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扣掐足窍阴穴治疗胆道蛔虫症 45 例

赣南医学院附属医院(江西 341000) 李树芳

笔者自1985年以来,采用扣掐足窍阴穴方法治疗胆道蛔虫症45例,取得了较好疗效,报道如下。

临床资料 45例中男28例,女17例;年龄15~60岁,平均46岁。其中16例住院治疗,29例门诊治疗。从发病至就诊时间最短2h,最长10天,平均3.5天。45例均有剑突下偏右侧阵发性疼痛,其中阵发性钻顶样疼痛或绞痛者34例,钝痛11例,疼痛放射至右肩胛区15例。伴畏寒或寒战、发热(体温在37.5~39.3℃之间)28例。呕吐蛔虫者18例,最少1条,最多8条。巩膜黄染者9例。38例有右上腹压痛,其中4例有右上腹腹肌紧张及轻度反跳痛。白细胞总数 $<10 \times 10^9/L$ 14例, $\geq 10 \times 10^9/L$ 者31例。

治疗方法 用拇指扣掐右侧足窍阴穴,每次扣掐60~100下,每2h1次,直至疼痛消失为止。体温超过38℃以上或白细胞总数 $>10 \times 10^9/L$ 者,加用庆

大霉素8万u,肌肉注射,每日2次。

结果 经扣掐治疗1~3天后症状全部消失,其中扣掐1天疼痛消失共30例;扣掐2天疼痛消失7例;扣掐3天疼痛消失8例。全部患者1周之内黄疸全部消退,体温及白细胞计数降至正常。45例经扣掐治疗后有29例大便排出蛔虫,占63%。最少1条,最多25条。疼痛消失追加服驱蛔药后排出蛔虫者10例。总排虫率占86.6%。

体会 胆道蛔虫症常因饮食内伤,情志不舒而使脏寒胃热,蛔虫上逆,阻塞气机,气机不运所致。足窍阴穴具有清胆利膈、泄热通窍作用。《十四经要穴主治歌》有“窍阴主治胁间痛”之记载。现代实验证明针刺足窍阴穴可使胆囊弛缓。因此,采用扣掐足窍阴穴治疗胆道蛔虫症是一种简便、无痛苦、无副作用、疗程短、收效快的方法。值得推广。