

消喘膏对223例哮喘患者的10年疗效观察

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内容摘要 用在背部肺俞、心俞、膈俞贴膏药法治疗223例哮喘患者，观察10年，结果痊愈72例，显效86例，好转35例，无效30例，有效率为86.5%；其中以寒型(113例)最好，有效率95%，寒热夹杂型(84例)有效率80%，热型(26例)有效率73%。贴药年限愈长、次数愈多，效果愈好。发作期贴药有治疗作用，缓解期贴药有预防效果。此药能降低患者呼吸道的敏感性，增强患者免疫力，有抗感冒作用，且疗效保持时间长，复发率低。

目前治疗支气管哮喘的方法虽多，但往往远期疗效欠佳。我们采用背部俞穴贴药法，通过补肺散寒，调经通络，疏气平喘，达到持久的治疗效果，现报道如下。

临 床 资 料

223例中，支气管哮喘35例，喘息性支气管炎188例；男91例，女132例；20~30岁者34例，31~40岁者29例，41~50岁者76例，51~60岁者56例，61~70岁者28例；其中部分为门诊患者，部分为固定点患者。病程在2~5年者28例，6~10年者51例，11~15年者42例，16~20年者43例，21~30年者37例，30年以上者22例。发病季节：春秋发病者15例，夏季发病者84例，冬季发病者108例，四季发病者16例。发病程度：轻者14例，中者74例，重者135例。

治疗方法与结果

一、消喘膏的组成及贴治方法：白芥子、元胡各21g，细辛、甘遂各12g^①，共研细末，分三次使用，用姜汁调成膏状，摊在六块方圆1寸的油纸上，在夏季三伏，贴于肺俞双、心俞双，膈俞双，用胶布固定，每10天贴一次，每次贴4~6小时，连贴3次，连续贴3年。发作期患者在贴药期间，逐渐减少支气管扩张药物用量。

二、疗效标准：(1)痊愈：连续观察3年以上，咳、痰、喘症状完全消失，未再用支气管扩张药物、抗生素及其他中西药，且能恢复正

常工作者。(2)显效：咳、痰、喘的程度，发作时间，发作次数以及用西药量均减少2/3以上，且能坚持工作者。(3)好转：咳、痰、喘的程度，发作时间，次数及用西药量减少1/3~1/2者。(4)无效：病情时好时坏，同时又使用其他治疗方法如服中药、激素或针灸等者。

三、结果：223例连续贴药五年以上者复查，其中痊愈72例(占32.3%)，显效86例(占38.6%)，好转35例(占15.7%)，无效30例(占13.5%)，有效率为86.5%。

疗 效 分 析

一、病种与疗效的关系：贴治支气管哮喘35例，痊愈15例，显效10例，好转5例，无效5例，有效率85.7%；贴治喘息性支气管炎188例，痊愈57例，显效76例，好转30例，无效25例，有效率86.7%，经 χ^2 检验 $P>0.05$ ，两者疗效无显著差异。

二、辨证分型与疗效关系：寒型113例，痊愈53例，显效44例，好转10例，无效6例，有效率94.7%；热型26例，痊愈2例，显效8例，好转9例，无效7例，有效率73.1%；寒热夹杂型84例，痊愈17例，显效34例，好转16例，无效17例，有效率79.8%。寒型效果最好， $P<0.005$ 。

三、贴药年限与疗效关系：贴药次数多、贴药年限长者比贴药次数少、年限短者效果好。在223例中，贴1年痊愈者17例，显效41例，好转105例，无效60例，显愈率26.0%，有效率73.1%；贴2年痊愈者17例，显效者101例，

好转者83例,无效者22例,显愈率52.9%,有效率90.1%;贴3年痊愈者64例,显效91例,好转38例,无效30例,显愈率69.5%,有效率86.5%。

在223例中,有72例贴4~6年,其中痊愈28例,显效33例,好转5例,无效6例,显愈率84.7%,有效率91.7%;贴药7~9年者16例,痊愈5例,显效8例,好转2例,无效1例,显愈率81.3%,有效率93.8%。

四、贴药与发病季节的关系:在三伏天贴药对春秋两季(共15例,12例有效)、冬季(共108例,95例有效)、夏季(共84例,71例有效)以及四季(共16例,15例有效)发病者都有效;对处于发作期者有治疗作用,对处于缓解期者有一定的预防作用,不同季节发病其治疗效果无显著差异,经 χ^2 检验, $P>0.05$ 。

五、合并肺气肿与疗效的关系:有肺气肿者82例,痊愈19例,显效29例,好转18例,无效16例,显愈率58.5%,有效率80.5%;无肺气肿者141例,痊愈53例,显效57例,好转17例,无效14例,显愈率78.0%,有效率90.1%。经 X^2 检验, $P<0.05$,无肺气肿者效果较好。

六、疗效保持时间与复发情况:贴药3年后,隔2~10年以上再次复查223例中的185例,其中除17例好转和22例无效外,痊愈68例中56例一直保持痊愈,12例复发;显效78例中66例一直保持显著疗效,12例复发。在这24例复发者中,在发作程度、时间、次数上比贴药前轻者14例,相同者3例,加重者7例。

七、诱发因素的变化:遇阴天不再喘者32例,显著减轻者59例,无效15例;遇刮风不再喘者14例,显著减轻者29例,无效9例;遇热不再喘者26例,显著减轻者39例,无效7例;遇冷不再喘者34例,显著减轻者73例,无效12例;遇各种气味喘未发作者35例,显著减轻者46例,无效10例;食物过敏喘未发作者13例,显著减轻者22例,无效2例;月经期不再喘7例,显著减轻14例;劳累不再喘7例,显著减轻13例;感冒减少190例。

讨 论

一、关于用药方法:消喘膏具有利气祛痰散寒逐饮之效,哮喘其病在肺,肩背通于肺,故在肩背部俞穴用药可使药力随经入肺,灌精气而营阴阳。且在三伏之时人体气盛,此时用药,药物容易随穴入经归脏。我们从1955年起已治疗了大批患者,效果显著^(2,3)。

二、关于寒喘与热喘的疗效差异:寒喘是阳气少而阴气多,故用辛温之消喘膏温阳散寒、化痰平喘效果明显;热喘是阴气少而阳气多,但因消喘膏中辅有甘遂的苦寒及元胡的微苦,故对热喘也有一定的效果。不论寒喘,热喘都有过敏体质存在,只是阴阳的比例、程度的轻重有所不同,因此用同一药物治疗可取得程度不同的效果。

三、关于贴药机理的初步探讨:贴药可能通过压力、温热、化学、痛觉感受器及皮肤,经淋巴管的吸收而取效的。可能与神经、体液的作用有关。药物刺激穴位,反射性地刺激了大脑皮质,调整了其兴奋与抑制过程。药物的内吸收使过敏状态减低,因此血液中的嗜酸细胞减少, IgE 下降, cAMP/cGMP 比值显著提高。从贴药后月经期喘作减少可推测,消喘膏可能对内分泌系统也有一定的影响,这与皮质控制下的丘脑和神经系统得到调整有关。

疗效巩固的原因可能是:(1)药物的刺激,在皮层形成一个新的兴奋灶,遗留下痕迹反射,长期地后抑制作用改变了丘脑—垂体—肾上腺皮质系统的机能状态。(2)药物吸收后使免疫系统发生变化,同时使肺内有关内感受器也产生相应改变,进一步使肺表面活性物质得到调整。

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Abstracts of Original Articles

Observation on Effect of Wenyang Tablet (温阳片) on Histamine Release, Serum IgE in Asthmatics

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Wenyang Tablet (WYT) was given to 77 adult asthmatics and placebo to the other 25 asthmatics as control. The results showed that the total effective rate was 89.6% and the markedly effective rate was 53.2% in WYT group, significantly higher than 20% and 4% of the controls ($P < 0.005$). There was no significant difference in serum IgE and specific IgE levels, histamine release and skin prick test between WYT group and controls before treatment (in July). After treatment (in October), however, serum IgE and specific IgE levels were increased in the controls ($P < 0.005$) and decreased in WYT group ($P < 0.005$), showing that the seasonal increase of serum IgE and specific IgE could be inhibited by WYT. Meanwhile, histamine release rate was decreased from 15.7% before treatment to 8.4% after treatment in WYT group ($P < 0.001$), whereas the controls was 14.9% and 15.5% respectively. WYT group also had a tendency to improve skin prick test. Serum IgE level was closely related to specific IgE level ($P < 0.001$) in asthmatics. Moreover, the difference of specific IgE between pre- and post-treatment was significantly related to the difference of histamine release between pre- and post-treatment in WYT group ($P < 0.005$).

Our previous study has showed that the suppressor T cell function was negatively correlated to the level of serum IgE in asthmatics treated with WYT. So it was suggested that WYT acted on the regulation of immunologically competent cell and in this way it enhanced Ts cell function and inhibited the seasonal increase of IgE. As a result, histamine release was decreased and seasonal attack of bronchial asthma was relieved.

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A Preliminary Study on Nasal Cavity Exfoliative Cells in "Lung Diseases" in TCM

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This paper reports the changes of nasal cavity exfoliative cells consisted of the total cell, epithelial cell, ciliated cell and neutrophil count in patients who suffered from lower respiratory tract diseases, the "lung diseases" in TCM, which belonged to the syndromes of lung-Qi (气) deficiency, lung-Yin (阴) deficiency and lung excess. A group of healthy subjects was taken as control. All of the observed subjects had no nasal symptoms whatsoever and abnormalities in nasal cavity in macroscopical observation as well. The results showed that lower respiratory tract diseases significantly affected the nasal cavity, and this was influenced by different syndrome types and sexes. (1) The squamous epithelial cell count had no significant difference among the four groups. (2) The neutrophil count in lung-Qi deficiency group was lower than that of the control ($P < 0.01$), which indicated that there was a parallel relation of neutrophil between the nasal secretion and blood. (3) The ciliated cell count was increased in the two groups of lung deficiency, which was significantly higher than that of the control ($P < 0.01$). It showed that the mucous membrane of nasal cavity was impaired in these patients. (4) In females, the ciliated cell count was significantly increased in the three studied groups than the control ($P < 0.05$, $P < 0.01$), but in males of lung excess group it was similar to that of the control ($P > 0.05$). This meant that the female's nasal cavity was more susceptible in lower respiratory tract diseases. (5) Although there were considerable variation in the above-mentioned three kinds of cell count, but the total cell count of nasal cavity exfoliative cells among 4 groups showed no significant difference, which revealed that the influence of lower respiratory tract diseases on nasal cavity was mainly reflected in the changes of cellular properties and the ratio of cells in nasal cavity mucous membrane. The defence functions of nasal cavity were impaired by these changes, which should be one of the physio-pathological basis that the patient was susceptible to cold when the patient suffered from lung deficiency.

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Observation on Effect of Treating 223 Asthma Patients with Xiaochuangao (消喘膏) for 10 Years

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Applying the method of sticking medicated plaster (Xiaochuangao) to the acupoint Feishu (B13), Xinshu (B15), Geshu (B17) on the back for treating 223 patients suffering from bronchial asthma. A follow-up of these patients over 10 years was made. 72 of 223 patients were cured, markedly effective 86, improved 35, ineffective 30, the total effective rate was 86.5%. Among the patients, the cold type