A multicenter, double-blind, randomized, placebo-controlled trial to evaluate the efficacy and safety of the Qishe Pill is proposed. The study will include 144 patients from three sites across China and diagnosed with cervical radiculopathy, according to the following inclusion criteria: age 18 to 65 with pain or stiffness in the neck for at least 2 weeks (neck disability index score 25 or more) and accompanying arm pain that radiates distally from the elbow. Qualified participants will be randomly allocated into two groups(1:1): Qishe Pill group and placebo group. The prescription of the trial medications (Qishe Pill/placebo) are 3.75 g each twice a day for 28 consecutive days. The primary outcome is pain severity. Secondary outcomes are functional status, patient satisfaction, and adverse events as reported in the trial.Date was collectedafter 4 weeks in treatment and 5 months in follow-up.

Results

For pain, self-reported disability and general health status (Short Form-36), Qishe Pill had a statistically significant advantage over placebo after 4 weeks in treatment and 5 months in follow-up ($P < 0.05$). There was no adverse event that reported in the groups.

Conclusion

The relative efficacy and safety of Qishe Pill for neck pain and related disability could be determined.

Keywords: Cervical radiculopathy, Qishe pill, Traditional Chinese medicine, RCT.

067

Characteristics of Traditional Chinese Medicine Use in Patients with Rheumatoid Arthritis in Taiwan: a Nationwide Population-Based Study

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Objective

Nationwide study of current traditional Chinese medicine (TCM) usage trend among patients with rheumatoid arthritis (RA) is lacking. The aim of this study is to evaluate the application of TCM among RA patients in Taiwan.

Materials and Methods

This study examined datasets from the National Health Insurance Research Database in Taiwan. Patients (n=25,263) newly diagnosed as RA and proven as catastrophic illness commissioned by rheumatologists between January 2001 and December 2009 were included in this study. Patients who had at least one TCM outpatient clinical record were defined as TCM users (n=6981), whereas those without TCM outpatient records were defined as non-TCM users (n=18372). The demographic data, treatment modalities, disease distributions, comorbidities, and prescription pattern of the TCM users were analyzed.

Results

TCM users were younger than non-TCM user (mean age: 49.6 versus 54.0). The ratio of female to male in TCM users was higher than non-TCM users (5:1 vs. 3:1). The average interval between RA onset and the first TCM clinical visit was 23.4 months. Herbal remedies were the most commonly used therapeutic approach (76.4%), followed by combined herbal remedies and acupuncture (21.1%), and acupuncture or traumatology alone (2.5%). The most commonly prescribed formulas were Shang-Zhong-Xia-Tong-Yong-Tong-Feng-Wan, Jia-Wei-Xiao-Yao-San and Liu-Wei-Di-Huang-Wan, whereas Rhizoma Corydalis, Radix Clematidis and Caulis Spatholobi were the three most frequently prescribed single herbs. Patients who had allergic rhinitis, disorders of menstruation or anxiety and depression were prone to have more TCM visits compared to non-TCM users.

Conclusion

Our population-based study revealed the high prevalence and specific usage patterns of TCM in the RA patients in Taiwan. These results provided valuable information for further pharmacologic investigation and clinical studies on the treatment of RA.

Keywords: Complementary and alternative medicine; National Health Insurance Database; Rheumatoid arthritis; Traditional Chinese medicine

068

Traditional Chinese Medicine Formula Liu-Wei-Die-Huang-Wan in the Treatment of Knees Osteoarthritis: A Double Blind Randomized Placebo-Controlled Clinical Trial

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Aim

This study compared the efficacy of an herbal formula OA2 (Liu-Wei-Die-Huang-Wan) to placebo in relieving the pain and stiffness of osteoarthritis.

Methods

This trial was a 8 weeks' randomized, double-blind, placebo-controlled study. The study was approved by the IRB of Chung Shan Medical University hospital, and signed informed consent was obtained from each patient. Eighty-one patients of osteoarthritis of knees or hips will be enrolled in this study. Inclusion criteria were: age 20 to 80 years; primary osteoarthritis in at least 1 knee, verified radiologically and scored (as normal, minimal, moderate or marked) for joint-space narrowing and marginal osteophytes in the medial, lateral and patellofemoral compartments; at least moderate pain during the 2 weeks before random assignment to treatment, as identified with the Western Ontario and McMaster Universities (WOMAC) LK3.0 Osteoarthritis Index pain subscale. Primary outcome measures was WOMAC (Western Ontario and McMaster Universities) osteoarthritis index at week 8. Secondary outcome measures were WOMAC (Western Ontario and McMaster Universities) osteoarthritis index at week 2; Visual analogue scale (VAS) , Quality of life by SF-36, patient global assessment