## 症例報告

### 長期に続いた非定型歯痛に桂枝加朮附湯と ノイロトロピン®の併用療法が奏効した一例

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要旨:長期に続いた左下顎第一大臼歯の非定型歯痛(AO)に対して,桂枝加朮附湯とワクシニアウイルス接種家兎炎症皮膚抽出液(ノイロトロピン®)の併用療法が奏効したので報告した.症例は39歳の女性で,約15年前に左下顎第一大臼歯に痛みを生じ,抜髄と根管治療を受けたが,痛みが持続したので当科を紹介された.左下顎第一大臼歯に限局する持続的な自発痛があったが,左下顎臼歯歯槽部に腫脹や圧痛,知覚異常はなく,関連痛も否定された. 画像検査でも左下顎骨に器質的病変はなかった. 痛みの原因は不明なことから左下顎第一大臼歯の AO と診断した. 漢方医学的には表寒虚証であったので桂枝加朮附湯とノイロトロピン®を投与し,さらに修治附子末を追加したことを契機に AO は満足する程度まで改善した. 病態が不明で難治性の AO に桂枝加朮附湯とノイロトロピン® の併用を治療の選択肢の一つとして考慮してもよいと考えらえた.

索引用語:桂枝加朮附湯、修治附子末、非定型歯痛、非歯原性歯痛、ノイロトロピン

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# Prolonged atypical odontalgia improved on treatment with keishikajutsubuto and Neurotropin®

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Abstract: We report a patient with atypical odontalgia (AO) treated with keishikajutsubuto and Neurotropin<sup>®</sup>. A 39-year-old woman developed pain in the left mandibular first molar 15 years ago and underwent extraction of left mandibular third molar and pulpectomy of left mandibular first molar followed by root canal treatments. She was referred to our clinic because of prolonged pain. There was persistent ongoing pain in the left mandibular first molar, but was no swelling, tenderness, abnormal sensation in the alveolar part of the left mandible. The imaging studies did not detect abnormalities in the left mandible. The patient was diagnosed as having AO in the left mandibular first molar. In addition to keishikajutsubuto and Neurotropin<sup>®</sup>, schuchibushimatsu was administrated and the pain markedly improved. Keishikajutsubuto and Neurotropin<sup>®</sup> may be useful in patients with intractable AO of unknown pathophysiology.

**Key words**: keishikajutsubuto, schuchibushimatsu, atypical odontalgia, non-odontgenic odontalgia, Neurotropin

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