

东唐毒克胶囊治疗阿片类戒断症状 32 例临床观察

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摘要 临床随机将病例分为东唐毒克胶囊组和可乐定组,两组服药 1~3 天均有明显疗效,经统计学检验两组差异性不显著($P>0.05$)。第 5~10 天,东唐毒克组疗效明显优于可乐定组($P<0.05$)。

主题词 物质禁断综合征/中医药疗法 阿片 @ 东唐毒克胶囊

依据卫生部制定的《阿片类成瘾常用戒毒疗法的指导原则》和《抗阿片类戒断药物临床实验指导原则》的有关内容,我们于 1997 年 1~2 月就东唐毒克胶囊用于阿片类戒断症状的具体效能和作用强度以及不良反应等内容进行了研究,现报告如下。

1 临床资料

诊断标准:有明确可靠的阿片类药物滥用史;符合 DSM-III-R 关于阿片类戒断综合征的诊断标准;尿吗啡检验阳性。

分组方法:按病人入院先后,以 1:1 随机将患者分为东唐毒克组 32 例,可乐定组 30 例(2 例未完成,故未计)。两组年龄、体重、吸毒史、吸毒量、末次吸毒时间、末次吸毒量及性别构成等因素比较均无显著性差异($P>0.05$)。排除躯体合并症、传染病及精神病患者。

2 治疗及观察方法

东唐毒克胶囊(由河北华加药业有限公司提供)每粒含生药 0.5g,可乐定(由西北第二合成制药厂出品)每片含可乐定 0.1mg。根据依赖者戒断症状的严重程度,每日平均用量及末次吸毒量,因人而异,给适当剂量,全部口服给药,两组分别给予东唐毒克胶囊 4~8 粒,1 日 3 次,必要时 1 日 4 次,可乐定 1~3 片,1 日 3 次,自治疗第 4 天起逐渐减量,第 10 天停药。

按卫生部统一制定的《阿片类成瘾戒毒药

物临床研究指导原则》进行标量。每日上午服药后 2 小时记录戒断症状及不良反应。两组病人在治疗结束后进行尿吗啡检测,尿检阴性为有效病例。

3 结果

3.1 两组抗戒断综合征药物的使用剂量比较:表 1 示,两组病人平均日服药剂量均以治疗第 2 天达到最大,随后逐日降低,下降趋势非常明显。比较两组个体之间用药量的变异程度,均以治疗后第 2~3 天为最低,以后变异程度越来越大。

表 1 两组受试对象逐日服药剂量比较($\bar{X} \pm S$)

天数	东唐毒克组(32 例) 药量(粒)	可乐定组(30 例) 药量(mg)
1	8.15±3.23	9.26±3.40
2	13.54±2.89	13.96±3.10
3	12.12±3.30	13.34±2.89
4	9.27±3.10	11.26±3.08
5	6.89±3.49	8.85±3.00
6	5.10±3.11	6.87±2.78
7	3.20±2.51	5.00±2.58
8	2.00±2.30	3.05±2.50
9	1.00±1.80	1.84±2.13
10	0.60±1.12	0.87±1.57

3.2 两组受试对象戒断症状总分逐日变化比较:表 2 示,治疗期间两组戒断症状总分均呈逐日降低趋势,说明两种药物均有控制戒毒症状的效能。从治疗第 1 天~第 10 天,东唐毒克组的戒毒症状总分一直低于可乐定组,从治疗后第 5 天起两组总分的均值差别表现出有统计学意义($P<0.05$ 或 $P<0.01$),说明东唐毒克控制戒毒症状的总体效能优于可乐定。

3.3 治疗头 3 日两组戒断症状减分率比较:东唐毒克组 32 例,治疗第 1~3 日戒断症状平均减分率为 87.8±10.5%;可乐定组 30 例,治疗第 1~3 日为 80.9±18.0%。经统计学处理两组差异无显著性($P>0.05$),可能与两组例数

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表2 两组受试对象戒断症状总分逐日变化比较($\bar{X} \pm S$)

天数	东唐毒克组(32例)	可乐定组(30例)
0	106.84±15.76	104.03±20.56
1	27.34±22.53	33.14±23.58
2	24.83±23.84	32.36±26.86
3	13.74±13.03	17.93±16.36
4	8.81±8.49	14.81±14.70
5	6.04±6.91**	12.22±10.68
6	4.14±4.64*	8.54±8.85
7	3.07±3.39*	6.91±8.72
8	2.16±3.02**	5.91±7.35
9	1.47±3.01*	4.61±6.25
10	0.98±2.82*	3.35±5.64

与可乐定组比较 * $P < 0.05$; ** $P < 0.01$

不够大有关,有待以后增大样本数再观察。

3.4 两种药物对戒断综合征中一些常见症状控制作用比较:治疗期间流涕、失眠、肌肉疼痛、腹痛腹泻、寒战5种常见戒断症状的得分,两组均逐日下降,说明东唐毒克与可乐定均有控制这5种戒断症状的效能。从0~10天,流涕、失眠、肌肉疼痛等5种症状逐日平均得分在两组间均差异无显著性($P > 0.05$),但东唐毒克组均低于可乐定组(资料略)。

表3 两组HAMA分值比较($\bar{X} \pm S$)

天数	东唐毒克组(32例)	可乐定组(30例)
0	33.27±4.80	31.00±5.98
5	3.10±3.49*	5.97±5.32
10	0.68±1.82	1.70±2.67

与可乐定组比较 * $P < 0.05$

3.5 两组Hamilton焦虑量表分值比较:表3示,治疗前及治疗10天时测量,两组焦虑量表分值比较差异无显著性($P > 0.05$),而治疗5天时测量,两组焦虑量表分值比较差异则有显著性($P < 0.05$)。

4 讨论

阿片类药物成瘾性强,戒断症状严重,戒毒后复发率高,严重影响身心健康,在许多国家已形成灾害。对阿片类成瘾者及时进行戒除、康复,以减少成瘾人群的扩散至为重要。中医药戒毒历史久远,形成了一套完整的中医戒毒治疗方案。阿片类物质苦温助火升阳,酸涩滞气凝

血,吸食日久出现脏腑成癯、邪实正虚的阿片中毒病机。其中,正虚指阴阳两虚或气阴两虚,临床以阳虚或气虚为主要表现。东唐毒克胶囊通过调理病体阴阳气血,脏腑功能以治其本。同时又通过解毒清热、活血止痛、止咳化痰、行气散瘀、宁心安神等以治其标,标本兼治,使机体在生理上达到新的平衡,实现戒毒过程中脱瘾和康复治疗之目的。

东唐毒克胶囊由金牛草(平地木)、冬虫夏草、党参、当归、天麻、元胡、木香、酸枣仁等地道中药、采用现代工艺加工提取而成,具有解毒清热、止咳化痰、活血止痛、补血养阴、宁心安神等功效。临床观察证实,东唐毒克与可乐定同样具有缓解阿片类物质戒断症状的作用,具备治疗作用的时效关系特点,有的患者在用药1~3天内便可控制绝大部分戒断症状。从第5天起戒断症状评分明显低于可乐定组($P < 0.05$ 或 $P < 0.01$),尤其对腹痛腹泻、肌肉骨关节疼痛、涕泪哈欠、汗毛竖立、畏寒等类感冒症状及食欲不振、疲乏无力、心悸气短症状效果更为明显,可以用作缓解阿片类物质戒断症状的治疗。治疗时发现,多数人用药后出现大便变软,4例出现缓泻,停药后自行缓解。尚未发现其它不良反应,这可能与观察样本例数少有关,有待进一步考查。

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ABSTRACTS OF ORIGINAL ARTICLES

Clinical Study on Vascular Dementia Treated with Naoxue Shutong Oral Solution

Xu Baoyu

Twenty seven cases of vascular dementia were treated with Naoxue Shutong oral solution based on Qi — invigorating, blood — activating and stasis — eliminating method with another 24 cases treated with Duxil, an intelligence — promoting agent. Results showed that both remedies had similar total effectiveness. The therapeutic effect of cases of asthenic — Qi blood — stasis type was superior to other types, and the results of per cranial Dopler test and hemorrhheological indices in treatment group showed that Naoxue Shutong was superior to the control group.

Authors' add: Xiyuan Hospital, China academy of TCM, Beijing 100091

Key words: Dementia vascular/TCM therapy @ Naoxue Shutong oral solution

(Original article on page 340)

Long — term Observation on Effect of Methods of Kidney — benefitting, Qi — invigorating, Blood — cooling, and Detoxification on Liver — Fibrosis

Yang Hongzhi, Chen Yanbi, Xu Ruiyun, et al.

Forty — eight cases of liver fibrosis due to B — hepatitis were treated with this principle for over 2 years. It improved symptoms remarkably with normal ALT and recovery of normal serum bilirubin in most cases. After a course of 1/2 year therapy, the mean values of HA, PC III and circulated immunocomplex were all decreased as compared with that before the treatment, and all recovered to normal after 2 years of treatment. 82% of the cases revealed normal calibre of the widened portal vessels, and there was a tendency of decrease in size of the enlarged spleen.

Authors' add: Third Affiliated Hospital, Zhongshan Hospital, Guangzhou 510630

Key words: Liver/pathology Hepatitis, B type/TCM therapy

(Original article on page 343)

Effects of Shengjing — Infusion on Sperm Morphology in Sterility Cases with Varicocele

An Liwen, Wang Shulin, Bai Guilin, et al.

Comparative observation was made between 46 such cases received simple operation and that with

additional treatment of Chinese materia medica. Results revealed that, after treatment, the morphology of sperm in both groups were all improved, but the percentage of those in the Chinese materia medica group was higher than the simple operation group ($P < 0.01$). The rate of spear — head sperm and sperm with uncertain shape was much lower than those of the simple operative group ($P < 0.01$).

Authors' add: First Affiliated Hospital of Heilongjiang University of TCM, Harbin 150040

Key words: Varicocele/complication Sterility/TCM therapy

(Original article on page 349)

Infantile Rickets Treated with Bugu Solution

Yang Zhixin, Yan Tianyu, Li Li

Altogether 70 cases were treated, with another 30 cases treated with calcium gluconate as control. The 3 — month rate of amelioration was 68.6% in the treatment group and 46.7% in the control group, with significant difference ($P < 0.05$). Recovery of pavor nocturnus and skeleton X — ray changes were all better in the treatment group. Hence, Bugu solution can be served as a satisfactory agent for the treatment and prevention of infantile rickets and to decrease the application of Vit. D, so as to prevent its intoxication.

Authors' add: Beijing Friendship Hospital, Capital Medical University, Beijing 100050

Key words: Ricket/TCM therapy @ Bugu Solution

(Original article on page 353)

Symptoms in Opiate Quitting Treated with Dongtang duke Capsule. Observation of 32 Cases

Zhang Guoen, Li Qing, Hou Juncai, et al.

Clinical cases were randomly divided into Dongtang duke capsule and clonidine groups, both revealing efficacy without significant statistical difference ($P > 0.05$) after 3 days of treatment. After 5 — 10 days of treatment, the therapeutic effect of treatment group was obviously superior to the control group.

Authors' add: Hebei Institute of TCM, Shijiazhuang, Hebei 050031

Key words: withdrawal syndrome/TCM therapy opium @ Dongtang duke capsule

(Original article on page 357)