

麝香保心丸在不稳定心绞痛治疗中的作用

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内容摘要 对15例不稳定心绞痛患者进行24小时动态心电图监护,并观察麝香保心丸的疗效。结果发现,该药可明显缩短心电图缺血性ST段下移的持续时间,与对照药相比 $P<0.01$,并能对抗因进餐引起的心肌缺血。

本文观察了24小时心电图监护下的15例不稳定心绞痛患者服用麝香保心丸(下称保心丸)的情况,进一步肯定了该药抗心肌缺血的效应,现报告如下。

资料及方法

一、病例选择:15例均为冠心病不稳定心绞痛患者^(1,2),其中13例为住院患者,2例为急诊观察患者,男10例,女5例,年龄41~76岁,平均年龄为 57 ± 6 岁。心绞痛类型,自发型7例,劳力型4例,混合型4例。无1例有症状性和无症状性ST段抬高。临床心功能分级(NYHA分级):I级8例,II级4例,III级3例。

二、观察方法

1. 所有患者均携带西德HELLIGE公司产MEMOPORT-C型24小时动态心电图机,并详细记录其心绞痛症状发作时的情况(休息、进餐、看报、散步等)⁽³⁾。

2. 对每一患者于相似条件下(非进餐时)发作心绞痛,依随机次序予以保心丸2粒含服,或对照药2粒含服,或不用药任其缓解,并取出这三种处理方式下记录得到的心电图作为一组参加比较。麝香保心丸系上海中药制药一厂产品,每丸22.5mg,其中含人参提取物27%、麝香6%、蟾酥4%、苏合香酯8%、冰片19%、牛黄12%、肉桂24%。对照药系与保心丸色泽、形状和大小相仿的中药王不留行。

3. 对进餐引起症状及心电图缺血性ST段下移者则于24小时动态心电图监测中,随机分

为不用药进餐、服保心丸进餐(饭前吞服2粒,饭后含服2粒),及用王不留行对照药进餐。并将这样的三餐次的心电图资料作为一组参加比较。

4. 心电图观察以ST段水平或下斜型压低1.0mm(0.1mV)以上为缺血性改变。

观察结果

一、非进餐时发作心绞痛随机给药取到7组共21例次心电图记录。其中包括劳力型3例、混合型2例、自发型1例。心功能分布为I级2例、II级3例、III级1例。将缺血性ST段下移平均持续时间(分)加以比较,发现用药组(8 ± 1 分)较安慰剂(18 ± 2 分)及未用药组(20 ± 3 分)明显缩短($P<0.01$)。如某劳力型心绞痛患者(例1)其心功能III级,活动后有心绞痛并伴心电图缺血性改变,用保心丸后则可明显缩短缺血时间(图1,2)。

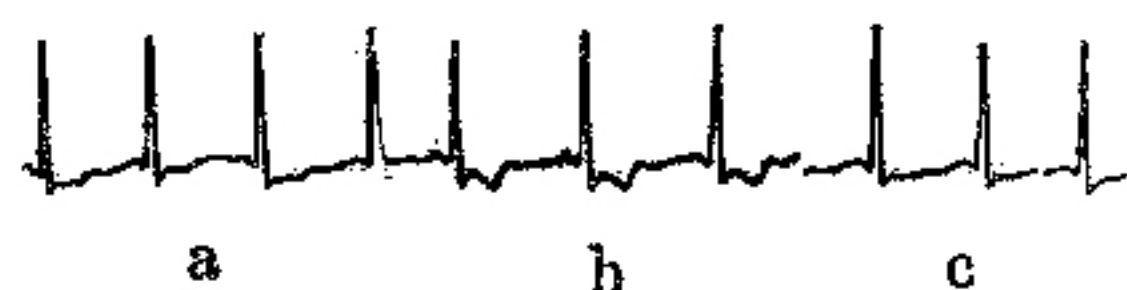


图1 例1,未服药时活动前(a, 12:00AM)及活动后(b, 8:28AM, c, 8:48AM)心电图,活动后缺血性ST段改变长达20分钟

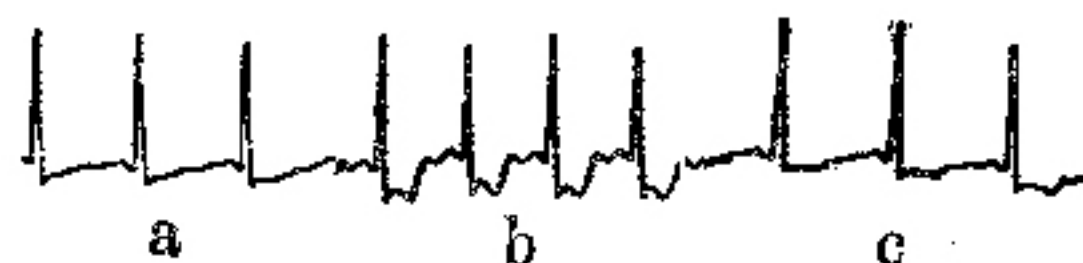


图2 同图1病例,活动后(b, 9:08AM)出现缺血性ST段改变,服保心丸后(c, 9:19AM)10分钟心电图恢复。a为活动前(9:00AM)心电图

二、进餐引起症状性心肌缺血随机投药结果取到 5 组心电图记录。结果发现用保心丸者可明显改善进餐后的 ST 段缺血性改变 (附表)。某患者 (例 2) 进餐时发作心绞痛、胸闷同时心电图 ST 段下移达 1.20mm (0.12mv), 并出现 T 波浅倒, 进餐前后用保心丸保护后, ST 段与进餐前相同, 且无 T 波变化 (图 3、4)。

附表 保心丸对进餐引起的缺血性 ST 段下降的改善作用

分 组	ST 段下移程度 (mm)					
	1	2	3	4	5	平 均
未用药	1.50	1.20	1.30	1.10	1.00	1.30±0.16
安眠剂	1.30	1.10	1.20	1.10	1.30	1.20±0.10
保心丸	0.40	0.30	0.60	0.40	0.50	0.44±0.11*

*P<0.01

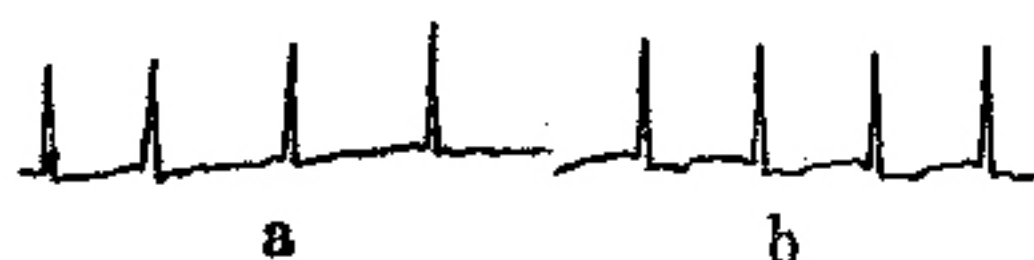


图 3 例 2, 进餐前 (a, 6:45 AM) 后 (b, 7:10 AM) 心电图, 进餐后出现缺血性 ST 段改变

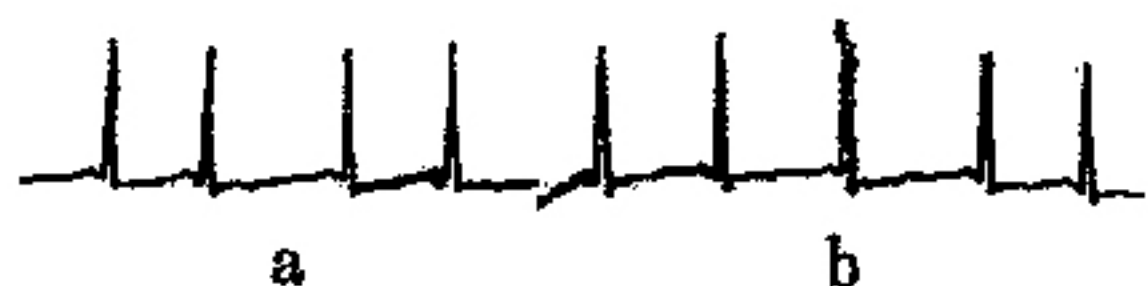


图 4 同图 3 病例, 服保心丸保护后进餐前 (a, 10:44 AM) 后 (b, 11:00 AM) 心电图无明显改变

讨 论

麝香保心丸的主要中药药理研究证明, 苏合香酯和冰片有显著的增高小鼠耐缺氧时间, 对狗实验性心肌梗塞有减慢心率、改善冠脉流量和降低心肌耗氧量之作用; 天然麝香对

麻醉犬产生降压和减慢心率作用; 人参皂甙能缩小家兔实验性心肌梗塞区、减慢心率、扩张肢体及脑血管, 有利于减少心肌耗氧量从而对抗心肌缺血。并证实该药对心绞痛的三日疗法及即刻疗法有效率分别达到 59.68% 及 80%^(4,5)。

本文证实用保心丸后对活动或静息时出现的心绞痛, 心电图 ST 段缺血性下移的持续时间, 较服王不留行或自然缓解有明显缩短作用。提示该药对劳力型及自发型心绞痛均有改善心肌缺血作用, 还证实保心丸对进餐引起的心肌缺血有明显保护作用。进一步证实该药对抗心肌缺血疗效确切。

本组曾用收缩时间间期、超声心动图及床旁漂浮导管观察保心丸的药物作用机理, 发现该药可使伴有泵功能失代偿的心绞痛患者的左室收缩功能增加, 使缺血性左心室后壁节段活动异常明显改善⁽⁶⁾。

本组资料观察到在左室泵功能正常或异常时的心肌缺血, 及在自发型、混合型及劳力型等不同类型的心绞痛中, 保心丸有确切疗效。但该药对各级泵功能的心肌缺血、及对各型心绞痛疗效机制还有待进一步观察。

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。 简 讯 。

中国中西医结合研究会湖南分会承担的“湖南省中西医结合的历史和发展”科研课题荣获 1986 年度湖

南省医药卫生科技成果四等奖, 省卫生厅同有关人员颁发了奖状、奖金及荣誉证书。 (湘 讯)

Changes in Proteinuria, Renal Function and Immunity after Treatment with Injection of North Astragalus membranaceus

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56 patients of chronic glomerulonephritis divided into nephritic, nephrotic and renal insufficiency groups were treated with injection of North Astragalus membranaceus. One course of treatment consisted of 30 injections, each with 2 ml intramuscular per day. Qualitative and quantitative measurements of proteinuria, renal function test, non-specific cellular immunity PHA-percutaneous (PHA-P) test, PHA induced lymphocyte transformation H 3 test (PHA-Tr), adenosine induced suppression assay (AISA), serum IgG, IgA, IgM, C 3, C 4, CH 50, ACH 50 (factor B), CIC-PEG precipitating assay, C 1 q-ELISA, Clq binding assay, proteinuria in 24 h., Cr, BUN were measured before and after treatment.

Before treatment, PHA-P was evidently lower than normal controls, IgG and IgA were lower, and IgM was higher than normal in nephrotic group. In uremia IgG, IgA and IgM were all lower than normal. C 3 decreased in 36 / 56, factor B was reduced in 13 correlatively with C 3. CIC positive in Clq ELISA, C 1q BA and PEG-PA was 40.4 %, 40.8 % and 32.1 % respectively.

After treatment, PHA-P increased, CIC tended to decrease but without statistical significance, and IgG and IgA increased in nephrotic group after 1 course. Increase in renal insufficiency group was found after 3 courses of treatment. The complement system improved but without statistical significance. Proteinuria decreased in nephritic and nephrotic groups; increase in the uremic group was parallel to improvement of the renal function, and decrease was found with successive treatment after 50 injections. The total effective rate was 61.7 %.

Based on the above observation, injection of North Astragalus membranaceus can improve cell-mediated and humoral immunity, reduce proteinuria and improve the renal function. It has certain effects in the treatment of glomerulonephritis patients. (Original article on page 403)

Efficacy of the Heart Protecting Musk Pill in the Treatment of Unstable Angina Pectoris

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We have observed in an earlier study that Heart Protecting Musk Pill can improve myocardial ischemia on the 12 leads ECG immediately after the administration, normalizing the echocardiographic left ventricular wall motion disturbance and improving the ischemic heart in both globular and segmental left ventricular systolic performance. The present study was designed to confirm its anti-ischemia efficacy more strictly under the Holter ECG monitoring. 40 episodes of the ischemic ST segment depression among 15 hospitalized patients of unstable angina pectoris were observed. The results showed that the mean duration of the ischemic ST segment change was 8 ± 1 minutes in the medication group, 18 ± 2 minutes in the placebo group and 20 ± 3 minutes in the non-medication group with a significant difference between the former group and the latter two groups ($P < 0.01$). Among those meal-related ST segment ischemic changes, the level of the ST depression in the Musk Pill medication group (0.44 ± 0.11 mm) was significantly less than that in the placebo group (1.20 ± 0.10 mm) and non-medication group (1.30 ± 0.16 mm), ($P < 0.01$). Thus it was confirmed again the anti-ischemic efficacy of the Heart Protecting Musk Pill. Its effectiveness on the different types of angina pectoris and among the compensatory and failed pump circumstances would be studied furthermore.

(Original article on page 405)

A Study on the Effect of Shou Tai Pill (寿胎丸) in Treating Threatened Abortion

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A clinical and experimental study on the effect of Shou Tai pill (STP) with additional ingredients in treating threatened abortion was reported. Based on the principle of TCM, it was regarded that the kidney was the foundation of reproduction, a normal functioning kidney would keep the fetus to develop in uterus. So the authors suggest treating the threatened abortion with STP, a recipe to replenish the kidney. It consists of *Cuscuta chinensis*, *Codonopsis pilosula*, *Scutellaria baicalensis*, *Atractylodes macrocephala*, *Dipsacus japonicus*, etc. Of the 110 cases treated with STP, 106 cases (96.36 %) proved to be successful. Results obtained from the experimental study in rats showed that the mechanism of the effects of STP in treating threatened abortion appeared to be: (1) Inhibiting the contraction of myometrium; (2) Strengthening the luteotropic function of the hypothalamus-pituitary-ovarium; (3) Promoting the development of pregnant uterus by their estrogenoid activity. (Original article on page 407)