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中西医结合治疗颌下腺炎

第二军医大学附属长征医院口腔科　陈必胜

颌下腺炎的病因以涎石所致最为多见。虽有急性与慢性颌下腺炎之分，但以慢性颌下腺炎为多；并多依赖于手术治疗。为了寻找有效的保守治疗方法，我们自 1977 年起，采用以涎石排石汤为主的中西医结合治疗，现报道如下。

临床资料

一、一般资料：本组男15例，女7例。年龄21～65岁，其中21～40岁13例，40岁以上9例，病期＜1个月者17例，＞1个月者5例；其中最长达5年。

二、症状与体征：多有乏力、纳差，局部胀痛，进食时尤甚。14例有明显疼痛表现，一般舌质稍红，脉弦滑，颌下腺明显可触及，质较硬，有压痛；2例口底粘膜水肿、充血、有索条状硬结。可触及涎石者16例，位置多靠近腺体。导管口有少量脓性分泌物者3例。经X线摄片证实有涎石存在者仅2例。初次发病者16例，反复发作者6例，均为单侧性。

三、诊断：慢性颌下腺炎(痰核型)12例，慢性颌下腺炎急性或亚急性发作者(混热型)9例，1例为急性化脓性腮腺炎。

治疗方法

一、治疗及方剂：以软坚化痰排石为主，佐以清热解毒，方以涎石排石汤：生牡蛎15g　生山甲10g僵蚕6g　金钱草15g　海金砂15g　鸡内金10g　连翘12g　夏枯草6g　川芎10g　白芍10g　陈皮6g　乌梅6g。单用上方者12例，一般服3～15剂，最多1例服35剂。加抗生素者10例，主要用于急性或亚急性发作者。

结　果

5天内排石消肿者6例，2周左右排石消肿者11例，另2例虽排石不明，但随访时无自觉不适，颌下腺不肿大，原可触及之结石已触不到。排出涎石大小有如米粒、黄豆及花生米样不等，最大者0.5×0.8×1.2cm。排石1枚者10例，2枚4例，二次3枚者2例，三次10枚者1例，另2例排石数量不明。

排石的19例中，11例为自行排石，其中3例治疗前未发现有导管结石，经服排石汤而自行排石；8例服药前涎石靠近腺体，位置较深不便于手术取石，经服排石汤，涎石均前移，至导管口附近，然后手术切开取石。

对本组患者进行3～5年随访，排石后复发或硬结不消退者4例，其中3例由于病史较长且反复发作、又采用手术摘除颌下腺治疗；2例自觉症状消失，但颌下腺仍可触及，且质地较硬。其余16例无复发，无自觉症状，颌下腺大小正常，质地柔软，为临床治愈，治愈率72.7%。

讨　论

慢性颌下腺炎是一种常见疾病，其主要原因为涎石所致。但其成因说法不一，而导管中炎症产物，脱落上皮、细胞死体、异物等存在或淤积，加之钙盐沉积而成涎石的说法，已为多数人所认可。由于涎石的存在而阻碍涎液的排泄，往往导致涎腺炎性病理过程发生和发展，而炎症又加速涎石的形成；因此治疗慢性颌下腺炎时，首先考虑排除影响涎液排泄的涎石，同时对已存在的或轻或重的慢性炎症给予治疗。这就是本文的出发点。

颌下腺涎石分为腺体和导管结石。而位于导管前2/3者，并不多见，多数导管涎石靠后1/3，因此如能使涎石向前推移，将利于手术取除。

我们根据利胆或利尿药加排石汤以排除胆石和尿路结石的理论与经验，用化痰软坚药加排石方剂以排除涎石。结果表明：尽早应用排石汤将大大增加涎腺恢复正常功能的机会。因此涎石排石汤治疗慢性颌下腺炎是有效的。其基本方为：生牡蛎软坚化痰清热潜阳，生山甲活血祛瘀攻坚散结，金钱草除湿利水清热消肿，海金沙清热利水，鸡内金消食积、化结石，连翘清热解毒，川芎活血理气，白芍柔肝止痛，对平滑肌有抑制作用，乌梅生津促进唾液分泌，陈皮理气和中。方中加入理气活血之药，是根据治痰先治气，盖气行则血行，气血相通，经络舒顺，痰聚便容易消散。

由于病性各异，应随症加减，但消炎和排石是相辅相成的。随着炎症的消退，导管壁水肿的减轻，加之平滑肌松驰，唾液分泌量增加，这些都将有利于排石；只有排除涎石，腺体的慢性炎症过程才有停止和消退的可能。故我们主张消炎和排石并重。

(参考文献略)

Observation on Experimental Glomerulonephritis Treated with Yu Ping Feng San (玉屏风散)

Chen Meifang (陈梅芳), Zhang Qingyi (张庆怡), et al
Research Laboratory of Renal Disease, Shanghai Second Medical University, Shanghai

A model of experimental glomerulonephritis was produced by modified Vassali method in 50 male rabbits, 25 of which were treated with Yu Ping Feng San (玉屏风散, Jade-Screen Powder) and 25 as control. The left kidney was removed on the 5th week and right kidney on the 9th for light and electronic microscopic examinations. Blood creatinine, lymphocyte transformation test, and urinary protein were determined. There were much less pathological changes in the treated group than in the control ($P < 0.001$). The rate of improvement was 83.33% in the former and 33.33% in the latter. In the 5th week blood creatinine was much lower in the treated group ($P < 0.05$), suggesting an early improvement of renal function. There was more urinary high molecular weight protein loss in the control than in the treated. This suggests Jade-Screen Powder may have some immunoregulatory function which is beneficial to the experimental glomerulonephritis both in pathological change and in renal function.

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Dynamics Study of Interferon Stimulating Effect of Polysaccharide of Acanthopanax Senticosus on Leukemic Cell Culture

Yang Jicheng (杨吉成), Liu Jingshan (刘静山), et al
Department of Microbiology of Suzhou Medical College, Suzhou

The present study is an experiment in dynamics of interferon stimulating effect of 10 μg /ml polysaccharide injection of Acanthopanax senticosus on leukemic cell line established by our department. The result has shown that the dynamic curve of inducing interferon with polysaccharide of Acanthopanax senticosus, as that of classical induction, is gradually rising in 4～16 hours, reaching the peak in 20～24 hours, then dropping gradually. In the same period of time the interferon titer induced by polysaccharide of Acanthopanax senticosus was found significantly higher than that of the classical induction. Thus, the polysaccharide of Acanthopanax senticosus possesses stimulating interferon effect, the most effective period of time of which is from 20 to 24 hours.

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TCM-WM Treatment of Submaxillary Adenitis — 22 Cases Report

Chen Bisheng (陈必胜)
Department of Stomatology, Changzheng Hospital, Second Military Medical University, PLA

Submaxillary adenitis is a common disease of the submaxillary glands. Its pathogenesis is usually correlated with the sialolith. In the past it was treated with surgical operation, and the effective conservative treatment was lacking. Since 1977, TCM-WM treatment which took the "sialolith discharging decoction" as the chief measure, was used in 22 cases. The result of their follow-up for three to five years showed sialoliths of 19 cases were excreted, and the effective rate reached 86.4%. The symptoms of 16 cases were relieved and their submaxillary gland resumed normal size. The rate of clinical cure attained 72.7%. Therefore at present, it is an effective conservative therapy for chronic submaxillary adenitis.

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Statistical Analysis of the Ethnopharmacologic Data Based on Chinese Medicinal Plants by Electronic Computer I. Magnoliidae

Xiao Peigen (肖培根), Wang Liwei (王立为), *Chou Guisheng (仇桂生), et al
Institute of Medicinal Plant Development, Chinese Academy of Medical Sciences;
**Department of Mathematics, Peking University, Beijing*

Statistical analysis has been applied to the clarification of the ethnopharmacologic data based on Chinese medicinal plants, and hence trend and regularity of these data have been abstracted and quantitatively described. The main parameters of the present study involved: family medicinal coefficient (αf), i.e. the radio of medicinal/total genera within a certain family; genus medicinal coefficient (αg), i.e. the radio of medicinal/total species within a certain genus; traditional therapeutic usages coefficient (TRI) and extent of traditional therapeutic usages within a certain taxon (β).

The results may be of value to the resources utilization, new drug searching, as well as systematization of traditional Chinese and herbal drugs.

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