

白蒺藜有效组分治疗脑血管障碍(瘀血型)的临床研究

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摘要 本文应用白蒺藜有效组分(912-II片)治疗脑血管障碍病变40例,经过3个月治疗,观察到该药能有效改善临床症状,降低血粘度,调整血小板功能,改善微循环,增加脑血流量。与卡兰片相比,改善临床的作用大致相同,相关临床指标的改善优于卡兰片。

主题词 脑血管意外/中医药疗法 蒺藜/治疗作用 血瘀/中医药疗法

白蒺藜为平肝潜阳、活血化瘀的良药。近年来,我们与中国科学院上海药物研究所合作,从白蒺藜总皂甙中提取了3个有效组分,其中Succinic acid N-E-Feruloyl-B-tyra-mine制成912-II片,应用于临床,并与卡兰片(calan)对照。观察证明,912-II片能缓解脑血管障碍(脑梗塞、脑动脉硬化等)患者的临床症状,改善血液流变学等临床指标。

1 对象与方法

1.1 治疗对象:912-II片组40例,其中男性28例,女性12例,平均年龄56.6岁。40例中脑动脉硬化15例,脑梗塞25例。卡兰片组32例,男性19例,女性13例,平均年龄64.5岁。32例中脑梗塞19例,脑动脉硬化13例。

1.2 病例选择:经CT证实的脑梗塞,符合全国第二届神经精神病学术会议拟定标准的脑动脉硬化患者。发病1~6月,无严重并发症,属风中于络,有头痛、眩晕症,且符合瘀血标准。

1.3 治疗方法:912-II片组:每片22.5mg,每次2片,一日3次,12周为一疗程。卡兰片组:每片5mg,每次2片,一日3次,12周为一疗程。服药期间停用一切活血化瘀中草药、扩

血管药物、钙离子拮抗剂等,原有降压药不变。

1.4 观察项目:

共同症状:头晕头痛、胸闷、胸痛、四肢麻木、心悸。经常出现为5分,间断出现为3分,偶而出现为1分,无症状为0分。

特有症状:意识障碍、失语、欲望、震颤、焦虑、抑郁、感情失控、记忆力低下、日常生活障碍。

实验室指标:包括血液流变学、血小板聚集、血脂等检查。

1.5 疗效评定标准:显效:临床症状消失或明显改善,积分较前减少70~90%,实验室检查正常;有效:临床症状改善,积分减少35~69%,实验室检查接近正常;无效:临床症状、实验室检查无变化,积分减少小于35%;恶化:症状加重,实验室检查无变化或较前恶化。

2 结果

2.1 两组疗效观察比较:表1示,912-II片组总有效率为87.5%,卡兰片为84.2%,前者略高于后者,但无显著性差异($P>0.05$)。

表1 两组治疗结果比较

分 组	例数	显效 例(%)	有效 例(%)	无效 例(%)
912-II片	40	15(37.5)	20(50.0)	5(12.5)
卡兰片	32	13(40.8)	14(43.7)	5(15.8)

2.2 两组脑血管障碍主要症状积分改善比较:治疗前后记录两组症状积分,求出各组治疗后症状积分下降值。表2示,两组治疗后各项症状积分均有显著下降,虽然卡兰片组各项积分下降幅度大于912-II片组,但两组比较均无显著性差异(P 均 >0.05)。

2.3 两组治疗前后血液流变学比较:表3示,两组治疗后除血浆比粘度外,其余4项虽均有显著下降,但无显著性差异(P 均 >0.05)。

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表2 两组治疗后脑血管障碍主要症状
积分下降值比较

项 目	912-II 片 40 例	卡兰片 32 例
头痛头晕	-1.78±0.78 *	-1.92±0.83 *
胸闷	-1.13±0.82 *	-1.86±0.85 *
胸痛	-0.92±0.69 *	-1.57±0.82 *
四肢麻木	-1.29±0.55	-1.46±0.67 *
心悸	-0.67±0.69 *	-1.13±0.78 *

注:表中数据为均值±标准差,以下表同

* 治疗前后自身比较 $P<0.01$

表3 两组治疗后血液流变学指标下降值比较

项 目	卡兰片 32 例	912-II 片 40 例
全血比粘度(高切)	-1.29±0.28 *	-1.04±0.46 **
全血比粘度(低切)	-4.70±0.69 **	-5.21±0.81 **
血浆比粘度	-0.05±0.11	-0.05±0.03
纤维蛋白原(mg%)	-56.03±22.20 *	-59.34±24.62 **
红细胞压积(%)	-5.11±1.19 **	-6.44±1.39 **

治疗前后自身比较 * $P<0.05$, ** $P<0.01$

2.4 两组对血脂影响的比较:表4示,服912-II片后甘油三酯和高密度脂蛋白均有明显变化,但卡兰片三项血脂指标均无明显变化。

表4 两组治疗后血脂下降值(mmol/L)比较

项 目	912-II 片 40 例	卡兰片 32 例
胆 固 醇	-0.82±2.44	-0.81±2.01
甘油三酯	-0.82±1.05 *	-0.77±1.81
高密度脂蛋白	0.13±0.31 *	0.11±0.32

* 治疗前后比较 $P<0.05$

2.5 两组对血小板聚集功能影响的比较:两组治疗后测血小板聚集功能,两组治疗后血小板聚集1分钟、5分钟、最大值均有显著性下降,表明2种药物均能抑制血小板聚集,强度基本一致。

表5 两组治疗后血小板聚集率下降值比较

分 组	例 数	血 小 板 聚 集 率		
		1 分钟	5 分钟	最大值
912-II 片	32	20.17±19.68 *	25.83±26.03 *	24.86±25.80 *
卡兰片	20	17.39±16.79 *	27.90±20.96 *	26.72±19.76 *

* 治疗前后自身比较 $P<0.01$

3 讨论

白蒺藜系蒺藜科植物,具有平肝解郁、活血祛风、明目等作用^[1],不少中医文献把其列为

活血化瘀之品。述其具有主恶血,破症瘕积聚^[2],镇肝风,凉肝火,散湿破血等功效^[3],并善行善破,专入肺肝,宣肺之痰,疏肝之瘀^[4]。我们筛选了白蒺藜的有效组分,进行其临床研究,应用于具有瘀证的脑血管障碍患者,取得了较好的疗效。

白蒺藜有效组分912-II片,经药理研究证实,具有改善血液流变性,调节血小板功能,抗血栓形成,缓解微循环障碍等作用,且毒性低,作用持久。

卡兰片可较好地改善血液流变性,调节血小板功能。卡兰片与912-II片对照,在缓解症状方面大致相同,改善血脂方面,912-II片优于卡兰片。

中医的瘀证病理,同现代医学中的血液流变性异常、血小板功能失调、微循环障碍等有密切的关系。脑动脉硬化、脑梗塞等病员,由于年龄因素,血液有形成分改变,血小板功能异常等,导致血液的粘、浓、凝、聚出现异常。一般这类病员,都有头痛、胸闷、手足活动欠利、麻木、舌紫、脉细涩等瘀血见证。我们用912-II片治疗脑血管障碍,能取得较好的疗效,是有理论和临床实践基础的。

对于脑血管障碍患者,除了常规应用改善脑血供,营养脑细胞等品外,在中药领域选择确有成效的活血化瘀之品,不失为治疗该类疾病的新途径。

4 参考文献

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ABSTRACTS OF ORIGINAL ARTICLES

Clinical Investigation on Acupuncture Treatment of Pain Induced by Cancer of Stomach

Dang Wen

By observation of 48 cases of pain due to gastric carcinoma, it was shown that acupuncturing (including filiform needling and acupoint injection) with patient's mind concentrating at the tender site. The results were rather satisfactory. After a therapeutic course of one month, the long-term analgesic rate of both treating groups was similar to that of the western drug group (all around 81%), while the markedly effective rate was superior to the later group. Treatment in all groups upgraded the living qualities of the patients. Acupuncturing and acupoint injection inhibited the side and toxic effect of chemotherapy, improved the indexes of high viscosity in hemorheology, elevated the powered activity of Cu, Zn, SOD. Based on the above results, the author claims that, the analgesic effect of acupuncturing in gastric carcinoma has a bearing on the elevation of PLEK, improvement of cellular immunity and upgrading of living quality.

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Key Words: Carcinoma of stomach/acupuncture therapy pain, stubborn/acupuncture therapy

(Original article on page 277)

Clinical Study on Cerebral Vascular Disorders (Blood Stasis Type) Treated with Active Component of Fructus Tribuli

Zhou Duan, Gu Renyue, Chen Qiong, Zhu Tianming, et al.

Tablet 912 — II, active ingredients from Fructus Tribuli, was applied for treating 40 cases of cerebral vascular disorders. After a course of 3 months, it was found that the tablet markedly improved the clinical symptoms, lowered the blood viscosity, regulated platelet functions, ameliorated the microcirculation, increased the cerebral blood flow. When compared with Carlan tablet, the action of improving clinical manifestations was basically the same, while for that of correlated clinical indices, 912 — II is better than the latter tablet.

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Key Words: Cerebral vascular accident/TCM therapy

Fructus Tribuli/therapeutic action blood stasis/ TCM therapy

(Original article on page 289)

Impact of Xian Zhen Tablet on Erythrocytic SOD, Serum LPO, Blood Lipids and Glucose in Diabetes Mellitus of Kidney-deficiency—Blood—stasis Type II

Guo Saishan, Chen Yubi, Liang Xiaochun, et al.

68 such cases of diabetes were randomly divided into treating group (Xianzhen Tablet), control group (placebo). Indices on activity and contents of RBC — SOD, LPO, blood lipids, blood glucose, and clinical symptoms were examined. Results revealed that decreased activity of SOD, increased LPO content were more remarkable in the treating group, with significant difference ($P < 0.05$). At the same time, for the treating group, RBC — SOD content was increased ($P < 0.001$), serum LPO lowered ($P < 0.05$), HDL — C contents increased ($P < 0.05$), and blood glucose decreased ($P < 0.05$), and the symptoms of kidney deficiency were also markedly mitigated; while for those in the control group, these changes were not obvious.

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Key Word: Diabetes mellitus, non insulin — dependent type/blood kidney deficiency/blood

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Cerebral Infarction Treated with Chuan Zhi Powder: Report of 34 Cases

Li Wanpeng, Su Changhu, Li Mingsheng, et al

Thirty-four cases were treated, with 19 cases basically cured, 9 cases markedly improved, 3 cases improved, the total effective rate being 91.8%. For the 33 cases in the control group treated with Trioxethylrutin, the figures were 13 cases, 5 cases, 3 cases and 63.62% respectively. The efficacy of Chuan Zhi Powder is markedly superior to the control group ($P < 0.01$). In the treating group the maximal aggregation rate of platelet, blood viscosity, and RBC hematocrit were all markedly lowered, and the muscular strength after treatment also improved remarkably.

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Key Words: Cerebral infarction/TCM therapy

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