

活血化瘀法治疗 34 例周围血管病临床分析

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内容提要 按辨证论治的原则,对 34 例周围血管病例,分别采用益气活血法、清热解毒活血法及理气活血法治疗。结果表明,本法对深部静脉血栓形成,血栓性浅静脉炎,多发性大动脉炎及闭塞性动脉硬化症都有一定疗效。并介绍了活血化瘀药的主要药理作用及其配伍方法。

我们对 1971 年 11 月至 1983 年 9 月住院观察的 34 例周围血管病患者使用活血化瘀法治疗,取得一定疗效。报告于下。

临 床 资 料

本组周围血管病包括深部静脉血栓形成、血栓性浅静脉炎、多发性大动脉炎及闭塞性动脉硬化症四种,都具备了 1982 年制定的瘀血证诊断条件⁽¹⁾。

一、深部静脉血栓形成 16 例。均发生在股静脉。女 10 例,男 6 例。5 例发生于产后感染,1 例由外伤引起,1 例在本病发现不久发现患有结肠癌,1 例与网织细胞肉瘤白血病同时发现,8 例原因不明。

二、血栓性浅静脉炎 6 例。皆发生在小腿以下部位。男 3 例,女 3 例。外伤引起者 3 例,1 例与静脉曲张有关,另 2 例原因不明。

三、多发性大动脉炎 10 例。男 3 例,女 7 例,最长者 46 岁,最幼者 19 岁。头臂动脉型 5 例,混合型 5 例。

四、闭塞性动脉硬化症 2 例。皆为男性。1 例 56 岁,1 例 65 岁。都有动脉硬化的临床表现,缺乏迁徙性血栓性浅静脉炎的病史。

治 疗 方 法

一、益气活血法。用于多发性大动脉炎(10 例,平均疗程 85 天),闭塞性动脉硬化症(1 例,用药 101 天)和部分伴有气虚的深部静脉血栓形成患者(4 例,平均治疗 37.4 天)。方用补阳还五汤加减:黄芪 60g 党参 30g 当归、

川芎、赤芍、鸡血藤各 15g 桃仁、红花各 10g 牛膝、桂枝各 12g。肾阳亏损者酌加制附片 9g 肉苁蓉、仙灵脾各 12g。

二、清热解毒活血法。用于血栓性浅静脉炎(6 例,平均治疗 54.3 天);1 例有趾端坏死的闭塞性动脉硬化症,疗程 30 天;4 例深部静脉血栓形成患者(3 例伴产后感染,1 例合并网织细胞肉瘤白血病),平均治疗 67 天。方用四妙勇安汤加味:银花、玄参、连翘各 30g 当归、丹参、赤芍、红藤各 15g 甘草、茜草根各 10g。热盛加蒲公英 30g 生大黄 12g 丹皮、黄柏各 15g;湿重加苡仁、萆薢各 15g。血栓性浅静脉炎外用红花、大黄、黄柏各 10g 生地、芒硝、甘草各 15g 湿热罨包。

三、理气活血法。用于深部静脉血栓形成(8 例,平均治疗 87 天)。方用血府逐瘀汤加减:桃仁、红花、柴胡、牛膝、炮山甲、刘寄奴各 10g 赤芍、当归、川芎、枳壳各 15g 佛手、桂枝各 12g。可合用通脉灵 17 号方⁽²⁾(丹参 20g 郁金、鸡血藤各 15g)。阳虚寒盛者酌加制附片、干姜各 9g 细辛 3g;静脉回流功能障碍、下肢水肿者加木瓜 25g 丝瓜络 10g 防己 15g 茯苓皮 30g。恢复过程中,可加服大黄蟅虫丸,每日二次,每次 1 丸。

疗 效

一、深部静脉血栓形成。除 1 例因肺栓塞猝死(病理解剖证实),1 例因年迈(79 岁)自动出院外(合并网织细胞肉瘤白血病)。其余 14 例的静脉功能都有不同程度的好转。

二、血栓性浅静脉炎。所治 6 例的急性炎症表现(红、肿、疼痛现象及压痛)消失。3 例留有可触及的线状条索物。

三、多发性大动脉炎。经治后,缺血症状皆有不同程度的好转,10 例中有 5 例无脉症消失,但动脉搏动沉细而弱。

四、闭塞性动脉硬化症。其中 1 例合并的趾端坏死愈合。两侧的缺血症状皆好转,患肢疼痛消失,但患肢触温仍较正常者偏低。

讨 论

根据本组四种周围血管病临床表现,应当属于中医的“血痹”、“脉痹”、“眩暈”、“虚损”等范围。血瘀证为其主要病理特征。有的为实证,有的属本虚标实证。

治疗方面,本组病例恒以活血化瘀为主。结合病机变化,通过辨证酌情选用益气活血法,清热解毒活血法,理气活血法等治疗。尚可随证选用补血、养阴、温肾之剂或酌用通络利湿之品。王清任称:“气虚血必瘀”^{〔2〕}。对那些病程较长、气虚明显的病人应当益气,并且益气药用量要大;对阳虚、肢体冷痛、脉涩或无脉者还应当辅以通阳,如每次黄芪 60g、桂枝 30g,确能起到益气活血、通阳复脉的效果,提

高疗效,并无伤阴动血之弊。相反,对一些苦寒泻下药,不宜重剂,更不宜常服,以防伤正而影响疗效。

活血化瘀与扶正、理气等药合理配伍时,常能起到良好的协同作用,这种作用远非单用活血药所能及。这充分体现了中医辨证论治的科学性和重要性。

据文献报告,活血化瘀药有改善微循环、活化纤溶酶,抑制胶原合成^{〔4~6〕}等作用。可能这就是本组病例用活血化瘀法得以获效的药理学基础。

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丹参素对微循环障碍家兔微血管和血浆乳酸含量的影响(摘要)

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用静脉注射 10% 高分子右旋糖酐方法复制成微循环障碍的家兔模型。观察中药丹参的水溶性成分丹参素对其微血管及血浆乳酸含量的影响,结果表明: 1. 静脉注射不同剂量的丹参注射液及丹参素注射液(不含吐温),均能增加微循环障碍家兔眼球结膜和肠系膜微血管的交点计数(生理盐水对照组则无此作用)。此变化有利于增加局部组织微循环的血液灌流,并有利于

侧枝循环的建立。2 用药半小时后丹参注射液及丹参素注射液组家兔血浆乳酸含量下降的例次均比盐水对照组明显增多; 用药二小时后各组间无显著差异。血浆乳酸含量的变化与微循环障碍程度有关,也是反映细胞代谢障碍的指标之一。此结果进一步表明,丹参及丹参素具有改善微循环障碍,从而改善细胞缺血缺氧所致的代谢障碍的作用。

Clinical Analysis of 34 Cases of Peripheral Vascular Disease Treated with Activating Blood Circulation and Removing Stasis Therapy

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Thirty-four cases of peripheral vascular disease, including primary arteritis of the aorta and main branches, arteriosclerosis obliterans, superficial thrombophlebitis and deep vein thrombosis, were treated with "activating blood circulation and removing stasis" therapy. According to the principle of "Planning Treatment According to Diagnosis", method of activating the blood by replenishing Qi (vital energy) or method of activating the blood by removing evil heat and toxic agents or method of activating the blood by regulating Qi was employed clinically as desired. The therapeutic effect was satisfactory.

(Original article on page 269)

TCM-WM Treatment of 42 Cases of Aplastic Anemia

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This paper reports 42 cases of aplastic anemia treated predominantly with TCM in the past 2 years. The patients were divided into three groups according to differential diagnosis of TCM: deficiency of kidney Yang; deficiency of kidney Yin and deficiency of both kidney Yin and Yang. The basic prescription of TCM was Huo Xue Yi Sui Tang (活血益髓汤, Decoction to Activate Blood and Replenish Sap), administered in combination with western medicine, such as testosterone propionate, stanozolol and blood transfusion. The results showed that total short-term effective rate was 85.8%, higher than that of cases treated with TCM or WM alone.

(Original article on page 277)

Effects of *Tripterygium Wilfordii* on Rheumatoid Arthritis — An Analysis of 165 Cases

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The therapeutic effects of *Tripterygium wilfordii* Hook (TW) administered orally on 165 patients (45 male, 120 female) with rheumatoid arthritis are described. The average duration of treatment was 4.6 months. Symptoms and signs of arthritis were obvious prior to the treatment but were relieved satisfactorily after treatment. Of the 165 patients treated, 16 were clinically cured (10.9%), 95 showed marked improvement (57.6%) and 46 (27.9%) had some improvement too. Total efficacy of the drug was 94.4%. These results showed that TW may well relieve the morning stiffness, shorten the time for walking 20M, and increase the grip strength. In most cases, erythrocyte sedimentation rate declined evidently, the hemoglobin content rose, rheumatoid factors became negative, serum IgG, IgM and c-globulin levels returned to normal. The main curative effects of TW on rheumatoid arthritis lie in anti-inflammation and immunosuppression, the former helps to lower the permeability of capillaries and the latter is realized by inhibition of immune organs such as thymus etc. TW has similar immunosuppressive effect (action) as that of steroid, but does not influence the normal secretion as that of steroid in the body.

(Original article on page 280)