

ACNE, ROSACEA, AND RELATED DISORDERS (INCLUDING HIDRADENITIS SUPPURATIVA)

COMBINATION THERAPY OF JUMIHAIDOKUTO AND KEISHIBUKURYOGANKAYOKUININ FOR ROSACEA

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Introduction: Rosacea is considered as blood stasis and chronic persistent inflammation, which indicate a pattern in Japanese Kampo medicine. The author has effectively treated patients using a combination of the traditional Kampo medical preparations Jumihaidokuto (JHT) and Keishibukuryogankayokuinin (KBY). JHT is composed of 10 kinds of herbal medicines (e.g. schizonepeta spike, pruni cortex) applied to skin diseases such as acne, urticaria, and atopic dermatitis for its anti-inflammatory, antibacterial, and antipruritic actions. KBY is composed of six kinds of herbal medicines (e.g. cinnamon bark, coix seeds) and also applied to skin inflammation diseases.

Objective: To evaluate the efficacy of the combination therapy – JHT and KBY – in patients with rosacea.

Materials and Methods: JHT and KBY were administered to patients with rosacea for 12 weeks. We evaluated telangiectasia, erythema, papules, pustules, feeling hot/hot flushes, dryness, quality of life using the Dermatology Life Quality Index, and safety of 14 patients who were able to survey at all observation dates.

Results: The results showed that the severity scores of erythema, papules, pustules, feeling hot/hot flushes, and dryness were reduced after the administration of the combination therapy. At baseline, 13 patients had telangiectasia, and at the 12-week assessment, three of those patients no longer had telangiectasia. In addition, a reduction in the DLQI score was observed from 6.8 ± 7.6 points at baseline to 2.3 ± 1.9 points at 12 weeks. During the investigation period, there were no side effects reported that seemed to be associated with the study drugs.

Conclusions: These results suggest that the combination therapy of JHT and KBY may be an expecting treatment option for rosacea.





