

胜红抗炎素治疗盆腔炎血瘀证144例 临床观察和实验研究

福州市第一医院(福州 350009) 方留焰

福州市医学科学研究所 林礞石 叶树范 王建榕 方 华

内容提要 应用清热化瘀法以胜红抗炎素治疗盆腔炎血瘀证144例,总有效率达97.82%,治愈率68.75%;治后患者体温下降,症状、体征、紫暗舌、舌下脉曲张、甲皱微循环障碍消失或好转。研究结果证明:以胜红抗炎素为主的清热化瘀药具有抗炎、消肿、镇痛、改善微循环作用,达到通行血脉,促进血运,清热散瘀,从而消除血瘀证候。紫暗舌、舌下脉曲张、下腹部压痛、病理性肿块,可作为盆腔炎血瘀证的诊断依据。

关键词 慢性盆腔炎 清热化瘀 胜红抗炎素 甲皱微循环 舌质 舌脉 血瘀证

为了进一步探讨血瘀证的实质和中药清热化瘀的作用机理,我们选妇科常见的慢性盆腔炎作为研究对象,以中医理论为指导,取具有高效的清热化瘀新药——胜红抗炎素^①作为主要治疗药物,对144例患者进行了临床观察及实验研究,现报告如下。

临 床 观 察

一、临床资料:病例来源于1988年3月~1989年8月本院妇科门诊与住院的盆腔炎患者共144例,年龄18~50岁,平均28岁。人工流产57例,上环或取环22例,输卵管结扎术8例,经期间房或盆浴21例,产后经后发病15例,不明原因21例。诊断标准:全组均取中西医双重诊断,西医依据有关文献^②,中医按1988年血瘀证诊断标准^③中主要项目。全组分为4型,湿热挟瘀72例,气滞血瘀54例,气血虚挟瘀16例,寒凝气滞2例。

二、观察指标:以中医四诊资料为依据,尤其是舌质色、舌脉、症状,触诊并通过盆检、血象、B超、甲皱微循环、子宫输卵管造影等检查(固定仪器、专人负责)。在治疗前后及治疗中均进行检测并按统一制订的表格进行登记。

舌质色的检测标准:依据全国中西医结合肿瘤四诊研究会所指定的舌质色舌板进行检测。

三、治疗方法:主方,胜红抗炎素胶囊主要成分:胜红蓟35.8%,刺针草21.4%,红木香21.4%,连翘21.4%(福州市医科所研制,福建省闽清制药厂生产),规格每粒0.25g,每次4~5粒,每日3~4次,饭后服,连续用药3~4周为1个疗程,可连服1~3个疗程。加减:盆腔包块大加赤桃化瘀汤:桃仁10g,赤芍10g,川芎9g,黄芩9g,山甲20g,三棱9g,莪术9g;气虚加党参10g,黄芪15g,白术10g;里热盛加败酱草30g,白花蛇舌草15g,蒲公英10g;出血多加贯众10g,侧柏叶10g,生地10g,旱莲草15g,益母草15g。

四、结果

1.疗效评定标准:依据有关“慢性盆腔炎中西医结合治诊标准”^②,应用本药1周以上,3个月以内者参加评定。

2.结果:(1)疗效:全组144例,痊愈99例(68.75%),显效22例(15.28%),有效20例(13.89%),无效3例(2.08%),总有效率达97.92%。(2)舌质色的变化:全组治疗前紫暗色有134例,治疗后消失79例,减轻53例,总有效率为98.51%。(3)舌脉的变化:全组治疗前出现舌脉1~3度曲张者138例,治疗后转为正常95例(69.57%),好转46例(33.33%),总有效率为97.97%。(4)甲皱微循环的变化:鉴于紫暗舌是血瘀证中的一个主要见证,故从紫暗色患者中取35例,对治疗前后甲皱微循环

检查的患者进行分析,治疗前全组均有出现多项不同程度的微循环障碍,治疗后各项目都恢复正常者19例(54.29%),有不同程度减轻或消失者15例,无效1例(属复合病),详见附表。结果表明,各项目中微血流障碍,血管周围渗出居多,分别占85.71%、80%,经治疗后各项都有显著改善,尤其在提高血流速,降低红细胞聚集,改善微血管渗出方面效果更为显著($P<0.001$),说明盆腔炎血瘀证是一个与微循环障碍有联系的病程过程,炎症是瘀证表现形式之一。

附表 35例紫暗舌患者治疗前后
甲皱微循环障碍比较

项 目	治 疗 前		治 疗 后		P 值
	例	%	例	%	
视野模糊	27	77.14	10	28.57	<0.0001
微血管袈顶扩张瘀血	20	57.14	6	17.14	<0.001
微血流缓慢或瘀滞	30	85.71	9	25.71	<0.0001
红细胞聚集	14	40.00	2	5.71	<0.001
微血管周围渗血或出血	28	80.00	11	31.42	<0.0001
微血管狭窄或闭塞	18	51.42	8	22.85	<0.05

实 验 研 究

一、实验材料:(1)药品:胜红抗炎素由福建省闽清制药厂提供,其浓度为2g/ml生药。(2)动物:昆明种小白鼠由福建省药品检验所动物房提供;大白鼠 Wistar 品种购自上海市计划生育研究所动物场。

二、方法与结果

1. 抗炎实验:(1)对鸡蛋清诱发大鼠足蹠肿胀的抑制作用:取170~280g健康大白鼠60只,雄雌兼有按1.2g/kg、0.84g/kg、0.6g/kg,且分口服及静脉给药两个途径,给药前先口服5ml生理盐水,5min后口服或静脉给药,30min后将新鲜的10%鸡蛋清溶液0.1ml注射于大白鼠左后肢足蹠,于注射后的第30min,1、2、4、6h测量其左右踝关节肿胀程度。对照组给生理盐水,方法同前。结果:胜红抗炎素对鸡蛋清诱发大白鼠足蹠肿胀有明显的抑制作用,且随着剂量的增大,作用愈明显。(2)对大白鼠棉球肉芽肿瘤增生的影响:取雄性大白鼠40只,体重169.35±7.92g($\bar{x}\pm S$)分成4组,按meiai等的棉球法,用巴比妥钠30mg/kg静脉注射麻醉后,将两个20mg重无菌棉球分别植入大鼠两侧腋窝部皮下,尔后第1天开

始给药,胜红抗炎素2g/kg和4g/kg静脉注射,氢化可的松10mg/kg和生理盐水静脉注射为对照,连续给7天;第8天颈椎脱臼致死,仔细剥出棉球肉芽肿,置90℃烤箱中烘1h,用扭力天平称其重量,同时取各大鼠肾上腺及胸腺称其重量,比较各组大鼠每100g体重的棉球肉芽肿、肾上腺及胸腺重量的差别。结果表明:胜红抗炎素、氢化可的松对大鼠棉球肉芽肿增生具有明显的抑制作用,说明对慢性增生性炎症具有一定的疗效。

2. 镇痛作用:小白鼠醋酸诱发扭体反应:选用体重17~23g健康雌性小鼠120只,分为8组,腹腔注射4组按0.4g/kg、0.6g/kg、0.8g/kg给药及对照组;口服灌胃4组按0.6g/kg、0.8g/kg、1.0g/kg给药及对照组。结果本药对小白鼠醋酸诱发扭体反应有明显抑制作用。提示该药有一定镇痛作用。

讨 论

一、盆腔炎血瘀证属常见病、多发病,美国称之为十大疑难病症之一。我们采用新中成药胜红抗炎素为主方治疗144例,取得较好疗效。研究结果说明,炎症可以致瘀,炎症是瘀证的表现形式之一^{〔4〕},清热化瘀确有消除炎症的作用,用清热化瘀法治疗血瘀证,疗效好、治愈率高。

采用胜红抗炎素治疗慢性盆腔炎患者及动物实验研究均表明该药具有抗炎、消肿、止痛作用,是治疗炎症理想药物。

二、根据1986年血瘀证诊断标准对慢性盆腔炎血瘀证候观察结果证明:紫暗舌、腹痛、病理性肿块、舌下脉曲张、甲皱微循环障碍等项证候治疗前发生率高达93.06~100%,因此这5个项目可作为盆腔炎血瘀证的诊断依据。

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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

Shi Zai-xiang(史载祥), Wu Ze-min(武泽民), Xu Shu-qiang(许树强), et al

China-Japan Friendship Hospital, Beijing (100029)

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

Cao Ling-xian(曹玲仙), Yu Jing(俞瑾), Xia Hui-qin(夏惠琴)

Obstetric and Gynecological Hospital, Shanghai Medical University, Shanghai (200011)

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

Fang Liu-yan(方留焰), Lin Shan-shi(林礞石), et al

Fuzhou No. 1 Hospital, Fuzhou Institute of Medical Science, Fuzhou (350009)

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