

中医药治疗精神分裂症 122 例临床观察

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摘要 本文通过对 122 例病程在 3 年以上精神分裂症(癲病)病人的临床观察,分析探讨了该病的病因、病机、症状、治法、方药的规律,取得了较好的疗效。在 122 例中,治愈 66 例,好转 55 例,无效 1 例。

主题词 精神分裂症/中医药疗法

精神分裂症中病程较长者大致可归属中医的癲病范畴,我院中医科对 122 例住院病人进行临床疗效观察,其结果满意,现报告如下:

1 一般资料

122 例患者均系符合 CCMD-2 诊断标准的精神分裂症住院病人,其病程均在 3 年以上。以入院前系统服用抗精神病药物,但效果不满意者为收治对象,其中女性 50 例,男性 72 例。21 岁以下 6 例,21~30 岁 36 例,31~40 岁 52 例,41~50 岁 17 例,51 岁以上 11 例,其中以 21~40 岁居多,占 72.13%。

2 治法与结果

2.1 辨证论治:根据临床证候特征,对 122 例进行临床观察,分为以下 8 个证型施治。

痰火内结,上扰脑神(24 例):兴奋语多,情绪不稳,时易激惹,时或焦虑,妄见妄闻,多疑善虑,甚则冲动、毁物,面红目赤,大便秘结,小便短赤,舌红苔黄厚腻,脉弦滑数。治拟豁痰泻火,清脑安神之法。药用:生石膏 120g,陈皮 15g,竹茹 15g,礞石 60g,黄芩 15g,栀子 10g,枳实 10g,酒制大黄 10g,佩兰 10g,炒枣仁 80g 等。

肝火内炽,灼及脑神(16 例):兴奋语多,急躁易怒,面红目赤,言语凌乱,妄见妄闻,时疑被害,甚则冲动,不寐好动,时时外走,渴喜冷饮,耳鸣如潮,口苦咽干,大便秘结,小便黄赤,舌红苔黄,脉弦数有力。治拟镇肝泻火,清脑宁神之法。药用:生石决明 60g,生龙齿 60g,龙胆草

15g,黄芩 15g,栀子 10g,枳壳 15g,车前子 10g,酒制大黄 10g 等。

肝郁痰结,上及脑神(17 例):情感淡漠,意志减退,妄见妄闻,生活懒散,喜静恶动,呆愣独处,胸闷不舒,渴不喜饮,舌质淡红,苔薄白,脉弦滑。治拟解郁化痰,育脑安神之法。药用:佛手 10g,香附 12g,郁金 20g,柴胡 6g,远志 10g,白芍 20g 等。

肝郁脾虚,上不荣脑(13 例):生活懒散,情感淡漠,呆愣少语,意志减退,妄见妄闻,多疑善虑,面色萎黄,肢体困乏,形容憔悴,少寐易惊,舌淡红,苔薄白,脉弦细。治拟舒肝健脾,养脑安神之法。药用:柴胡 6g,郁金 20g,香附 12g,白芍 30g,茯苓 60g,党参 15g,炒枣仁 80g,百合 30g,炒麦芽 30g,炒白术 12g,山萸肉 20g 等。

肝肾两虚,上不益脑(17 例):情感淡漠,意志减退,妄见妄闻,敏感多疑,思维迟缓,倦怠懒动,脑中发空,头晕目眩,记忆减退,咽干口渴,舌质红,苔薄白,脉弦细。治拟补益肝肾,荣脑养神之法。药用:当归 15g,白芍 40g,女贞子 40g,菟丝子 40g,枸杞子 15g,杜仲 30g,炒枣仁 60g,何首乌 30g,炒麦芽 30g 等。

脾肾两虚,上不益脑(23 例):倦怠懒动,思维简单,形容憔悴,肌肤消瘦,生活懒散,接触被动,呆愣少语,喜静少动,自语自笑,独处一隅,腰膝酸软,大便溏薄,舌质淡,苔薄白,脉沉细。治拟培土固肾,养脑安神之法。药用:党参 15g,茯苓 60g,炒白术 10g,女贞子 40g,菟丝子 60g,枸杞子 15g 等。

心脾两虚,上不荣脑(6 例):倦怠乏力,不思饮食,心悸而空,思维贫乏,意志减退,时而自笑,情感淡漠,呆愣独处,少寐多梦,舌淡红,苔薄白,脉细弱。治拟益心健脾,荣养脑神之法。药用:党参 15g,茯苓 20g,白术 10g,生黄芪 15g,当归 20g,甘草 6g,远志 10g,炒枣仁 60g,

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木香 6g, 山萸肉 15g, 大枣 15g。

气虚血瘀, 脑神失调(6例): 情感淡漠, 偶有易怒, 气短懒言, 时而妄闻, 体乏无力, 女性经黯衍期, 唇紫黯淡, 或舌有紫点, 脉沉细。治拟益气活血, 调养脑神之法。药用: 生黄芪 60g, 茯苓 60g, 党参 15g, 山药 30g, 枸杞子 20g, 红花 15g, 赤芍 30g, 怀牛膝 30g, 当归 15g, 百合 60g, 麦冬 30g 等。

以上各型患者均为每日服 1 剂, 早晚分服, 30~60 剂为一疗程。

2.2 治疗结果: 经阴性症状评定量表(SANS)评定, 治疗前为 50.70 ± 15.45 分, 治疗后为 30.95 ± 13.38 分, 治疗后较治疗前评分降低了 19.75 ± 9.37 分。症状全部消失, 自知力恢复, 评为痊愈 66 例(54.10%); 症状消失或减轻, 自

知力未恢复, 评为好转 55 例(45.08%); 症状无改善, 评为无效 1 例(0.82%)。

3 讨论

据本组病例观察, 在虚性证候中, 脾虚者 25 例, 其中偏执型 16 例(64%), 青春型 3 例(12%), 其他型 6 例(24%); 肾虚者 40 例中, 偏执型 14 例(35%), 青春型 1 例(2.5%), 其他型 25 例(62.5%)。故不难看出, 病程在 3 年以上的精神分裂症病人中, 脾虚者以偏执型居多, 肾虚者以其他型居多, 而青春型在虚证病例中则极为少见。在 25 例脾虚病人中, 痊愈 17 例(68%); 在 40 例肾虚病人中, 痊愈 14 例(35%)。故可看出, 脾虚肾虚虽同属虚证, 在临床治疗上, 补肾之虚较为困难。肾主一身之元气, 肾精亏虚则缠绵难愈, 预后不佳。

活血化瘀法治疗男性免疫性不育 14 例

袁茂云*

笔者近几年内, 采用辨证与辨病相结合的方法, 收治了 14 例血清抗精子抗体(ASb)阳性, 精液自凝的患者, 运用活血化瘀法治疗, 取得了较为理想的疗效, 特报导如下, 供同道参考。

1 临床资料

14 例患者均系门诊患者, 最大年龄为 34 岁, 最小为 25 岁, 平均年龄为 28.5 岁, 配偶同居, 妇检及有关检查均无异常, 婚后 1.5~3 年内不育者 12 例, 3 年以上者 2 例。精液检查, 有不同程度的自凝, 血清抗精子抗体均为阳性; 14 例患者中, 2 人否认手淫史, 12 人婚前都有程度不同的手淫史; 14 名患者中伴有前列腺炎者 11 例; 作血液流变学检查 14 例均高于正常值, 其中血小板粘附率升高明显。中医辨证属单纯瘀血型 7 例, 症见: 无明显自觉症状, 性生活正常, 仅见口唇紫暗, 舌暗红, 舌下静脉紫暗; 瘀血兼夹肾气(阳)虚者 4 例, 症见: 腰膝酸软, 早泄, 或举而不坚, 或性欲淡漠; 瘀血兼挟阴虚者 2 例, 症见: 形瘦, 五心烦热或阳事易举; 瘀血兼挟气虚者 1 例, 症见: 神倦乏力, 嗜卧, 不耐疲劳, 易汗。

2 治疗方法

方选桃红四物汤加味, 桃仁、当归、川芎、王不留行、路路通、仙茅各 10g, 赤白芍、牛膝、仙灵脾、熟地各 15g, 甲珠、红花各 6g。肾气(阳)虚者加用五子衍宗丸; 阴虚者去二仙, 加用生地 20g, 并加服二至丸, 知母 10g; 气虚者加用黄芪 50g, 黄精 15g。每日 1 剂, 30 天为 1 疗程, 1 疗程完毕复查精液及血清 ASb, 不效再服 1 疗程, 一般均服用 2 个疗程左右, 服药期间忌生冷油腻之品, 节房事。

3 疗效标准及结果

治疗 2 疗程后, 临床症状缓解, 抗精子抗体转阴性, 自凝消失, 配偶受孕, 评为显效者 4 例; 治疗后复查抗精子抗体转阴性, 精液检查自凝现象消失, 评为有效者 9 例, 服药 3 个疗程后复查血清、精液均无改变评为无效者 1 例。

4 体会

男性精子自凝, 血清抗精子抗体(ASb)阳性, 称为免疫性不育, 笔者根据所搜集资料发现多数患者在婚前有程度不同的手淫史, 以及现伴有前列腺炎病史, 从症候上发现有不同的瘀血表现, 尤以唇舌青紫、舌下静脉瘀滞为显著, 血液流变学异常, 整个疾病过程表现与瘀血密切相关, 故而治疗上从活血化瘀方面着手, 取得了较为理想的疗效。

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ABSTRACTS OF ORIGINAL ARTICLES

Effect of Dachengqi Decoction on Immune Function of Acute Cerebral Hemorrhage

Wang Junqing, Wu Zhiyao, Zhou Xiaoyan

The phagocytic function of macrophages and changing rules of T lymphocyte subgroups were examined in 43 cases of acute cerebral hemorrhage. Results showed that there were general decrease of macrophage phagocytosis and phagocytic index. Comparison between these results and that of the controlled group revealed significant difference ($P < 0.01$). CD4 and CD8 were also markedly increased ($P < 0.05$); CD4/CD8 markedly lowered ($P < 0.05$), suggesting that there is a decrease of immune function in such patients. When the patients were randomly divided into 2 groups and treated by 20% mannitol, furosemide, cerebratin in one group, and the other group treated by, in addition to the above remedies, Dachengqi Decoction 1 potion q. d. All indexes were re-examined 1 month later. Results showed that all indexes in the latter group were better than that the former. Among others, rate of phagocytosis, phagocytic indices, CD4/CD8 were markedly higher in the integrated medicine group CD8 markedly lowered ($P < 0.05$) in the integrated group, suggesting that Dachengqi Decoction yielded marked regulating action on immunity in acute cerebral hemorrhage cases.

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Key words: Cerebral hemorrhage/TCM therapy Cerebral hemorrhage/immunology Dachengqi Decoction/treatment

(Original article on page 28)

Comparative Observation on Effect of Recipes and Medicaments for Spleen-Strengthening and Damp-removing on Chronic Ulcerative Proctocolitis Allergy

Qi Jinsheng

100 cases of such patients were randomly divided into 2 groups, each 50 cases. The treating group was treated with spleen-strengthening and damp-removing recipes and medicaments. The clinical effective

rate being 86.0% cured rate being 60.0%, remarkably higher than that of the western medication group.

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Key words: Proctocolitis/TCM therapy recipe of Qi-invigo rating/therapeutic application recipe of damp-removing/therapeutic application

(Original article on page 32)

Clinical Observation on 122 Cases of Schizophrenia Treated by TCM

Feng Xiujie, Ma Liang

122 cases of schizophrenia (epileptic syndrome in TCM) with a history of illness over 3 years were observed. Explorations on etiology pathogenicity, symptoms, treatment, rules of recipe and medicaments were made and the therapeutic results were satisfactory 66 cases were cured, 55 ameliorated, only 1 case ineffective.

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Key words: Schizophrenia/TCM therapy

(Original article on page 34)

Thirteen Cases of Obstruction of Central Retinal Artery Treated Mainly by TCM

Peng Qinghua, Xie Like, Zeng Zhiming

13 cases were divided on the basis of syndrome differentiation, into 2 groups, type of Qi-stagnation Blood-stasis and type of Qi-deficient Blood-stasis, and were treated with Decoction of Stasis Expelling from Blood Chamber, and Buyang Huan Wu Decoction with modifications respectively, together with Xuexuantong i. v. and retro bulbar injection of Guihong injections, all with satisfactory results. The eyesights were improved, visual field expanded circulation time in retina shortened, thus saved the visual ability partially in part of the patients.

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Key words: Obstruction of retinal artery/TCM therapy

(Original article on page 38)