

## Clinical Report 2 (Kampo Medicine)

*Maobushisaishinto for Non-dipper Hypertension*

Narihiro Fujii

Tokando Medical Clinic

<b>Case</b>	69-year-old male
<b>Chief complaint</b>	Non-dipper hypertension
<b>Past medical history</b>	not particular
<b>Family history</b>	Hypertension (-); Father: prostate cancer; Mother: gastric cancer
<b>Social history</b>	Smoking: 10 cigarettes/day until 2008, thereafter quit. Drinking: Occasionally

### History of present illness:

The patient visited our clinic on 5/25/XXXX after experiencing occasional staggering. He had a blood pressure of 185/110mmHg in his right arm and 175/100mmHg in his left. He underwent a complete medical checkup every year, but was never questioned about blood pressure. He weighs 69kg, marking an increase of 2kg from the previous year. He underwent an endocrine examination but no particular problem was detected. He was prescribed an oral medication of valsartan(80)1T, and was told to record his blood pressure at home. As a result, his nighttime blood pressure was found to be high, indicating non-dipper hypertension. In winter, his weight increased to 72kg, his blood pressure increased at home, and his systolic blood pressure measured 150-160mmHg. His antihypertensive drug was thus switched to valsartan + trichlorotiazide MD1Tab on 12/24. With a blood pressure of 115 – 135/90-70mmHg, he continued to display non-dipper hypertension. He continued the oral administration, and returned to the clinic on 7/6/XXXX+1.

Appetite:	Ordinary
Bowel movement:	Once a day; no change
Bladder movement:	6 – 8 times, once during the night
Sleep:	Good

Other symptoms: Sensitivity to cold (-),  
Sensation of warmth (-)

### Present illness:

Height: 169cm; Weight: 72kg; BMI: 25.2

Anemia (-); Edema (-)

Blood pressure: 130/70mmHg; Pulse: 55/min,  
regular

Stethoscopy and tapping found no particular  
abnormality

Good complexion, light pink tongue with a light,  
dry coating

Pulse: On the right, inch-bar-cubit is stable and  
slightly string-like; on the left, inch-bar is stable  
and slightly string-like, and cubit is slightly  
sunken.

Abdominal examination: Ventral horn – moderate;  
Abdominal pressure 3/5; Epigastric fullness (-);  
Chest side painfulness (left and right 1+);  
Splashing sound in epigastric region (-);  
Palpitation (-); Weakness (+)

Blood biochemical examination: No particular  
problem

Progress: The nocturnal rise in blood pressure was  
seen as poor prognosis, so Maobushisaishinto 5g  
was administered on 7/6 to improve nighttime  
blood pressure.

No subjective complaint from the patient  
himself. A re-examination on 8/6 showed no  
change in the rise and drop in blood pressure,  
but blood pressure pattern changed from a non-  
dipper to a dipper pattern (Fig. 1).

### Flow of the defense qi

Physiological condition: The defense qi is produced  
from the hydration shell in the lienogastric artery,  
and flows through the entire body. It flows around  
the Yang parts of the body during the daytime and  
around the Yin parts during the nighttime (Fig. 2),  
and flows through the entire body 50 times in a day.  
That is, it flows through the Yang parts 25 times  
during the daytime and through the Yin parts 25  
times during the nighttime. It then flows through  
the five organs.

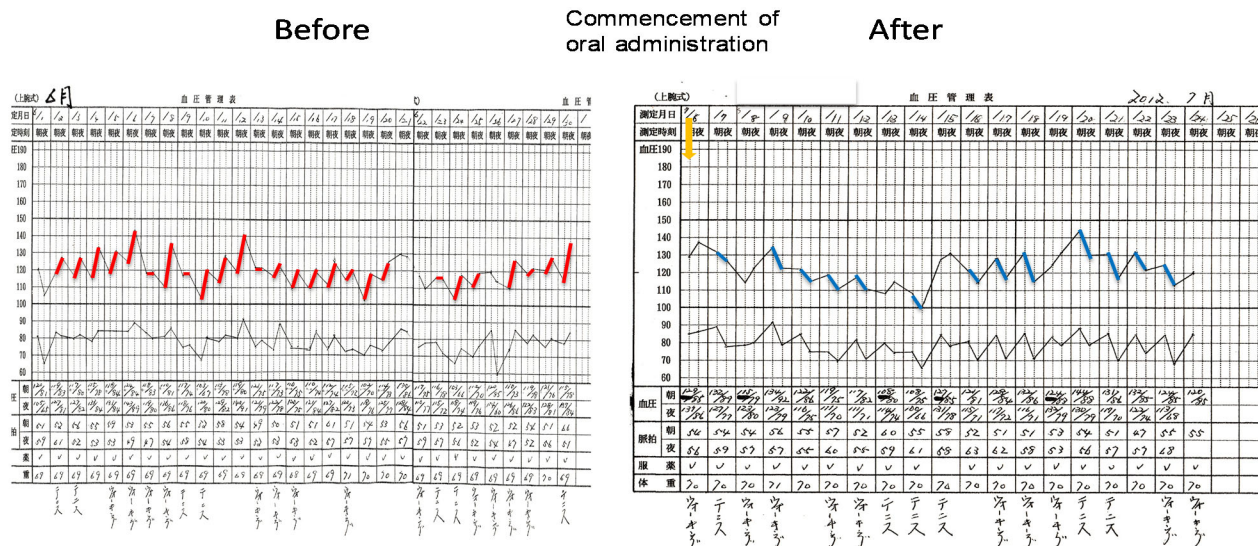


Fig. 1: Non-dipper hypertension changed to dipper hypertension by administering Maobushisaishinto

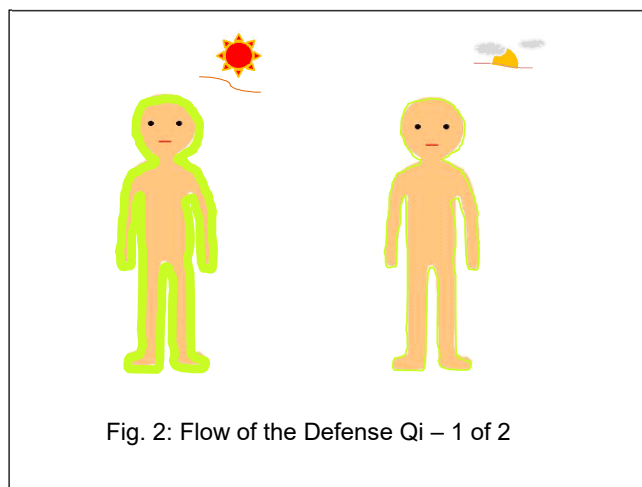


Fig. 2: Flow of the Defense Qi – 1 of 2

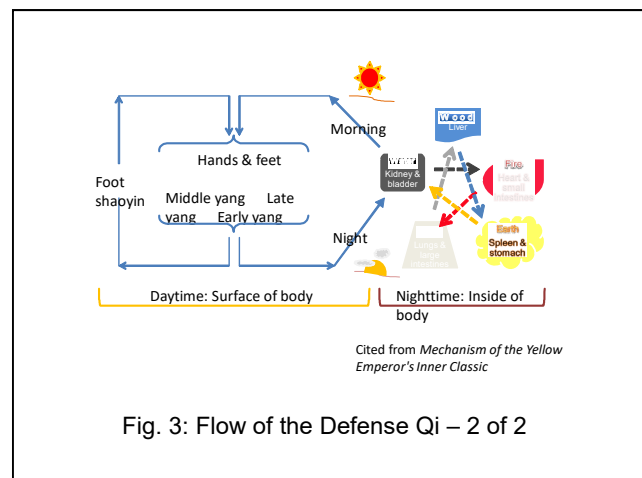


Fig. 3: Flow of the Defense Qi – 2 of 2

At dawn, the defense qi finishes circulating through the Yin parts and is discharged through the eyes as Yang qi. This makes people open their eyes and wake up.

This Yang qi flows along the bladder meridian to the little toes.

The Yang qi that separates from the outside of the eyes flows along the small intestine meridian to the little fingers. From the outside of the eyes, it might also flow along the gall bladder meridian to the fourth toe, then up along the triple energizer meridian to the tips of the fingers.

The Yang qi that is discharged from the preauricular area flows along the stomach meridian down to the toes. The Yang qi that is discharged from the parotid flows along the large intestine meridian to the fingers.

Of the above, the Yang qi that reaches the feet flows from the soles to the kidney meridian channel at the medial malleolus. From here, it flows along the kidney meridian to the kidneys, and from the kidneys to the heart, lungs, liver, spleen, and kidney, where it completes its round of the Yin part and once again flows out through the eyes and around the Yang parts.

## Conclusion

High blood pressure during the nighttime improved with *maobushisaishinto*. The exterior defense qi pattern cannot be evaluated subjectively, but there are clearly symptoms that can be improved with *maobushisaishinto*. If *maobushisaishinto* could improve the exterior defense qi pattern, it could also be used for other diseases.