

14. Genitourinary Tract Disorders (including Climacteric Disorders)**Reference**

Fuse H, Sakamoto M, Iwasaki M, et al. Effect of chorei-to and hachimi-jio-gan on unidentified complaints on urinary tract. *Hinyoki Geka (Japanese Journal of Urological Surgery)* 1995; 8: 603–9 (in Japanese). [MOL](#), [MOL-Lib](#)

1. Objectives

To evaluate the efficacy of choreito (猪苓湯) and hachimijiogan (八味地黄丸) for relieving urinary frequency, voiding pain, and incomplete emptying in patients without organic urinary tract disease.

2. Design

Randomized controlled trial using sealed envelopes for allocation (RCT-envelope).

3. Setting

One university hospital and three other hospitals, Japan.

4. Participants

Twenty-three patients with unidentified urinary tract complaints other than organic urinary tract disease (chronic prostatitis included). The analysis population consisted of 20 patients including 9 with nervous urinary frequency (all in the choreito arm) and 11 (2 with chronic prostatitis and 9 with nervous urinary frequency) in the hachimijiogan arm.

5. Intervention

Efficacy evaluated 4 weeks later by patient's physician based on subjective symptoms.

Arm 1: TSUMURA Choreito (猪苓湯) Extract Granules 2.5 g t.i.d. (n=9).

Arm 2: TSUMURA Hachimijiogan (八味地黄丸) Extract Granules 2.5 g t.i.d. (n=11).

6. Main outcome measures

Subjective symptoms: daytime urinary frequency, nocturnal urinary frequency, voiding pain, incomplete emptying, and voiding discomfort.

7. Main results

Daytime and nocturnal urinary frequency was significantly decreased from baseline in both arms, but the effect occurred earlier in arm 2 than in arm 1. Also, both treatments tended to improve voiding pain, incomplete emptying, and voiding discomfort. Usefulness was achieved in 88.9% in arm 1 and 100% in arm 2, as judged by the treating physicians.

8. Conclusions

Choreito and hachimijiogan are useful for unidentified urinary tract complaints.

9. From Kampo medicine perspective

None.

10. Safety assessment in the article

Not mentioned.

11. Abstractor's comments

This study compared efficacy of two Kampo medicines. Eviprostat (herbal extract product), Cernilton (cernitin pollen extract), Bladderon, Prostal, and Harnal were released in 1967, 1969, 1979, 1981, and 2005, respectively; control drugs seem to have been available as of 1995. In addition, the distribution of underlying diseases is not uniform (i.e., there are 2 cases of chronic prostatitis v.s. 18 cases of nervous urinary frequency).

12. Abstractor and date

Fujisawa M, 14 October 2008, 1 June 2010.