhaustion and headheaviness decreased. Her stomach felt comfortable too, but she was easily susceptible to stress at work. Improvement of the shoulder stiffness. Since after about one year of treatment almost all symptoms had healed, the dose was tapered, but since complete interruption of the treatment resulted in a deterioration of her physical condition, she currently continues on a low dose schedule.

< Migraine; tension headache; blood stasis >

Case (6): age 24 years, female, employee

Chief complaint: headache

Anamnesis: At the age of 21 onset of a collagen disease, that was treated over a period of one year with steroids and the therapy then terminated.

Present illness:

Onset of repeatedly occurring headaches after the patient started to work in an office at the age of 23. Her work requires that she uses a computer. The headaches were characterized by throbbing, pulsating pain (1) in the occipital region and (2) the temporal regions and occasionally she also felt like she had been hit or (3) a pain as if a heavy stone were placed in the center of her head. The incidence fluctuated but was higher on hot days with fair weather so that summers were difficult for her. A neurosurgeon diagnosed migraine and tension headache. The use of acetaminophen during periods of pain became increasingly frequent. Currently, she uses analgesics on average 5 times per week.

Findings upon first visit:

Obese physique, muscular, face was flushed red, there was acne on the mandible, she disliked heat and there was no sense of coldness. She had a good appetite, but since about one and a half years ago she experienced almost daily heartburn and gastric discomfort. She had a dry mouth and preferred cool drinking water. There was a tendency toward easy development of edema of the face and extremities. She had difficulties falling asleep and experienced night sweats all over her body. She had 1 to 2 bowel movements per day (in the morning). Her eyes tended to tire easily and she was also easily irritated. Her menstrual cycle ranged between 30 to 35 days, lasted for 3 days, she had little menstrual flow and the menstrual blood was dark red. Delayed menstruation. The pulse was slippery and wiry, the tongue pale and the sublingual veins thin, there was distention of the lower abdomen and tenderness on the right side next to the naval.

Pattern: exterior-interior evil repletion

Prescription: *bofutsushosan*

Course:

Two weeks later she experienced comfortable bowel movements and lost about 1 kg in body weight. Both frequency and intensity of the headaches decreased. Pulse was wiry and thin, tongue slightly red. Six weeks later improvement of the sense of body heat. Headaches and dizziness occurring during the forenoon sometimes were alleviated when she had diarrhea. There was a strong sense of fullness, tenderness or discomfort of the hypochondrium, the entire lower abdomen was tender and even stroking it hurt. Drugs for expelling blood stasis and rectifying qi were considered necessary and thus a modified formula of *tsudosan* used. Ten weeks later the usage of analgesics had decreased to 1-2 times per week and without her really realizing since when, she noticed that the gastric symptoms did not longer bother her. She continues to take the formula.

< Migraine / tension headache; blood stasis >

Case (7): age 62 years, female, housewife

Chief complaint: headache, dyshidrosis, constipation

Present illness:

Since 10 years, following her climacteric age, the patient experienced hot flashes and abnormal sweating, constipation and was prescribed at another clinic *unseiin + tokakujokito* and similar formulas, which improved these symptoms. Recently, the same symptoms recurred and the patient visited our clinic, also because of the headaches she had since her youth.

The headaches started at the age of 20, her eyesight deteriorated and she experienced throbbing pain 2-3 times a month. On these occasions she used commercial analgesics and rested for 2-3 days, but sometimes these symptoms were also accompanied by nausea and vomiting. Also, from her climacteric age onward she experienced in the morning upon getting up a sense of headheavyness and felt as if she wore a hat. Formerly, she reported that the use of *kamishoyosan* reduced the frequency of analgesic use. She also had been constipated since her teens and could not have bowel movements without the

use of cathartics. She used a cathartic from a Kampo pharmacy (content unknown) and had one bowel movement every 3 to 5 days. There was also cervical spondylosis (C7).

Findings upon first visit:

Fair-skinned large-built person, obese, light brown complexion of the face with many freckles. In her daily life she is working industriously. She has a big appetite, gets up twice for nocturnal urination, dreams a lot, is under stress relating to family matters, her legs are prone to easy development of edema, her face flushes and she sweats abnormally on her head and back, dislikes summers, does not complain of chilliness. The pulse was deep and wiry, the tongue deep red with a white fur and teeth marks, engorged sublingual veins, the abdomen showed a mild degree of fullness, tenderness or discomfort of the hypochondrium and there was a marked degree of tenderness on both sides of the naval.

Pattern: blood stasis, qi stagnation

Prescription: *tsudosan*

Course:

The administration of *tsudosan* led to a quick alleviation of the headache and 2 months later the use of analgesics had decreased to half its former frequency. The frequency of the use of commercially available cathartic did not change, but upon combination with *daibotanpito* she experienced from the following month onwards comfortable bowel movements and in association with this the use of analgesics decreased to the range between one and two tenths. Since the alleviation of the symptoms was also associated with improvements in the blood stasis findings of the tongue and abdomen, she continued to take this formula and gradually improved. She stabilized mentally too.