

痛闭安临床疗效观察

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疗 效

内容提要 本文报告用痛闭安外敷治疗妇产科疾病和其他病症 443 例, 治愈率 43.6%, 显效率 36.1%, 总有效率 96.0%。且本药使用方便、安全。

疗效结果见附表。

附表 痛闭安对各种病症疗效观察

病 名	例数	用药量(袋)	治愈(%)	显效(%)	好转(%)	无效(%)
产后尿闭	55	1~2	45 (81.8)	4 (7.3)	1 (18.0)	5 (9.1)
外阴水肿及侧切伤口炎症	18	1~2	17 (94.4)	—	—	1 (5.6)
剖腹产术后腹胀、排气不畅	35	1~2	—	28 (80.0)	6 (17.1)	1 (2.9)
人流术后腹痛	176	1	111 (63.1)	63 (35.8)	—	2 (1.1)
痛经	12	5	1 (8.3)	6 (50.0)	5 (41.7)	—
盆腔炎	18	5	—	10 (55.6)	8 (44.4)	—
更年期各部位凉麻胀痛	22	5	—	9 (40.9)	9 (40.9)	4 (18.2)
成人腹泻	15	1	5 (33.3)	—	10 (66.7)	—
婴儿腹泻	14	1	13 (92.9)	—	—	1 (7.1)
腰部、季肋部及关节风湿痛	78	3~5	—	41 (52.6)	33 (42.3)	4 (5.1)
总 计	443	1~5	193 (43.6)	160 (36.1)	72 (16.3)	18 (4.0)

体 会

痛闭安是把中医传统的“热熨法”的长处和化学自发产热物质的优点结合起来研制成功的一种外敷新药、新剂型。据药典记载和临床验证, 痛闭安药物中的主要成份金盆草, 具有祛风散寒、行水开窍的显著疗效; 铜芸解热止痛、祛风胜湿效果良好; 祁艾叶理气血、逐寒湿, 主治心腹冷痛, 产后腹痛, 月经不调, 崩漏等, 是妇产科常用的有效药物; 蛤蟆草, 祛风利湿, 破瘀通经, 并有止血作用。

痛闭安是在我院临床沿用二十多年治疗盆腔炎的有效方剂燻药的基础上, 提取有温经通络、祛湿止痛显著疗效的中药铜芸(防风)(*Radix Ledebouriellae*)、金盆草(细辛)(*Asarum sieboldii* miq)、祁艾叶(*Folium Artemisiae argyi*)、蛤蟆草(委陵菜)(*Potentilla chinensis* Ser)等, 加入化学致热物质, 改革剂型, 研制成功的一种温通镇痛的外敷新药。1983年2月~5月, 我们应用痛闭安治疗妇产科疾病和其他病症共 443 例, 疗效显著。

资料与方法

一、病例选择: 本组病例大多数系我院产科、妇科、计划生育、婴儿室住院或门诊患者, 部分为本院职工或家属。这些患者多是经过其它方法治疗无明显效果, 而试用痛闭安者。

二、治疗方法: 《痛闭安》是用塑料袋密闭包装的, 每塑料袋内装两小袋《痛闭安》药物。其药物是装在一端是塑料、一端是带孔牛皮纸的小袋中。使用时, 剪开塑料袋外包装, 将小袋药物由塑料端倾倒在牛皮纸端, 使之通过牛皮纸上小孔接触空气, 经抖动 3~5 分钟, 药物开始发热, 然后敷于患处, 即可起到治疗作用。使用 1~5 袋为一疗程。

三、疗效标准: 治愈: 症状和体征消失者; 显效: 症状和体征明显减轻者; 好转: 症状好转者; 无效: 症状无好转者。

这些中药性味均属辛温，又在化学致热物质的热透作用协同下，其有效成份较充分地通透到人体组织中去，从而发挥治疗作用。据临床观察，其祛湿止痛、温经通络疗效可靠。

我们体会，痛闭安对产后尿闭、痛经、人工流产术后腹痛、外阴水肿及侧切伤口炎症疗效尤著，对剖腹产术后腹胀、排气不畅、盆腔炎、少腹冷痛、宫寒不孕等疗效良好；对由于虚寒或血瘀而引起的其它病症，如更年期身体各部位凉麻胀痛，婴幼儿及成年人腹泻，外伤后局部肿痛等亦有较好的疗效。

产后尿闭是产科常见病症，多因滞产、膀胱肌肉麻痹所致，有的患者由于反复多次安放导尿管造成泌尿系感染，影响产褥期的恢复。应用痛闭安治疗产后尿闭，收到显著疗效，据临床观察，外敷后排尿时间最短为15分钟，最长为2小时。我们从预防入手，对于产后和剖

腹产术后按期拔除导尿管以后5小时仍不能自解小便者，常规使用一袋痛闭安外敷下腹部膀胱所在部位，一般于产后6小时内（即应用痛闭安1小时左右）即可达到自行排尿的效果。

人工流产术后出现腹痛者下腹部外敷一袋痛闭安，5分钟后，患者即觉下腹部有舒服的热感，随之腹痛缓解，其它不适亦消失，没有因敷用痛闭安而造成阴道出血增多者，得到医务人员和患者的好评。

痛闭安不但疗效好，而且使用方便、安全。经临床观察，应用痛闭安外敷时，5分钟即可发热，半小时后热度达到 45°C 左右，3至4小时后热度达到高峰约 60°C 至 80°C 左右，持续发热10至15小时，无高热，无烫伤皮肤之虑，但对婴幼儿患者应隔布外敷为宜。据观察，无任何副作用出现。

中西医结合治疗慢性结肠炎 150 例

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我们从1979年10月~1982年10月，采用中药为主西药为辅治疗慢性结肠炎150例，报告如下

治疗方法 一、基本方：党参、白术、山药、莲子、茯苓、车前子、马齿苋、炒谷麦芽。湿热者选加薏米、石莲子、扁豆花、败酱草、银花、黄芩或黄连、秦皮、白头翁；肝脾不和者选加白芍、防风、木瓜、青陈皮、川楝子；脾胃虚弱者选加黄芪、扁豆、砂仁、姜炭、肉豆蔻；脾肾两虚者选加补骨脂、炒益智仁、九香虫、芡实、金樱子；肾阳虚弱者选加仙灵脾、补骨脂、炒益智仁、肉桂、熟附片、五味子或合四神丸等。

二、辅助治疗：除根据情况酌加西药抗菌素或输液输血外，尚采用：1.耳针：取穴大肠、小肠、交感、脾。每日一次，左右交替，两周为一疗程。2.磁疗：常用于脾胃虚弱型、脾肾两虚型，一日一次，两周为一疗程，可连续两个疗程。3.贴脐疗法：对脾肾两虚型、肾阳虚型可用肉桂、丁香等量研粉拌匀后，取适量用胶布贴于脐部，2~3日更换一次，10天为

一疗程。4.中药灌肠：对溃疡型结肠炎加用中药灌肠：苦参、黄柏、黄连、黄芩、白头翁、白芍煎水100~150ml加入锡类散两支，每晚灌肠一次，半月为一疗程，可用两个疗程。

治疗结果 本组病史最短5个月最长30年，经治疗后痊愈（临床症状消失，大便成形，无粘液及脓血，食欲增加，体质恢复，大便经化验室镜检、培养均为阴性）120例，占80%；好转（临床症状消失，食欲增加，大便次数减少，但时干时稀不稳定，大便化验检查：有时可见食物残渣或脂肪球少许）30例，占20%。疗程最短20多天，最长3个月，其中随访痊愈53例三年未复发。

体会 本病中西医结合治疗能互相取长补短，收效更快。中医学从整体辨证论治，调整脏腑功能，以治其本。如投方有效，主张守方较长时间，以利巩固。治疗中要注意对生冷、质硬、油腻等食物的控制。出院后可一面坚持工作，一面坚持服药，半年后行乙状结肠镜检查，以观远期疗效。

Abstracts of Original Articles

A Preliminary Observation of Correlation Between "The Eight Principle Syndromes and the Function of Vegetative Nervous System

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The aim of this study was to evaluate the correlation between "the eight principle syndromes" and the function of vegetative nervous system. In the initial stage, the following three tests: temperature-recovery test, posture test, and ice-water test were employed. Recently the Wenger's method (analysis of balance-factors of the vegetative nervous system) was used. The data were obtained from 108 women suffering from functional uterine bleeding and amenorrhea.

The results of the three functional tests suggested that Shi Re (excess-heat syndrome) refers predominantly to hyperfunction of sympathetic nervous system, Xu Han (deficiency-cold syndrome) to sympathetic exhaustion, and Xu Re (deficiency-heat syndrome) seems to be a transition from sympathetic hyperfunction to exhaustion. The results of Wenger's method further proved the afore-mentioned conclusion.

(Original article on page 198)

Light-Microscopic and Electron-Microscopic Observation on Placenta and Viscera of Fetus in Mid-Stage Abortion Induced by Radix Euphorbiae Kansui

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A light-microscopic and electron-microscopic observation on 13 placentas and 3 fetus obtained from mid-stage abortion induced by Radix Euphorbiae Kansui is reported. The decidua was congested, hemorrhagic, degenerated and necrotic, and infiltrated by inflammatory cells. The villi were also congested, hemorrhagic and edematous, with aggregation of platelets. Congestion and hemorrhage were observed in all the viscera of the fetus, and microthrombi in the myocardium. It was assumed that Radix Euphorbiae Kansui might have some damaging effects on the fetal circulatory system.

(Original article on page 201)

Clinical Observation on Therapeutic Effect of Tong Bi An

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Tong Bi An (痛闭安) is a new thermogenetic and analgesic preparation for external application which is prepared on the basis of Teng Yao (炆药), an effective prescription having been clinically used for pelvic infection in our hospital for more than 20 years. It contains effective medicinal herbs such as Radix Ledebouriellae, *Asarum sieboldii* Miq, *Folium Artemisiae argyi*, *Potentilla chinensis* Ser and some chemical thermogenic materials.

The article reports the clinical observation on its therapeutic effect in the treatment of 433 cases of obstetrical and gynecological and other diseases from February to May 1983. The total rate of effectiveness is 96%, among which cured 43.6% (193 cases), effective 36.1% (160 cases), improved 16.3% (72 cases) and non-effective 4% (18 cases). An introduction of typical cases is appended.

The discussion indicates: Tong Bi An's therapeutic effect is remarkable for postpartum anuria and postevacuation or postcurettage abdominalgia and menorrhagia, and also for vulval edema, inflammation of episiotomic wound, abdominal inflation, obstacle gas exhaustion, pelvic infection, lower abdominal cryalgia, abortion and crymouterine infertility etc. It can be widely used in clinical obstetrics and gynecology and family planning. And it can cope with other diseases caused by cold deficiency and blood extravasation such as climacterium cold, numbness, expansion and pain or arthralgia diarrhea of infant and adult and swelling and pain due to trauma.

With its effect of warming channel and relieving pain or expelling dampness and promoting circulation, the medicine is applicable to a wide scope of disorders and it is convenient for use, causing fast and proper thermogenesis and no side-effect.

(Original article on page 203)