

抗氟一号治疗地方性氟病的疗效观察

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内容提要 本文用中药抗氟一号治疗地方性氟病 33 例, 经与对照组 32 例比较观察, 结果: 中药组一般临床症状和缓解颈、腰、骨关节疼痛率为 97% 和 94% 以上, 优于对照组; 中药组握力明显提高, 用药前后对比差别非常显著 ($P < 0.005$), 同时尿氟排出量也显著增加, 用药前后对比差别显著 ($P < 0.05$), 而对照组均无明显改变。

地方性氟病是由于某些地区的地质、环境中氟含量过高, 通过饮水和食物进入体内而引起的慢性蓄积中毒性疾病。目前, 治疗该病的药物疗效不够满意, 本文报告用中药抗氟一号治疗 33 例, 并与其它药物治疗 32 例作对照, 经临床观察收到一定疗效, 现介绍如下。

资料与方法

一、病例选择: 全部患者生活于高氟量地区, 该地区饮用水含氟量最低 1.20mg/L, 最高 5.5mg/L, 平均 2.73mg/L, 其氟斑牙患病率 80.6%, 氟骨症患病率 34.8%。取其自然情况基本相似者 65 例, 随机分为中药和对照两组。中药组 33 例, 男 15 例, 女 18 例; 年龄 22~76 岁, 平均 53.3 岁; 病程 5 年以下 6 例, 6~19 年 20 例, 20 年以上 7 例。对照组 32 例, 男 12 例, 女 20 例; 年龄 29~75 岁, 平均 52.2 岁; 病程 5 年以下 5 例, 6~19 年 23 例, 20 年以上 4 例。

二、诊断标准: 根据 1981 年 9 月石家庄会议通过的“地方性氟中毒防治工作标准”(试行)^①。中药组 33 例中氟骨症 23 例, 其中硬化型 17 例、混合型 9 例; 对照组 32 例中氟骨症 16 例, 其中硬化型 12 例、疏松型 3 例、混合型 1 例。

三、治疗方法: 为使两组条件一致, 所有受治者仍在原自然环境中生活和劳动。

中药组: 抗氟一号组方: 熟地、首乌、枸杞子、肉苁蓉、黄精、威灵仙、防风、红花、茯苓、泽泻等制成丸剂, 重 15g/丸, 含生药 10g/丸, 含氟量 0.0015mg/丸。每次 1 丸, 每日 3 次, 连服 6 个月。

对照组: 每日口服维生素 C 300mg, 钙片 3g, 鱼肝油 5000IU, 连服 6 个月。

四、观察指标: (1) 临床观察: 分一般症状和颈、腰、骨关节疼痛两类。疗效判定: 有效包括显效(症状消失)和好转(症状减轻); 无效即症状无改善。(2) 握力: 用国家体委科研所 WL-II 型握力计检测, 以公斤(kg)为单位, 观察两组用药前后的差值变化。(3) 尿氟含量用电极法测定, 以每升的毫克量(mg/L)为单位, 观察两组用药前后的尿含氟量变化。

结 果

一、临床症状: (1) 一般症状: 观察发生例数最多的症状, 依次为头晕、乏力、肢体麻木, 服药 1、3、6 个月后复查: 1 个月中药组有效率分别为 68% (17/25)、60% (18/30)、67% (12/18), 对照组分别为 30% (7/23)、27% (7/26)、11% (2/19); 服药 3 个月中药组分别为 96% (24/25)、93% (28/30)、94% (17/18), 对照组分别为 74% (17/23)、73% (19/26)、53% (10/19); 服药 6 个月中药组乏力一症有效 29 例 97%, 头晕和肢体麻木基本消失, 对照

组有效率分别为74%(17/23)、77%(20/26)、58%(11/19)。中药组疗效明显优于对照组。(2)此病以腰、背及大骨节疼痛为最多见,且出现最早。本文以颈、腰、肩、肘、髋、膝关节疼痛发生的总例次观察两组服药前后的疗效,中药组92例次,服药后有效86例次,有效率94%;对照组102例次,服药后有效65例次,有效率64%。抗氟一号对改善颈、腰、骨关节疼痛疗效明显优于对照组。

二、握力变化:中药组22例,对照组13例,分左、右两侧进行服药前后的差值比较,结果见表1。

表1 服药前后双侧握力差值比较

	握力均值(kg)		均值差±标准差(kg)	t值	P值
	服药前	服药后			
中药组左(22例)	16.27	20.1	3.82±1.19	3.178	<0.005
	17.0	21.23	4.23±1.23	3.47	<0.005
对照组左(13例)	19.61	22.38	2.77±1.28	2.16	>0.05
	18.69	23.07	4.38±2.09	2.087	>0.05

中药组两侧握力明显增加,差异非常显著($P<0.005$),而对照组无明显改变($P>0.05$)。

三、尿氟量变化:中药组服药后可资对比的21例,对照组11例,两组服药前后对比结果见表2。

表2 两组服药前后尿氟量对数均值比较

	例数	尿氟量(mg/L)		t值	P值
		对数和	对数均值±标准误		
中药组	前	33	21.36	0.53±0.06	2.098
	后	21	14.96	0.71±0.05	
对照组	前	32	19.35	0.51±0.05	1.38
	后	11	7.11	0.65±0.09	

服药后中药组尿氟量明显增加,差异显著($P<0.05$),而对照组无明显改变($P>0.05$)。

讨 论

过量的氟进入人体,除侵害牙齿和骨骼外,还干扰某些酶系统,并影响中枢神经系统和抑制某些内分泌功能⁽²⁾,Susheela发现地方性氟中毒是对胶原组织的损害⁽³⁾。因此,可以认为地方性氟病是以氟斑牙、氟骨症为主要表现的

全身性疾病。

一、拟方原则:从地方性氟病的主要表现来看,与中医理论中的肾有关,证属肾痹范畴,故本文拟以补肾为主、活血通经为辅的治疗原则,同时又考虑到体内积存的氟能从尿路排出,而佐以渗湿利水类药物,从而组成了抗氟一号方剂。

二、本文资料表明,抗氟一号中药的疗效明显地优于对照组,且无毒副作用。对头晕、乏力、肢体麻木及颈、腰、骨关节疼痛有明显改善作用,还可使握力显著增加。

尿氟含量是诊断本病的重要指标。正常人尿氟含量一般在0.1mg/L以下,本文两组患者均高于此限。两组在同一条件下采尿,作服药前后对照,其结果是中药组服药后尿氟量显著增加($P<0.05$),具有排氟效果,而对照组无改变。中药抗氟一号的氟含量为0.0015mg/丸,同时也含有 Fe^{+++} 、 Ca^{++} 、 Mg^{++} 、 K^{+} 等阳离子,中药中的这些阳离子与水、食物中的氟结合,形成难溶的盐从粪便中排出。说明尿氟量增加,与中药本身的微量氟无关。

三、疗效机理探讨,方中首乌、肉苁蓉等补肾类药物,能促进DNA的合成,改善细胞的能量代谢⁽⁴⁾,调节神经—内分泌功能。红花具有活血化瘀作用,能改善微循环,加上威灵仙、防风等通经止痛类药物,通过松弛骨骼肌,改善神经、肌肉和骨组织的营养状态⁽⁵⁾,而使疼痛得到缓解。此外,尿含氟量的增加,可能与周身机能状态的改善和茯苓等渗湿利水类药物的作用有关。

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Effects of Qing Court Shoutao Pill (清宫寿桃丸) on Concentrations of Zn, Cu, Na and Br in Senile Hair

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This paper reports the clinical effect of Qing Court Shoutao pill (QCSP) on the concentrations of Zn, Cu, Na and Br in senile hair. 25 over 60 years old patients suffering from senile symptom-complexes were divided randomly into two groups and treated with QCSP (12 cases) and vitamin E (13 cases) respectively. The concentrations of Zn, Cu, Na and Br in senile hair collected before and after eight weeks of treatment were separately measured with neutron activation analysis. It was shown that after eight weeks of treatment with QCSP or vitamin E, Cu and Na concentrations decreased, Zn concentration remained almost constant, and thus Zn/Cu ratio increased. This indicated that QCSP as well as vitamin E possessed the effect of slowing down the process of aging (Original article on page 216)

Observation on Effect of Anti-Fluorine No.1 in Treating Endemic Fluorosis

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Two clinical treatment groups divided randomly were observed. The experimental group (33 cases) was treated with Chinese remedy Anti-fluorine No.1, while the control group (32 cases) administered with routine Western medicines. Result: The general symptoms of 97% patients of the experimental group were improved, and 94% of that of the neckache, backache and arthralgia were reduced, while the effective rates of the control group were 58~77% and 64% respectively. In the experimental group, before and after treatment, the mean gripping power of left and right hand was 16.27 kg, 17 kg and 20.1 kg, 21.23 kg respectively, which showed a significant difference ($P < 0.005$). In the control group, the mean values were 19.61 kg, 18.69 kg and 22.38 kg, 23.07 kg respectively, the difference was not significant statistically ($P > 0.05$). Before treatment the mean urinary fluorine in the experimental and control group were 3.39 mg/L and 3.23 mg/L respectively. After treatment, the former excretion increased to 5.15 mg/L ($P < 0.05$) and the latter was 4.47 mg/L showing no statistic significance. (Original article on page 219)

Analysis of Pulse Condition in 643 Cases of Healthy Adults

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This study deals with observation on the pulse condition in 643 healthy adults, 342 males, 301 females, whose age ranged from 16 to 80. It was found that pulse was present in nine types: Normal pulse in 86 cases, normal smooth in 73, smooth in 26, small smooth in 79, wiry smooth in 88 cases, small wiry in 130 cases, wiry pulse I in 109, wiry pulse II in 18 and wiry pulse III in 34 cases. Features of these types of pulse and the relationship between their features of various types of pulse and age were analysed statistically. The results showed that pulse condition in healthy adults changed from normal or normal smooth or small smooth to smooth or small wiry, to wiry smooth, and finally to wiry I ~ III with the advancing age.

(Original article on page 221)

Effect of Preparation of Shi Jinmo's (施今墨) Anti-aging Recipe on B Type Monoamine oxidase Activity in Mice and Life Span of *Drosophila melanogaster*

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The preparation of the anti-aging recipe of Shi Jinmo, a famous experienced doctor of TCM, showed about 50% inhibition on brain MAO-B activity when the preparation was fed to 6-month male NIH mice for 90 days. The inhibitory effect of MAO-B activity partly explained the anti-aging efficacy of Shi Jinmo's remedy in terms of the regulation on brain level of monoamine transmitters, the shift of which was