

# 신장 및 비뇨기계 독성을 보이는 생약재 中毒 및 泌尿器系 毒性을 보이는 생약재

## Toxicity in Kidney and Urinary Tract induced by Chinese Herb Medicine

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### Abstract

Toxicity in kidney and urinary tract after using Chinese herb medicine in general people could be a problem in Korea. However, reported cases of Chinese herb toxicity in the literature are unexpectedly rare compared to the actual clinical experiences. It is assumed that this low incidence is due to the difficulty of the user to know the prescription or exact name of herb medicine. Ignorance about the nature of Chinese herb medicine might result in fatal effect for the health of general people. To prevent the possible organ toxicity of Chinese herb medicine, we need to consider three requirements. First, enough cases showing toxicity of herb medicine should be collected. Second, comparative analysis of the collected cases should be carried out. Third, public relations (P.R.) to the general people and the governmental regulation should be performed. That is, Information collection Data analysis P.R. and Regulation. I have been personally experienced some cases of typical Chinese herb induced nephropathy in the patients with past history using Chinese herb medicine. All of them showed clinical progression to chronic renal failure. The common problem in these patients were the ignorance about the prescribed herb medicine. These are actual reality in Korea and it means that the resolution of the problem and further prevention for the other people is impossible in this country. Rapidly progressive renal fibrosis after a slimming regimen including Chinese herbs containing aristolochic acid has been identified as Chinese - herb nephropathy. Chinese herb nephropathy have been reported in the literature world - widely (Toxicology 2002; 181 - 2: 577 - 80; Clin Nephrol 2000; 53(4): 301 - 6; Intern Med 2001; 40(4): 296 - 300; Am J Nephrol 2001; 21(6): 441 - 8; Nephrology 2004; 9(3): 126 - 9) since an outbreak of rapidly progressive renal failure observed in Belgium in 1992 ~ 1993, related to a slimming regimen involving Chinese herbs (Bull Mem Acad R Med Belg 1994; 149: 128 - 35). Seventy one cases were registered and renal failure has been progressed in most cases despite the withdrawal of the Chinese herbs. Renal biopsies showed an extensive interstitial fibrosis with loss of tubules. Chinese herb nephropathy contains a variety of clinical features of progressive renal failure to Fanconi's syndrome. Fanconi's syndrome has mostly been reported in Asian countries, and is characterized by proximal tubular dysfunction and slower progression to end - stage renal disease. It has been reported that Aristolochic acid component in Chinese herb induce the toxicity in kidney and urinary tract in humans and animals (J Pharm Belg 1997; 52(1): 7 - 27; J Am Soc Nephrol 2002; 13: 431 - 6). It has also been reported that the prevalence of urothelial carcinoma among patients with end - stage Chinese - herb nephropathy (caused by aristolochia species) is high (N Engl J Med 2000; 342(23): 1686 - 92). Chinese herb, Aristolochia Fang - chi, has been proved nephrotoxic and does not provide enough safety for common health care. The overview shows that attention is caught to the danger of Chinese herbs of unknown origin and these observations indicate the need of intensive search of nephrotoxins in cases of interstitial nephritis of unknown origin.

**Keywords :** Chinese herb nephropathy; Toxicity; Kidney; Urinary tract; Aristolochic acid; Urothelial carcinoma; Aristolochia Fang - chi

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(Scr: 1.6mg/dL)

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3.95mg/dL	가			(rapidly progressing renal failure)
2)	:	1		
3)	:			
4)	:		, 1992	70
(Chinese herb nephropathy)		가		
5)	:		(Bull Mem Acad R Med Belg 1994: 149: 128 - 35).	(Toxicology 2002; 181 - 2: 577 - 80), (Clin Nephrol 2000; 53(4): 301 - 6, Intern Med 2001; 40(4): 296 - 300), (Am J Nephrol 2001; 21(6): 441 - 8) (Nephrology 2004; 9(3): 126 - 9)
(53 )				
1)	:	7		
Scr: 1.5mg/dL				
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2			가	가
Scr: 7.46				
2)	:	5	(Aristolochic acid)	
			(J Pharm Belg 1997; 52(1): 7 - 27),	
3)	:			
4)	:	/		Fanconi Syndrome
5)	:			
가	가			(J Am Soc Nephrol 2002; 13: 431 - 6).
2	가			
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III			(Carcinogenesis 1997; 18: 1063 - 7, Am J Kidney Dis 1999; 33(6): 1011 - 7)	
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(N Engl J Med 2000; 342(23): 1686 - 92). 가

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