

临床报道

厌氧灵治疗腹部厌氧菌感染 90 例临床观察

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摘要 选择 90 例外科腹腔内感染病人,随机分为两组,所有病例于术中取材,行细菌学调查,并分别于术前 1 日用药至术后 4 日。结果表明,两组病例中,厌氧菌的检出率合计为 56.7%,需氧菌的检出率为 54.4%;白细胞计数氨苄加灭滴灵组为 $(10.14 \pm 2.84) \times 10^9/L$,较厌氧灵组 $(8.94 \pm 2.31) \times 10^9/L$ 轻度升高($P < 0.05$);厌氧灵组的排气时间为 2.31 ± 0.53 天,早于氨苄加灭滴灵组 3.07 ± 0.52 天($P < 0.01$)。提示厌氧灵在临床应用中防治腹内感染有较好效果。

主题词 外科伤口感染/微生物学 革兰氏阴性厌氧菌 @ 厌氧灵

在急腹症中,空腔脏器穿孔、梗阻以及腹部手术后继发的腹腔细菌感染非常多见,且以需、厌氧菌混合性感染为特征^[1,2]。在大量的体外抑菌实验和动物实验基础上,我们根据中医理法组成厌氧灵方,并作临床实验观察。

1 一般资料

腹内感染患者 90 例,男性 31 例,女性 59 例。年龄 14~86 岁,平均年龄 50.86 ± 16.15 岁。随机分为两组,厌氧灵治疗组(简称厌氧灵组)和氨苄青霉素加灭滴灵组(简称氨苄加灭滴灵组)。

2 治疗及观察方法

于术前 1 日开始分别给厌氧灵组实验对象口服厌氧灵胶囊,每粒 0.5g,每次 6 粒,每日 4 次;氨苄加灭滴灵组静脉滴注氨苄青霉素 3.0g,加灭滴灵 0.5g,每日 2 次。两组药物均用至术后第 4 日。

所有病例均在手术开腹后,用注射器抽取感染源体液,作需氧菌及厌氧菌培养。分别于术

前、术后 3 天、术后 7 天测晨腋下体温,并作外周血白细胞(WBC)计数测定。同时记录术后排气时间及术后切口感染情况。

3 结果

3.1 细菌学调查比较:两组病例均做胆汁、腹腔渗出液、阑尾腔内容物的细菌学调查。表 1 示,两组患者需氧菌与厌氧菌感染率基本一致,均在 50~60% 之间。

表 1 两组病例细菌学调查

菌 种	厌氧灵组 60 例 例(%)	氨苄加灭滴灵组 30 例 例(%)
需氧菌	32(53.3)	17(56.7)
大肠杆菌	27(45.0)	12(40.0)
克雷白氏杆菌	2(3.3)	3(10.0)
肠球菌	2(3.3)	1(3.3)
沙门杆菌		1(3.3)
葡萄球菌	1(1.7)	
厌氧菌	36(60.0)	15(50.0)
脆弱拟杆菌	15(25.0)	5(16.7)
消化链球菌	8(13.3)	4(13.3)
奇异变形杆菌	4(6.7)	2(6.7)
产黑素拟杆菌	5(8.3)	
产气荚膜梭菌	2(3.3)	1(3.3)
梭形杆菌	1(1.7)	1(3.3)
普通变形杆菌		1(3.3)
吉氏拟杆菌		1(3.3)
痤疮丙酸杆菌	1(1.7)	

3.2 体温变化比较:两组患者术前体温基本一致,术后 3~7 天体温逐步降至正常,下降速度

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亦基本一致($P>0.05$)。见表 2。

3.3 白细胞变化比较:治疗前两组 WBC 总数分别为 $1.5 \times 10^9/L$ 和 $1.3 \times 10^9/L$, 治疗后厌氧灵组的 WBC 下降速度较快, 术后 3 天即降至 $9 \times 10^9/L$ 左右, 术后 7 天降至 $6.6 \times 10^9/L$; 氨苄加灭滴灵组术后 3 天 WBC 仍在 $10 \times 10^9/L$ 以上, 术后 7 天降至 $7.5 \times 10^9/L$ 左右。

表 2 两组治疗前后体温($^{\circ}C$)变化比较

分组	例数	术前	术后 3 天	术后 7 天
厌氧灵组	60	37.67 $\pm$ 0.91	36.87 $\pm$ 0.35	36.53 $\pm$ 0.23
氨苄加灭滴灵组	30	37.33 $\pm$ 0.98	36.90 $\pm$ 0.27	36.61 $\pm$ 0.37

注:表中数据为均值 $\pm$ 标准差

3.4 术后排气时间:胃肠功能恢复情况以排气时间作为指标来评价。厌氧灵组 60 例术后排气时间为 2.31 ± 0.53 天(均值 $\pm$ 标准差,下同), 氨苄加灭滴灵组 30 例, 术后排气时间为 3.07 ± 0.52 天, 两组比较有显著性差异($P<0.01$)。

3.5 术后切口感染情况比较:厌氧灵组 60 例, 术后切口感染 2 例(3.3%); 氨苄加灭滴灵组 30 例, 术后感染 4 例(13.3%), 但尚无明显差异($P>0.05$)。

4 讨论

对急腹症, 张继民等报告了 102 例阑尾炎、消化道穿孔、胆道感染等患者的细菌学研究结果, 其细菌培养总阳性率为 78%, 大部分为需氧菌与厌氧菌的混合感染^[3]。大量病例报告证实, 腹部厌氧菌感染占总感染率的 20~96%。Finegold 总结了腹腔内感染的厌氧菌感染率, 其中肝脓肿为 52%; 伴腹膜炎的阑尾炎为 90%; 胆道疾病为 41~45%; 术后腹内感染为 93%^[4]。在本组病例中, 胆管胆汁中分离出的厌氧菌占 60.0%, 以消化链球菌最多, 其次为脆弱类杆菌, 与何亮家^[5]的报告近似。阑尾炎的厌氧菌感染率较高, 本组为 87.5%。此外, 在我们的研究中, 病种以胆囊炎、胆囊结石、胆管及肝内结石及阑尾炎居多。

本研究病例均系腹部感染性疾病, 半数以上有厌氧菌感染, 应用厌氧灵能较好地控制感染, 使患者顺利渡过围手术期, 体温、白细胞水

平均能在术后 3~7 天恢复至正常水平。在腹部手术后, 胃肠道功能恢复对患者的早日康复有重要意义。有学者报道^[6], 在创伤情况下, 胃肠道的细菌数量明显升高, 细菌易位的机会大大增加。早期的胃肠道功能通畅, 可使患者的腹压降低, 从而改善心肺功能, 再者早日进食促进肠蠕动, 增加机体抵抗力, 促使肠道内过度生长的腔菌群排出, 减少内毒素血症和菌血症的发生。本研究结果表明, 厌氧灵治疗组在术后排气时间上明显提前于对照组。

厌氧灵由大黄、黄芩、黄连、木通、丹参组成, 现代研究表明, 大黄具抑菌及抑制血管活性物质 TXA₂ 合成的作用^[7,8]。黄芩可小鼠胸腺 T 细胞亚群和红细胞免疫功能, 是一种较理想的免疫增强剂^[9]。丹参可提高组织 ATP 及高能磷酸化合物的含量^[10]。体外实验证明, 厌氧灵对包括脆弱类杆菌在内的 6 种厌氧菌有良好的抑菌作用, 厌氧灵可以明显地抑制由内毒素诱生的 TNF、IL-1、IL-6 的分泌量。

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ABSTRACTS OF ORIGINAL ARTICLES

Analysis on Short — term Effect of Electric Acupuncture Treatment for Vascular Dementia.

Lai Xinsheng, Zhang Jiawei, Mo Feizhi, et al

Forty — six cases of VD were equally and randomly divided into 2 groups, the electric — acupuncture group (EA) and acupuncture group (A). Changes in scoring value of HDS, FAQ, CCSE, contents of SOD, LPO, GSH — Px, bloodlipids and NO and changes in EEG, TCD were observed before and after treatment. The effective rate, total ameliorated and effective rates were 52.2%, 87.0% respectively in the AE group; higher than those in the A group of 13.0%, 47.8% respectively ($P < 0.01$). All the above indices were markedly significant ($P < 0.05 \sim 0.01$), but not significant in the control group ($P > 0.05$), indicating that EA treatment is superior to regular acupuncture treatment for VD and exerts marked convalescent actions on patients mental ability.

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Key words: Dementia, vascular/acupuncture therapy electric acupuncture

(Original article on page 340)

Therapeutic Action of Yanyangling on Anaerobic Infection of Abdomen: Analysis of 90 Cases.

Cui Naiqiang, Qiu Qi, Wu Xianzhong

Ninety cases of intra — abdominal infection in the surgical department were divided in random into 2 groups. Samples were obtained during the operation for bacteriological investigation. The remedy was given 1 day before operation through the 4th day after operation. The total positive rate of anaerobic bacteria was 56.7%, that of aerobic bacteria, 54.4%. In the group receiving ampicillin and metronidazole, the WBC count was $10.14 \pm 2.84 \times 10^9/L$, a slight elevation as compared with the $8.94 \pm 2.31 \times 10^9/L$ of Yanyangling group. For the latter group, the time for exsufflation was 2.31 ± 0.53 day earlier than the 3.07 ± 0.52 day of the ampicillin group, indicating that Yanyangling yields good effect for the prevention and treatment of abdominal infection.

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Key words: surgical infection of wounds/Gram

negative anaerobic bacteria @ Yanyangling

(Original article on page 345)

Clinical and Experimental Studies on Immunological Natural Abortion and Sterility.

Luo Songping, Zhang Yuzhen, Liang Guozhen

Clinical study revealed that immunological sterility mainly manifests itself as deficiency of Yin and Yang of the kidney or with blood stasis at the same time. Zhuyun No. 1 and No. 2 Pills for nourishing the kidney and warming up the kidney to activate blood circulation yielded a rate of 93.5% for eliminating AsAb with an average rate of 29.0% for pregnancy. There were no side effects. Animal models revealed that Zhuyun No. 1 and No. 2 inhibited the formation of antibodies. Studies on natural abortion demonstrated that an abortive couple had an increased compatibility of HLA while the CD₄ of abortive women was markedly lowered with low blocking effect, deficiency of both spleen and kidney as its manifestations. After treated with Zhuyun No. 3 Pill for strengthening the spleen and tonifying the kidney, the successful rate for pregnancy was 95.2% and the blocking effect can be thus increased.

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Key words: Abortion/immunology sterility — female/immunology

(Original article on page 351)

Action of Guzhenfang on Hypothalamus — Pituitary — Thyroid — Thymus Axis in Senile Rats.

Zhao Weikang, Jin Guoqin, Wang Runping et al

The H — P — T — T Axis of senile rat is markedly senilized. Guzhenfang can improve more or less the indices of the axis. This indicates that the remedy can improve the nervous — endocrine network of the thorax and abdomen so as to delay the advent of senility from various approaches which embodies the overall regulating characteristics of traditional remedies.

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Key words: Hypothalamus — Pituitary System/drug actions thyroid gland/drug actions @ Guzhenfang

(Original article on page 363)