

步长稳心颗粒联合比索洛尔治疗室性早搏的疗效观察

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摘要 目的:观察步长稳心颗粒联合比索洛尔治疗室性早搏的疗效。方法:对 65 例室性早搏患者,随机分为 2 组,对照组在治疗原发病基础上给予比索洛尔治疗;治疗组在对照组治疗方法上加用山东步长制药有限公司生产的步长稳心颗粒,两组疗程均为 30d,观察 2 组患者室性早搏治疗的效果及心电图的改变。结果:对照组总有效率为 53%,治疗组为 91%,治疗组总有效率明显高于对照组,两组比较有统计学意义($P < 0.05$)。结论:步长稳心颗粒对室性早搏患者疗效较好,不良反应少,值得推广。

关键词 步长稳心颗粒;比索洛尔;室性早搏

Observation on Therapeutic Effect of Buchang Wenxin Capsule Combined with Bisoprolol in Treating Ventricular Premature Contractions

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Abstract Objective: To observe the therapeutic effect of Buchang Wenxin capsule combined with bisoprolol in treating ventricular premature contractions. **Methods:** Sixty five patients suffered from ventricular premature contractions were randomly divided into two groups. Patients in control group were given Bisoprolol apart from regular treatment on protopathy. Patients in observation group received additional treatment of Buchang Wenxin capsule apart from the same treatment as the control group. The treatment course was 30 days. The therapeutic effect of treatment and changes of ECG in two groups were observed. **Results:** The total effective rate in control group and observation group were relatively 53% and 91%. There were significant differences between the two groups ($P < 0.05$). **Conclusion:** Buchang Wenxin capsule shows satisfactory therapeutic effect in treating ventricular premature contractions with few side effects. It is worth generalizing.

Key Words Buchang Wenxin capsule; Bisoprolol; Ventricular premature contractions

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室性早搏患者主要症状为心悸不适,当频发室性早搏或呈二联率,可导致心排血量减少,严重者影响患者正常的工作与生活。室性早搏患者由于心脏激动顺序的改变会加重血流动力学障碍,易发生猝死,所以控制室性早搏不仅能够减少猝死发生,还能改善心功能^[1]。临床常用的抗心律失常药物有致心律失常作用、对心肌及心脏传导的抑制作用等^[2]。现将我院应用步长稳心颗粒联合比索洛尔治疗室性早搏的临床观察报道如下。

1 资料与方法

1.1 临床资料 我院 2010 年 2 月至 2012 年 10 月门诊及住院患者共 65 例。入选标准:1)均有心悸、胸闷等临床症状;2)24 h 动态心电图提示室性早搏 > 30 次/min;3)抗心律失常药物停用 2 周以上。随机分为治疗组和对照组。治疗组 33 例,对照组 32 例。

1.2 研究方法 对照组在治疗原发病基础上给予初始剂量比索洛尔片 2.5 mg,1 日 1 次,口服;治疗组在对照组治疗方法上加用步长稳心颗粒(山东步长制药有限公司生产),每次 9 g,1 日 3 次,温开水冲服。两

组疗程均为 30d,同时比索洛尔据血压、心率及症状变化加减。

1.3 观察指标 观察胸闷、心悸症状治疗前后改善情况;通过 24 h 动态心电图,比较室性早搏数量治疗前后的改变。同时观察治疗中、治疗后患者是否出现肝功、肾功、甲状腺功能等异常,患者是否出现难以耐受的不良反应。

1.4 疗效判断标准 症状改善情况。显效:心悸、胸闷等临床症状基本消失;有效:症状明显好转;无效:临床症状无改善。客观标准:通过 24 h 动态心电图检查,比较治疗前后室性早搏数量的改变,参照《中药新药临床研究指导原则》^[2]执行。显效:24 h 早搏完全消失或早搏减少 90% 以上;有效:早搏减少 50% ~ 90%;无效:早搏减少小于 50%。

2 结果

2.1 临床疗效比较 两组治疗结束后,对照组总有效率为 53%,治疗组为 91%,后者明显优于前者,两组比较,有统计学意义($P < 0.05$,见表 1)。两组患者治疗后复查血常规、肝肾功能、甲状腺功能与用药前无特殊

变化。

表 1 两组临床疗效比较

组别	例数	治愈	有效	无效	总有效率(%)
对照组	32	8	9	15	53
治疗组	33	21	9	3	91

3 讨论

稳心颗粒由党参、甘松等 5 种中药组成,具有整合调节多离子通道阻滞和非离子通道调节的双重作用,不仅可治疗心悸,降低心肌细胞自律性,还能改善心肌缺血,增加有效循环量,而达到改善心功能的作用。其中甘松具有抗心律失常作用,其有效成分为缬草酮。甘松提取物对心肌细胞钠通道和钙通道有抑制作用,能延长不应期,阻断折返激动,治疗期前收缩^[3-4]。该组方治疗时可达到益气养阴、定悸复脉,活血化瘀作用,明显减少心律失常的发作次数,改善心悸、气短、乏

力、失眠等临床症状。稳心颗粒可以治疗房性早搏、室性早搏、心房颤动,甚至优于心律平^[5]。本观察结果显示步长稳心颗粒与比索洛尔联合治疗室性早搏,不仅明显优于单独应用比索洛尔治疗,还可减少比索洛尔的用量,不良作用少,值得临床上推广。

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脑心通口服联合补阳还五汤足浴治疗糖尿病末梢神经病变 65 例

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摘要 目的:探讨脑心通口服联合补阳还五汤足浴治疗糖尿病末梢神经病变的临床疗效。方法:治疗组口服脑心通胶囊,同时每晚以补阳还五汤为基本方水煎泡足,对照组给予口服甲钴胺胶囊,2 组进行疗效对比。结果:治疗组总有效率 90.8%,对照组总有效率 71.0%。治疗组疗效明显优于对照组($P < 0.05$)。结论:脑心通口服联合补阳还五汤足浴治疗糖尿病末梢神经病变疗效明显,值得临床。

关键词 糖尿病末梢神经病变/中医药疗法;脑心通;补阳还五汤;足浴

Oral Administration of Naixintong Combined with Foot Bath of Buyang Huanwu Decoction in Treating 65 Cases of Diabetic Peripheral Neuropathy

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Abstract Objective: To explore the clinical effect of oral administration of Naixintong combined with foot bath of Buyang Huanwu decoction in treating diabetic peripheral neuropathy. **Methods:** Patients in treatment group were given oral administration of Naixintong capsule as well as foot bath of Buyang Huanwu decoction every night. Patients in control group received oral administration of Mecobalamin capsule. **Results:** The total effective rate of treatment group was 90.8%, and the total efficiency rate of control group was 71%. The curative effect of treatment group was better than that of the control group($P < 0.05$). **Conclusion:** The clinical effect of oral administration of Naixintong combined with foot bath of Buyang Huanwu decoction in treating diabetic peripheral neuropathy is satisfactory and worth clinical application.

Key Words Naixintong; Buyang Huanwu Decoction; Foot Bath; Diabetic Peripheral Neuropathy

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糖尿病末梢神经病变是糖尿病最多见的并发症之一,主要表现为蚁行、麻木、虫爬、触电感、手足冰冷或