

蜂胶治疗口腔粘膜白斑 45 例

解放军总医院 口腔科 庞劲凡 洪 民 周继林 曹启华 张 申 李金兰
中医科 陈树森

内容提要 用蜂胶局部治疗口腔白斑45例，痊愈28例，显著疗效14例，好转3例，治疗过程无明显副作用，认为蜂胶是治疗口腔白斑安全、有效的药物。

口腔粘膜白斑是口腔粘膜中较常见的疾病，多见于中年以上男性患者。其表现为口腔粘膜上出现擦不掉的白色角化斑块，表面略粗糙，可有沟纹，或呈疣状突起和大小不等的白色角化颗粒，亦可在白色斑块的基础上伴有溃疡。少数白斑病例可以发生恶变，癌变率约为3~6%^①，因此，积极的防治口腔白斑，及早发现，及时治疗，并探讨各种有效的治疗方法，对预防口腔白斑癌变有重要意义。目前对口腔白斑治疗有效的药物不多，并有一定的副作用，而较有效的中药治疗，文献中尚未见报道。为探索安全有效的中药疗法，1980年以来，我们用蜂胶局部治疗口腔白斑，取得较好的疗效，现将初步经验介绍如下。

临 床 资 料

一、一般资料：本组45例，男44例，女1例。其中31~40岁5例，41~50岁15例，51~60岁18例，61岁以上者7例。发病部位（其中10例在2个以上部位有病变）：颊部31例，唇部13例，舌部8例，硬腭区2例，软腭左侧1例。白斑类型：平滑型（淡白色或不均匀白色斑块，表面平滑，柔软）24例，沟纹型（白色斑块，高出粘膜面，表面略粗糙或有沟纹）16例，疣状型（乳白色厚而高起，表面不平，呈刺状或绒毛状突起，粗糙，稍硬）5例。

二、治疗方法：蜂胶是蜜蜂从植物芽苞和树皮处采集的树脂，为蜜蜂用以堵塞和光滑蜂巢的粘性物质，呈固体状黄褐色，低温下变硬。为了便于口腔内给药，我们将蜂胶提纯后

制成50%蜂胶复合药膜。用药时将药膜剪成相等于白斑的大小，含药面（即蜂胶面）贴在病变粘膜上，厚的白斑每日2~3次，薄的白斑每日1~2次，50%蜂胶复合药膜在口腔中一般能维持半小时至1小时，在腭部能维持1~2小时。治疗2周为1个疗程，如白斑未消退，可继续应用，一般在用药2个疗程后可酌情停用数天至1周再继续用药。

三、疗效标准：痊愈：白色病变完全消失，粘膜正常，症状消除。显著疗效：病变明显变薄，色泽变浅，表面变平，变软，范围缩小2/3以上，症状不明显。好转：病变色泽转淡，变薄，范围缩小不足2/3，症状减轻。无效：病变无变化。

四、治疗结果：痊愈28例，占全组病例62.2%；显著疗效14例，占31.1%；好转3例，占6.7%；全部有效。3种类型白斑痊愈的例数是：平滑型19例（79.2%），沟纹型7例（43.8%），疣状型2例（40.0%），以平滑型疗效最佳，痊愈病例的治疗时间最短为1疗程，最长为4疗程。

讨 论

蜂胶有消炎、止痛和较好的软化角化组织作用，外用能治疗多种皮肤病，如鸡眼、胼胝、寻常疣、皮肤真菌病、扁平疣、皮肤结核等^②。口腔白斑为口腔粘膜的角化性损害，我们用蜂胶治疗亦收到较好的效果。本组45例用50%蜂胶复合药膜治疗获痊愈及显著疗效者42例，达93.3%，而且对厚的白斑亦有较好的疗

效。例如患者张×, 59岁, 男。腭部白斑8年, 曾用冷冻、电灼、部分切除、局部涂5-FU及0.1%维甲酸等多种治疗无明显效果。检查见整个硬腭区有广泛绒面状厚而粗糙的白斑, 突起于粘膜面。患者住院治疗, 用50%蜂胶复合药膜贴敷腭部, 每日2~3次, 每次维持2小时以上, 治疗2个疗程后, 腭部白斑开始呈片状脱落, 范围缩小变薄, 继续治疗1疗程, 共6周后, 除腭穹隆部留有淡白色光滑的小斑片外, 原来范围广泛而厚的白斑基本脱落, 治疗过程中无任何不适感。停药3个月后随诊有轻度复发, 但再贴药可很快消退。

蜂胶为蜜蜂产品, 具有安全无毒性的优点, 动物试验证明无毒性反应, 亦无致癌特性⁽³⁾。蜂胶制剂还可用于内服治疗银屑病、胃及十二指肠溃疡、慢性肠炎及高脂蛋白血症, 患者连服3个月无不良反应⁽³⁾。因此, 蜂胶局部应用治疗口腔粘膜白斑是安全的, 蜂胶复合药膜中各种成分均为无毒的生物制品, 即使在贴药过程中吞入溶解的蜂胶或药膜基质对健康也无不良影响。

蜂胶有较好的软化角化组织使其脱落的作用, 但其作用较缓慢。我们曾用蜂胶膏局部涂布治疗口腔白斑, 因其在口腔粘膜上很快流失, 作用于病损区时间短, 影响疗效。为使药物在口腔粘膜病损区维持较长的时间, 我们选用复合药膜的剂型, 使之能粘贴在粘膜上, 并减慢蜂胶的释放, 大大的延长了蜂胶的作用时间,

从而提高了疗效。

50%蜂胶复合药膜外用局部治疗白斑, 大多数患者无任何不适, 少数患者在治疗后期或白斑脱落后局部有充血和烧灼感, 1例软腭区白斑脱落后形成浅溃疡, 其原因可能是治疗后期角化组织软化变薄, 此时贴药时间过长或次数过多则可能发生局部充血糜烂。因此, 在治疗后期, 当白斑已经很薄时, 贴药次数要减少, 时间要缩短。如局部出现充血、烧灼感, 可暂停贴药数天。如白斑消退后形成浅溃疡, 可局部喷撒养阴生肌散或涂布类固醇软膏, 数天内即愈合。

文献报道养蜂人中约万分之五有接触性皮炎⁽³⁾。我们曾有1例对多种药物过敏的颊部白斑患者, 用50%蜂胶复合药膜贴敷两小时后, 病变区及周围粘膜水肿充血, 停止贴药后24小时充血水肿扩展至腭部及舌部, 经服扑尔敏3天充血水肿消退。其后对患者进行皮肤贴敷试验, 24小时后局部出现红斑, 48小时后出现水泡, 对照侧阴性, 证明患者对蜂胶有接触性过敏反应, 故对过敏体质患者, 应用前宜先做皮肤贴敷试验。

参 考 文 献

1. Norman K. Wood, et al. Differential diagnosis of oral lesions, second edition. The CV Mosby Company, ST Louis, Toronto, London, 1980:67.
2. 房 柱. 蜂胶的医疗效用. 中国养蜂1979; 3:12.
3. 房柱编著. 蜂胶的研究与医疗应用. 中国养蜂学会 连云港市科技情报研究所, 1980:54—84.

天津南开医院举行从事中西医结合研究急腹症廿五周年学术报告会 暨中国中西医结合研究会急腹症专业委员会扩大会议

为纪念天津市南开医院从事中西医结合研究急腹症廿五周年、天津市中西医结合急腹症研究所建所十周年和新大楼落成, 5月12至16日在天津召开了学术报告会和中国中西医结合研究会急腹症专业委员会扩大会议。100多位代表参加了会议。卫生部中医司田景福司长, 中国中西医结合研究会季钟朴理事长参加会议并讲话。吴咸中所长对南开医院从事中西医结合研

究急腹症廿五周年的经验做了总结发言。专家们做了学术报告。

急腹症专业委员会扩大会议讨论了专业委员会的组织、设立急腹症基金会及今后学术会议等问题。会议期间, 有八个中西医结合医院的领导对创办中西医结合医院的经验举行了座谈会, 田景福司长及季钟朴理事长做了重要发言。

(郑显理)

After the Yin Xu patients were treated with the medicine for Yin tonic, the value of T₃ obviously increased in comparison with that before the administration of the medicine, and the difference was significant. However, the changes of T₄ before and after the administration of the medicine were small.

Through the study of the changes of T₃ and T₄ before and after the administration of the medicine, it can be seen that the difference between the values of T₃ in the serum of the patients with Yang Xu and Yin Xu before taking the medicine is very obvious, whereas after treatment, with the patients recovering from the symptoms, the difference between the values of T₃ becomes small. These facts demonstrate that the Chinese medicines of Yang tonic and Yin tonic can adjust T₃ of patients. The values of T₄ of the two symptoms after treatment still differ markedly from each other, and this indicates that T₄ of Yang Xu symptom increases very slowly.

The results of the clinical experiment show clearly that Yang Xu clinical symptom can be treated by using medicine of Yang tonic. Thus T₃ and T₄ of patients can recover to some degrees. It is worth emphasizing that the traditional Chinese medicine can adjust the systemic functions of the human body and improve the function of thyroid itself.

(Original article on page 479)

A Clinical Experience of Treating Maxillae-Facial Acute Inflammation by TCM-WM

Lin Peiyan (林培炎)

Department of Maxilla-facial Surgery, Beijing Dental Hospital, Beijing

Chinese medicine practitioners have accumulated a great deal of experience in treating severe cases of maxillae-facial inflammation. The treatment of severe maxillae-facial inflammation by TCM-WM gives better results than that of western medicine alone.

A combination of local application of Ren Zhong Bai paste (人中白糊, preparation from human urine) and systematic use of antibiotics with cortisone is an effective conservative therapeutic measure, especially the Ren Zhong Bai paste plays an active role in raising the non-operational recovery rate. The clinical application of this remedy is suggested and further study on its pharmacological action is needed.

(Original article on page 481)

Prevention and Treatment of Hemorrhage after Extraction of Teeth by Using the Pulvis of Cibotium Barometz-Alum Burnt

Zhou Rujun (周汝俊)

Second Affiliated Hospital of Jiang Xi Medical College, Nanchang

The clinical effect by using the pulvis of Cibotium barometz-Alum burnt to prevent and treat hemorrhage after extraction of teeth is reported in this paper. The pulvis is formulated as follows: Cibotium barometz 30 g, Alum burnt 50 g, Metronidazole 5 g, Natrii chloridi 15 g. Two hundred and thirteen cases (265 teeth) were divided by double blind method into two groups, the experimental group (127 cases, 158 teeth) and the control group (86 cases, 107 teeth), after removal of the tooth, the blood oozed into the alveolus. So pulvis is used on the wound in the experimental group, whereas the routine method of pressure hemostasis is used in the control. As a result, the coagulation time in the experimental group averaged 50 seconds, much shortened than that in the control, and complications such as postoperative hemorrhage, pain and dry socket were less serious too. The difference between the two groups is markedly significant ($X = 16.23$, $P < 0.01$). It is considered that the favorable mechanism of pulvis is due to its effect of rapid hemostasis and anti-inflammation. The pulvis can induce a firm mass in the extracted tooth sockets.

(Original article on page 483)

Treatment of Oral Leukoplakia with Propolis

—Report of 45 Cases

Pang Jinfa (庞劲凡), Chen Shusen (陈树森)*, et al

Department of Stomatology; Department of Traditional Chinese Medicine,
Chinese PLA General Hospital, Beijing*

Oral leukoplakia is a common disease of oral mucosa on which malignant change may occur in a few cases. Exploration of various effective therapy may be of prime importance for the prevention of malignant change caused by this disorder. At present, only a few drugs effective for this disease can be found and their side effects are