西洋医学的治療が困難な虚弱高齢者の慢性痛に対し 十全大補湯が奏効した3症例

杉本真理子* 仲 本 博 史 * 名城れい子* 田村奈保子* 佐 々 木 翼 * 南 部 隆 * 關 山 裕 詩 *

要旨:虚弱高齢者の慢性痛治療では、副作用が出やすく通常量の西洋薬の使用が困難であり、また、抗凝固療法のため神経ブロックが適応外のことも多い、これらの理由で西洋医学的治療が困難であった80歳台後半の虚弱高齢者の慢性痛3症例に対して、十全大補湯が奏効したので報告する。(症例1) 肋骨骨折後の胸背部電撃痛に対し、十全大補湯、桂枝加朮附湯、附子を使用し、6ヵ月後に完治した。(症例2) 多発胸腰椎圧迫骨折後の背部痛で歩行困難となった。疎経活血湯と十全大補湯を開始し、痛みは軽減し1ヵ月後に歩行器歩行可能となった。(症例3) 腰椎手術後の慢性腰下肢痛に対し、真武湯、疎経活血湯、抑肝散加陳皮半夏を開始、その後十全大補湯に変方し3ヵ月後に痛みは消失した。

虚弱高齢者の慢性痛において、気血双補剤の十全大補湯を併用した漢方治療を行い、疼痛緩和のみならず Activities of daily living (ADL) や Quality of life (QOL) の改善効果も認めた.

索引用語:十全大補湯, 気血両虚, 虚弱, 高齢者, 慢性痛

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Three cases in which juzentaihoto was effective for chronic pain in the vulnerable elderly

Mariko SUGIMOTO*, Hirofumi NAKAMOTO*, Reiko NASHIRO*, Naoko TAMURA*, Tsubasa SASAKI*, Takashi NANBU* and Hiroshi SEKIYAMA*

Abstract: In the vulnerable elderly patients, medication with high dose anticonvulsants, opioids, and antidepressants is often intolerable due to side effects, such as drowsiness and dizziness. Nerve blocks are not applicable, because of anticoagulation/ anticoagulant therapy. There are abnormalities of qi, blood and water, behind these vulnerable elderly patients with chronic pain. Therefore, Kampo, which aims to normalize the balance of qi, blood and water, can be effective. We experienced 3 vulnerable elderly patients with chronic pain, whose symptoms were successfully treated by juzentaihoto, known to improve qi and blood. In case 1 with intercostal neuralgia after rib fracture, juzentaihoto, keishikajutsubuto and bushi powder completely eliminated the pain after 6 months. In case 2 with low back pain after recurrent multiple vertebral compression fractures, sokeikakketsuto and juzentaihoto decreased pain, which enabled the patient to walk using the walking frame in a month. In case 3 for failed back surgery syndrome, we initially administered shimbuto, sokeikakketsuto and yokukannsankachimpihange, and then changed to juzentaihoto, pain perfectly disappeared after 3 months.

In the vulnerable elderly patients with chronic pain, combined use of juzentaihoto is effective, not only for pain relief, but also for improvement of activities of daily living (ADL) and quality of life (QOL).

Key words: juzentaihoto, qi and blood deficiency, vulnerable elderly patient, chronic pain

^{*} Department of Anesthesiology, Teikyo University School of Medicine Offprint requests to: Mariko SUGIMOTO, Department of Anesthesiology, Teikyo University School of Medicine. 2-11-1 Kaga, Itabashi-ku, Tokyo 173-8605, Japan