

Clinical Report 2 (Kampo Medicine)

A Case in Which Keishikaryukotsuboreito Had a Marked Effect on Postmenopausal Anxiety

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Summary

Keishikaryukotsuboreito had a marked effect in a case where there was a hesitation to apply hormone replacement therapy to a patient who entered menopause several years ago and whose chief complaint was anxiety.

Introduction

The period from when the gonadal function begins to decline toward the final cessation of menstruation to when it eventually falls and stabilizes, is called menopause, and the unidentified medical syndrome that appears during this period is called menopausal symptoms. Hormone replacement therapy is markedly effective against such vasomotor symptoms as sweating and hot flashes, but it frequently fails to have a sufficient effect on psychological symptoms such as depression and anxiety. Additionally, applying hormone replacement therapy several years after menopause increases the risk of side effects, so it is not a realistic first choice of treatment. Furthermore, prescribing an antidepressant is met with strong resistance from both gynecologists and patients who visit a gynecologist with a chief complaint of general malaise.

This paper is a report on a case where Kampo treatment had a marked effect on a patient who sought medical attention for a chief complaint of anxiety experienced several years after menopause.

Case

58-year-old female

Past medical history & family history: Nothing particular to mention. Entered menopause at 55 years of age.

Chief complaint: Anxiety, hot flashes, insomnia

History of present illness: From around June of XXXX-3, the patient began to experience hot flashes, but she ignored them, as they did not particularly bother her. In the same year, she had a medical checkup and was told her blood pressure was on the high side. It was not so high that she needed to see a doctor, but because her blood pressure had always been low until then, the diagnosis shocked her, such that she was gripped by a sense of anxiety and experienced palpitations whenever she measured her blood pressure after that. No abnormality was found in subsequent medical checkups, but from the beginning of XXXX, the patient's anxiety mounted for no reason, and she began to measure her blood pressure at home. She also began to wake up in the middle of the night, and tended to experience hot flashes when she woke up. She would then think about bad things and lose sleep out of anxiety. She created a stream of worries for herself to the point that she could not get any housework done, and thus made a first visit to my hospital on February 22.

Appetite: Not much appetite, although some food is consumed.

Bowel movement: Once a day

Urination: 5 – 8 times/day; nighttime urination: 1 – 2 times

Sleep: Falls asleep, but tends to fall into a doze, and frequently experiences nocturnal awakening.

Present condition: 155cm, 47kg, blood pressure 127/71mmHg

Overall findings: Hair is short, disheveled, and tangled. No makeup. Clothes are not worn properly.

Abdominal findings: Weak (abdominal strength 2/5). Tension in the rectus muscle on both sides, and strong palpitations from the epigastric to the paraumbilical region. Slight painfulness in the right side of the chest. Slight epigastric discomfort.

Pulse: Slightly floating and string-like

Tongue: Red, swollen, light yellow coating

Progress: The patient was administered 7.5g of *keishikaryukotsuboreito* extract three times a day and 1 tablet of an estrogen-progesterone compound drug once a day, for a week.

When the patient made a visit the following week, she was not wearing makeup, but she had brushed her hair, and was wearing tidy clothes. She said she became magically better from the following night after she began taking her medicine. She reported that sleeps well at night, and her feeling of anxiety, negative thoughts, hot flashes and palpitations all disappeared. She did not want to take hormones, so she was prescribed only Kampo medicine thereafter.

During treatment, the patient's anxiety sometimes strengthened after a nocturnal awakening or when there was an earthquake or typhoon, but her condition improved on the whole after she was prescribed an additional 2.5g/day of *kambakutaisoto*. By the time a year passed, the patient was seen wearing attractive makeup and giving close attention to her clothes. *Keishikaryukotsuboreito* was gradually reduced in response to her improvement, and when she came in for a consultation in February XXXX+2 "to make certain, although she thinks she is alright now," she was prescribed 2.5g/day of *keishikaryukotsuboreito* worth a month. This completed her treatment.

Observations

Keishikaryukotsuboreito is a prescription composed of cinnamon bark, keel bone and oyster shell. It works on deficiency patterns that call for the use of *keishito* or *keishikashakuyakuto*, and improves anxiety, tendency to be surprised, shallow sleep, excessive dreaming, palpitations, and nocturnal emissions.

In the above case, *keishikaryukotsuboreito* was used, based on palpation findings such as poor abdominal strength, tension in the abdominal rectus muscle and palpitations, accompanied by the patient's chief complaints of anxiety and insomnia. Hot flashes and seating were observed since immediately after menopause, so a female hormone was initially prescribed, but the patient improved solely with *keishikaryukotsuboreito*. The symptoms were not due to hormonal decline, but rather, it was thought that the kidney qi declined with age and the heart qi worsened on the whole, thereby causing a qi counterflow mainly brought about the patient's illness.

During menopause, patients are affected not only by hormonal changes, but also changes in social background and changes accompanying age. Kampo treatment that corresponds to each condition is thought to be effective.