脾虚证与胃癌患者胃粘膜微量元素及其氧化物测定的临床意义

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内容提要 应用 EDAX 检测 41 例牌虚证胃病患者胃粘膜微量元素和氧化物。胃粘膜 Zn、Cu、ZnO和CuO在正常区与病变区间、脾气虚证与脾虚气滞证间、良性胃病与胃癌间, 差异均非常显著,P<0.05~0.001。检测结果提示: (1)人体内微量元素自成系统,元素 间比值处于相对稳定的范围; (2) Zn/ZnO和 Cu/CuO的比值, 反映Zn、Cu的"有效利用率"; (3) 牌虚气滞证与胃癌间有密切的内在联系; (4) Zn、Cu、ZnO、CuO、Zn/ZnO和Cu/CuO的量变,与病变性质及中医证型有关,值得深入研究。

应用能量色散X射线分析仪(简称能谱仪, EDAX) 检测脾虚证与胃癌患者胃粘膜组织中微量元素及其氧化物含量的比值,探索它们的量变对病证的影响及临床意义。现报道如下。

资料与方法

一、一般资料: 41例患者均经纤维胃镜、 手术和病理组织学证实面明确诊断为胃溃疡、 十二指肠球部溃疡(二者综称为良性胃病)和胃 癌。根据中医辨证标准(1,2)分脾气虚证组: 16 例, 男 14 例, 女 2 例; 年龄 22~74 岁, 平均 46岁。良性胃病15例(十二指肠球部溃疡 9 例, 胃溃疡 6 例),胃癌 1 例。胃粘膜肠上皮化生 6 例。脾虚气滞证组: 25 例,男 18 例,女 7 例;年龄 29~68 岁,平均 53 岁。良性胃病15 例(十二指肠球部溃疡 6 例,胃溃疡 9 例),胃癌 10例。胃粘膜肠上皮化生 19 例。

二、研究方法: 41例患者均作胃部分或大部分切除手术。采集每例患者手术切除的新鲜胃标本,剪取其特殊病灶区与非病灶区胃窦、胃体3处粘膜,各2cm×2cm,正中切开,迅速制样,1份作扫描电镜观察,1份作EDAX分析。每例患者的胃粘膜按扫描电镜和病理组织学检验结果,将癌组织、溃疡组织和重度炎症组织作为病变组织;将仅有极为轻度的浅表性炎症粘膜作为自身对照的相对正常组织。应用EDAX测定病变组织和正常组织中的微量元素

系列及其氧化物。

EDAX 能自动检测样本中 0.1~0.001 mm 范围内原子序数12以后的元素,通过电子计算机自动计算出各元素在所测得元素系列中的重量百分比(WT%),作为相对重量单位;并能在同一点上同步测得该元素系列相应的氧化物系列及相应的 WT%。病变组织和正常组织定15个点重复同步测定15次微量元素及其氧化物,取WT%的均值。胃模膜正常与病变组织微量元素 WT%之和的均值,称为综合量。氧化物综合量也是这样测算。

结果

41例脾虚证患者胃粘膜测得Na、Mg、Al、Si、P、S、K、Ca、Fe、Cu、Zn、Ti、Ni、Cr等 20 种元素及其相应的氧化物,其中 Zn、Cu、ZnO和 CuO的WT %量变显著。41例脾虚证患者胃粘膜相对正常组织的微量元素(WT%,下同) Zn 3.31±1.26,Cu4.64±1.94,ZnO 1.48±0.71,CuO 2.39±0.98,病变组织 Zn 1.44±0.85,Cu2.42±0.92,ZnO 0.73±0.41,CuO1.35±0.48,两部分组织间 Zn、Cu、ZnO和CuO 的差异有显著性意义,P<0.001。胃粘膜Zn、Cu、ZnO和 CuO WT%及其综合量,在脾虚证型间、良性胃病与胃癌间均有显著性差异,P<0.05~0.001,结果见表 1。

胃粘膜组织中ZnO和CuO降低,而Zn/ZnO

表 1 各证型组患者胃粘膜 Zn、Cu、ZuO、CuO含量比较 (M±SD)

| 组 | 别 | 例 | Zn (WT%) | | Cu (WT%) | | | ZnO (WT%) | | | CuO (WT%) | | | |
|-----|-----------------|----|---------------|--|-------------------------------|-------------------------------|---|----------------------|-------------------------------|---|---|----------------------------|---|-----------------------------|
| | | 数 | 正常 | 病变 | 综合 | 正常 | 病变 | 综合 | 正常 | 病变 | 综合 | 正常 | 病变 | 综合 |
| 思牌 | 气虚 | 16 | 4.33 ±1.27 | 1.89 ±0.84 | 3.11 ±1.22 | 6.12 ±1.76 | 2.98 ±0.78 | 4.55 ±1.57 | 2.08 ±0.46 | 1.00 ±1.22 | 1.54 ±0.54 | 3.18 ±0.65 | 1.61 ±0.33 | 2.39 ±0.78 |
| 者脾 | 虚气滞 | 25 | 2.68 ±0.84 | 1.17 ±0.69 | $^{1.93}_{\pm 0.75}$ | 3,66 ±1.24 | $\substack{\textbf{2.07} \\ \pm \textbf{0.84}}$ | 2.86 ±0.79 | 1.12 ±0.64 | 0.55 ±0.39 | $\substack{\textbf{0.84}\\ \pm 0.28}$ | $^{1.89}_{\pm0.80}$ | 1.18 ±0.49 | $\substack{1.53\\\pm 0.35}$ |
| 脾良症 | 性胃病 癌 | 15 | 3.23 ±0.37 | $\substack{\textbf{1.57} \\ \pm \textbf{0.07}}$ | 2.40 ±0.83 | 4.84 ±0.89 | $^{2,24}_{\pm 0.23}$ | 3.63 ±1.21 | $^{1.51}_{\pm0.38}$ | 0.84 ±0.14 | $^{1.18}_{\pm 0.33}$ | $^{2.34}_{\pm0.35}$ | ±0.10 | $\substack{1.91\\\pm0.45}$ |
| 州胃 | 癌 | 10 | 1.97 ±0.41 | 0.50 ±0.22 | $\substack{1.24 \\ \pm 0.73}$ | $\substack{2.77 \\ \pm 0.95}$ | $\substack{\textbf{1.63}\\ \pm \textbf{0.85}}$ | $^{2,20}_{\pm 0.57}$ | $\substack{0.44\\\pm0.04}$ | $\substack{\textbf{0.09} \\ \pm \textbf{0.03}}$ | $\substack{\textbf{0.27} \\ \pm \textbf{0.17}}$ | $^{1.10}_{\pm0.39}$ | $\substack{\textcolor{red}{\textbf{0.72}}\\ \pm \textbf{0.31}}$ | 0.93 ± 0.19 |
| 良牌性 | 气虚 | 15 | 4,39 ±0.33 | $^{\textcolor{red}{\textbf{1.99}}}_{\pm\textbf{0.01}}$ | 3.19 ± 0.17 | 6.28 ±0.54 | $\substack{3.05\\\pm0.12}$ | $^{4.66}_{\pm 0.33}$ | $^{2.11}_{\pm 0.13}$ | $^{1.04}_{\pm0.08}$ | 1.57 ±0.11 1.18 ±0.33 | $^{3.28}_{\pm 0.25}$ | $^{1.73}_{\pm 0.26}$ | $^{2.51}_{\pm 0.26}$ |
| 病脾 | 虚气滞 | 15 | 3.23 ±0.37 | $_{\pm 0.07}^{1.57}$ | $^{2.40}_{\pm 0.83}$ | 4.84 ±0.89 | ± 0.23 | 3.63 ±1.21 | $\substack{1.51 \\ \pm 0.38}$ | 0.84 ±0.14 | 1,18 ±0.33 | $\substack{2.34\\\pm0.35}$ | 1.48 ±0.10 | $	\pm 0.45 	\pm$ |

和 Cu/CuO 的比值升高,反映出 Zn、Cu 在组织中有效利用率降低。胃粘膜组织中 Zn/ZnO 和Cu/CuO的比值升高愈显著, Zn、Cu 有效利用率也愈低,组织结构中缺 Zn、缺 Cu 也愈厉害,癌变发生率也愈高,见表 2。

表2 各证型组患者胃粘膜 Zn/ZnO、Cu/CuO 比值

| · 24 | 451 | 例 | | Zu/Zu(|) | Cu/CuO | | | |
|------|------|----|------|--------|------|--------|------|------|--|
| 組 | 别 | 数 | 正常 | 病变 | 综合 | 正常 | 病变 | 综合 | |
| 患 | 脾气虚 | 16 | 2.10 | 1.89 | 2.02 | 1.92 | 1.85 | 1.90 | |
| 者 | 胂虚气滞 | 25 | 2.36 | 2.13 | 2.29 | 1.93 | 1.75 | 1.86 | |
| 脾气 | 良性胃病 | 15 | 2.13 | 1.86 | 2.03 | 2.06 | 1.51 | 1.90 | |
| 虚滞 | 胃 磁 | 10 | 4.47 | 5.56 | 4.59 | 2.52 | 2,26 | 2.42 | |
| 良胃 | 脾气虚 | 15 | 2.08 | 1.91 | 2.03 | 1.91 | 1.76 | 1.85 | |
| 性病 | 胂虚气滞 | 15 | 2.13 | 1.86 | 2.03 | 2.06 | 1.51 | 1.90 | |

脾气虚证中胃癌率为6.25 %, 肠上皮化生率为 37.5 %; 脾虚气滞证中胃癌率为 40 %, 肠上皮化生率为76%, 两证问差异有显著性意义, P<0.001。提出脾虚气滞证与胃癌间有密切的内在联系。

讨 论

机体内 Zn 是多种蛋白质分子所必需的元素,它是酶的重要组成部分和激活剂,缺 Zn会增加机体对癌瘤的易感性。Cu也是酶的重要组成部分,是氧化还原反应最有效的催化剂。Zn 与Cu在生命活动过程中起着重要的作用。胃粘膜组织中Zn、Cu、ZnO和CuO WT%下降,以

及Zn/ZnO、Cu/CuO比值上升,都与病变的性质有关。本组 Zn、Cu、ZnO和 CuO随着十二指肠球部溃疡、胃溃疡和胃癌的 顺序递减,而Zn/ZnO、Cu/CuO比值则随此顺序递升。在病变组织中这种顺序的递减和递升的程度更为明显。在脾气虚证与脾虚气滞证胃粘膜组织 Zn、Cu、ZnO、CuO、Zn/ZnO和Cu/CuO 的递减与递升,尤以正常组织中为明显。

胃粘膜正常组织中Zn、CuWT%,可以反映机体Zn、Cu的相对水平。测定病变组织中Zn、Cu、ZnO和CuO有助于对病变性质的研究;测定相对正常组织中Zn、Cu、ZnO和CuO则有助于对中医证的研究。因为中医的证,是疾病过程中机体整体性、阶段性、局部性(三性),代谢态、功能态、结构态(三态)同步变化的生理病理抗争的层次和水平的全身反应。所以测定患病机体"正常组织"中的活性物质是研究证本质的一条途径。临床上研究微量元素与健康、微量元素与证病关系时,检测组织或体液中微量元素的存在形式及其在元素系列中的比值,可能比仅测定单项元素的绝对值更有科学价值和意义。

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Observation on Effect of Tian-Huang-Ling Granule(天黄灵冲剂) in the Treatment of Allergic Rhinitis

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Based on the clinical experience of the authors, 60 cases of patients with allergic rhinitis had been treated with Tian-Huang-Ling Granule (larvae of a silkworm with batrytis, milk vetet, long-spur epimedium) made in Ren-Ji hospital since 1982 in order to search for an effective drug in TCM. The symptoms were relieved in 96.6% of the patients without any side effect of drowse, fatigue etc. The results were much better than those treated with Xin-Qin Granule (辛芩冲剂) or ketotifeni as the control groups (P<0.01). The eosinophils and basophils of blood counted before and after the treatment in all patients showed very significant differences (P<0.01). The knowledge of the disease in TCM was reviewed. Then the disease and the Tian-Huang-Ling Granule were discussed with the theory of TCM and WM combined.

(Original article on page 720)

Effect of Granule-Gastritis on 52 Cases of Chrnoic Gastritis Infected with Campylobacter Pyloridis

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52 patients with chronic gastritis infected by campylobacter pyloridis (CP) were selected for random observation. The course of treatment was 4 weeks. In the group treated with granule-gastritis, the effective rate for CP was 81.3% (26/32), and the improvement rates of the symptoms and histopathological lesion were 87.5% (28/32) and 40.6% (13/32) respectively. In the group treated with Wei-Mei-Su(维斯素) as the control group, the figures were 25%, 40% and 10% respectively. These differences were statistically significant (P<0.01~0.001). The results showed that the effect of granule-gastritis on chronic gastritis infected with CP was better than that of Wei-Mei-Su.

(Original article on page 722)

Clinical Significance of the Measurement of Gastric Mucosa Trace Elements and Their Oxides in Patients with Spleen Deficiency and Gastric Cancer

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The gastric mucosa trace elements and oxides were investigated with X-ray energy disprese analysis system in 41 cases of gastric disease due to Spleen deficiency. The differences in the change of the quantity of Zn, Cu, ZnO and CuO were very significant (P<0.05~0.001) in the gastric mucosa between normal area and focal area, between Spleen Qi(\P) deficiency and Spleen deficiency with Qi stagnation, and between benign gastric disease and gastric cancer.

The experiments showed that: (1) The trace elements in the organism form its own system, the values being within the relatively constant scope. (2) The ratios of Zn/ZnO and Cu/CuO reflected "the rate of effectual utility" of Zn and Cu. (3) There was a very close internal relation between Spleen deficiency with Qi stagnation and gastric cancer. (4) The quantitative changes of Zn, Cu, ZnO, CuO, Zn/ZnO and Cu/CuO were related to pathologic change and the TCM syndrome pattern, and is worthy of further research.

(Original article on page 724)

Clinical Observation of Consciousness-Restoring Effect of Angong-Nauhuang Pills(安宫牛黄丸)in Craniopathy Wang Yongheng(王永恒)

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104 patients of craniopathy with unconsciousness were treated with Angong-Niuhuang Pills (ANF) for a prospective random study. In 104 patients of Group A, ANP seemed to be an efficient