

参茜固经冲剂治疗月经过多及其对血清、经血纤维蛋白裂解产物的影响

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内容提要 采用参茜固经冲剂治疗月经过多72例,并观察治疗前后经血及血清纤维蛋白裂解产物(FDP)含量。结果:72例中显效44例(61.1%),有效19例(26.4%),无效9例(12.5%),总有效率87.5%。经血中FDP含量治疗前后均高于血清中含量;治疗后经血及血清中FDP含量均较治疗前下降;显效病例经血FDP含量下降尤为明显。说明参茜固经冲剂是治疗月经过多的有效药物,其作用可能是参与纤溶系统,减少纤维蛋白裂解,增加纤维蛋白沉积,促使血管内膜闭合及凝血过程发生,达到固经摄血之目的。

关键词 参茜固经冲剂 月经过多 纤维蛋白裂解产物

1987年1月~1988年6月用参茜固经冲剂治疗月经过多72例,其中18例测定治疗前后血清和经血中纤维蛋白裂解产物(FDP)含量,以探讨本冲剂的治疗机理,现报告如下。

临床资料

一、72例均为本院门诊患者,平均年龄35.1岁(21~50岁),以生育年龄妇女为多。平均病程7年(3个月~30年)。

二、诊断标准:(1)病史:月经规则,月经量明显增多,可有放环史。(2)月经量:应用改良碱性血红蛋白稀释法测定均超过80ml/周期。(3)基础体温呈双相型。(4)妇科检查:子宫大小正常或增大,双侧附件正常或有触痛性结节。(5)B型超声检查:子宫大小正常或略大,或有子宫肌瘤,每个肌瘤直径<5cm,卵巢正常;或有5cm以下粘稠性液性暗区。

72例均经以上检查明确诊断,子宫肌瘤者29例,其中6例为多发性小肌瘤,23例为5cm直径以下的肌壁间肌瘤;有排卵型功能性子宫出血病者28例;子宫内膜异位症者7例;放环后月经过多者5例;产后、流产后月经过多者3例。72例月经血量平均155.1ml(82.7~436.3ml/周期),其中出血量在100~140ml/周期者占55.6%。

方 法

一、月经血量测定方法:采用改良碱性血红蛋白稀释法测定月经血量^①。

二、FDP测定方法:月经高峰期(经行第2~3天),阴道内留置消毒月经杯1~3小时取经血,将经血沉淀、离心,取上清液备用。同时静脉取血、离心,取血清备用。采用上海生物制品研究所的FDP致敏血球及标准血浆,采用反相间接血凝法测定^②。有18例治疗前后作了测定。

三、治疗方法:参茜固经冲剂(上海中药三厂产品):党参12g 白术6g 升麻9g 生地12g 杭白芍9g 女贞子12g 旱莲草12g 茜草12g 生蒲黄12g 生槐米12g 大、小蓟各12g 生山楂12g。4包冲剂相当于1剂中药量。于经前1周到月经干净期间服药,每次2包,每日2次,3个月经周期为1个疗程,服满1个疗程评定疗效。

结 果

一、疗效评定标准:显效:月经量减少>30%;有效:月经量减少20~30%;无效:月经量减少<20%。

二、结果:72例中显效44例(61.1%),有效19例(26.4%),无效9例(12.5%),总有效率87.5%。72例治疗前月经血量平均155.1

ml/周期, 治疗后平均 103.3 ml/周期, 较治疗前明显减少 ($P < 0.001$)。

疗效与病种的关系: 见表 1。

表 1 疗效与病种的关系 (例)

病 种	显效	有效	无效
子宫肌瘤	20	4	5
有排卵功血	16	10	2
子宫内膜异位症	3	4	
放环后	3	1	1
产后、流产后	2		1

表 1 各病种间的疗效, 经 χ^2 检验, $P > 0.05$ 。说明参茜固经冲剂对上述病种所致月经过多有类似的疗效。

三、治疗前后血清、经血 FDP 含量比较: 经血 FDP 治疗前为平均 $38.61 \mu\text{g/ml}$, 治疗后为 $16.67 \mu\text{g/ml}$; 血清 FDP 治疗前平均含量为 $18.89 \mu\text{g/ml}$, 治疗后为 $10.28 \mu\text{g/ml}$ 。治疗前及治疗后经血 FDP 含量均明显高于血清 FDP 含量 ($P < 0.001$, < 0.05); 治疗后经血及血清中 FDP 含量均有明显下降 ($P < 0.001$, < 0.01), 尤以经血 FDP 含量下降较明显。

疗效与 FDP 的关系: 见表 2。

表 2 疗效与血清、经血 FDP 含量的关系

	例数	血清 FDP ($\mu\text{g/ml}$)		经血 FDP ($\mu\text{g/ml}$)	
		治前	治后	治前	治后
显效	13	19.62	10.39***	41.54	16.92*
有效	3	18.33	11.67**	18.33	11.66**
无效	2	15.00	12.50**	50.00	22.25**

与治前比较 * $P < 0.001$, ** $P > 0.05$, *** $P < 0.05$

显效病例治疗后血清、经血 FDP 含量均下降明显。

讨 论

一、月经过多患者与血瘀、气虚、血热等因素有关, 该类患者在临床上常伴有血瘀征象,

如舌有瘀斑, 瘀点, 皮肤有紫癜, 有瘀血阻滞症状, 络脉受阻, 瘀血不去, 新血不生而致月经过多; 积瘀化热, 热迫冲任, 经血妄行, 血去伤阴, 气阴两亏, 则经血更多。故用参茜固经冲剂益气养阴, 祛瘀生新, 固经摄血。该方用党参、白术、升麻益气摄血; 用生地、白芍、女贞子、旱莲草养阴清热, 凉血止血; 用蒲黄、槐花、刘寄奴、茜草、大小蓟、生山楂清热凉血, 祛瘀止血。配方严谨, 气阴得复, 促进经血固摄, 血止则气阴恢复, 两者配合, 相得益彰。

二、活血化瘀和 FDP 的关系, 月经过多的原因, 目前机理尚不清楚, 有学者认为子宫腔内纤维蛋白溶解活性增强是某些妇女月经过多的致病原因。子宫内膜在月经来潮时, 由于有纤溶酶原激活剂的作用, 催化无活性的纤溶酶原, 成为有活性的纤溶酶, 使纤维蛋白裂解, 抑制内膜血管的闭合及凝血过程, 使月经期失血量增多。测定经血 FDP 含量, 在一定程度上能间接反应月经来潮时子宫腔内纤溶活性的程度, 从而间接确定月经过多与纤溶活力之间的关系。本组对 18 例用参茜固经冲剂治疗的月经过多患者, 测定了治疗前后经血及血清 FDP 含量, 提示治疗后月经过多患者经血与血清中 FDP 含量明显降低, 经血中 FDP 下降更明显, 显效病例经血 FDP 含量下降最显著。活血化瘀药物除能改善血液物化指标等作用外, 还参与纤溶系统, 降低纤维蛋白裂解产物, 增强纤维蛋白沉积, 促使内膜血管的闭合及凝血过程发生, 达到固经摄血之目的。

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· 书 讯 ·

《人体体质学——理论、应用和发展》一书即将出版。该书由匡调元教授主编, 上海中医学院出版社出版。全书包括: 人类群体体质学、人体发生体质学、医学体质学、养生体质学、气质体质学及体质学研究

思路、方法与展望等专题, 深入浅出地论证了体质与遗传、生态、优生、优育、究境、养生、临床治疗及体质食疗等问题。该书每册 7.20 元 (含邮资), 欲购者请汇款至上海中医学院体质学教研组 (200032) 肖颐收。

tions between pAII and pANP, pALD ($P < 0.001$).

Key Words Heart Qi insufficiency, Heart Yin deficiency, Heart Yang deficiency, atrial natriuretic polypeptide, aldosterone, angiotensin II, congestive heart failure

(Original article on page 405)

Observation of the Superficial Tongue Blood Volume and the Tongue Spectrophotometric Determination on Coronary Heart Disease Patients with Blood Stasis Syndrome

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The tongue bodies of coronary heart disease (CHD) patients with blood stasis syndrome were looking dull purple in different degree. The authors adopted two kinds of biophysics methods which are tongue spectrophotometer and DM-80-6 superficial tongue blood volume meter. 52 CHD patients with blood stasis syndrome, 50 normal individuals and 26 patients before and after the treatment according to promote blood circulation to remove the blood stasis, were examined. The results were as follows: The purple ray values of the tongue spectrum of the CHD patients with blood stasis syndrome were more than that of normal individuals. Statistics showed significant difference ($P < 0.01$). So was the tongue blood volume ($P < 0.01$). In the treatment group, the purple ray value of tongue spectrum reduced, and the red ray volume of tongue increased significantly, as well ($P < 0.01$). The results suggested that both methods may be quantitative comparative parameters for diagnosis, differentiation of symptoms and signs, and evaluation of the therapeutic effectiveness.

Key Words coronary heart disease, blood stasis syndrome, superficial tongue blood volume, tongue spectrophotometric determination

(Original article on page 407)

Effect of Shen-Qian Gu-Jing Granule(参茜固经冲剂) on Fibrin Degradation Products in Serum and Menstrual Fluid of Patients with Menorrhagia

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Shen-Qian Gu-Jing granule was used in the treatment of the menorrhagia in 72 cases including idiopathic menorrhagia 28, uterine myoma 29, endometriosis 7, intrauterine device 5, postpartum and post induced abortion 3 cases. The amount of menstrual blood loss (MBL) and the fibrin degradation products (FDP) level in menstrual fluid and peripheral blood were measured before and after treatment. 87.5% of all cases showed a significant decrease in MBL ($P < 0.05$). The local FDP level significantly decreased parallel to effectiveness of MBL. The results suggested that the function of this Chinese herbs complex in menorrhagia was related to the regulation of FDP level.

Key Words Shen-Qian Gu-Jing granule, menorrhagia, fibrin degradation products

(Original article on page 409)

Clinical Observation and Experimental Study on Shenghong Kangyan Su (胜红抗炎素) in Treating 144 Cases of Pelvic Inflammation with Blood Stasis Syndrome

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Using the method of clearing up heat and resolving stasis, the authors treated 144 cases of pelvic inflammation with blood stasis syndrome (BSS) with Shenghong Kangyan Su. The total effective rate was up to 97.92%, cure rate up to 68.75%, without toxicity and side effects. Clinical and experimental study showed that the crux of pelvic inflammation with BSS had some relations with microcirculation obstruction. Inflammation may cause microcirculation obstruction and blood stasis, and is one forms of BSS. Therefore dull purple tongue, undertongue vein dilated, abdominal pain in lower part, pathologic mass can be regarded as the basis of diagnosis of pelvic inflammation with