

臨 床 経 験

腰椎後方椎体間固定術後疼痛に対する
治打撲一方エキス製剤の有効性

許斐恒彦* 谷戸祥之*

要旨：〔目的〕治打撲一方は外傷後の腫脹疼痛軽減に対する有効性が知られている一方で、脊椎手術による外科侵襲に対する有効性は知られていない。本研究の目的は、腰椎後方椎体間固定術（posterior lumbar interbody fusion：PLIF）に対する、治打撲一方の有効性を検証することである。〔方法〕対象は2014年4月以降当センターでPLIFを施行した32症例であり、術後1日目から非ステロイド性抗炎症薬（NSAIDs）のみを内服した群（n=18）と、治打撲一方エキス製剤を併用内服した群（n=14）との2群に分け、術後の腰部 Visual Analogue Scale（VAS）値と術後ドレーン排液量の比較検証を行った。〔結果〕VAS値は術後4日目から14日目にかけて治打撲一方群で有意に低くなった。術後ドレーン排液量に関しては両群間で有意差は認めなかった。術後血腫等により再手術を要した症例は両群共に認めなかった。〔考察〕PLIF術後に治打撲一方エキス製剤を併用投与することで、有効かつ安全に疼痛をコントロールできる可能性が示唆された。

索引用語：腰椎後方椎体間固定術、腰部脊柱管狭窄症、治打撲一方

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Clinical efficacy of Jidabokuippo for pain following posterior lumbar interbody fusion

Tsunehiko KONOMI* and Yoshiyuki YATO*

Abstract: A postoperative spinal epidural hematoma has the potential to result in devastating neurologic sequela and intolerable pain that requires the continued vigilance of the spine surgeon. Jidabokuippo (JDI) is a Japanese traditional Kampo medicine, which has been used for the past 300 years to improve the blood circulation in the affected lesion and alleviates contusion-induced swelling and pain. This study was designed to demonstrate the efficacies of JDI in the lumbar spinal stenosis patients who underwent posterior lumbar interbody fusion (PLIF) by analyzing the post-operative pain and relevant complications after the surgery.〔Methods〕 Our study involved 32 patients who underwent PLIF at our institution between 2014 and 2016 and be capable of oral ingestion divided into 2 groups : one group (n=18) received only non-steroidal anti-inflammatory drugs (NSAIDs), while the other group (n=14) received concomitant use of the JDI. We compared the postoperative visual analogue pain scale (VAS) values for the lumbar region and the drainage volume from surgical drains.〔Results〕 The VAS value of JDI group was significantly lower from postoperative day 4 to day 14. There was no significant difference in postoperative drainage volume between the two groups. There were no cases requiring reoperation due to hematoma or other postoperative complications in either group.〔Discussion〕The results suggest that JDI combination therapy may be an effective and safe method of pain control after PLIF.

Key words: posterior lumbar interbody fusion, lumbar spinal stenosis, jidabokuippo

*Department of Orthopaedic Surgery, Murayama Medical Center, National Hospital Organization
Tsunehiko KONOMI, Department of Orthopaedic Surgery, Murayama Medical Center, National Hospital Organization.
2-37-1, Gakuen, musashimurayama-shi, Tokyo 208-0011, Japan