

紫草鳖甲四物汤治疗 162 例银屑病临床观察

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摘要 以紫草鳖甲四物汤为基本方,以血热、血燥为主型,再辨夹风、夹湿、血瘀、肾虚四症,配以相应的中药加减治疗银屑病患者 162 例,治愈率 46%,总有效率 89%。认为银屑病多为肝阴虚而肝阳过刚所致,点滴状多兼有表证和肺实,斑块状多兼有风燥和血瘀,关节型多见肾虚,红皮症型多有药毒。

主题词 银屑病/中医药疗法 @ 紫草鳖甲四物汤

银屑病是一种慢性、反复发作、以表皮细胞过度增殖为特点的皮肤病。目前发病率有增加的趋势,但尚无特效的根治方法,所以本病是国内外皮肤科重点研究和防治的疾病之一。我们自 1993 年 6 月至 1998 年 6 月共收集本病 162 例,以自拟紫草鳖甲四物汤为基本方治疗,取得较好疗效,现报告如下。

1 临床资料

本组 162 例,男 96 例,女 66 例;年龄 <20 岁 22 例,20~40 岁 90 例,41~60 岁 46 例,>60 岁 4 例;病程 <5 年 62 例,5~10 年 52 例,11~20 年 38 例,>20 年 10 例;类型:寻常型 131 例,关节型 18 例,脓疱型 6 例(其中掌跖脓疱型 4 例,泛发脓疱型 2 例),红皮症型 7 例。有家族史 44 例。初发诱因最明显的是感冒、处境潮湿,分别为 48 例、36 例;加重原因最明显的是情绪、停用激素类药物,分别为 112 例、25 例。本组病例均依据杨国亮主编的《皮肤病学》和朱仁康主编的《中医外科学》进行临床诊断。病情程度及疗效评判依据国际通用的 PASI 法。

2 治疗方法

2.1 辨证分型:分为 2 主型、4 兼症。

主型:(1)血热型:皮疹发展迅速、新疹不断出现,色鲜红、发热、甚者高出皮肤,鳞屑较多但易剥离,瘙痒症状加重,常伴不同程度的咽部不适感,或经前期紧张症,或低烧、心烦易怒、口舌干燥等全身症状,脉弦滑或数,舌红绛、苔黄。(2)血燥型:皮疹暗红、融合呈片状,鳞屑厚大而较难剥离,甚有皲裂,基底较厚,指甲干燥无华,脉弦细或沉细,舌红、苔薄白或燥黄。

兼症:(1)夹风者:奇痒难忍,鳞屑多而碎,肺脉多有浮象,舌可见白苔。(2)夹湿者:有脓疱或湿疹样浸渍性皮损,鳞屑粘腻,脉濡,舌苔腻。(3)兼血瘀:皮损暗

红,基底厚而硬,边缘较清楚,鳞屑大而难剥离。(4)兼肾虚:无论皮损轻重不同,都有关节疼痛感,多有明显的甲损害。

2.2 处方用药:基本方为紫草鳖甲四物汤:紫草、鳖甲、生地黄、当归、白芍、川芎。加减法如下。

血热型:(1)初发或伴有咽痛或因感冒而再发者,用基本方加金银花、连翘、重楼、牛蒡子、桑白皮、白花蛇舌草等。(2)女性经前期皮损加重、潮红,伴情绪不佳,烦躁易怒者,用基本方加牡丹皮、郁金、柴胡、枳壳、龙胆草、赤芍、益母草等。(3)因停用激素药或其它外用药物而皮损加重者,用基本方加大白芍和紫草的用量,再加赤芍、甘草、龙胆草、白花蛇舌草、苦参,甚者需加水牛角、玳瑁粉等。**血燥型:**用基本方加天冬、麦冬、太子参、玄参、女贞子、生黄芪。

夹风者:在相应类型方药的基础上加白鲜皮、土茯苓、白蒺藜、皂角刺、全蝎、蜂房等。**夹湿者:**在相应类型方药的基础上加土茯苓、苍术、龙胆草、黄柏、车前草、泽泻等。**兼血瘀:**在相应类型方药的基础上加桃仁、红花、丹参、赤芍、水蛭、炮山甲珠等。**兼肾虚:**在相应类型方药的基础上加仙茅、淫羊藿、鸡血藤、苏木、丹参、海风藤、虎杖、怀牛膝等。

3 结果

采用中华医学会银屑病科研协作组推荐采用的疗效标准。痊愈:皮损完全消退,PASI 分值下降为 0。显效:皮损明显消退,PASI 分值下降 80%以上。有效:皮损部分消退,PASI 分值下降 50%~80%。无效:皮损消退不明显,PASI 分值下降不足 50%。

治疗结果:痊愈 74 例(46%),显效 62 例(38%),有效 9 例(5%),无效 17 例(11%)。治愈率 46%,总有效率 89%。随访痊愈者半年至 3 年,有 11 例复发,但症状较轻,再次用药仍有效。无效者多为血燥兼肾虚或兼血瘀者,并且绝大多数曾用过大量免疫抑制剂和含汞、砷等的外用药。

4 讨论

银屑病多为肝血不足,肝阴虚而肝阳过刚所致。银屑病的病因错综复杂,但从临床症状看,90%以上的患者左关肝脉多有弦象,绝大多数患者伴有不同程度的皮肤瘙痒,其病情的轻重与精神和情绪有明显关系,多伴有甲损害等,诸多症状都提示应责于肝。当肝血不足

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时,则气失血束妄行无度,刚而不柔。观之如阳盛,实乃真阴虚。血虚邪入,并易从邪之性而化热、化燥。血热生痰、血燥生风,故以养血柔肝的代表方——四物汤为基本方,大量临床研究证明它有调节免疫、降低血液粘度、明显改善微循环的功能。紫草入心肝两经,具有凉血活血、解毒透疹、利尿滑肠功能等。现代研究认为紫草可以拮抗免疫复合物对血管内皮的损伤。根据病情紫草可用 20~90g 不等。鳖甲味咸平,入血走阴,养阴清热,软坚散结与四物相配合治疗银屑病,可取得良好效果。

点滴状银屑病多兼有表证和肺实,斑块状银屑病多兼有风燥和血瘀。临床所见点滴状银屑病多为初次发病或病程较短者。特点是斑块小而鲜红,鳞屑薄而易脱落,绝大多数患者自觉咽痛、咽干,右手寸脉浮。此为肺实之象,邪气盛则实。即外部阳邪并入阳分,内扰五脏之阳气,肺金承克肝木以求平。《内经》曰:“风位之下,金气承之”。肝阴不足,肝阳刚而不柔,肺金行克制之职以平之。金克木,胜则平,负则虚,虚则外邪更易内扰。临床可见其病情多时好时坏,有自限性。在这一点上与其他类型有明显差别。如斑块状银屑病则几乎没有自行消退的情况,甚至连季节性缓解现象也不明显,鳞屑厚而不易脱落,肌肤甲错甚者皲裂,多见左手关脉弦,瘙痒以夜间为重,此是风邪化燥、伤津凝血所致。皮损的基底斑块随血瘀程度从轻到重而由小到大,由软到硬,由薄到厚。血瘀轻者风证显,症见瘙痒无度;血瘀重者风证隐,瘙痒轻但基底厚硬、色暗难愈。因此,点滴

状银屑病要重用金银花、连翘、桑白皮等,泻肺清邪;斑块状银屑病重用天冬、麦冬、太子参等,养阴生津。同时要根据血瘀的程度,酌情给予桃仁、红花、水蛭以及蜂房、全蝎等活血祛风化瘀之品。

关节型多有肾虚,红皮症型多有药毒。“肾主骨”,关节型患者有明显的骨损害,临床除有关节痛症外,均可见不同程度的甲损。女性多伴有月经不调,男性多伴有腰酸乏力等。关节痛多出现在皮损之后(11/18),其次是与皮损同时出现(4/18),18 例中有 3 例自诉关节痛出现在皮损之前,并且其疼痛症状较其他患者严重,并且这 3 例中有 1 例指骨已发生变形,该患者自诉最初患有类风湿性关节炎,3 年后始发现皮损。可见其肾虚有先有后、有轻有重,临床需酌情处理。临床所见红皮症型及泛发性脓疱型多是由滥用外用药物或突然停用免疫抑制药而造成的。在上诉 7 例红皮症型中有 4 例是肌注长效地塞米松,2~4 周后突然发生;2 例服用所谓“祖传秘方”后发生红皮症,其中 1 例因伴有发热、恶心、血尿等症即于某医院就诊,诊断为“汞中毒”。

银屑病是多因素、错综复杂的病变,中医认为银屑病与津液、气血、五脏、六淫都有关。现代医学认为银屑病是与内分泌—神经—免疫网络系统失衡有关,遗传学认为是多基因病变,分子生物学认为是与多种细胞因子、免疫球蛋白等有关,细胞学认为与角朊细胞的凋亡及其细胞表面的钙离子受体增多有关。如何应用这些学说发挥中医药的理论和临床优势,是我们今后有待解决的问题。

第五次全国农村中医药学术交流会 征文通知

中国民间中医药研究开发协会定于 2000 年 7 月在广西桂林市召开“第五次全国农村中医药学术交流会”,征文如下。

1 征文对象及要求

全国名地县市以下农村各级医疗单位中的中医药人员或有中医中药特长者均可投稿。中医、中西医结合各科各病方面的理论探讨、临床经验、中医药管理等方面的论文均可参加交流。论文限 3000 字以内,另纸附 600 字以内的论文摘要和 200 字以内的作者简介,要求字迹清楚,用方格纸抄写或打印。

2 有关事项

经专家评选后,凡入选者均可通知参加会议,并由会议发给“优秀论文证书”和继续教育学时证明或证书。会议印发“学术论文简介”和“会议资料汇编”等。

3 投稿地址

本次会议委托湖北省麻城市卫生局承办,稿件请在 2000 年 5 月 15 日前寄:湖北麻城市卫生局中医科收,信封上请注明“第五次农村中医征文”,邮政编码:438300。

联系电话:(0713)294126。

欢迎邮购《毒药本草》

《毒药本草》一书是由全国著名风湿病专家杨仓良任主编,全国 30 多位专家学者参与编写的我国第一部毒药专著。该书尽收有毒中药 900 多种,侧重于临床应用和毒理及中毒防治,很适合于临床应用和毒理专项科研研究。该书出版之际,全国著名老中医朱良春作序,许多全国中医药专家、学者曾给予本书高度评价。本书于 1992 年由中国中医药出版社出版,非常受读者欢迎,已连续出版 3 次。由于杨仓良敢于并善于使用毒药而被患者及新闻界誉为“毒药大王”,他本人也因为对中医药的贡献,被评为“全国第二届跨世纪人才十大新闻人物”、“中国百名优秀退伍军科技创业之星”、“世界传统医学中国赛区百名医药之星”等称号。

现本店仍有杨仓良主编的部分图书,《毒药本草》(第 1 版)每册 78.00 元,《华佗神秘方》每册 10.00 元,《现代中医临床疗效评价与进展》每册 40.00 元。欢迎邮购,免收邮费。另外由杨仓良主编的《动物本草》亦将在近期出版。

邮购地址:宁夏银川市银新北路宁夏杨晓难病研究院中西医结合书店,邮编:750002,电话:(0951)3069258,3072789,联系人:马小惠。(广告编号:200002-13)

河北省巨鹿县风湿病专科学校招生

为弘扬祖国传统医学,让更多的医生掌握一技之长,更好地为患者服务,经县教委、卫生局批准,本校决定面向国内外推广治疗风湿病的新技术。赵双兴医师研治风湿病多年,在民间秘方基础上研制出了纯中药制剂追风散、追风丸。本校主要学习类风湿、强直性脊柱炎、无菌性骨坏死、骨质增生、椎间盘突出、妇女产后风等常见风湿类疾病的发病机理,辨证论治。重点学习以上丸散的组方。期满发钢印证书,为方便在职与边远地区医师学习,特编函授教材,好学易懂,常年函授,并诚寻合作者,详情简章备索。

联系地址:河北省巨鹿县风湿病专科学校,联系人:赵双兴 邮政编码:055250,电话:0319-4338563。(广告编号:200002-14)

ABSTRACTS FROM ORIGINAL ARTICLES

Clinical Observation on Treatment of 29 Cases of β — Mediterranean Anemia (Thalassemia) with Yisui Shengxue Ling (YSSXL)

Wu Zhikui, Huang Youwen, Wang Rongxin, et al

Based on the TCM theory of "kidney generates marrow", we treated 41 cases of β — Mediterranean anemia from an highly endemic area in Guangxi. Of whom, 29 cases were treated with YSSXL. 28 cases were effective; another 12 cases were treated with new form YSSXL instant granules, all effective. Comparison was made between the treatment group and a group treated with myleran. The results showed that the former group was markedly effective and superior to the latter. Systemic analysis on gene was also made in the patients, in the aspects of the relationship between genetic mutation and therapeutic effect, genetic expression and modulation, for the study of its molecular mechanism. This study also gives the possible mechanism of thalassemia treated by Chinese remedy: putting forward a hypothesis claiming that the said Chinese theory is its theoretical core. Its objectivity was identified, thus offering the scientific background for the theory and practice of thalassemia treated by traditional Chinese Medicine.

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Key words: β — Mediterranean anemia (thalassemia)/TCM therapy @ Yisui Shengxue Ling

(Original article on page 90)

One hundred Ninety — eight Cases of Ascitis in Liver Cirrhosis Treated with Eqi Drink

Liu Shuchang, Zhang Wude, Hong Minli, et al

All the cases were randomly assigned to two groups, the treatment group and control group. For the treatment group, western remedies and Eqi drink (EQD) were given during the ascitic stage, and with EQD alone after ascitis subsided, while the control group was administered western remedies in its whole course. Observation was made on both groups in terms of manifestations before and after the treatment, first appearance of effective time, time of cure, and long — term effectiveness. Results showed that there was significant difference in the above indices between the 2 groups ($P < 0.05$ or $P < 0.01$), the treatment group being superior to the control group, demonstrating that EQD is effective for the treatment of cirrhotic ascitis with stable and rapid effect, and complete eradication of ascitis, and with satisfactory both short — term and long — term effectiveness.

Authors' address: Xigu Region Hospital of TCM, Lanzhou, Gansu 730060

Key words: Liver cirrhosis/TCM therapy ascitis/TCM therapy

@ Eqi Drink

(Original article on page 92)

Observation of Therapeutic Effect in 162 Cases of Psoriasis Treated with Zicao Biejia Siwu Tang (ZBS)

Wei Yachuan, Lu Heqi

162 cases of psoriasis, mainly of blood — heat and blood — dryness types, complicated with wind, dampness, blood — stasis and kidney deficiency, were treated with ZBS as basic recipe with modifications. The cured rate was 46%, with a total effective rate of 89%. It was claimed that psoriasis is caused mostly by deficient liver — yin and exuberant liver — yang. Patients with punctata type lesion are mostly complicated with superficies syndrome and excessiveness of the lung; while those with plaque lesions, complicated with wind — dryness and blood stasis; and those arthropathic type patients, with kidney deficiency; erythema type patients, with drug poisoning.

Authors address: Institute of Basic Theory, China Academy of Traditional Chinese Medicine, Beijing 100700

Key words: Psoriasis/TCM therapy @ Zicao Biejia Siwu Tang

(Original article on page 97)

Effect of Huanyuan Injection (HY) on the Metabolism of Lactic acid, Ca^{2+} and Free Radicals in Brain Tissue of Rats of Acute Cerebral Hemorrhage

Wang Zuo, Zhang Chunyan

Cerebral hemorrhage model of rat was prepared by injecting 0.5 μ l collagenase saline into its internal capsule and observation performed on the effect of HY on the contents of lactic acid, Ca^{2+} , SOD, MDA in the hematoma area in the brain. Qingkailing (QKL) injection was used as control. Results revealed that the contents of lactic acid Ca^{2+} , MDA in the model control group were obviously higher than that of the normal and operated control groups ($P < 0.01$), activity of SOD markedly lowered than that the other 2 groups ($P < 0.01$). The contents of lactic acid, Ca^{2+} , MDA in the HY group were all obviously lowered than that of the model — control group ($P < 0.05$ or $P < 0.01$), activity of SOD markedly higher than that of the model — control group ($P < 0.05$ or $P < 0.01$). The action of lowering the content of MDA of HY group was superior to the QKL control group ($P < 0.05$).

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Key words: Cerebral hemorrhage/TCM therapy @ Huanyuan injection

(Original article on page 106)