矽复康治疗矽肺53例疗效观察

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内容提要 矽复康是以莨菪类药为主的中药复方制剂,具有活血化瘀、疏通微循环、提高免疫功能、增强肺的麻清能力等作用,经3年来53例临床观察,对改善矽肺患者的临床症状,恢复肺功能,增强患者体质,恢复劳动力等均有较明显的效果。部分原有胸闷,气息,行走或上楼都感困难者,经治疗后都有不同程度的恢复,有的已恢复原工作。

关键词 矽复康 莨菪类药 矽肺 极循环 活血化瘀

矽肺是因长期吸入二氧化硅粉尘引起的,以肺组织纤维化为主的一种全身性疾病。迄今国内外尚缺乏满意的治疗方法。我们通过20余年的临床实践,吸取全国微循环与莨菪类药研究成果,于1984年率先创用莨菪类药治疗矽肺病,并取得初步疗效。在此基础上加用活血化療、并正固本、滋阴润肺的中药,取名矽复康,继续进行观察研究。自1987~1988年间,先后收治住院矽肺患者53例,通过3年临床疗效观察和动物实验已取得初步结果,并通过专家鉴定。现将临床部份报告如下。

对象与方法

一、对象

53 例患者均为男性,均有长期从事蛇纹石、磷矿石、煤矿、红石等开采加工的历史,年龄最小36 岁,最大70 岁,平均52.8 岁,接尘工龄最短6年,最长30年,平均19.4 年。53 例均符合 1986 年国家矽肺诊断标准(GB5906-86 尘肺 X 线诊断标准及处理原则), I期22 例, I+T9 例, I期15 例, I+T2 例, II期3 例, II+T2 例。

二、治疗方法

口服"砂复康"片(由弋阳县制药厂协作提供),每次3片,每天3次,3个月为1疗程,中间休息1周,连服4个疗程后,进行复查对比。

三、疗效观察指标

治疗前后除作血、尿、便常规,血沉,肝

肾功能及心电图等一般检查外,主要以临床症状,肺功能,实验室检查,胸片等改变作为考核评价指标。

结 果

一、临床症状

治疗后临床症状改善比较显著,其中有18 例在10天左右便有明显改善。从我们的观察中证明,单纯的矽肺患者年龄较轻,症状越重, 改善越快越明显;老年患者显效较慢。详见表 1。

· 表 1 53例矽肺患者治疗前后临床症状改善情况

症	状	治 疗 前		治	疗	后
		例数	%	例数		%
4	急	53	100.00	0		0
N)	癱	40	75.47	9		22.50
帹	嗽	46	86.47	1		2.17
咯	疾	44	83.02	4		9.09
島根	6 簟	35	66.04	1		2.86
疲	乏:	46	86.79	5		10.86

治疗后临床各种症状均有明显改善,与治疗前比较,经卡方检验P 值均<0.01,差异有非常显著意义。

二、肺功能

53例矽肺患者中除 8 例因前期无长形仪表记录纸未作肺功能测定外, 45例均在服用矽复康前后测定肺活量(FVC),最大通气量(MVV), 1 秒钟时间肺活量(FEV₁)。其结果见表 2。

经治疗前后比较,肺功能三项指标均得到

表 2 45例矽肺患者治疗前后肺功能改变 (x±S)

肺功能	治	疗 前	治	疗 启
FVC(L)	2.626	± 0.601	3.040	± 0.609*
FEV ₁ (L)	1.531	± 0.601	1.663	± 0.600*
MVV(L/min)	58.504	±24.224	67.020	±25.441*
MVV(%)	68.190	± 26.730	81.670	±29.580

注: 治疗前后比较, *P<0.01

显著提高 (P<0.01)。

三、实验室检查

从铜蓝蛋白和粘蛋白的检验结果看来,两者治疗前后均在正常(100u/dl~250u/dl和338mg/dl~0.277mg/dl) 范围之内,统计处理 t 值分别为 0.773 和 0.032, P值 均>0.05, 差异无显著意义。

四、胸片对比

经江西省劳动卫生职业病防治研究所专家 随机抽阅 20 张胸片,显示治疗前后部分胸片 两肺清晰度有所提高,局限性肺气肿有改善,有 3 份结节及融合块状阴影有不同程度的缩小。

五、微循环检查

经53例甲皱微循环观察发现,矽肺患者尤其是 I 期合并肺气肿和 I 、II 期患者都有不同程度的微循环功能障碍,表现在微动脉的痉挛扭曲、变形、渗出和隐没,并随着治疗后症状的改善而逐渐恢复,详见表 3。

表 3 矽复康治疗前后微循环改变情况

甲皱微循环		治疗	育 前	治	疔 后
		例数	%	例數	%
E	常	6	11.32	33	62.26
扭曲	变形	9	16.98	6	11.32
後出!	豫 没	38	71.70	14	26.43

六、副反应

在矽复康治疗过程中,出现的副反应主要有: 视力模糊占 50.94%,口干占 33.96%,尿潴 留占 7.55%,腹胀占 5.66%,一般经停药休息 1~2 天后,都可恢复,无蓄积作用,也不影响疗程。本组患者除上述反应外,未见其它毒 副作用,全部患者作肝、肾功能及 心 电 图 检查,均属正常。

讨论

通过3年的临床和实验研究,结合近年来有关微循环与莨菪类药研究发现,我们认为砂复康治疗矽肺,可能与莨菪类药物具有活血化瘀、疏通微循环、改善通气/血流比值,提高免疫功能⁽²⁾,松驰支气管平滑肌,改善纤毛运动,增强肺的廓清功能,保护细胞膜和溶酶体膜,以及类皮质激素样作用有关^(3~6)。

关于不良反应问题,除较普遍 反 应 有 口 干、视物模糊和瞳孔轻度散大外,未发现有其他毒副作用。我们曾对矽复康作动物急性毒性试验和蓄积试验,证实该药属 无 毒 性、无 蓄积,有利于长期服用。

(本工作承蒙中国中西医结合研究会微循环 专业委员会 杨国栋、姚新民同志指导,特此致谢)

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PAgT, VIII R:Ag and KPTT in two groups between pre- and post-treatment was significant statistically ($P < 0.05 \sim P < 0.001$). The decline in PAgT and VIII R:Ag was faster in group 2 than in group I ($P < 0.05 \sim P < 0.01$). The results showed that blood-activating and stasis-removing drugs were likely to improve abnormal PAgT and VIII R:Ag in nephrotic children.

(Original article on page 406)

Effects of Danggui Shaoyao Powder(当归芍药散) on Blood Rheological Indexes and Prostaglandin F₂α in Dysmenorrhea Patients

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The results showed that several blood rheological indexes of dysmenorrhea patients were abnormal, the contents of plasma prostaglandin $F_2\alpha$ (PGF₂ α) and menstrual blood PGF₂ α of the patients were significantly higher than those of the normal women. The abnormal indexes were recovered to normal range after the patients had been treated with Danggui Shaoyao Powder for 3 months. Danggui Shaoyao Powder had better actions of improving the abnormal indexes than Tianqi Dysmenorrhea Capsule (田七稿经股票) did. (Original article on page 410)

Clinical Comparative Study of Intravenous Piperacillin Sodium or Injection of Scutellaria Compound in Patients with Pulmonary Infection

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In this survey, 60 patients with pulmonary infection (mainly nosocimial pneumonia) were divided into two groups randomly. 30 patients treated by injection of Scutelleria compound and 30 patients by intravenous piperacillin sodium as control. Before treatment there was no significant difference of clinical data between two groups. The total efficacy was evaluated after treatment for one week. 40%, 36.7% were marked effective in corresponding. 33.3%, 40% were effective and 26.7%, 23% were ineffective respectively. Total effective rates were 73.3% and 76.7% in corresponding group. Temperature was averagely decreased for 7.43±3.02 and 7.63±5.79 days, symptoms disappeared or relieved for 11.67±6.75 days and 11.53±7.30 days, leucocyte decreased to normal on 9.03±6.53 days and 10.13±6.23 days, roentgenographical shadows disappeared or became smaller for 16.1±7.02 days and 16.1±9.88 days in corresponding group. There were no side-effect of the functions of liver, kidney and medulla ossium in two groups. In piperacillin sodium group, fungal infection were found in 4 of 30 patients, but there was no any case suffered from fungal infection in injection of Scutelleria compound group. It was suggested that injection on Scutelleria compound is a hopeful preparation and should be stu died furtherly.

(Original article on page 413)

Clinical Therapeutic Effect of Xifukang(矽复康)on 53 Patients with Silicosis

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Xifukang is a compound preparation of Chinese herbs consisting of Hanbane grugs mainly. Since 1987, the significant effeciency have been obtained in treatment of 53 patients suffering from silicosis by self-control study. The results indicated that the clinical manifestations including dyspnea, cough, sputum production, chest pain, weakness, etc. were markedly improved (P < 0.01) and measurements of pulmonary function (FVC, FEV and MVV) significant enhanced (P < 0.01). After treatment 20 cases roentgenogram exam showed that the lung's clarity and the limited emphysema were improved, the silicolic nodule and mass-mergence opacity of 3 cases lessened in some degree. By discussing the effect of Xifukang which might lower the collagen protein content of experimental silicosis of Wistar rats and improve pathomorphous. The authors concluded that the therapeutic mechanism of Xifukang could be the actions of this remedy on promoting blood circulation to eliminate blood stasis dredging microcirculation, increasing ventilation/perfusion-(V_A/Q), protecting dust-cells, resisting fibrosis, regulating immune function, enhancing lung clearance, postponing and preventing development of silicosis. (Original article on page 420)