

# 病毒性肝炎治胆初探

## ——附 60 例临床疗效观察

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**摘要** 提出肝病治胆,肝胆并治的观点,拟定了柴胡合剂加丹参注射液静点的治疗方案,治疗属肝胆湿热兼瘀血阻络证的慢性肝炎 60 例。结果表明,在退黄、降酶和抑制病毒复制等方面均优于西药对照组。

**主题词** 肝炎,病毒性,人/中医药疗法

中医对病毒性肝炎的治疗方法多样,流派纷呈。我们根据脏腑相关的理论并通过临床实践认识到,肝炎的病位主要在肝胆,病机主要是湿热毒邪导致肝胆功能失常,因而提出肝病治胆、肝胆并治的观点和治疗方法。同时拟定了柴胡合剂加丹参注射液静脉点滴的治疗方案,对 60 例属于肝胆湿热兼瘀血阻络证的慢性肝炎进行了临床观察,现总结如下。

### 1 临床资料

选择 1991 年 1 月至 1992 年 5 月住院的慢性肝炎患者 90 例,分为两组。观察组 60 例,男性 57 例,女性 3 例;年龄 20 岁以下 2 例,21~40 岁 35 例,41~60 岁 21 例,60 岁以上 2 例。依照第六次全国病毒性肝炎会议制定的临床诊断标准,本组病例中诊断为慢性迁延性肝炎 30 例,慢性活动性肝炎 30 例;乙型肝炎 46 例;丙型肝炎 10 例,甲乙型肝炎重叠感染 3 例,乙丙型肝炎重叠感染 1 例。血清胆红素(SB)异常者 44 例,谷丙转氨酶(ALT)异常者 60 例。对照组 30 例,男性 27 例,女性 3 例;年龄 20 岁以下 1 例,21~40 岁 14 例,41~60 岁 13 例,60 岁以上 2 例。诊断为慢性迁延性肝炎 11 例,慢性活动性肝炎 19 例;乙型肝炎 23 例,丙型肝炎 5 例,甲乙型肝炎重叠感染 1 例,乙丙型肝炎重叠感染 1 例。SB 异常者 22 例,ALT 异常者 29 例。依照中国中医药学会内科肝病专业委员会

制定的病毒性肝炎中医辨证标准,两组病例均为肝胆湿热证兼瘀血阻络证患者。

### 2 治疗方法及结果

2.1 治疗方法:柴胡合剂由大黄、黄芩、虎杖、柴胡、郁金、乌梅、白芍、丹参、赤芍、枳壳、半夏等药组成。观察组口服柴胡合剂,每次 100ml,每日 2 次;静脉点滴丹参注射液 20ml,每日 1 次。对照组静脉点滴门冬氨酸钾镁注射液 20ml 和丹参注射液 20ml,每日 1 次。每 2 周复查 1 次肝功能、HBVM 等,并做 B 超复查肝、胆、脾。

2.2 疗效判定标准:疗效判定系参照中国中医药学会内科肝病专业委员会制定的病毒性肝炎疗效评定标准进行。临床近期治愈:湿热证与瘀血证的主要症状消失,肝脾肿大较前回缩或稳定不变,肝功能恢复正常( $TTT \leq 6U$ ,  $SB < 17.1 \mu\text{mol/L}$ ,  $ALT < 35U/L$ )两周后复查仍正常。临床近期基本治愈:湿热证与瘀热证中的主要症状大部消失,肝脾肿大稳定不变,肝功能接近正常( $TTT \leq 10U$ ,  $ALT < 50U/L$ ,  $SB < 25.7 \mu\text{mol/L}$ )两周后复查仍在此水平。好转:湿热证与瘀热证中的主要症状大部消失,肝脾肿大稳定不变,肝功能  $TTT \leq 13U$ ,  $ALT \leq 70U/L$ ,  $SB < 25.7 \mu\text{mol/L}$ 。无效:治疗 3 个月未达好转标准者。

2.3 治疗结果:观察组近期治愈 51 例,近期基本治愈 4 例,好转 2 例,无效 3 例;对照组分别为 20 例、7 例、1 例、2 例。近期治愈率观察组为 85%,对照组为 66.7%,组间比较差异显著( $P < 0.05$ )。但两组间在肝脾肿大、胆囊异常的改善方面无显著差异。在肝功能的改善方面,SB、ALT 复常率以观察组为优(见附表),其平均复常时间观察组 SB 为 24.5 天、ALT 为 26 天;对照组分别为 44 天、30.5 天。HBsAg 观察组疗前阳性 21 例,疗后转阴 10 例(47.6%);对照组疗前阳性 19 例,疗后转阴 6 例(31.5%)。抗

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HBc-IgM 观察组疗前阳性 38 例, 疗后转阴 15 例(39.5%); 对照组疗前阳性 23 例, 疗后转阴 7 例(30.4%)。在乙肝病毒复制指标转阴方面, 两组无显著差异( $P$  均  $>0.05$ )

附表 两组治疗前后肝功能指标比较

|     | 观 察 组 |           | 对 照 组 |          |
|-----|-------|-----------|-------|----------|
|     | 疗前异常例 | 疗后复常例(%)  | 疗前异常例 | 疗后复常例(%) |
| SB  | 44    | 41(93.2)* | 22    | 14(63.6) |
| ALT | 60    | 56(93.3)* | 29    | 22(75.9) |

与对照组比较: \*  $P < 0.05$ , \*\*  $P < 0.01$

### 3 讨论

中医理论认为, 肝胆相表里, 肝病及胆, 胆病及肝。肝胆皆司胆汁排泄, 若肝失条达, 胆失疏泄, 胆汁不循常道, 外溢肌肤则发生黄疸。肝胆经脉皆布胁肋, 若肝胆气郁, 络脉不畅, 则见胸胁苦满、胁痛等症; 气滞日久, 瘀血阻络, 可见肝脾肿大。肝胆皆主情志活动, 而情志活动的异常又是肝炎病情反复波动发展的重要因素。

肝与胆的生理病理特点有许多共同之处, 同时肝炎的病机和主要症状的发生均与肝胆有

关, 所以肝病治胆, 肝胆并治。柴胡合剂中的药物药性偏于寒凉, 药味以苦辛酸为主, 归经多入肝胆。其中大黄泄肝利胆; 黄芩、虎杖清肝利胆; 柴胡、郁金疏肝利胆; 乌梅、白芍柔肝利胆; 丹参、赤芍凉血活血利胆; 枳壳、半夏消积化痰利胆。诸药相伍, 切中慢性肝炎之湿热、气滞、血瘀、痰凝及热毒伤阴之病机。本方能使肝气条达, 胆气疏泄, 湿热清泄, 瘀热消散。同时临床与实践研究也证实方中诸药多具有促进胆汁分泌、排泄和松弛奥狄氏括约肌的作用<sup>[1,2]</sup>, 以及抗病毒、诱生干扰素、调节免疫、改善微循环、抗肝纤维化、抗肝坏死、促进肝细胞再生等作用<sup>[3]</sup>。毒理试验结果和临床实践证明柴胡合剂安全无毒性。

### 4 参考文献

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## 经络导平治疗疑难病介绍

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近五年来, 我们运用 DM-3 型经穴导平治疗仪治疗各种疑难疾病, 取得较好疗效, 现介绍如下:

1 神经性耳聋: 23 例北京聋哑学生中, 年龄 8~17 岁, 病程 6~16 年。药物致聋 19 例, 先天性聋 1 例, 病因不明 3 例。治疗前后均经北京同仁医院电测听检查。主穴选在小肠经和三焦经上, 配穴选在三焦经和脾经上, 进行中等电量平衡刺激, 多数人治疗 40 次, 少数人只治疗 20 余次。23 例 46 只聋耳中 43 只听力有提高, 占 93.5%, 其中 38 只耳提高 10 分贝, 其中语言频率范围(250~2000 赫兹)提高最多, 占 91.3%。

2 中风偏瘫症: 患者系脑血栓和脑出血后遗症, 因其他疗法疗效不明显或无效前来诊治。导平治疗中, 采用多经多穴, 强压贯通, 重点分治, 于督、膀胱两经选主穴每天治疗 30~40 分钟, 每个疗程 15~20 次, 治疗 2~7

个疗程。治疗后, 病人患肢肌力明显增强, 活动较治疗前灵活, 自觉“上重下轻”的症状消失或减轻, 有语言障碍的患者说话也较治疗前清楚了。总有效率 85% 以上。

3 神经性血管头痛: 35 例患者中, 慢性 23 例, 急性 12 例。对全头痛者, 主穴选风池、百会、风府, 偏头痛选阿是穴及痛点附近腧穴, 配穴多选在上肢的心经、心包经或下肢的脾经、肝经上。每天治疗 20~30 分钟, 中等电量平衡刺激。急性头痛者 8 次以内治疗均获治愈, 慢性患者经 5~30 次治疗, 亦均获效。

经络导平是集针灸、按摩、理疗、气功于一机的新疗法, 导平仪器的设计上有高电压的直流脉冲电能和平衡调节设置, 能向人体经穴输入高而安全的电能和同时调节失去平衡的经气, 其治疗能量比针灸的能量大得多, 作用于人体较深较广, 平衡调节的能力强。因此, 导平疗法具有极强的镇痛消炎、活血化瘀、散结退肿、整复内脏、调节内分泌和提高免疫, 达到疏通经络, 平衡阴阳, 恢复人体正常活动功能的作用。

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## ABSTRACTS OF ORIGINAL ARTICLES

### **Comparative Study on 100 Cases of Chronic Hepatitis B Treated with Chinese Traditional and Western Drugs**

*Zhang Jing, Kuang Yunshan, Rong Yaqiu, et al.*

Fifty Cases of chronic B—hepatitis were treated with TCM based on differentiation of syndromes and compared with a control group of 50 cases treated with western remedies. Results showed that for the treating group, the rate of negative return of HBeAg was 64%, and the rate of positive return of HBe was 48%, while that of the control group were 20% and 10% respectively.

**Authors'Address:** Dahua Hospital, Shanghai, 200031

**Key Words:** Hepatitis B/treatment of integrated traditional Chinese with western medicine

(Original article on page 409)

### **Preliminary Exploration on Treating Gallbladder for Viral Hepatitis. Clinical Observation on 60 Cases.**

*Shen Qiming, Jia Wentao, Fan Jinhua, et al.*

The viewpoint of treating gallbladder and combined treatment of liver and gallbladder for liver disease is proposed and the therapeutic project of intravenous drip of Mixture of Radix Bupleuri plus Radix Salviae Miltiorrhizae is formulated. Sixty cases of chronic hepatitis of damp—heat of liver—gallbladder with blockage of collaterals by stagnant blood were thus treated. Results revealed the relief of jaundice, decrease of enzyme and inhibition of viral replication in treating group are all better than the western drug control group.

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**Key Words:** Hepatitis, viral, human/TCM therapy

(Original article on page 411)

### **Effect of Massotherapy on the In Vivo Free Radicals Metabolism in Prolapse of Intervertebral Disc and Cervical Spondylopathy.**

*Li Zongmin, Liu Jingwei, Wu Yinhua, et al.*

The endogenous free radical clearing agent SOD and blood CAT in the blood and urine of 2 groups of prolapse of intervertebral disc and cervical spondylopathy were all lower than that of the healthy control group, while the —SH reflecting the metabolic disturbance of free radical was higher. After massotherapy, blood SOD, CAT were increased, while LPO, —SH in urine

were all decreased, demonstrating that there is a distinct parallel relationship existing in the changes of these enzyme in blood and urine.

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**Key Words:** Displacement of intervertebral disc/massotherapy osteophytosis, vertebral/massotherapy free radicals

(Original article on page 416)

### **Observation on the Effect of Zhitong (analgesic) Solution on Dilatation of Uterus in Artificial Abortion.**

*Lian Fang, Liu Jingjun, Zhang Xiyun, et al.*

Two hundred cases of early pregnant women to receive artificial abortion were randomly divided into 4 groups, viz. analgesic solution, dicaine, normal saline, and blank control groups of which the action on dilatation of uterus and of mitigating the comprehensive reactions to artificial abortion were observed. Results revealed that the analgesic solution and dicaine groups had better effect on dilatation of uterus and ameliorating the reactions of artificial abortion, analgesic solution was especially good at mitigating the comprehensive reactions to artificial abortion than the dicaine group.

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**Key Words:** abortion, artificial cervix/drug action

(Original article on page 419)

### **Clinical Observation on Enuresis Treated by Yi'niaoting (Stopping Enuresis).**

*Yu Jingmao, Zhou Suzhen, Wang Guangli*

Prospective observation was made on 64 cases of infantile enuresis. Among them, 42 received Yi'niaoting capsule the other 22 cases were administered Niao Duo Ling tablet. Results: for the treating group the total effective rate was 80.95%, marked effective rate 61.95%, while that for the control group were 50.00% and 31.82% respectively. There was significant difference between the 2 groups ( $P < 0.01$ ).

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**Key Words:** Enuresis/TCM therapy @ Yi'niaoting

(Original article on page 421)