症 例 報 告

赤丸料が有効だった原因不明の腹痛を伴うくる病の1症例

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要旨：難治性の原因不明の腹痛に対して赤丸料が著効した症例を経験したので報告する．症例は中学生．主訴は下腹部痛，便秘．X-4年より低リン血症性くる病と診断され，加療中だったが，X-1年7月から下腹部の間欠的な鈍痛が出現．しだいに痛みの持続時間が長くなり，1日中痛みが持続するようになった．諸検査では異常なし．X年9月FGF23産生腫瘍を摘出したが，下腹部痛が持続するため，X年10月受診．苦悶様顔貌で，常に下腹部をおさえ，入室後すぐにベット上で側臥位になるような状態だった．種々の方剤が無効で，慢性難治性疼痛であることから裏寒の存在を考え，鼠径部圧痛や鼓音なども併せて赤丸料に転方した．転方時，烏頭を2gから開始し，6gまで漸増したところ，下腹部痛が劇的に改善し，苦悶様の顔貌も消失し座位での会話が可能となった．小児の難治性疼痛で裏寒の存在が明確でなくても，赤丸料は鑑別すべき方剤と考えられた．

索引用語：赤丸，慢性疼痛，小児

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A case of rickets accompanied by abdominal pain of unknown origin successfully treated with sekiganryo
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Abstract: The Kampo medicine sekiganryo is usually used for patient with severe coldness. We herein report its successful use in the treatment of a child with refractory abdominal pain of unknown origin. The patient was a fourteen year-old girl who in year X-4 was diagnosed with hypophosphatemic rickets. From July of year X-1 she felt intermittent, dull, lower abdominal pain. The pain gradually lasted longer, leading to her feeling the pain during the daytime. Multiple examinations detected nothing abnormal. In September of year X, an FGF 23 producing tumor was removed, but the pain was not resolved. In October of year X, she was admitted to our department. Because many Kampo preparations were not effective, we changed to sekiganryo after five months of treatment even though she did not have severe coldness. When uzu (un-prepared aconite tuber) included in sekiganryo was increased from 2g to 6g, the lower abdominal pain improved rapidly.
In the treatment of children with refractory pain, sekiganryo should be considered even if severe coldness is not found.

Key words: sekigan, chronic pain, children

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