

水黄连加 TMP 治疗急性菌痢 75 例疗效观察

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内容提要 本文报道用湘西土家族常用草药水黄连加 TMP 治疗急性菌痢 75 例, 其中治愈 73 例, 治愈率为 97.33%。同期用庆大霉素加 TMP 对照治疗 73 例, 治愈率为 80.82%, 两组治愈率有非常显著差异。临床症状、体征改善明显、病原菌转阴率高, 远期疗效巩固, 药物副作用少, 是治疗菌痢的有效药物之一。

水黄连系龙胆科獐牙菜属植物川东獐牙菜(*Swertia davidi* Franch), 为土家族民间常用的一种民族药。湘西自治州及其毗邻地区有较丰富的药源。本品性寒、味苦, 有清热解毒、利胆健胃的功能。民间用于治疗痢疾、肠炎、肺炎、黄疸型肝炎、妇科炎症等疾病。作者曾用水黄连浸膏片治疗 300 例急性细菌性痢疾, 临床治愈 245 例, 治愈率为 81.67%⁽¹⁾。为了进一步验证水黄连疗效, 我们在此基础上加用甲氧苄氨嘧啶(TMP)治疗一组急性菌痢 75 例, 临床上获得较好的疗效, 现将观察结果报告如下。

材料与方法

一、病例选择与治疗分组: 凡符合急性菌痢诊断标准者, 均列为本文观察对象。148 例急性菌痢, 采用随机分组方法分为: 水黄连加 TMP 观察组, 庆大霉素加 TMP 对照组。观察组平均年龄为 30.5 岁, 对照组平均为 28 岁, 两组年龄分布基本均衡。性别: 观察组男性 42 例(56%), 女性 33 例(44%); 对照组男性 37 例(50.68%), 女性 36 例(49.32%)。

二、药物剂量及使用方法: 水黄连浸膏片每片含生药 1.0g, 成人一次口服 3 片, 1 日 3 次。庆大霉素成人一次 4~8 万 u 肌注, 1 日 2 次。TMP 0.1~0.2g, 1 日 2 次, 口服。7 天为一个疗程。

三、疗效标准: (1)治愈: 临床症状消失, 每日大便在 2 次以下, 停药后每日镜检大便 1 次, 连续 3 次每个高倍视野的白细胞均不超过 3 个(包括肛拭检查)。停药后隔日作大便培养, 连续两次阴性(包括肛拭检查)⁽²⁾。(2)好转: 尚未达到治愈标准者, 但临床症状、体征有明显改善, 作为好转判断。(3)无效: 经临床治疗 3 天, 临床症状、体征均无明显改善, 作无效判断。

观察结果

一、临床疗效观察结果: 两组治疗结果见表 1。

表 1 两组治疗结果比较

	例数	治愈 例数 (%)	好转 例数 (%)	无效 例数 (%)
观察组	75	73 97.33	1 1.33	1 1.33
对照组	73	59 80.82	12 16.43	2 2.74

$$\chi^2=8.82 \quad P<0.01$$

二、临床主要症状、体征平均消失时间, 两组结果见表 2。

表 2 临床主要症状、体征平均消失时间(天)

	发热	腹痛	腹泻	里急后重	左下 腹压痛	脓血便
观察组	1.52	2.2	1.8	2.2	1.9	1.7
对照组	1.7	3.2	2.3	2.7	2.4	2.2

[△]临床观察协作组

三、粪便细菌培养转阴时间：观察组粪便培养痢疾杆菌阳性者共 30 例，6 天内全部转阴；对照组粪便培养痢疾杆菌阳性者共 24 例，6 天内转阴 20 例，转阴率为 83.3%。临床平均治愈天数两组分别为 3.98 天，4.19 天。粪便镜检平均转阴时间为 4.06 天，4.08 天。粪便细菌培养平均转阴天数为 3.9 天，4.4 天。

四、水黄连加 TMP 在治疗急性菌痢的过程中，未发现不良反应。

五、对观察组经治愈出院的部分病例进行随访，32 例出院时间在 60~113 天之间，均未见复发，疗效巩固。

讨 论

水黄连为多年生草本植物，全草供药用。夏秋季采集，晒干备用。湘西俗称青鱼胆草、水灵芝，含有多种化学成分，水溶性部分有龙胆碱 (Gr stianine)⁽³⁾，非水溶性部分有熊果酸 (Ursolic acid)⁽⁴⁾，1,5,8-三羟基-3-甲氧基咕吨酮 (belliaFolium)⁽⁵⁾。对痢疾杆菌抑菌试验结果表明，其水溶性部分龙胆碱具有抗菌作用。水黄连煎剂，用试管法抑菌试验，对志贺氏、鲍氏、福氏菌具有抑菌作用，抑菌圈为 18~20mm，抑菌价为 1:4，杀菌价为 1:2⁽⁶⁾。水黄连加 TMP 作抑菌试验，在试管内 1:32 倍有明显抑菌作用。非水溶性部分化学成分对痢疾杆菌无抑菌作用。

本文结果说明 TMP 加水黄连的疗效，高于

单用水黄连组，也高于同期的西药对照治疗组 ($P < 0.01$)，临床症状、体征改善作用明显，平均退热天数为 1.5 天，一天内退热例数占 70.91%，较对照组一天内退热例数 57.14% 为优。腹泻复常时间短，腹痛消失时间平均为 2.2 天，一天内腹痛消失率为 59.68%，对照组为 46.51%，腹泻、腹痛消失时间均短于对照组。脓血便、里急后重、左下腹压痛的消失时间，两组之间无明显差异。粪便镜检观察组平均恢复时间短于对照组。一疗程后粪便培养全部转阴，而对照组转阴率为 83.3%，但两组转阴平均天数无明显差异，平均治愈天数亦无明显差别。水黄连片剂用于临床数年，未发现有明显副作用及毒性反应，对消化道无不良刺激。是治疗菌痢有效的一种民族药。

(本所田友顺、罗景方同志协助部分试验工作，一并致谢。)

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精神卫生·标准化精神检查与量表讲习班在开滦举办

为了提高精神科基层医务人员的中西医结合临床和科研水平，中国中西医结合研究会精神科学组委托开滦矿务局精神病院于 1985 年 7 月 22 日至 8 月 2 日在唐山开滦举办了《精神卫生·标准化精神检查与量表讲习班》，为期两周。参加讲习班的 76 名学员来自全国十四个省、市、自治区。讲习班邀请了华西医科大学刘协和教授，北京医科大学许又新、刘涛教授、罗和春主任、贾云奎主治医师、护理部王述彭主任，华北煤炭医学院崔杰成教授，天津市精神病防治院周正保副主

任医师等分别讲授了“医学科研设计”、“人格障碍”、“心身医学”、“精神卫生”、“住院精神病人的心理需要”、“精神科中西医结合的途径、方法之探讨及近年来进展概况”等专题。并通过示教和实习，系统学习了国内外目前常用的标准化精神检查及诊断评定量表。开滦矿务局精神病院在北京医科大学精神卫生研究所的大力协助下，负责编印了《标准化精神检查量表评定手册》一书，深受学员们的欢迎。

(牛宗新)

Group II: 35 cases treated with Chinese herbs and prednisone. The average dosage of the latter was 15mg daily for infants and 30mg daily for children. The mean treatment course was 58.9 days. The effective rate of Group II was 91.8%, higher than the effective rate of Group I, which was 86.7%. The method of combined traditional Chinese and western medicine has been found to have little or no side-effects or rebound. It not only showed marked effect but also shortened the course. (Original article on page 26)

A Study on the Preventive and Therapeutic Effects of *Alternanthera Philoxeroides* on Influenza

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Alternanthera philoxeroides (AP) has long been used in China as a traditional herb medicine for the treatment of influenza. The preventive and therapeutic effects of AP on influenza were studied in this paper.

Prevention: Experimental group consisted of 4,431 subjects. AP preparation (analogous to 50 gm of crude drug per day) was given 3 days for every ten days. The whole course lasted one month. The incidence of influenza of the experimental group was 3.9% while it was 9.1% of the control group consisting of 4,527 subjects ($P < 0.001$).

Therapeutic effect: By double blind method, AP (in above mentioned dosage) was given three times a day for 2 days to the therapeutic group of 172 cases. All the clinical symptoms subsided within 48 hours in 140 cases with an average cure rate of 81.4% (73~91%). No significant side effects were observed in the course of treatment. In the control group 36 cases were treated with ABOB 600 mg per day for two days. The cure rate was 27.7% (at the end of treatment). $P < 0.001$.

Laboratory survey: An obvious virustatic effect on influenza virus A,B and Sendai virus was identified in vitro.

(Original article on page 29)

The Relationship Between Tongue Color and the Tongue Microcirculation

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This article reports observation of tongue color and its relation to microcirculation reflected by superficial blood flow rate, capillary plexus shape in the fungoid papillae and the cross section area of the papillae in healthy and sick children. All of the investigated healthy children have pink tongues. The superficial tongue blood flow rate is greater in group of children with smaller age but decreased gradually with age, i.e. 0.0457 ± 0.005 ml/sec in group of 4~5 years old, 0.043 ± 0.004 in 6~10 years old, and 0.041 ± 0.0011 in 11~15 years old.

The section area of the papillae is increased with age, i.e. 0.22 ± 0.01 mm² in group of 4~5 years old, 0.24 ± 0.01 mm² in group of 6~10; 0.37 ± 0.02 in group of 11~15. All the P value < 0.001 .

As for the shape of the tongue papillae capillary plexus in children, most of them resemble tree branches and flower petals. Only a few capillaries are in spasmodic or dilated condition. Such irregular forms are increased with age, i.e. 1% in group of 4~5 years old; 5% in group of 6~10 years old; and 7% in group of 11~15 years old.

Patients with acute nephritis, nephrosis and asthma have dark-pink tongues. The tongue superficial blood flow rate decreased. The ratio of the abnormal capillaries increased. The section area of the fungoid papillae changed in varied degree. According to the authors that tongue superficial blood flow rate, shape of the tongue papillae plexus, section area of the tongue papillae can be used as a comprehensive indicator of tongue microcirculation and subtle changes of the tongue color. (Original article on page 31)

Observation on Effect of *Swertia Davidi* and TMP in Treating 75 Cases of Acute Bacillary Dysentery

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75 typical cases of acute bacillary dysentery were treated with *Swertia davidi* and TMP with 73 of them cured. The effective rate was 97.33%. Another 73 cases were treated with gentamycin sulfate and TMP as control. 59 of them were cured, with an effective rate of 80.82%. The difference between these two effective rates was significant statistically. The fever dropped down rapidly with apparent relief from abdominal pain. A high normalizing rate for the checking of pathogenic microbes takes place within a short period of time. Longterm efficacy is stable with negligible side-effect. It is one of the effective anti-dysentery drugs.

(Original article on page 34)