Tsumura & Co.

Revised: March 2013 (5th version)

Standard Commodity Classification No. of Japan 875200

- Kampo-preparation-

TSUMURA Jidabokuippo Extract Granules for Ethical Use

<jidabokuippo>

Storage		
Store in	light-resistant,	air-tight con-
tainers.		

Expiration date	
Use before the expiration date indi-	
cated on the container and the outer	
nackage	

Approval No.	(61AM)1135
Date of listing in the NHI reimbursement price	October 1986
Date of initial marketing in Japan	October 1986

DESCRIPTION

DESCRII II	DESCRII IION		
	7.5 g of TSUMURA Jidabokuippo extract granules		
Composition	contains 2.25 g of a dried extract of the following		
	mixed crude drugs.		
	JP Cinnamon Bark 3.0 g		
	JP Cnidium Rhizome 3.0 g		
	JP Nuphar Rhizome 3.0 g		
	JP Quercus Bark 3.0 g		
	JP Glycyrrhiza 1.5 g		
	JP Rhubarb 1.0 g		
	JP Clove 1.0 g		
	(JP: The Japanese Pharmacopoeia)		
	Inactive ingredients	JP Magnesium Stearate	
		JP Lactose Hydrate	
	Dosage form	Granules	
Description	Color	Grayish-brown	
	Smell	Characteristic smell	
	Taste	Slightly sweet and astringent	
	ID code	TSUMURA/89	

INDICATIONS

TSUMURA Jidabokuippo Extract Granules (hereafter TJ-89) is indicated for the relief of swelling and pain caused by contusion.

DOSAGE AND ADMINISTRATION

The usual adult dose is 7.5 g/day orally in 2 or 3 divided doses before or between meals. The dosage may be adjusted according to the patient's age and body weight, and symptoms.

PRECAUTIONS

- 1. Careful Administration (TJ-89 should be administered with care in the following patients.)
 - (1) Patients with diarrhea or soft feces [These symptoms may be aggravated.]
 - (2) Patients with an extremely weak gastrointestinal tract [Anorexia, epigastric distress, nausea, abdominal pain, diarrhea, etc. may occur.]
 - (3) Patients with anorexia, nausea or vomiting [These symptoms may be aggravated.]

(4) Patients with greatly declined constitution [Adverse reactions are likely to occur, and the symptoms may be aggravated.]

2. Important Precautions

- (1) When TJ-89 is used, the patient's "SHO" (constitution/symptoms) should be taken into account. The patient's progress should be carefully monitored, and if no improvement in symptoms/findings is observed, continuous treatment should be avoided.
- (2) Since TJ-89 contains Glycyrrhiza, careful attention should be paid to the serum potassium level, blood pressure, etc., and if any abnormality is observed, administration should be discontinued.
- (3) When TJ-89 is coadministered with other Kampo-preparations (Japanese traditional herbal medicines), etc., attention should be paid to the duplication of the contained crude drugs. Special caution should be exercised when TJ-89 is coadministered with preparations containing Rhubarb.
- (4) Since there is an individual difference in the cathartic action of Rhubarb, caution should be exercised concerning the dosage and administration.

SHO: The term "SHO" refers to a particular pathological status of a patient evaluated by the Kampo diagnosis, and is patterned according to the patient's constitution, symptoms, etc. Kampo-preparations (Japanese traditional herbal medicines) should be used after confirmation that it is suitable for the identified "SHO" of the patient.

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3. Drug Interactions

Precautions for coadministration (TJ-89 should be administered with care when coadministered with the fol-

lowing drugs.)

Drugs	Signs, Symptoms, and Treatment	Mechanism and Risk Factors
(1) Preparations containing Glycyrrhiza (2) Preparations containing glycyrrhizinic acid or glycyrrhizinates	Pseudoaldosteronism is likely to occur. Besides, myopathy is likely to occur as a result of hypokalemia. (Refer to the section "Clinically significant adverse reactions".)	Since glycyrrhizinic acid has an accelerating action on the potassium excretion at the renal tubules, an acceleration of decrease in the serum potassium level has been suggested.

4. Adverse Reactions

TJ-89 has not been investigated (drug use investigations, etc.) to determine the incidence of adverse reactions. Therefore, the incidence of adverse reactions is not known.

(1) Clinically significant adverse reactions

- 1) Pseudoaldosteronism: Pseudoaldosteronism such as hypokalemia, increased blood pressure, retention of sodium/body fluid, edema, increased body weight, etc. may occur. The patient should be carefully monitored (measurement of serum potassium level, etc.), and if any abnormality is observed, administration should be discontinued and appropriate measures such as administration of potassium preparations should be taken.
- 2) Myopathy: Myopathy may occur as a result of hypokalemia. The patient should be carefully monitored, and if any abnormality such as weakness, convulsion/paralysis of limbs, etc. are observed, administration should be discontinued and appropriate measures such as administration of potassium preparations should be taken.

(2) Other adverse reactions

	Incidence unknown
Hypersensitivity Note 1)	Rash, Redness, Pruritus, etc.
Gastrointestinal	Anorexia, Epigastric distress, Nausia, Abdominal pain, Diarrhea, etc.

Note 1) If such symptoms are observed, administration should be discontinued.

5. Use in the Elderly

Because elderly patients often have reduced physiological function, careful supervision and measures such as reducing the dose are recommended.

6. Use during Pregnancy, Delivery or Lactation

(1) Use of TJ-89 in pregnant women, women who may possibly be pregnant is not recommended. [The uterotonic action and congestive action on the intrapelvic organs of Rhubarb contained in TJ-89 may cause premature birth or abortion.] (2) TJ-89 should be administered with care in nursing mothers. [Anthraquinone derivatives in Rhubarb contained in TJ-89 may be excreted in breast milk and induce diarrhea in nursing infants.]

7. Pediatric Use

The safety of TJ-89 in children has not been established. [Insufficient clinical data]

PACKAGING

Bottles of 500 g 2.5 g \times 42 packets 2.5 g \times 189 packets

REQUEST FOR LITERATURE SHOULD BE MADE TO:

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Manufactured and Distributed by:

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