

五苓散加味治疗化疗性肾衰的临床研究

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摘要 用五苓散加味治疗化疗引起的急性肾功能衰竭 24 例,临床缓解率 87.5%,总有效率 91.7%。实验表明,该方对改善动物摄食量、降低血清尿素氮(BUN)、肌酐(Cr)、 β_2 微球蛋白(β_2 -M)的含量有明显作用,并能减轻顺铂(PDD)对肾脏 $\text{Na}^+ - \text{K}^+$ ATP 酶活性的抑制。显微镜下观察到肾脏病理改变较对照组轻微。

主题词 抗肿瘤药,多剂联用/副作用 肾功能衰竭,急性/中医药疗法 五苓散/治疗应用

化疗引起的肾功能衰竭临床上并不少见,其肾毒性在一定程度上限制了它的临床使用^[1]。近年来我们运用经方五苓散加味治疗化疗所致的肾功能衰竭,疗效满意,现报告如下。

1 临床资料

本文 24 例均为病理细胞学确诊的恶性肿瘤住院患者,其中男 18 例,女 6 例。年龄 30~68 岁,中位数为 52 岁。病种包括肺腺癌 7 例,结肠癌 3 例,鼻咽癌 3 例,卵巢癌 3 例,胃癌 2 例,直肠癌、宫颈癌、精原细胞瘤、肾癌、恶性淋巴瘤、转移性腺癌各 1 例。其中 16 例以顺铂(PDD)为主的方案治疗,8 例用含阿霉素(ADM)方案治疗。

全部病例均有尿少、面肿、呕恶等症状。按全国急性“三衰”工作会议制定的肾衰分级标准^[2]划分,24 例中属轻度肾衰(BUN 7.14~14.28mmol/L, Cr 176.8~442.01 μ mol/L) 21 例,中度肾衰(BUN 14.29~24.99mmol/L, Cr 442.02~884.02 μ mol/L) 3 例。

2 治疗方法

本组病例均治以五苓散加味:白术 10g,桂枝 10g,茯苓 15g,泽泻 10g,猪苓 10g。每日 1 剂,水煎服。气虚者加黄芪 15g,党参 15g;浮肿加桑白皮 20g,茯苓皮 15g;便秘加大黄 10g;腰

痛加杜仲 15g。一般病例服药 5~7 剂,病情严重者连续服药数十剂,平均服药 11.9 剂。

3 治疗结果

本组病例以临床症状消失,实验室检查 BUN、Cr 正常为临床缓解;临床症状改善, BUN 或 Cr 有一项恢复正常,另一项降低 30% 以上为显效;临床症状无改善, BUN 和 Cr 无变化或升高为无效。按以上疗效标准统计,本组病例治疗后获临床缓解 21 例,显效 1 例,无效 2 例。临床缓解率为 87.5%,总有效率为 91.7%。服药 7 天内肾功能恢复正常 14 例(58.3%),最多服药 40 余剂肾功能恢复正常。治疗前 BUN 的均值为 9.21 ± 1.97 mmol/L, 疗后为 5.59 ± 2.93 mmol/L; 治疗前 Cr 的均值为 230.25 ± 32.69 μ mol/L, 疗后为 134.32 ± 39.70 μ mol/L。二者治疗前后比较均有非常显著性差异($P < 0.01$)。无效病例中 1 例为胃癌化疗后出现溶血性肾功能衰竭死亡,另 1 例为肺腺癌脑转移、高热合并肾功能衰竭、循环衰竭死亡。

4 典型病例

邓××,男,48 岁,住院号 44581。诊断为肺癌并见纵膈淋巴结转移,曾给顺铂和丝裂霉素动脉灌注,疗后出现尿少,面目浮肿,呕恶。实验室检查 BUN 为 8.4~11.4mmol/L, Cr 为 209~273 μ mol/L。给予五苓散加黄芪、桑白皮等治疗两周,尿量明显增加,浮肿消退。复查 BUN 为 3.4~5.8mmol/L, Cr 95~157 μ mol/L。

徐×,男,57 岁,住院号 44232。诊断为腺癌并见骨转移、皮下转移,曾给予 Vp-16 和 PDD 治疗,疗后出现偏瘫、尿少、失语。实验室检查 BUN 为 9.0~12.3mmol/L, Cr 为 225~310 μ mol/L,二氧化碳结合力(CO_2 -CP)为 22mmol/L,血清 β_2 -微球蛋白(β_2 -M)为 6.55mg/L。肾图示双肾功能受损。给予五苓散加黄芪、党参、甘草治疗 40 余日,尿量增加。复查

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BUN 为 3.4 ~ 6.4 mmol/L, Cr 为 88 ~ 140 μ mol/L, $\text{CO}_2\text{-CP}$ 为 25 mmol/L, $\beta_2\text{-M}$ 为 1.97 mg/L, 病情明显好转。

纪×, 女, 66岁, 住院号 38272。诊断为肺腺癌并见脑、骨转移。曾给予 Vp-16 和 Me-CC-NU 治疗, 出现肾功能衰竭, 症见尿少、呕恶、不大便。实验室检查 BUN 为 15 mmol/L, Cr 为 300 μ mol/L。给予五苓散加黄芪、大黄治疗 1 周, 尿量增多, 大便通畅。复查 BUN 为 4.2 mmol/L, Cr 为 99 μ mol/L。病情明显好转。

5 讨论

五苓散本为气化不利、水蓄下焦病证而立, 临床多用于治疗急慢性肾炎水肿证属水湿内停者。化疗后肾功能衰竭, 出现小便不利、渴欲饮水、水入即吐等症, 与五苓散证合拍, 故收效明显。本方中的茯苓、泽泻、猪苓等药有抑制肾小管对钠重吸收而发挥利尿的作用^[3]; 黄芪有益气利水作用, 对实验动物及正常人均有明显利尿作用^[4]; 白术能健脾化湿; 桂枝可温阳化气。全方具有健脾益气利水之功效。

实验表明, 五苓散加味可使顺铂所致的大鼠各项指标显

著降低($P < 0.05$)。上述指标中, $\beta_2\text{-M}$ 主要反映肾小球滤过率^[5], 说明五苓散加味对肾小球滤过率有一定保护作用。

国外研究认为, 顺铂所致肾毒性主要是抑制肾脏 $\text{Na}^+ - \text{K}^+$ ATP 酶活性^[6]。我们的动物实验表明, 顺铂所致大鼠肾衰时 $\text{Na}^+ - \text{K}^+$ ATP 酶活性明显降低, 而中药五苓散加味可显著降低顺铂对 $\text{Na}^+ - \text{K}^+$ ATP 酶活性的抑制。可以认为五苓散加味治疗化疗性肾衰的有效机理之一是通过调节机体的能量代谢来实现的。

6 参考文献

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蒙药治疗肝血管瘤 1 例

白凤鸣* 白金龙*

肝血管瘤是常见的肝脏良性肿瘤之一, 除外科治疗方法外尚无很好的治疗措施, 我们采用自拟蒙药“红花十二味丸”治疗多例, 取得较好疗效。举 1 例如下:

康××, 女, 57岁。自 1983 年春始, 自觉上腹及肝区胀痛, 曾在多家医院按慢性胃炎或胆囊炎治疗无好转, 近 3 个月以来上述症状加重, 肝区有灼热感, 在某医院作 CT 检查确诊为肝左叶血管瘤, 直径 6.5 cm, 该医院建议手术治疗, 因患者不同意手术治疗而在 1988 年 11 月 19 日来我处要求服蒙药治疗。症见精神不振,

体质消瘦, 腹部略胀, 肝脏轻度肿大, 肝区有叩击痛, 脉细涩, 舌紫绛、苔白腻, 尿黄。按蒙医理论辨证为脾胃湿滞, 肝之气血瘀阻型肝脉痞。立法于燥湿健脾消食, 行气活血化瘀兼清血热。处以自拟“红花十二味丸”加石榴果、诃子。药用: 红花 35g, 藏红花 15g, 五灵脂 30g, 广木香 25g, 川楝子 15g, 黑冰片(野猪粪炭的正规名) 25g, 山楂 30g, 酸李干(秋李晒干果实之切片) 20g, 刺玫花(刺玫之晒干花瓣) 10g, 人工牛黄 2g, 山梔 10g, 麝香 1g, 石榴果 10g, 诃子 10g。上药除麝香、人工牛黄外共研细面, 后加麝香和人工牛黄作 7g 重蜜丸, 早晚各服 1 丸。服用 1 个月后, 腹胀及肝区疼痛消失。因效不更方, 上药继续服用 2 个月后, 诸症消失。CT 复查, 肝左叶血管瘤已消失。对该患者随访至 1992 年, 未见病情复发。

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ABSTRACTS OF ORIGINAL ARTICLES

The Methods of Tributary Elimination and Removal, the Basic Treating Principle for Damp — Heat Syndrome

Zhou Changhong Zhao Shaoqin

This paper deals with the definition of the methods of "tributary elimination and removal", the background for its establishment and scope of application based on the sorts, properties and location of damp—heat. Furthermore, it also discusses the rules for its application and its contraindications as well.

Author's Address: Beijing College of TCM, Beijing 100029, PRC

Key Words: Damp — heat (TCM)/TCM therapy @Tributary elimination and removal

A Preliminary Exploration on Dr. Yan Yonghe's Theory of Qi Circulation and His Idea of Regulating Qi

Liu Xiaozhuang

Basing on Dr. Yan's discourse on regulating Qi, one of his important academic idea, this paper explores his theory of Qi circulation, pathological mechanism of "Qi — channel", treating principles, and application of remedies, expounds the clinical significance of "Qi — channel of human body prefers smooth circulation" and "put smooth Qi circulation first".

Author's Address: Jiangxi College of TCM, Nanchang, Jiangxi 330006, PRC

Key Words: Regulation of Qi @Theory of Qi circulation @Yan Yonghe

Comparative Study Between Scalp Needling and Body Needling in the Treatment of Apoplectic Hemiplegia

Shi Ying Song Zhaoying

By applying "withdrawing and adding method" for points — penetrating scalp needling, 100 cases of apoplectic were treated with a cured rate of 45%, the total effective rate being 97%. As compared with 50 cases treated with body needling at the same period, the effective rate revealed significant difference.

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Key Words: Apoplexy (TCM)/acupuncture — moxibustion therapy hemiplegia/acupuncture — moxibustion therapy

Observation on the Therapeutic Effect of Mayi Yiganning on the Transformation of HBV — M: Report of 480 Cases

Wu Zhicheng Li Shuangxi Li Yuanzhai, et al.

The effect of Mayi Yiganning on the transformation of HBV — M was observed in 480 cases, with a control group of 460 cases treated with other remedies and immune products. Results showed that the rates of transformation for 5 indices of HBV — M were significantly higher than the control group (all $P < 0.01$). Among them, HBsAg, HBeAg, anti — HBe changes were especially distinctive, with the rate of negative HBsAg as high as 37.92%. The effects on amelioration of symptoms, recovery of liver functions were also satisfactory.

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Key Words: B — hepatitis Virus/actions of drug @Mayi Yiganning

Clinical Study Chemotherapeutic Renal Failure Treated with Wuling Powder with Additives

Cheng jianghua Long Hao Zhao Dehui, et al.

24 cases of renal failure induced by chemotherapy were treated with Wuling powder plus additives. The result of clinical amelioration was 87.5%, with a total effective yielded marked actions of promoting appetite in animals, lowering serum urea nitrogen, creatinine, 2 microglobulin. It also decreased the inhibition of PDD on the enzyme activity of renal $\text{Na}^+ - \text{K}^+$ ATP. Microscopic exam revealed the pathological lesion of kidney to be milder in the tested group.

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Key Words: Combined use of multiple — remedies/side effect renal failure, acute/TCM therapy wuling powder/therapeutic application.