

临床报道

稳心冲剂治疗急性心肌梗塞后心律失常
的疗效观察高改地^{*} 周玉萍^{*}

摘要 经6家医院采用随机单盲法,共治疗急性心肌梗塞后心律失常患者89例,临床总有效率为91.30%,心电图总有效率为89.4%,Holter总有效率为66.7%。经统计学处理,稳心冲剂组疗效与心律平对照组无显著差异($P>0.05$)。

主题词 心肌梗塞/并发症 心律失常/中医药疗法

@ 稳心冲剂

稳心冲剂是广安门医院根据多年临床经验拟定的经验方,并已经审批成为新药。稳心冲剂治疗心肌梗塞后心律失常是“八·五”攻关课题,经6家医院采用随机单盲法进行观察,并与心律平进行对照,现总结如下:

1 一般资料

观察对象为半年内发生的急性心肌梗塞患者,伴有室性或房性或交界性早搏,所发生的房颤或各种心动过速,室性早搏每分钟3个以上,其它早搏每分钟5个以上。中医辨证为气阴两虚,心脉不畅者。共观察89例患者,稳心冲剂组69例,心律平组20例。稳心冲剂组年龄38~68岁,50岁以上占79.7%;病程1天~2.5个月,平均2个月。心律平组年龄39~72岁,50岁以上占80.0%;病程3天~2个月,平均1.5个月。

2 临床表现及检查情况

2.1 心肌梗塞部位:从两组心梗部位看,梗塞情况大概一致,部分患者合并两处以上心肌梗塞(表1)。

2.2 心律失常程度:表2示,两组心律失常均

以室性早搏、房性早搏、心房纤颤为主,稳心冲剂组少数病例为各类心动过速,两组情况基本一致。

表1 两组心肌梗塞部位比较

分组	例数	前 间壁	前壁	下壁	高位 侧壁	正 后壁	心内 膜下	右室
稳心冲剂	69	26	15	30	2	3	2	2
心律平	20	5	3	13	0	0	3	0

表2 两组心律失常情况比较

分 类	稳 心 冲 剂 组			心 律 平 组		
	重度	中度	轻度	重度	中度	轻度
室 性 早 搏	17	22	11	4	7	2
房 性 早 搏	9	6	2	1	3	1
心 房 纤 颤	2	9	1	1	1	
阵发室上速	2					
结性心动过速		1				

稳心冲剂组有28例做了24小时动态心电图(Holter)检查,室性早搏18例,重度13例,中度5例;房性早搏10例,重度7例,中度3例。

2.3 临床症候:临床症候主要观察心悸气短、疲乏无力、少寐多梦、头晕自汗、胸闷胸痛5项,两组症候程度基本一致。

3 治疗及观察方法

3.1 服药方法:采用随机单盲的方法,稳心剂组口服稳心冲剂,每次1袋(9g),温开水冲服,1日3次。心律平组口服心律平,每次1袋(含药150mg)一日3次,袋装,剂型和包装大致和稳心冲剂相同。均4周为一疗程。

3.2 症候分级及评分标准:以心悸不宁为例,其他4个症候的分级及评分标准相似,资料略。

* 中国中医研究院广安门医院,北京市宣武区北线阁(100053)

收稿日期:1995-09-26

无:症状消失为0分;轻:能胜任一般日常劳动,但稍重体力劳动即有心悸,为4分;中:一般日常劳动即有心悸,为5分;重:不能从事任何日常劳动,休息时亦出现心悸,为6分。

3.3 24小时动态心电图分级和评分标准:无:正常,为0分;轻:早搏1小时10~20个,为1分;中:早搏1小时21~30个,为2分;重:早搏1小时30个以上,为3分。

3.4 疗效评定标准:参照有关标准制定本组的疗效标准。

3.4.1 症候疗效标准:显效:症状消失或改善2级,积分下降>2分;有效:症状消失或改善1级,积分下降1分;无效:症状无改善或加重者。

3.4.2 心电图疗效标准:分早搏、阵发房颤和心动过速的疗效标准。

早搏疗效标准:显效:早搏消失或较原来减少75%以上,或改善2级,积分下降2分者;有效:早搏较原来减少50~75%,或改善1级,积分下降1分者;无效:早搏无变化或增多者。

阵发房颤疗效标准:显效:发作控制或基本被控制,改善2级,积分下降2分者;有效:发作明显减少,发作持续时间缩短,发作间歇时间延长,改善1级,积分下降1分者;无效:发作与疗前相同或加重者。

心动过速疗效标准:显效:完全停止发作;无效:无明显变化。

4 治疗结果

4.1 症候改善情况:表3示,心悸气短、疲乏无力、少寐多梦、头晕自汗、胸闷胸痛的总有效率,稳心冲剂组分别为91.3%、89.9%、85.1%、92.2%、89.9%,心律平组分别为70.0%、80.0%、83.3%、73.7%、65.0%。经统计学处理,两组症候比较尚无显著性差异(P 均>0.05)。治疗后稳心冲剂组舌象、脉象改善情况略优于心律平组(资料略)。

4.2 心电图改善情况:表4示,治疗后稳心冲剂组心律失常显效率为43.0%,有效率为46.3%,无效率为10.7%;心律平组分别为30.0%、35.0%、35.0%。稳心冲剂组疗效虽优于心律平组,但尚无显著性差异($P>0.05$)。

表3 两组症候疗效比较

症 候	稳 心 冲 剂 组			心 律 平 组		
	显效	有效	无效	显效	有效	无效
心悸气短	25	38	6	5	9	6
疲乏无力	23	39	7	6	10	4
少寐多梦	21	36	10	5	10	3
头晕自汗	25	34	5	3	11	5
胸闷胸痛	26	36	7	4	9	7

表4 两组各类心律失常改善情况比较

分 类	稳 心 冲 剂 组			心 律 平 组		
	显效	有效	无效	显效	有效	无效
室 性 早 搏	20	26	4	5	5	4
房 性 早 搏	7	9	1		2	2
心 房 纤 颤	5	3	4	1	1	
阵发室上速	2					
结性心动过速		1				

稳心冲剂组治疗前后有28例做了Holter检查,室性早搏18例,显效5例,有效7例,无效6例;房性早搏10例,显效3例,有效4例,无效3例。

5 讨论

快速性心律失常,属中医心悸之范畴,其病位在心,临床上以气阴两虚兼心脉瘀阻型为多见。稳心冲剂由党参、黄精、三七、甘松、琥珀等组成。方中党参、黄精性甘平,益气养阴、健脾化源;甘松性辛甘温,行气开郁醒脾,能协助益气活血;三七性甘温,能活血化痰;琥珀性甘平,能定惊安神,活血散瘀。全方合用,可使心气渐足,心阴得充,瘀祛络通,气血流畅,则心悸气短诸证自除。为益气养阴、宁心复脉、活血化痰、定悸安神之良剂,对快速心律失常疗效颇著。

经观察,稳心冲剂对症候、心电图及Holter、总疗效与心律平组无显著差异,舌象、脉象均有改善。治疗前后测定血液流变学指标,能显著降低全血粘度、纤维蛋白原和血浆粘度,表明稳心冲剂对心肌梗塞后心律失常出现的血液流变学异常有调整作用。

稳心冲剂组治疗69例急性心肌梗塞合并心律失常患者,全部病例均进行了血尿常规及肝肾功能检查,疗后复查未发现毒副作用。

ABSTRACTS OF ORIGINAL ARTICLES

Observation on Therapeutic Effect of Wenxin (Heart — stabilized) Granules on Arrhythmia After Acute Cardiac Infarction

Gao Gaidi, Zhou Yuping

Altogether 89 cases of cardiac arrhythmia from 6 hospitals after acute cardiac infarction were treated randomly by singleblind methods with a total effective rate of 91.30%. The total effective rate for EKG was 89.4%. Holter's total effective rate being 66.7%. There was no significant difference in the effective rate between Wenxin Granule group and the control group treated with Propafenone

Author's Address: Guanganmen Hospital, China Academy of TCM, Beijing 100059

Key Words: Cardiac infarction/ complication, cardiac arrhythmia/TCM therapy @ Wenxin Heart — stabilized granules

(Original article on page 348)

Analysis on EEG in 266 Cases of Epilepsy Treated by Jianning (Epilepsy—tranquilized) Tablet

Zhang Hengliu, Jia Xiaolin

92 cases of epilepsy were treated by self—formulated Jianning Tablet with a total effective rate of 88.4%, which was similar to that of the integrated medicine group. However, there was significant difference ($P < 0.05$) as compared with the western medicine group. There was also a positive correlation between clinical therapeutic effect and the effect of EEG.

Authors' Address: Affiliated Hospital, Guangzhou University of TCM, Guangzhou

Key Words: Epilepsy/TCM therapy electroencephalography @ Jianning Tablet

(Original article on page 353)

Study on Rheumatoid Arthritis of Wind — cold — dampness Type and Wind — heat — dampness Type Bi — Syndrome

Xiao Changhong, Gu Weiwang, Li Liuyang, et al

The experiment was conducted in rats with CIA on which wind — cold — dampness, wind — heat — dampness stimulation and topical rubbing of SEB were given. Results showed that, wind — cold — dampness or wind — heat — dampness alone didn't increase the incidence of CIA and integration of inflammation, nor

change the surface temperature of the affected joint. However, wind — heat — dampness markedly increased the content of ^{99m}Tc of affected joint in female rats. When SEC was rubbed on the surface, wind — cold — dampness markedly increases the integration of inflammation in male rats (as compared with pure SEB), and markedly increased the DTH reaction of male rats (as compared with wind — heat — dampness). Whereas wind — heat — dampness markedly increased the content of ^{99m}Tc of affected joints in female rats (as compared with wind — cold — dampness) when topically applied SEB, wind — heat — dampness markedly increased the surface temperature of affected joint in female rats, while wind — heat — dampness and wind — cold — dampness markedly lowered that in the male rats.

Authors' Address: Section of Internal — medicine, Department of TCM, First Military Medical University, Guangzhou 510282

Key Words: Arthritis, rheumatoid/pathophysiology Bi — syndrome/pathophysiology disease mode/animal

(Original article on page 361)

Regulation Action of Needling on the Vegetative Nervous Function in Hyperthyroidism Patients

He Jinsen, Jin Shubai, Chen Hanping, et al

By observing the vegetative nervous balance index excretion amount of CA in Urine, contents of T_4 , T_3 in serum contents of cAMP, cGMP in plasma, before and after needling in hyperthyroidism patients, it was shown that when treatment was given by acupuncture based on Zheng differentiation, all indices can be markedly improved. The decrease of serum thyroxin content was especially apparent, demonstrating that needling treatment was potential for the therapy of hyperthyroidism, which was closely related to the adjusting action of acupuncture on vegetative nervous function, rendering it in a relative stable condition.

Authors' Address: Department of Acupuncture-moxibustion, Shanghai University of TCM, Shanghai 200032

Key Words: Hyperthyroidism/acupuncture — moxibustion therapy nervous system/acupuncture — moxibustion effect

(Original article on page 366)