

9. Cardiovascular Diseases

Reference

Na BJ, Jung JH, Choi CM, et al. Effects of Banhahubak-tang (Banxiahoupotang) on patients with poststroke depression. *Daehan-Hanbang-Naegwa-Hakhoeji (Korean Journal of Oriental Internal Medicine)* 2005; 26(3): 563–74 (in Korean with English abstract).

1. Objectives

To evaluate the effectiveness of the Ban Ha Hu Bak-tang (Banxiahoupotang, 半夏厚朴湯) for post-stroke depression.

2. Design

Randomized controlled trial (RCT).

3. Setting

One Oriental hospital (Kyunghee University Medical Center), Republic of Korea.

4. Participants

The patients with post-stroke depression (n=38).

5. Intervention

Arm 1: Treatment with Ban Ha Hu Bak-tang (半夏厚朴湯) for 7 days (n=19).

Arm 2: Other treatments generally used for post-stroke depression for 7 days (n=19).

6. Main outcome measures

Beck Depression Inventory (BDI), Modified Barthel Index (MBI), and Ki score.

7. Main results

Based on BDI score, improvement in poststroke depression was more significant in yin syndrome patients than in yang syndrome patients. Both of the Yin-patients showed significant improvement in BDI score.

8. Conclusions

Ban Ha Hu Bak-tang has efficacy for poststroke depression in yin syndrome patients.

9. Safety assessment in the article

The adverse events of Ban Ha Hu Bak-tang were evaluated by an investigator who didn't participate in patient treatment and was blinded to group allocation.

10. Abstractor's comments

This study evaluated the efficacy of Ban Ha Hu Bak-tang in 38 patients with post-stroke depression. Ban Ha Hu Bak-tang is known to reduce Ki and improve gastrointestinal problems and neurotic symptoms. Ban Ha Hu Bak-tang improved BDI, MBI, and Ki scores (measures of depression severity) in patients with poststroke depression classified as yin syndrome. As the control treatments were not mentioned and were diverse, the control in this study was inappropriate.

11. Abstractor

Cho SH, 13 July 2010.