

140例胃部恶性肿瘤患者手术前后 和死亡前血瘀证研究

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内容提要 三年多来,跟踪观察了140例胃部恶性肿瘤患者术前、术后和死亡前的舌质和5项血凝指标(AT-III、Fn、Fa、VIII R:Ag和 β -TG)。术前肿瘤患者紫舌阳性率高达58.0%,5项血凝指标测定值显著异常,说明胃部恶性肿瘤完全符合血瘀证诊断。术后紫舌阳性率和5项血凝指标均无显著好转,说明单纯手术切除没有根本改善肿瘤患者的血瘀状态。23例肿瘤患者在死亡前舌质与血凝指标显示了比术后、甚至术前更为明显的血瘀状态,说明血瘀证更是死亡前胃部恶性肿瘤的主要特征之一。提示:胃部恶性肿瘤与中医血瘀密切相关,血瘀证程度可作为判别病情轻重和预后的有效客观指标。

关键词 胃部恶性肿瘤 血瘀证 紫舌阳性率 血凝指标
确分期。

近年来国内对恶性肿瘤与中医的关系进行了研究,认识到恶性肿瘤与中医血瘀有一定的关系^①。为了深入研究胃部恶性肿瘤与中医血瘀的关系,自1986年至1989年,我们对140例胃部恶性肿瘤患者手术前后和死亡前从舌质和血凝指标(AT-III、Fn、Fa、VIII R:Ag和 β -TG)等方面进行了跟踪观察,现将观察结果报道于下。

一般资料

一、病例来源:140例胃部恶性肿瘤患者(胃恶性淋巴瘤1例,胃癌139例)全部来自上海第二医科大学附属仁济医院,均经病理切片证实。其中男性102例,女性38例。40岁以下13例,41~60岁54例,61岁以上73例。姑息切除98例,根治切除30例,病灶未切除12例。病变在胃窦部70例,胃小弯30例,贲门19例,胃体11例,胃大弯5例,胃底1例,全胃3例,残胃1例。

二、临床病理分期:根据1978年全国胃癌协作组会议修订的TNM病期分类法和《黄家驷外科学·上册》^②有关胃恶性淋巴瘤分期法,140例胃部恶性肿瘤患者中属I期9例,II期26例,III期31例,IV期71例,另有3例未能明

观察方法

一、观察时间:手术前、后1个月左右和死亡前3个月内。

二、观察内容:

1.舌质:固定2名专业人员同时观察,分为紫暗舌和非紫暗舌两种。

2.血凝指标:(1)AT-III(抗凝血酶III),火箭电泳法;(2)Fn(血浆纤维结合蛋白),火箭电泳法;(3)Fa(纤溶总活力),凝胶空斑法;(4)VIII R:Ag(因子VIII相关抗原),火箭电泳法;(5) β -TG(β 血小板球蛋白),放射免疫法。

结果

一、舌质:(1)手术前:手术前后舌质资料完整的88例胃部恶性肿瘤患者,其中舌质紫暗或瘀斑、瘀点者51例(占58.0%),非紫舌者37例。(2)手术后:术后一个月左右,上述88例肿瘤患者,其中舌质紫暗或瘀斑、瘀点者45例(占51.1%),非紫舌者43例。手术前后88例配对肿瘤患者舌质变化经 K^2 检验无显著意义($P>0.05$)。(3)死亡前:死亡前3个月内23例肿瘤患者,其中舌质紫暗或瘀斑、瘀点者13

例(占56.5%),非紫舌者10例。

二、血凝指标:(1)术前与正常人比较:140例肿瘤患者术前的5项血凝指标与正常人相比均有显著性差异($P<0.01$)。(2)术前与术后比较:手术后肿瘤患者的5项血凝指标与术前比均无显著好转($P>0.05$)。术后118例肿瘤患者的血凝指标测定值与正常值相比,4项

血凝指标仍有显著性差异($P<0.01$),唯有Fn无显著差异 $P>0.05$ 。(3)死亡前:23例死亡前3个月内肿瘤患者的血凝指标测定结果与正常人相比有非常显著差异($P<0.01$);与手术前后血凝指标测定值相比,处在更为明显的高凝状态,AT-III、Fn有显著性差异($P<0.05$)。详见附表。

附表 各组血凝指标观察结果 ($\bar{x}\pm S$)

组别	AT-III (mg/dl)	Fn (ng/ml)	Fa (%)	ⅧR:Ag (%)	β-TG (ug/ml)
正常人	36.41±8.30(59)	297.30±111.90(50)	90.28±24.34(30)	94.09±32.46(120)	25.00±8.20(103)
手术前	32.01±8.39(140)**	246.26±93.00(140)*	62.49±39.07(140)**	193.60±124.93(140)**	76.12±31.49(125)**
手术后	32.47±8.53(118)*Δ	266.03±97.10(118)Δ	66.10±38.18(118)*Δ	210.73±138.15(118)*Δ	73.46±34.24(113)*Δ
死亡前	26.45±6.95(23)**▲▲	215.68±86.53(23)*▲	57.89±39.33(23)**	209.92±124.39(23)**	75.14±31.90(20)**

注:与正常人组比较,* $P<0.01$,** $P<0.001$;与手术前组比较,Δ $P>0.05$;与手术前、后组比较,▲ $P<0.05$,▲▲ $P<0.01$;括号内数字为例数

讨 论

观察表明术前肿瘤患者的紫舌阳性率高达58.0%(51/88),同时我们进行了血凝指标(AT-III、Fn、Fa、RⅧ:Ag和β-TG)的测定,发现术前肿瘤患者的5项血凝指标与正常人相比有显著差异,ⅢAT-III、Fn和Fa都明显低于正常值($P<0.01$),AT-III是血浆中最重要的抗凝物质,Fn具有非免疫性调理素作用,有维护血流中凝血物质动态平衡的作用,Fa直接地反映了血浆素原活化素的活性,上述结果说明肿瘤患者抗凝—纤溶能力下降,机体调理凝血与纤溶能力下降,处于明显的高凝状态;ⅧR:Ag和β-TG都非常显著地高于正常值($P<0.001$),也说明肿瘤患者处于明显的高凝状态。根据1988年10月修订的血瘀证诊断标准^③,胃部恶性肿瘤患者完全符合血瘀证的诊断。

手术切除是目前治疗胃部恶性肿瘤的一个重要手段,手术后胃部恶性肿瘤患者的血瘀状态又如何呢?手术后1个月的观察结果显示,肿瘤病灶切除后,机体血瘀状态有所减轻,但紫舌阳性率仍高达51.1%(45/88),与术前相比, $P>0.05$ 。手术前后5项血凝指标测定值均无显

著好转,术后4项血凝指标测定值与正常值相比仍有显著性差异。说明肿瘤患者的血瘀状态并没有随着局部病灶的切除而得到根本的改善。

另一个有意义的观察结果是,23例肿瘤患者在死亡前3个月内舌质与血凝指标显示了比手术后、甚至手术前更为明显的血瘀状态。紫舌阳性率高达56.5%,高于术后阳性率,高凝状态比手术前、后更为明显,AT-III比手术前更低,两者有显著性差异,AT-III、Fn也明显低于术后水平,进一步说明血瘀证是晚期胃部恶性肿瘤的主要特征之一。

术前、术后和死亡的长期跟踪观察显示胃部恶性肿瘤患者与中医血瘀确实存在着密切的关系,血瘀程度似可作为判别肿瘤患者病情轻重和预后的有效客观指标。

(我校病生实验室杨君蕊帮助测定血凝指标,仁济医院江顺贤帮助工作,谨谢)

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Analysis on the TCM Syndromes of the Patients with Autoimmune Thyroid Diseases

—Observation on the Change of Thyroid and Immune Functions in 109 Patients

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Eighty-nine cases of hyperthyroidism and 20 cases of hypothyroidism caused by Hashimoto's thyroiditis were observed in order to analyse the thyroid and immune functions of the patients, and their relationship with the syndromes of TCM. The results showed that, in the patients with Yin(阴) deficiency syndrome, the contents of total T_4 , T_3 were higher than normal and TSH lower than normal, while in Yang(阳) deficient patients, the contents of total T_4 , T_3 were lower than normal and TSH higher than normal. This results suggested that the states of thyroid functions were closely related to the TCM syndromes. It was also found that the percentage of OKT 4⁺ cells and the self-recognizing ability of lymphocytes were lower than normal in patients with hyperthyroidism and Yin deficiency. While in patients with hypothyroidism and Yang deficiency, they were higher than normal. These meant that the abilities of lymphocyte autoreaction in Yin deficient patients were in contrary tendency with those in Yang deficient patients. The former had the manifestation of over-inhibition while the latter, hyperaction. Besides, the contents of auto-antibodies were higher than normal in both the patients with hyperthyroidism and hypothyroidism, which manifested itself as a common character of autoimmune thyroid diseases. The results indicated that there were common characters as well as individual characters of thyroid and immune functions between hyperthyroid patients and hypothyroid patients, and these characters might well be the material bases of various syndromes in TCM.

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Investigation on Blood Stasis Syndrome of Patients with Gastric Malignant Tumor

Pre-, Post-Operation and Before Death

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In the past three years, the authors observed substance of tongue and 5 indexes of blood coagulation (AT-III, Fn, Fa, VIII R:Ag and β TG) for a long time in 140 patients of gastric malignant tumor pre-operation, one month post-operation and 3 months before death. All patients were verified as gastric carcinoma by pathological section. The results showed that the positive rate of substance of tongue in patients pre-operation was as high as 58% (51/88), 5 indexes of blood coagulation in patients had obvious difference ($P < 0.001$) comparing to that of healthy persons. This implied it existed relationship between gastric malignant tumor and blood stasis in TCM, and accorded with diagnosis of blood stasis syndrome. With the resection of tumor focus, the states of blood stasis in patients had been improved to a certain extent. But the positive rate of substance of tongue post-operation was still as high as 51.1% (45/88) comparing to that pre-operation ($P > 0.05$). 5 indexes of blood coagulation in patients post-operation had no obvious improvement comparing to those pre-operation. This showed that the simple resection did not basically improve blood stasis in patients. The another important result was that the substance of tongue and 5 indexes of blood coagulation of 23 patients in last 3 months before death had more obvious blood stasis comparing to those post-operation even those pre-operation. This explained that blood stasis is one of the main characters of gastric malignant tumor before death. In conclusion, the extent of blood stasis syndrome can be used as an objective index to judge seriousness and prognosis of gastric malignant tumor patients' condition.

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Effects of *Ligusticum wallichii* on the Plasma Levels of β -TG, PF_4 , TXB_2 and 6-keto-PGF 1α in Rabbits under Acute Experimental Cerebral Ischemia

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By occluding the bilateral carotid arteries of rabbits to produce bilateral partial cerebral ischemia, and by using RIA and ELISA to measure the levels of Beta-thromboglobulin (β -TG),