

中药治疗慢性萎缩性胃炎伴肠上皮化生及不典型增生的临床观察

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摘要 以补气温中、活血化瘀为基本治则,口服中药汤剂及胃萎康冲剂、活力丸,临床症状总有效率为91.8%。对慢性萎缩性胃炎伴肠上皮化生及不典型增生者的总有效率分别为87.5%及74.4%,治疗后胃粘膜血流量有显著增高($P < 0.01$)。

主题词 胃炎,萎缩性/中医药疗法 化生/中医药疗法 增生/中医药疗法

近年来,由于消化系统恶性肿瘤的发病率上升,对癌前病变的诊断与治疗日益受到人们的重视。我们继治疗慢性萎缩性胃炎(简称CAG)取得较满意疗效之后^[1],又对CAG伴肠上皮化生(简称IM)及不典型增生(简称ATP)的病人进行了治疗观察,结果如下。

1 临床资料

本组共观察61例,男50例,女11例;年龄29~71岁,平均49.9岁;病程3~30年,平均13.2年。症状以上腹痛、腹胀暖气、反酸烧心、食欲减退、遇冷加重、便溏或便秘、舌质暗或淡、脉涩或弦等为主。诊断为CAG伴IM者56例,其中IM轻度18例,中度25例,重度13例;CAG伴ATP者39例,其中ATP轻度18例,中度18例,重度3例。61例中同时伴有IM及ATP者34例。全部病例均经纤维胃镜和病理组织学确诊。该组病人活体组织均取自胃窦部,按全国统一标准做病理组织学诊断。

2 治疗方法

以补气温中、活血化瘀为基本治则,根据症状酌情加减。基本方:黄芪30g,党参10g,吴茱萸10g,肉桂10g,丹参30g,赤芍12g,香附

10g,三棱10g,莪术10g,王不留行10g,炮山甲15g,甘草6g,等。腹痛较明显者加元胡、细辛、白芍;反酸烧心者加乌贼骨、半夏、干姜;口苦、胆汁返流加四逆散;便溏加木香、丁香;便秘加钩藤、白术、肉苁蓉。每日1剂,水煎服。同时配合我院自制之胃萎康冲剂、活力丸内服。胃萎康由黄芪、细辛、黄连、公英等组成,每次20g,每日3次;活力丸由水蛭、土鳖虫等组成,每次5粒,每日2次。观察期间停服其他治疗胃病的药物。伴IM和/或ATP轻度者服药3个月,中度者4个月,重度者5~6个月。

3 疗效标准与结果

临床症状疗效:症状基本消失为显效;症状减轻为有效;治疗后症状无改善为无效。

内窥镜及病理疗效:胃粘膜萎缩消失的同时IM和/或ATP由重度变为轻度或消失为显效;胃粘膜萎缩伴有IM和/或ATP病变程度降低1级为有效;治疗前后各项无变化为无效。

本疗法对常见症状如上腹痛、腹胀暖气、食欲下降、大便异常、遇冷加重等都有较好的疗效,对上腹痛的疗效尤为明显,服药后消失率高达94.3%(50/53例);而对腹胀暖气和食欲下降的消失率均较前者为低,分别为87.3%(48/55例)和67.6%(25/37例)。临床症状疗效,显效41例(67.2%),有效15例(24.6%),无效5例(8.2%),无1例加重,总有效率为91.8%。

本组中CAG伴IM者共56例,治疗后内窥镜及病理疗效,显效27例(48.2%),有效22例(39.3%),无效7例(12.5%),无1例加重,总有效率为87.5%。显效27例中IM消失22例。CAG伴ATP者共39例,治疗后显效13例(33.3%),有效16例(41.0%),无效10例(25.6%),总有效率为74.4%。39例中3例CAG伴

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重度 ATP 者胃粘膜萎缩消失, ATP 减轻。治疗前后作电镜对照者 2 例, 治疗后肠上皮化生减轻, 粘液颗粒明显减少。治疗前后分别于胃窦及胃体部作检测胃粘膜血流量者 30 例, 结果显示治疗后胃粘膜血流量较治疗前明显增加并有显著差异 ($P < 0.01$)。个别病人服药后上腹部有灼热感, 未经特殊处理自行缓解。治疗前后肝、肾、心、脑功能无明显变化。

4 讨论

CAG 伴 IM 及 ATP 被认为是消化系统癌前病变^[2], 目前缺乏有效的药物。现代医学认为上述病变是胃粘膜长期受到攻击因子的作用致使胃粘膜屏障及胃粘液屏障破坏的结果。而正常的胃粘膜血流量是维持正常消化、吸收、分泌和排泄功能的基础, 也是多种胃肠疾病发生过程中的重要环节^[3]。因此, 胃粘膜血流量变化在消化系统疾病发生过程中也日益受到重视。有资料表明, 胃粘膜病变和溃疡、糜烂等在其众多的病因中, 粘膜血流量降低是最重要的因素之一^[3]。动物试验发现胃粘膜损伤的深度与缺血的严重程度有关^[4]。还有报告^[5]慢性萎缩性胃炎、浅表性胃炎、胃溃疡及胃癌 4 种病均存在血液粘滞性增高、血流速度减慢、红细胞聚集性增加和血液粘稠度增大等血液流变学障碍。祖国医学认为该病属“胃脘痛”“痞症”“嘈杂”等范畴, 其主要病机通常被认为属脾胃虚弱、脾肾阳虚、肝胃不和等。我们临床常见到无症状或症状较轻, 但组织学病变较重的病人, 仅靠中医辨证治疗难以奏效。因此我们中西合参, 将纤维胃镜之所见, 如胃粘膜色淡、苍白或红白相间以白为主, 伴 IM 或 ATP 时常见之粘膜粗糙不平、结节隆起或粘膜皱襞粗大肥厚以及血液流变学等变化, 与祖国医学的宏观辨证相结合, 如临床常见之上腹部久痛不愈或刺痛, 遇寒加重, 得热则舒, 口唇粘膜色暗或舌质暗有瘀点瘀斑, 脉弦涩无力等, 我们认为该病的病机变化为气虚血瘀、寒凝血瘀, 其中血瘀尤为重要。由于 CAG 与胃癌的关系已被证实, CAG 伴 IM 和/或 ATP 者与之关系更为密切, 在不典型增生中癌变率约为 8%^[6], 因此西医多主张采取手术疗法。然而

术后所遗留的残胃炎及残胃癌的发生亦是难免的。我们本着治病求因的原则, 以补气温中、活血化瘀为治则, 获较满意疗效。方中黄芪、党参、肉桂等具有补脾健胃、温中散寒之功效。现代药理研究认为黄芪等补气药可增强网状内皮系统的吞噬功能, 增加病原微生物诱生干扰素的能力, 增强机体免疫力^[7]。肉桂有扩张血管, 调节外周循环的作用^[8]。活血药可降低血粘度, 加速红细胞电泳, 使血液流动改善, 变红细胞聚集为分散^[9], 加速病变部位侧支循环的建立, 进而促进病变部位细胞修复及萎缩的腺体再生。炮山甲、王不留行及活力丸具有活血化瘀、软坚散结的功效, 对粘膜粗糙不平、结节隆起、肠化增生等均有较好的疗效。治疗过程中, 曾一度因活力丸缺乏致使 CAG 伴 IM 及 ATP 者疗效下降, 似说明活力丸在上述病变治疗中起着相当的作用, 当然, 从中医整体观念的角度上看, 其他药物的扶正祛邪功能也是不可否定的。

5 参考文献

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· 简 讯 ·

▲由河北医学院附属第四医院刘亚娟副教授等承担的“止吐汤治疗恶性肿瘤化疗所致呕吐的研究”, 于 1992 年底通过专家技术鉴定, 其临床疗效居国内领先水平。“止吐汤”经对 100 例患者观察, 大部分患者 1 至 3 剂即可止吐, 显效及临床治愈率达 97%, 明显优于对照组灭吐灵的有效率。

▲1993 年 3 月 6 日北京针灸骨伤学院附属医院举行了隆重的开诊典礼。这所医院是国家中医药管理局直属高等中医院校附属医院之一, 设病床 550 张, 每天可接纳 1500 多人次就医, 是一所以中医、针灸、骨伤为特色; 设备先进的现代化大型综合性中医医院。

ABSTRACTS OF ORIGINAL ARTICLES

Effect of Oral Solution 8868 on Some Indices of Serum Markers of B--hepatitis Virus

Yu Shenshan An Jingya Gao Hanmin

Observation was made on the effect of 8868 oral solution, composed of natural pollen, Radix, Bupleuri, Hawthorn, on the serum markers of B--hepatitis virus. Results showed the negative rate of HBsAg was 55.3%, that of HBsAg 13.1%, positive rate of HBeAb was 21.0%. A/G ratio, thrombocyte count were all markedly improved (all $p < 0.05$). The efficacy is rather similar to Co. Shushe tablet.

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Key Words: B--hepatitis Virus B--hepatitis/blood
(@) 8868 oral solution

(Original article on page 283)

Clinical Observation on Chronic Atrophic Gastritis with Metaplasia and Atypical Hyperplasia of Intestinal Epithelium Treated by TCM

Liu Mei Xu Kexian Liang Fangxin, et al.

The total effective rate for clinical symptoms treated with oral decoction with Weiweikang (benefiting atrophic stomach) granules and Huoli (vitality) Bolus guided by the principle of invigorating Qi, warming the interior, activating circulation and eliminating blood stasis, was 91.8%, while that for the chronic atrophic gastritis with metaplasia and atypical hyperplasia of intestinal epithelium was 87.5% and 74.4% respectively. After treatment, the volume of blood flowing was markedly increased ($P < 0.01$).

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Key Words: Gastritis, atrophic/TCM therapy Metaplasia/TCM therapy hyperplasia
/TCM therapy

(Original article on page 285)

Cervical Spondylopathy Treated with Elevating--rotation Reduction: Report of 3687 cases

Xu shan Wen Youlai Li Baoxin, et al.

Based on the limitation of the segmental activity and signs of local tenderness, location diagnosis and treatment for cervical pain and referred pain was performed with elevating--rotation reduction. Clinically,

attention should be given to the combination of X-ray film and signs and symptom. The total effective rate for 3687 cases thus treated was rather high.

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Key Words: Osteophyma of vertebral bone/massotherapy, massage/method

@ elevating--rotation reduction

(Original article on page 289)

Infantile Primary Enuresis Treated by Spotted--moxibustion with Zhuang Medicated Threads

Huang Jinming Deng Qiumei Huang Yanning, et al.

33 cases were treated by spotted--moxibustion with Zhuang medicated threads, the effective rate being 84.6~85.0%. The longterm effect was also satisfactory. This therapy can also markedly raised the infiltration pressure of nocturnal urination. There was no obvious relation between the therapeutic effect and syndrome typing.

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Key Words: Enuresis/acu--moxibustion therapy ethnomedicament/drug administration and dosage

@ Medicated threads of Zhuang medicine

(Original article on page 293)

Studies on the Red Cell--membrane Protection Action of Modified Qingdan Tuihuang (Bile--clearing and Anti--Juandice) Decoction

Chen Shulan Xu Huangshu Zhou Yaoting, et al.

The Decoction showed marked effect on many kinds of Icterus Neonatorum. Estimation on the activity of superoxide dimutase, lipoperoxide, enzymes of RBC, were made through histochemical staining and resistance of RBC membrane. Results revealed that the remedy has distinctive protective action on cell membrane of RBC.

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Key Words: Cell membrane of RBC/drug action.

@ Qingdan Tuihuang (Bile--clearing and Anti--Juandice) Decoction

(Original article on page 302)