臨床経験

失敗学的アプローチによる膝関節痛の漢方治療

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要旨:膝の痛みには防已黄耆湯が頻用されるが,西洋医学的な考え方で処方を選択すると多くは失敗する.変形性膝関節症という病名に対して防已黄耆湯を無差別に選択すると有効率はせいぜい40%であるが,これに附子を追加すると有効率は88%になる.しかし,膝に熱感のある症例は熱証であるから冷やすタイプの越婢加朮湯が適応となる.また,膝の痛みとはいっても関節そのものよりは周囲の靭帯,腱,筋が炎症の首座である場合は,麻杏薏甘湯や薏苡仁湯を選択すべきである.

一般的に痛みを主訴とする場合、どうしても「痛い」という訴えに引きずられてしまい、 附子や麻黄を含む方剤から選択する傾向がある。このような発想は西洋医学における「痛いときは鎮痛剤」と同じことであり、東洋医学的視点が欠如している。形態学的異常と関連性のない膝痛では、その病態に心身相関、特に潜在化した怒りがからんでいる場合が多く、このような病態には抑肝散が有用である。

索引用語:膝関節痛,防已黄耆湯,機能性身体症候群,抑肝散

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Kampo therapy for the pain at the knees according to methodologies to prevent accidents or failures

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Abstract: Boiogito is frequently employed for the treatment of pain at the knees. However, the choice is sometimes resulted in failure when a Kampo formula is selected by the diagnosis of the western medicine. When Boiogito was randomly selected in osteoarthritis at the knees, the effective rate was 40% at most, but the rate increased to 88% by adding Bushi (the powder of heat-processing Aconiti Tuber). When a patient complains knee pain with a sensation of heat, Eppikajututo should be more effective. If pain derives from surrounding ligaments, tendons or muscles, Makyoyokkanto or Yokuininto should be choiced.

In general, when pain is assumed to be a chief complaint, analgesia becomes the purpose of treatment, and there is a tendency to choose a formula containing Bushi or Mao (Ephedrae Herba). Such a conception in the selection of Kampo formula is lacking the identity of the Kampo medicine and shows no difference between both Kampo medicine and western medicine, in which an analgesic is indicated every time when a patient complains soreness. Pain at the knee not related to a morphological abnormality is usually due to subconscious and repressed anger. Yokkansan is frequently beneficial to such a condition.

Key words: knee, pain, Boiogito, functional somatic syndrome, Yokkansan

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