

临床 研究

活血通痹液治疗风湿类疾病 120 例临床观察

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摘要 目的:研究提高风湿病的疗效,探讨养血活血药对风湿病患者甲襞微循环异常的治疗作用。方法:将就诊患者随机分为两组,治疗组以具有祛风除湿、养血活血作用的活血通痹液治疗观察,并与风湿圣药治疗的患者对照。结果:治疗组无论是对风湿病还是对甲襞微循环异常的疗效,与对照组比较差异均有显著性($P<0.05$ 或 $P<0.01$)。显示了养血活血药的治疗作用及优越性。结论:在祛风湿药中适当加入养血活血药能显著提高疗效,并能改善甲襞微循环,对风湿病的治疗及预后均有重要意义。

主题词 风湿热/中医药疗法 @ 活血通痹液

本课题研究的风湿类疾病以风湿性关节炎、类风湿性关节炎和强直性脊柱炎为主,这类疾病在发病过程中多表现出一些甲襞微循环异常与瘀血证候。针对上述情况,我们研制出具有祛风除湿、养血活血作用的纯中药制剂活血通痹液,用于临床,取得了满意疗效。现将 1997 年 11 月~1999 年 8 月期间的 120 例及对照组 60 例治疗情况总结如下。

1 临床资料

采取随机方法分为治疗组与对照组(2:1 比例),两组分别为 120 例、60 例,其中风湿性关节炎 30 例、15 例,类风湿性关节炎 60 例、30 例,强直性脊柱炎 30 例、15 例;男 61 例、28 例,女 59 例、32 例;年龄 <14 岁 19 例、8 例,15~35 岁 67 例、38 例, >36 岁 34 例、14 例;血沉增快者 73 例、38 例,ASO 增快者 22 例、12 例,类风湿因子(RF)阳性者 49 例、27 例,两组资料之间差异无显著性,具有可比性($P>0.05$)。

诊断标准:风湿性关节炎按照 1988 年 4 月昆明全国中西医结合风湿类疾病学术会议制订的标准,类风湿性关节炎:按照 1987 年 6 月第 51 届美国风湿病学会会议修订标准,强直性脊柱炎参考 1968 年纽约诊断标准制定^[1]。

所有病例均符合上述标准,无其他合并症及并发症,且参照中华人民共和国中医药行业标准辨证属于

风寒湿痹者^[2]。

2 治疗及观察方法

2.1 治疗方法:治疗组用活血通痹液。处方组成:制川乌 36g,豨莶草 90g,青风藤 45g,黄芪 90g,补骨脂 45g,五加皮 45g,地龙 36g,土鳖虫 30g,川芎 45g,制乳香 18g,桂枝 36g。上方水煎提取 3 次(第 1 次煎煮 2h 以上),取汁后浓缩,加入 95%高浓度食用乙醇,制成含醇量 10%的药液,冷藏 24h 后过滤分装灭菌 1h 后分装,每瓶 500ml。用法:每次服 50ml,日服 3 次。

对照组:风湿圣药[吉卫药准字(85)430123 号,吉林辉南天泰药业有限公司生产,批号 970104],每次服 5 粒,每日 3 次。

风湿性关节炎治疗 2 个月,类风湿性关节炎及强直性脊柱炎治疗 4 个月后统计疗效。

2.2 观察指标:甲襞微循环异常分布情况、药物对甲襞微循环异常的疗效、以上 3 种病的疗效情况。

2.3 统计学方法:采用 t 检验及 χ^2 检验。

3 治疗结果

3.1 疗效判定标准:按照 1988 年 4 月昆明全国中西医结合风湿类疾病学术会议标准^[1]。

3.2 甲襞微循环疗效标准(自拟):甲襞微循环检测结果分正常、轻度异常、中度异常、重度异常。治愈:检测结果正常或减轻 2 个等级;有效:检测结果减轻 1 个等级;无效:检测结果无改变。

3.3 结果:3 种关节炎中甲襞微循环异常分布情况统计:治疗组风湿性关节炎 30 例中正常 13 例,异常 17 例,对照组 15 例中正常 6 例,异常 9 例。治疗组类风湿性关节炎 60 例中正常 11 例,异常 49 例,对照组 30 例中正常 7 例,异常 23 例。治疗组强直性脊柱炎 30 例中正常 8 例,异常 22 例,对照组 15 例中正常 5 例,异常 10 例。以上治疗组 120 例中正常 32 例,异常 88 例,对照组 60 例中正常 18 例,异常 42 例。两组之间差异无显著性(P 均 >0.05)。

甲襞微循环异常者的疗效情况:治疗组 88 例中治愈 45 例,有效 40 例,无效 3 例,治愈率 51.14%,总有效率 96.60%。对照组 42 例中治愈 13 例,有效 21 例,无效 8 例,治愈率 30.95%,总有效率 80.95%。两组比较差异有显著性($P<0.05$ 或 $P<0.01$)。

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3种关节炎中疗效情况统计:风湿性关节炎30例中近期治愈20例,显效6例,有效3例,无效1例,对照组15例中近期治愈4例,显效4例,有效3例,无效4例。类风湿性关节炎60例中近期控制25例,显效23例,有效9例,无效3例,对照组30例中近期控制4例,显效11例,有效9例,无效6例。强直性脊柱炎30例中显著好转14例,有效15例,无效1例,对照组15例中显著好转2例,有效9例,无效4例。治疗组疗效明显优于对照组(P 均 <0.05)。

4 讨论

我们所诊治的风湿类疾病患者中多以慢性多关节炎为主要特点,这类疾病常可致关节破坏和畸形,极易引起不同程度的残疾。从这类病的主要特点来看,在发病过程中虽然病因病理不同,都可出现小血管炎症性、破坏性和纤维化改变,因此,甲襞毛细血管可出现形态、结构和功能的异常,严重者表现为管襻增大,毛细血管消失,正常血管床破坏,病变过程中出现微循环障碍和血液流态的改变,从而严重影响了血液流变性能,故发病后表现出一些血瘀证候,检测甲襞微循环结果也充分证实了患者不同程度地存在着甲襞微循环障碍,治疗上单用祛风除湿的中药很难改变上述病理机制,根据病变过程中风寒湿邪侵袭,气血凝滞不通的病理机制。经过多年的反复总结,证明在方中适当增加养

血、活血药物,可加快症状缓解,改善微循环,显著提高疗效,因此拟定出了祛风除湿,养血活血并有通络功效的活血通痹液。方中制川乌、豨莶草、青风藤既能祛风除湿,又能散寒止痛,现代药理研究也证实,此类药物均能抑制关节炎症,减轻炎性水肿的损害,且有很强的镇痛作用;痹证反复发作,既可导致气血亏耗,又内损脏腑,损伤肝肾,故以黄芪补气且兼固表,补骨脂、五加皮既可补肝肾,又能祛风湿,能增强体质,调节免疫功能;土鳖虫、川芎、乳香养血活血,祛风止痛,现代药理研究也证实能够改善人体的微循环,加快物质代谢和局部营养供应,促使炎症消除;地龙通络,桂枝温通经脉,既能助祛风湿药散寒止痛,又能助活血药以改善微循环。诸药合用共奏祛风除湿,补益脏腑,活血祛瘀,改善微循环,消除痹痛之功。

本项研究显示,适当增加活血药物改善甲襞微循环,对这类病的治疗、预后均有重要意义,丰富了风湿类疾病的治疗方法。随着科学研究的进展,改善甲襞微循环的临床应用会更进一步扩大,在风湿病治疗中发挥更大的作用,造福广大风湿病患者。

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白龙消风散加减治疗慢性荨麻疹 48 例

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荨麻疹为常见的皮肤病,慢性荨麻疹尤为难治,笔者自1989年开始用白龙消风散加减治疗慢性荨麻疹,取得较好疗效,现报道如下。

1 临床资料

本组48例,其中男18例,女30例;病程4个月~2年;其中 <1 年32例,1~2年16例。

2 治疗方法

本方以《医宗金鉴》消风散加减而成。药用:生石膏30g(捣碎先煎),知母10g,黄芩10g,苦参10g,生薏苡仁40g,荆芥12g,防风12g,浮萍10g,白鲜皮20g,地龙10g,赤芍15g,六一散15g(包)。口干甚心中烦热加栀子6g、黄连6g;咽部干痛、充血加金银花15g、玄参12g、升麻6g;腹胀便溏加陈皮10g、大腹皮10g;妇女月经不调,经血有瘀块加益母草20g、香附10g;瘙痒剧烈加僵蚕10g、徐长卿10g;大便燥结加酒大黄10g。每日1剂,水煎口服。7天为1个疗程。

3 治疗结果

痊愈:风团全部消退,停药半年以上不复发,共25例,其中病程 <1 年者22例,1~2年者2例;有效:风团发作间歇延长,起疹较前明显减少,瘙痒较前明显减轻,或用药后皮疹消退,但停药后又复发,共15例,其中病程 <1 年者11例,1~2年者4例;无效:用药2个疗程病情无变化,共8例。总有效率为83.3%。

4 讨论

荨麻疹相当于中医学之“瘾疹”。清·《疡医大全·斑疹门主论》云:“胃与大肠之风热……怫郁皮毛腠理之间,轻则为疹”。风热日久不得疏泄,致经络阻滞,气血不行,故病旷日久。因此,对慢性荨麻疹疹色鲜红,有灼热感及伴口干喜冷饮,便干溲赤,心中烦热,脉见弦滑,舌质红赤,苔黄之病笔者用自拟清热活血、疏风止痒之白龙消风散治疗。本方以生石膏、知母清阳明胃热;黄芩、黄连清心肺之火;苦参、生薏苡仁、白鲜皮除湿止痒;浮萍、荆芥、防风疏风清热,赤芍、地龙清热活血。诸药合用,共奏疏风清热,活血祛湿之功,因而获得满意疗效。

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ABSTRACTS FROM ORIGINAL ARTICLES

Clinical observation on 120 cases of rheumatic diseases treated with Huo Xue Tong Bi Ye

Xia Junjie, Feng Buzhen, Cao Zhongzhen, et al.

Objective: To increase the therapeutic effect of rheumatic diseases and probe into therapeutic action of drugs for nourishing the blood and activating blood circulation on abnormal nail fold microcirculation. **Methods:** The patients were divided into two groups, the treatment group treated with Huo Xue Tong Bi Ye which has functions of dispelling wind and dampness, and nourishing the blood and activating blood circulation, and the control group treated with Feng Shi Sheng Yao. **Results:** The therapeutic effects on both the rheumatic disease and abnormal nail fold microcirculation in the treatment group were better than those in the control group ($P < 0.05$ or $P < 0.01$). **Conclusion:** Combination of proper amount of drugs for nourishing the blood and activating blood circulation and the drugs for dispelling wind and dampness can obviously increase the therapeutic effect and improve nail fold microcirculation, with an important action on treatment and prognosis of rheumatic diseases.

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Key words: Rheumatic fever/TCM therapy. @Huo Xue Tong Bi Ye

(Original article on page 671)

Effect of Shen Xian Kang Tang on expression of serum TGF- β_1 in the patient of mesangial proliferative glomerulonephritis

Li Xiayu, He Xuelin, Fan Yongsheng, et al.

Objective: To probe the inhibitory action of Shen Xian Kang Tang on serum transforming growth factor β_1 (TGF- β_1) in the patient of mesangial proliferative glomerulonephritis (MsPGN). **Methods:** 60 cases of MsPGN were randomly divided into nephritis control group, benazepril group and Shen Xian Kang group, and the changes of serum TGF- β_1 before and after treatment were investigated. **Results:** After treatment, serum TGF- β_1 levels in the benazepril group and Shen Xian Kang group were significantly down-regulated ($P < 0.01$), with no significant difference between the two groups ($P > 0.05$), and there was significant difference as the two groups compared with the control group ($P < 0.01$). **Conclusion:** Shen Xian Kang Tang may have the action of anti-TGF- β_1 , being advantageous to delaying injury of the kidney.

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Key words: Glomerulonephritis, membrano-proliferative, / TCM therapy. @ Shen Xian Kang Decoction

(Original article on page 673)

Clinical observation on 139 cases of recurrent genital herpes treated with Anti-Virus Capsule

Fan Ruiqiang, Chi Fenghao, Chen Yongfeng, et al.

Objective: To observe the therapeutic effect of Anti-Virus Capsule on recurrent genital herpes. **Methods:** The patients were randomly divided into two groups, the treatment group (139 cases) treated with oral administration of Anti-Virus, and the control group (46 cases) treated with oral administration of aciclovir. Serum IL-2 before and after treatment was determined in 15 cases of the treatment group. **Results:** The effective rates in the both groups were 90.51% and 91.11% respectively with no significant difference, and there was a significant difference before and after treatment in serum IL-2 in the 15 cases ($P < 0.01$). **Conclusion:** Anti-Virus Capsule is an effective preparation of Chinese drugs for genital herpes and it can increase immunologic function of the human body.

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Key words: Herpes, genital/TCM therapy

(Original article on page 679)

Experimental study of Effect of psychogenic stress on expression of CRF gene in hypothalamus and gastric mucosa of the rat and intervention of Chinese drugs

Li Jie, Liu Changjiang, Li Qinghe, et al.

Objective: To expound the mechanism of emotion inducing diseases and the intervening action of drugs from molecular level. **Methods:** RT-PCR was used to investigate expression of corticotropin releasing factor CRFmRNA in the hypothalamus and gastric mucosa, and molecular biological mechanism of the intervening action of compound Xin Shen No. 1 with action of regulating the flow of Qi, lowering the adverse flow of Qi, and dispersing accumulation of pathogen in the rat after fastening and immersing in water. **Results:** Compared with the normal group, the model group showed disturbance of functional activity of Qi in microscope, extensive and superficial ulcer in the stomach and expression of CRFmRNA in the hypothalamus and gastric mucosa, and the Xin Shen No. 1 treatment group showed a significant decrease in gastric ulcer and CRFmRNA expression. **Conclusion:** Confirm the correlation between disturbance functional activity of Qi and CRF gene expression, and Xin Shen No. 1 has action of improving the above-mentioned indexes.

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Key words: Stress, psychology, hypothalamus/genetics, gene expression

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