

Kampo Medicine - Current Research

Clinical Applications of Kakko – Part 2

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Kakkonto is a prescription that first appeared in the great Chinese classic *Shokanron* (treatise on cold damage) and came to be widely used in Japan from the latter half of the 19th century. Particularly since Yodo Odai (1799-1870) introduced various indications for the prescription, it has become a frequently-used prescription that is applied to a wide variety of diseases.

Clinical applications (continued)

In *Shokanron*, indications for which *kakkonto* is used are acute infectious diseases. However, from Japan's more than 150 years of experience, *kakkonto* is known to be a prescription that is effective for an extremely wide range of indications and is today applied to many diseases. These are introduced below, in continuation from the previous issue.

3. Rhinitis, allergic rhinitis, sinusitis

Kakkonto is widely known to cure inflammatory diseases of the face, such as the ears, nose, throat and eyes, and is frequently used for this purpose. A particularly large number of cases has been reported regarding diseases of the nose.

Kampo shinryo iten (dictionary of Kampo medicine) mentions the application of *kakkonto* for sinusitis as follows: "It is used in the initial stage of the acute phase, and works well when used for such symptoms as fever, heavy head, nasal obstruction, purulent discharge, and stiff shoulders."¹⁾ It also states that "For cases that become chronic, 2.0g each of *kakkonto+senkyu* (*Cnidii* Rhizoma), *ogon* (*Scutellariae* Radix), *kikyo* (*Platycodi* Radix), and *shin'i* (*Magnoliae* Flos) are used. For cases that have a tendency of inner heat or constipation, 5.0g *sekko* (*Gypsum* Fibrosum) and 0.5 to 1.0g *daio* (*Rhei* Rhizoma) are added. The preparation may

also be applied to some cases of hypertrophic rhinitis and nasal polyp. It may also be used for recurrences after surgery and when symptoms do not improve."¹⁾ Additionally, Hosono et al. write as follows regarding the emergence of effect: "For such nasal conditions, *kakkonto* commonly works by increasing the amount of nasal discharge over the first several days and even making the discharge even thicker and more purulent than usual, and thereafter gradually decreasing the nasal discharge so that it becomes less thick and eventually disappears."²⁾

Byomei Kampo chiryo no jissai (practical Kampo therapy by disease name) defines *kakkontokasenkyushin'i* as the basic prescription for acute rhinitis, and recommends the addition of *kikyosekko* (*Platycodi* Radix+ *Gypsum* Fibrosum; in the case of viscous rhinorrhea) or *yokuinin* (*Coicis* Semen; in the case of watery rhinorrhea).³⁾

Hanawa writes that for chronic sinusitis, using *kakkonto* alone has a sharper effect than *kakkontokasenkyushin'i*⁴⁾, and notes that because *kakkonto* has a strong drainage effect, using it when the discharge opening is blocked sometimes causes a severe headache because the discharge has nowhere to go.⁴⁾ He also reports that due to this discharge effect, there was a case where a child with nasal allergy took the prescription with good progress but the closing of his wound after surgery for acute appendicitis took longer than usual.⁴⁾ For this reason, he warns that *kakkonto* may be used in cases where there is a natural discharge route, but if not, it should not be used readily.⁴⁾

Chronic sinusitis

The following cases have been reported regarding chronic sinusitis. *Kakkonto* is frequently used as a decoction blended with something else. There are also many cases of *kakkontokasenkyushin'i* and *kakkonkajutsubuto*. *Kikyosekko* extract or *yokuinin* extract are also added to *kakkonto* in some cases.

Case 1: Chronic sinusitis

Patient: 13-year-old girl

The patient suffered nasal congestion, rhinorrhea and a heavy head that persisted for several years. There was nothing to note in particular in her family medical history or past medical history. Height 151cm, weight 43kg, both eardrums normal. Her nasal mucosa was red and slightly swollen, and a large amount of discharge and viscous secretion was observed in both nasal passages. The pharynx had mucosal redness and postnasal discharge. Paranasal sinus X-ray examination found a moderate shadow in both maxillary sinuses.

Diagnosis: Chronic sinusitis of both paranasal sinuses

Observation of present illness from the perspective of oriental medicine: Medium build, somewhat well-muscled, good facial complexion, floating and tense pulse, slightly dry tongue.

A daily dose of 5g *kakkontokasenkyushin'i* was prescribed as the symptoms suggested an excessive pattern. After approximately ten weeks, the discharge from both nasal passages decreased significantly, nasal congestion was alleviated, and an improvement was seen in the shadow that appeared in the paranasal sinuses in the sinus X-ray examination.

Shigeto Osako, Cases of chronic sinusitis, *Gendai no Kampo chiryo* (modern Kampo therapy), p. 582, Toyo Gakujutsu Shuppansha, 1985

Case 2: Maxillary empyema

A 39-year-old woman with chronic maxillary empyema complained that the right side of her face began to hurt intensely since a few days ago such that she cannot eat or sleep at night.

An examination found that the center of her right upper jaw was swollen to the size of the tip of a thumb and was slightly red. Even rubbing the area caused strong pain. Her right nasal cavity was blocked, and her right shoulder was particularly stiff. She sometimes felt chills, and had a high body

temperature of 37.8°C. She had a floating and slightly rapid pulse.

When she was given *kakkonto* with 10.0g of Yokuinin, her face suddenly felt lighter in the morning after taking the prescription at night, and she slept soundly. As she woke up, a large amount of pus poured out to her throat. Furthermore, after five days of taking the preparation, no new inflammation appeared in the affected area, and the patient completely forgot about the pain. Yokuinin was added to *kakkonto*, as it has drainage and analgesic effects.

Keisetsu Otsuka, *Shoukou ni yoru Kampo chiryo no jissai* (practical Kampo therapy based on symptoms, p. 21, Nanzando, 1963

Allergic rhinitis

Meanwhile, *kakkonto* is also effective against some types of allergic rhinitis. In *Kampo shinryo iten*, it is written: "Some types of allergic rhinitis that is accompanied by constant stiffness in the shoulders, susceptibility to colds and frequent sneezing, may be treated by this prescription (*kakkonto*)."⁵⁾

Case 1: Allergic rhinitis

44-year-old male. From around four years ago, the patient began to experience bouts of sneezing, runny nose and minor eye irritation in spring, which lasted for roughly a whole month. He was diagnosed with cedar pollen allergy and somehow kept the symptoms at bay with Intal nasal drops and an antihistamine. However, because taking the antihistamine made him sleepy and lethargic such that he could not concentrate on his work, he visited us four days after a bout occurred. He had a steady pulse, stiffness at the back of his neck and no dyspepsia, dry mouth or coldness, so he was told to take *kakkontokasenkyushin'i* extract for a week. Efficacy of the prescription appeared immediately after taking it, and the patient's bouts completely disappeared in four days. He said he was able to spend the spring season this year in comfort.

Katsutoshi Terasawa, *Shin Kampo shohou manual* (new Kampo prescription manual), p. 54, Shibunkaku Shuppan, 1991

Case 2: Allergic rhinitis

A 28-year-old woman complained that, since several years ago, she was prone to sneezing for a while every morning after she woke up. It was minor in summer but worsened from autumn to winter. Her doctor diagnosed her with allergic rhinitis and gave her medicine, but she said the sneezing still has not stopped.

The patient is a tall, fair-skinned, plumpish woman. Her pulse was slightly floating but not rapid. Her abdominal pattern showed that a spot above the umbilical region that was sensitive to pressure. I gave her *kakkonto* for this. No changes were observed over the first seven days, but her symptoms improved after two weeks. They completely disappeared after four weeks, and she experienced no frequent sneezing after that.

Keisetsu Otsuka, *Shoukou ni yoru Kampo chiryo no jissai* (practical Kampo therapy based on symptoms), p. 73, Nanzando, 1963

Nasal congestion as a side effect of a psychotropic drug

Kakkonto is also used at times for nasal congestion that is not caused by inflammation. For example, there are cases where it has been used against nasal congestion that occurred as a side effect of an antipsychotic drug.

Akira Kurokouchi studied the efficacy of *kakkonto* extract by administering the extract to five patients of schizophrenia who developed nasal congestion as a side effect of an antipsychotic drug. As a result, he reports that two cases showed marked improvement, two cases showed moderate improvement, and one case with a history of chronic sinusitis showed slight improvement, and that no side effects were observed whatsoever.⁶⁾

Case 1: Nasal congestion caused by taking an antipsychotic drug

16-year-old male student in his first year of high school

Family medical history / Past medical history: Nothing in particular

History of present illness: From around May 1990 when the patient entered high school, he began to suffer from paranoia, thinking that others are trying to set him up. He pushed himself to go to school, but on August 1, he was told by a friend that he is “gloomy.” This triggered a sense of strong anxiety in him, to the point that the thought of suicide crossed his mind. He therefore had an emergency hospitalization on that same day.

Progress in hospital (Fig. 1): A general biochemical blood examination and neurological examination conducted upon hospitalization showed no abnormality. Diazepam (DZP) and thioridazine (TR) were administered, and in roughly two weeks, the patient’s paranoia and anxiety abated. Suddenly on August 26, he displayed psychomotor agitation, punching the wall while yelling, “I’m famous. I’ve done nothing wrong. Why is everyone saying such bad things about me?” The erroneous perception disappeared in roughly four weeks, after injections of haloperidol (HP) and levomepromazine (LP) and oral administration of mainly LP. However, immediately after administering HP and LP, severe nasal congestion and mouth dryness emerged. From the perspective of otorhinolaryngology, a slight swelling of the nasal mucosa was observed. The patient was therefore given *kakkonto* (daily dose of 5g). On the following day, the nasal congestion improved so that he was able to breathe more easily, and disappeared after about a week of taking the prescription. The patient gained consciousness of the disease and was discharged on October 4.

Akira Kurokouchi, The efficacy of *kakkonto* on nasal congestion caused as a side effect of an antipsychotic drug, *Kampo Medicine*, Vol. 43, No. 2, pp. 79-83, 1992

Other nasal diseases

Kakkonto is also used for nasal polyps. Hanawa recommends *kakkonto* or *kakkontokasenkyushin'i* for allergic nasal polyps (type I allergy).⁷⁾ There is a famous case in which Yodo Odai (1799—1870) used a prescription of *kakkonto* blended with other substances for a patient with chronic sinusitis accompanied by nasal polyps. In roughly half a year, the nasal polyps dropped off and a sudden improvement was seen.⁸⁾

Additionally, there are reports of cases in which *kakkonto* was used for such symptoms such as snoring caused by rhinitis and erosion of the skin below the nose due to nasal discharge.

Case 1: Pediatric snoring caused by hypertrophic rhinitis

The patient was a four-year-old boy. His first medical visit was in June 1965. Immediately after birth, he became susceptible to colds, and when he came down with a cold, it was habitual for his nose to become blocked, produce a large amount of discharge, and bleed. An ear, nose and throat doctor treated him for hypertrophic rhinitis and tonsillitis, but he was not cured. Moreover, he was the talk of his family because he had stiff shoulders and snored profusely even though he was only a child. He also complained of stomach aches sometimes, had night sweats from his neck to head, and had a pale complexion although he had good nutrition. Both of his abdominal rectus muscles were tense.

To treat the patient's stiff neck and nasal blockage, *kakkonto* extract powder 1.0g was administered twice. The prescription works well when it works, and the patient no longer caught a cold after taking it. His nasal blockage lightened considerably, he became able to breathe more easily, and the awful pediatric snoring completely disappeared, thereby making the entire family happy.

Domei Yakazu, *Kampo chiryo hyakuwa* (hundred stories of Kampo therapy), Part 5, p. 200, Ido-no-Nippon-Sha, 1971

4. Otitis media and others

Symptoms of acute otitis media are frequently indications to use *kakkonto*. In *Kampo shinryo iten*, it is written as follows: "Use [*kakkonto*] when there is pain inside the ear, chills, fever and headache in the initial stage, and the pulse is floating and strong. It may also be used when the patient complains of stiff shoulders or displays symptoms resembling those of meningitis. If the symptoms accompany vomiting, add 5.0g Hange (pinellia tuber), and if the patient complains of severe dryness of the mouth, add 3.0g *kikyo* (*Platycodi Radix*) and 5.0g *sekko* (*Gypsum Fibrosum*)."⁹⁾

Cases that have been reported to date are introduced below. Case 5 is a case of discomfort around the auricular region and not a case of otitis media, but it has been included as a case related to the ear.

Case 1: A patient who developed otitis media from a cold

A two-year boy developed otitis media after catching a cold and was seeing an ear and nose doctor, but he came to see me at the recommendation of a neighbor. His chief complaint was the discharge of pus from his left ear. This was verified, but there was nothing else of particular note. No abnormality was seen in his defecation or urination, and he had a healthy appetite. He was given *kakkonto*, and on the third day, the pus stopped, and he was completely cured after three weeks.

Keisetsu Otsuka, *30 Years of Kanpo*, Sogensha, 1959

Case 2: Tubal obstruction (?)

37-year-old female

Around six to seven years ago, the patient says her hearing became poor and her ear began to feel blocked, causing her pain. Furthermore, the sound of her breathing echoed strongly in her ear, and at the same time, her voice became a falsetto voice.

Since then, she complained that the same symptoms occurred whenever she rode an airplane.

When I asked if she has a bad nose, she did not know, but she said she often has a runny nose.

An examination found her to be of medium height and build with an abdominal strength that was slightly weak, minor clapotage and palpitation in the epigastric region, and “Otsuka’s point of small resistance and tenderness just above the umbilicus.”

This small resistance and tenderness just above the umbilicus is an abdominal pattern that Dr. Keisetsu Otsuka defines in *Kampo shinryo iten* as a target of *kakkonto*. However, the figure in the book is difficult to understand. I have therefore provided my own definition of “Otsuka’s point of resistance and tenderness just above the umbilicus” as the abdominal pattern where a short cord-like anatomical white line is felt above the naval when pressed in small circles with the tip of the index finger or middle finger in perpendicular direction to the linea alba and that area is a source of pain to the patient, and regard it as an indication for *kakkonto*. This may differ slightly from Dr. Otsuka’s explanation, but it generally holds true as the target for *kakkonto*.

I suspected that because this patient had rhinitis, pressure changes in high places probably made her susceptible to tubal obstruction, and judging by her abdominal pattern, I diagnosed her as having a *kakkonto* pattern. However, her abdominal pattern trended slightly toward deficiency, so I added 3.0g Jutsu (*Atractylodis Rhizoma*), and to reduce the inflammation of her rhinitis and salpingitis (?), I also decided to add 1.5g each of *senkyu* (*Cnidii Rhizoma*) and *kikyo* (*Platycodi Radix*).

The result was such that approximately two weeks later, she had less nasal discharge, and she no longer blew her nose as much as she used to, although she admitted that she still had some postnasal discharge.

After another two weeks, the rhinorrhea disappeared, and the postnasal discharge became almost negligible.

Yet after another three weeks in mid-spring, the patient said her symptoms of allergic rhinitis that occurred every year, such as runny nose and blocked nose, were extremely minor this year.

Around three-and-a-half months after taking the prescription, the patient said she felt stronger and did not tire as easily as she used to, which she did not claim in the beginning, and the redness of her throat that was seen in the beginning of spring had disappeared. As predicted, her deficiency pattern and chronic inflammation in the nose and throat were of an allergic nature.

Around four months later, she said her ear was fine even when she rode an airplane.

After six months, when she was climbing down from the mountain on a hiking trip, her right ear began to hurt. She feared a recurrence of the disease and sought the attention of a nose and ear doctor, but she was diagnosed with otitis externa, and was relieved that it was irrelevant to her previous disease.

The patient, being an eager person, took the prescription for a year and continued to seek medical attention for quite some time after that before terminating the prescription.

Terutane Yamada, *Kampo no shinryo to chiryo (Ouyou-hen)* (Kampo examination and treatment (Advanced edition)), p. 45, Taniguchi Shoten, 1993

5. Tonsillitis and pharyngitis

Tonsillitis is generally said to be caused by the invasion of the wind-heat pathogen, but it also occurs when a person with heat accumulation (liver fire and stomach heat) is invaded by an external pathogen (whether it is wind-cold or wind-heat).

Kakkonto alone is usually not effective against pharyngitis and tonsillitis, and in many cases, gypsum is added, or other measures are taken to dispel the accumulated heat. Extract preparations should be supplemented with *kikyosekko* extract.

In *Kampo shinryo iten*, it is written as follows: “Use [*kakkonto*] when the patient has a fever and

sore throat in the initial stage, to promote perspiration. If the patient has a high fever, add 2.0g *kikyo* and 10.0g *sekko*; if vomiting occurs, add 5.0g *hange* (*Pinelliae* Tuber). This preparation is commonly used for 1 to 2 days..."¹⁰⁾

Case 1: Pharyngitis

18-year-old female; first visit on August 1973

The patient had a sore throat since the night before, and said it was red and swollen. She also had stiff shoulders and a temperature of 37.2°C. She did not cough or feel nausea, and had an appetite, although she did not eat much. She also had a headache. She was given *kakkonto+kikyo+sekko* and told to take it after gargling. After taking two doses, she forgot about the pain, and her temperature also went down.

Tomie Omura, Kampo chickenrei (Kampo clinical trials),

Journal of Kampo Medicine, Vol. 22, No. 6, p. 37, 1963

6. Conjunctivitis

Kakkonto is used against diseases (particularly inflammatory diseases) that are relatively close to the surface of the eye, such as the eyelid, conjunctiva and cornea. *Kampo shinryo iten* notes that indications for *kakkonto* are found in the initial stage of stye, marginal blepharitis, dacryocystitis, conjunctivitis, trachoma, and conjunctival phlyctenule.¹²⁾

Yunokiryu ganryou hidensho (secrets of Yunoki-style eye treatment), a book on ophthalmology from the Edo Period, writes about the application of *kakkonto* preparations (such as *Rhei* Rhizoma) to inflammatory diseases such as of the conjunctiva and cornea. *Ganka ichikagen* (personal views of ophthalmology) also contains cases of clinical trials that used *kakkonto*.

Case 1: Conjunctivitis

Patient: 58-year-old male. Occupation: Gardener. Small, slender build.

Chief complaint: Finger tremor, pain in both eyes, tearing, eye discharge, photophobia, vesicular eczema on both palms.

Past illnesses: Syphilis—The patient has been treated for one-and-a-half years but is receiving ongoing treatment. Arteriosclerosis—His blood pressure has increased to around 150/100 since a few years ago, and is causing heaviness of the head, insomnia, etc. to come and go. Due to sciatica on the right side, he has pain from his right hip to lower right leg that still persists. Since a few years ago, he began to experience fine finger tremors on both hands along with high blood pressure, a condition that also still persists. Three years ago, he had surgery for cholelithiasis.

Present symptoms, history of present disease and progress: The patient was being treated in hospital for the above diseases. In early May, he suddenly developed a strong reddening of the conjunctiva in both eyes, eye pain, photophobia and eye discharge along with stiffness in both shoulders. A culture test of the eye discharge and a drug resistance test were performed, and as a result, short bacillus was found. He was thus told to apply a few drops a day of an antibiotic eyedrop and steroid eyedrop. However, as this had no effect, internal medicine, including an antibiotic and anti-inflammatory drug, were also administered but only slight improvement was seen, and the patient was not completely cured. This suggested that he had bacterial conjunctivitis accompanied by an allergic reaction. The stiffness in both shoulders was severe, so all Western medicine was canceled with the aim of alleviating the inflammation in both eyes and the stiffness in the shoulders, and a switch was made to Kampo therapy. The patient was administered 6g/day of *kakkonto* extract for three days, but already on the second day the symptoms in both eyes and entire body markedly improved. The inflammation in the eyes, eye discharge and other symptoms virtually disappeared, and the finger tremors and vesicular eczema on both palms showed general improvement, so the

prescription was continued for another week. The patient was thus cured of almost all symptoms except for the sciatica on the right side. This was improved only somewhat and was not cured, so the patient is continuing to take the internal medicine (total of 10 days so far).

Hiroshi Nishimura, Shorei hokoku (case reports), *Progress in Kampo Medicine*, 1968 Vol. 7, p. 14, 1968

7. Trigeminal neuralgia

With regard to this disease's indications for *kakkonto*, it is written in *Kampo shinryo iten* that “[*kakkonto*] is used in the initial stage of development of trigeminal neuralgia, to achieve a condition characterized by a strong pulse and tension in the muscles.”¹³⁾ *Kakkonto* is thus commonly used in the initial stage of development of the disease, but it is also effective in chronic cases if the conditions are right.

Saito conducted a study on 141 patients of trigeminal neuralgia and reported that among 18 patients who were given *kakkonto* alone, the prescription was non-effective or unreliable in 14 patients (77.8%) but significantly effective and effective in 2 patients each (total 22.2%).¹⁴⁾

Tayama et al. report that among 50 patients of idiopathic trigeminal neuralgia and symptomatic facial pain (treated by the nerve block method and analgesic administration), 12 patients were given *kakkonto* with the result that *kakkonto* was effective in 4 patients each of the two diseases.¹⁵⁾

These findings suggest that a certain rate of efficacy could be achieved even if *kakkonto* is administered regardless of pattern.

Case 1: Trigeminal neuralgia on the left side (female)

Two years ago, the patient developed a severe case of trigeminal neuralgia in her left cheek. Her doctor said that pain was coming from her teeth and pulled out her teeth one after the other, but her symptoms did not improve at all. Even so, after receiving shots in her mouth, gums and on her face,

they had disappeared before she realized it. This time, the same trigeminal neuralgia on the left side occurred from last autumn, but the pain was more intense than before. Clear saliva kept flowing inside her mouth, but she could not move her mouth due to the pain and could neither swallow nor throw up. Presently, she is receiving various treatments by a doctor specializing in neuralgia, but hardly any improvement has been seen. Recently, she said her head hurts, and even a slight touch of her lips feels like an electric shock and is extremely painful. She can open her mouth only slightly, so she cannot talk as she wishes, and all she can eat are liquid meals because she can neither chew nor swallow solids. In this state, she says her shoulders, and especially her left shoulder, have become extremely stiff.

The patient has sallow skin and complexion that give the impression of fluid retention. Her pulse is rather sunken and somewhat string-like, tense and rapid. The pulse above her spleen is particularly weak (spleen deficiency pulse). She has pressure pain in the right Hiyu (bladder) point. Her tongue has a thick white coating and is well moist. When I touch her abdomen, she cries out that it hurts, so I cannot examine her abdomen carefully because the pain increases when I have her lie down. Even so, the abdominal wall was found to be somewhat bloated with fat and water, and the skin at the corner of her lower left abdominal region was extremely sensitive. I suspected resistance and sharp tenderness in the left iliac region (abdominal indications for Tokakujokito). I therefore swiftly applied Okibari needle patches to the left Kyousha (stomach) point and the left and right Rekketsu (lung) points, Okibari embedded needle patches to the right Hiyu (bladder) point, and moxibustion to the Ketsuinyu (bladder) point (both sides). The pain immediately subsided to a certain degree.

I also administered a decoction of *kakkontokasojutsusbushi* (*Puerariae* Radix 4.5g, *Ephedrae* Herba 2.5g, *Cinnamomi* Cortex 3.0g, *Paeoniae* Radix 4.7g, *Glycyrrhizae* Radix 2.0g, *Ziziphi*

Fructus 3.0g, *Zingiberis* Rhizoma 4 cloves, *Atractylodis Lanceae* Rhizoma 5.5g, *Aconiti* Radix Processa 1.0g = daily dose).

Two days later, some signs of improvement appeared. It is not certain whether the drug or the acupuncture took effect, but acupuncture was applied some more to the Yoryosen (GB34) point, the Rinkyu (GB41) point and the Tanyu (BL19) point on both sides. This, however, aggravated the patient's condition. Acupuncture stimulation was apparently excessive.

I then administered *kakkontokasojutsubushi* with slightly different ratios of ingredients (*Atractylodis Lanceae* Rhizoma 8.25g, *Aconiti* Radix Processa 1.5g, *Zingiberis* Rhizoma 5 cloves, *Puerariae* Radix 7.0g, *Ephedrae* Herba 4.0g, *Cinnamomi* Cortex 5.0, *Paeoniae* Radix 7.0g, *Glycyrrhizae* Radix 1.5g, *Ziziphi* Fructus 4.5g = daily dose) for two weeks.

Thereafter, I received good news from Tokyo. The trigeminal neuralgia that was so painful gradually subsided since taking the preparation, and the patient became able to more or less eat and talk normally. However, she noted that she sometimes experienced stinging pain at unexpected moments, so I sent her three weeks' dose of the previous preparation. When I saw her again in Tokyo, she was more than 90% better, and in about a month, she was cured, and her symptoms seemed long-forgotten. (@Tokyo clinic)

Shiro Hosono, *Kampo igaku jikko* (lectures on Kampo medicine), p. 91, Sogensha, 1982

8. Facial palsy

Kakkonto is good for facial palsy in its initial stage of development. In *Kampo shinryo iten*, it is written as follows: "Use [*kakkonto*] in the initial stage of development. It is especially effective against facial palsy that occurs after a cold. The target is a condition characterized by a strong pulse and tension in the muscles."¹⁶⁾

Case 1: Facial palsy

A 56-year-old woman suddenly developed facial palsy ten days ago. She complained that she could not close her left eye, her mouth drooped on one side, and she felt depressed.

Her pulse was floating and large, and she said her neck was stiff, but there were no other abnormalities. She was given *kakkonto*. After taking five doses, she was 90% cured, and after another five days, she was completely cured.

Keisetsu Otsuka, *30 Years of Kanpo*, p. 119, Sogensha, 1959

9. Temporomandibular arthrosis

The temporomandibular joint, or jaw joint, is where the middle yang (stomach) meridian flows. Thus, when considering that it is a part of the middle yang parts of the body, it is understandable why *kakkonto* is used for this disorder.

Kazuo Sano et al. administered Tsumura *kakkonto* extract granules to patients of temporomandibular arthrosis and observed the clinical efficacy two weeks later, with the result that out of 28 patients, the preparation was significantly effective in 6 patients (21.4%), effective in 7 patients (25%), somewhat effective in 9 patients (32.3%) and non-effective in 6 patients (21.4%).¹⁷⁾

Onuma et al. administered *kakkonto* and Kamishoyosan to 50 patients of temporomandibular arthrosis and report that the prescription brought an improvement or more in 80.0% of the patients, with 5 patients showing a marked effect, 35 patients an improvement effect, and 10 patients no effect.¹⁸⁾

Case 1: Temporomandibular arthrosis

16-year-old male. From around two weeks ago, a pain emerged in the patient's left masseter muscle. Thereafter, he felt dull pain whenever he chewed or yawned, so he visited our clinic. He could only open his mouth 23mm without pain. A tenderness was observed in his left jaw joint and masseter muscle, and there was pain in his left jaw joint whenever he

moved his jaw laterally to the right. He also had stiff shoulders. He was administered 7.5g/day of *kakkonto*, and although there was still some tenderness a week later, it was gone after two weeks. He became able to open his mouth 54mm, and the stiffness in his shoulders also disappeared. The clinical result showed marked efficacy.

Kazuo Sano et al., Gakukansentsusho to *kakkonto* (temporomandibular arthrosis and *kakkonto*), *Kampo Medicine*, Vol. 23, No. 1, p. 25, 1995

10. Headache

As with the mechanism of stiff shoulders, when fluid from the neck does not flow, the muscle is not nourished, and when muscle tension becomes severe, a headache occurs in addition to stiff shoulders. In most cases, this is a tension-type of headache. *Kakkonto* also has the effect of curing such headaches.

Yoichi Hashimoto et al. administered 7.5g of Tsumura *kakkonto* extract granules (divided into three portions) to patients who complained of a tension-type headache and examined the efficacy from the subjective and objective viewpoints. Given that “marked improvement,” “improvement” or “slight improvement” were observed in more than 80% of the patients, he stated that *kakkonto* had a greater effect on people who had greater muscle tension.¹⁹⁾

Additionally, Hosono states that headaches that occur from sinusitis are sometimes improved with *kakkonto* preparations and gives two case examples.

There are thought to be many types of headaches that could be improved with *kakkonto*, but few cases have been reported, possibly because such cases are too ordinary.

Case 1: Tension-type headache

75-year-old female. Height 152cm, weight 61kg, sturdy and solid build. No cold sensitivity.

History of present illness: The patient has been receiving treatment for high blood pressure and

osteoporosis for the past ten years. She sometimes complained of stiff shoulders and headaches, but internal and external anti-inflammatory analgesics had improved them. From early-September of 1993, she developed a stiffness from the back of her neck to shoulder blades and a dull headache that felt as though she were wearing a pot on her head. She was diagnosed with tension-type headache (muscle contraction headache) and given 1.5mg etizolam (divided into three portions), 150mg eperisone hydrochloride (divided into three portions) and 3.0g pyrine analgesic (divided into three portions). However, her symptoms failed to improve, and she complained of nausea and vomiting, so she was administered 7.5g Tsumura *goshuyuto* extract granules (medical use) to be taken in three portions before each meal.

However, no effect was observed, possibly because the pattern was not right. The patient went to another hospital to receive a head CT examination because she was worried about an intercranial lesion, but no abnormality was found. An occipital nerve block drug was also used in combination, but it was non-effective. The patient complained of stomach pain from taking the analgesic, so the analgesic was canceled, but because she had an excess pattern of stiff shoulders, she was newly given 7.5g Tsumura *kakkonto* extract granules (medical use) to be taken in three portions before each meal. From the second day of taking the prescription, the headache and stiffness in the shoulders improved and completely disappeared a week later. Presently, she is happy that she could treat her stiff shoulders and headache solely with *kakkonto*, without taking a muscle relaxant or analgesic in combination.

Hiroaki Tanaka, A case in which *kakkonto* was effective for tension-type headache, *Kampo Shinryo*, Vol. 12, No. 12, p. 5, 1993

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