Hepatitis C and B: Honso Sho-Saiko-to (H09), Japan's herbal formula for liver care.

Honso® SHO-SAIKO-TO (h09)
(The Only Standardized Japanese Herbal Remedy for Liver Health)
Clinical proven, US trials underway, used by millions

CLINICAL SUMMARY

For all published research on Sho-saiko-to on PubMed, click here...

Sho-saiko-to (or Liver Kampo, Honso's consumer product) or "Xiao Chai Hu Tang" is a classic Chinese botanical formulation widely known by its Japanese name.

MAY HELP

● To improve liver function*
● To increase immune against harmful damages on the body*
● To enhance digestive health*

CONSTITUENTS

Sho-saiko-to is a mixture of seven botanicals:

● Bupleurum root (Chai hu)
● Pinellia tuber (Ban xia)
● Scutellaria root (Huang qin)
● Ginseng (Ren shen)
● Jujube (Da zao)
● Licorice (Gan cao)
● Ginger (Sheng jiang)

A number of pharmacologically active components have been isolated including:

● Baicalin
● Baicalein
● Glycyrrhizin
● Saikosaponins
● Ginsenosides
● Wogonin
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- Gingerols

The standardization specification (HPLC assay) by Honso Pharmaceutical Co., Ltd.:\(^{(4)}\)

- Glycyrrhizin: 24.7-46.0 mg/day
- Baicalin: 110.6-205.6 mg/day
- Saikosaponin: 6.5-19.7 mg/day

CURRENT CLINICAL TRIAL IN THE US

New York Trail: “Sho-saiko-to for patients with chronic hepatitis C who are intolerant to or have contraindication to Interferon-based therapy: a phase II study” (Protocol 02-073).

San Diego Trial: "Safety and Tolerability of Sho-saiko-to ("SST") in Patients with Compensated Cirrhosis due to Chronic HCV Infection, A Phase II Trial" (Project: 031532)

PHARMACOKINETICS

Due to the complexity of this formula, only limited data is available. One study indicates that the serum concentration of glycyrrhizin after a normal daily dose is 1.2 mcg/ml.

WARNINGS

Sho-saiko-to may cause interstitial pneumonitis, a potentially fatal condition. Concurrent use of interferon may increase this risk.

CONTRAINDICATIONS

Women who are nursing or pregnant and patients currently undergoing interferon treatment should not take Sho-saiko-to.

ADVERSE REACTIONS

Sho-saiko-to related pneumonitis has been reported in 74 patients (approximately 1 in 20,000).

DRUG INTERACTIONS

**Anticoagulants / Antiplatelets:** Theoretically, SST may cause additive effects when administered concurrently.

**Interferon:** Concurrent use may increase the risk of interstitial pneumonitis.

**Monoamine oxidase inhibitors (MAOIs):** Some ingredients, such as ginseng and licorice, may potentiate activity of MAOIs.

LITERATURE SUMMARY AND CRITIQUE


Two hundred and sixty patients with cirrhosis were randomized using age, sex, hepatitis B antigen status and liver function strata to treatment with Sho-saiko-to or control. Patients were followed for 5 years with bimonthly alpha-fetoprotein measurement and quarterly ultrasonography. Hepatocellular carcinoma diagnoses were confirmed by angiography, computed tomography and, where indicated, biopsy. Sho-saiko-to led to a one-third reduction in the incidence of hepatocellular carcinoma (23% vs 34%) and a 40% reduction in death (24% vs 40%). Analysis of this data suggests that Sho-saiko-to has multifactorial action, both reducing the incidence of hepatocellular carcinoma and acting as a hepatoprotective agent.

REFERENCES
Hepatitis C and B: Honso Sho-Saiko-to (H09), Japan's herbal formula for liver care.


*The information provided here is for healthcare professional practitioners only. This product is a "traditional Asian medicine" formula. These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure or prevent any disease.

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