症例報告

ビスホスホネート製剤関連顎骨壊死に対し 漢方治療を試みた1症例

大山口藍子*1 杉村光隆*1 高畑沙世*2 田中義基*2 丹羽 均*1

要旨:ビスホスホネート製剤(BP製剤)を投与されている患者が抜歯などの侵襲的歯科治療を受けた後、顎骨壊死が発症することが問題となっている。しかし、現在のところ、BP製剤関連顎骨壊死(BRONJ)に対する治療法は確立されておらず、患者は長期間にわたる痛み、顎骨の露出や局所の感染に悩まされている。今回、BRONJの患者に対し、痛みの緩和のため漢方治療を試みたので報告する。患者は74才女性、抜歯をきっかけにBRONJを発症した。排膿散及湯(TJ-122)を計4ヵ月間投与した。投与開始から1ヵ月はCRPの低下と、Visual Analogue Scale(VAS)値の低下が得られた。しかし、2ヵ月目では再び、CRP増加とVAS値の上昇を認めた。3ヵ月後、歯牙が脱落し、4ヵ月目にはCRPも上昇し、鎮痛効果を得られなかった。したがって、病期が長期にわたるBRONJに対して、漢方薬治療は適していると考えられるが、消炎および痛みの緩和は、一時的な効果と考えられた。

索引用語:ビスホスホネート, 顎骨壊死, 漢方

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One patient who tried the treatment with kampo medicines for bisphosphonaterelated osteonecrosis of the jaw bone

Aiko OYAMAGUCHI*¹, Mitsutaka SUGIMURA*¹, Sayo TAKAHATA*², Yoshiki TANAKA*² and Hitoshi NIWA*¹

Abstract: Bisphosphonate (BP) is known to cause osteonecrosis after having received the invasive dental treatment such as the tooth extraction. Bisphosphonate-related osteonecrosis of the Jaw (BRONJ) has not been clarified. The patients with BRONJ were troubled with the pain, the exposure of the jaw bone and local infection for a long term. In this paper, the patient with BRONJ, and treated with the kampo medicines for pain control was reported. The patient was a 74-year-old female who was diagnosed as BRONJ after the tooth extraction. The patient was treated with hainosankyuto for 4 months. The value of CRP and visual analogue scale (VAS) score were improved after the treatment in 1 month. But these parameters increased 2 months after the medication. A tooth was lost 3 months later and the value of CRP was increased 4 months later. Therefore it was suggested that kampo medicines should be effective in the pain control in the early period of the administration in patient with BRONJ.

Key words: Bisphosphonate, Osteonecrosis of the jaw, Kampo medicine

^{*1} Department of Dental Anesthesiology, Osaka University Graduate School of Dentistry Offprint requests to: Aiko OYAMAGUCHI, Department of Dental Anesthesiology, Osaka University Graduate School of Dentistry.

¹⁻⁸ Yamadaoka, Suita-shi, Osaka 565-0871, Japan

^{* &}lt;sup>2</sup> Department of Dental Anesthesiology, Osaka University Dental Hospital