

精神分裂症的活血化瘀治疗及血液流变学改变

——347 例临床对照观察

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内容提要 本文报告以活血化瘀为主的中药加西药治疗精神分裂症 194 例和单纯西药治疗的 153 例对照观察。其疗效前者明显高于后者 ($P < 0.005$), 且可缩短疗程 ($P < 0.01$)。并对 40 例病人进行了血液流变学检查, 结果各项指标均高于正常 ($P < 0.01$), 为活血化瘀治疗提供了依据。

活血化瘀治疗精神分裂症, 国内各地均有报道^[1], 由于大多缺乏科研设计及对照, 疗效较难肯定。东北三省精神分裂症活血化瘀治疗协作组, 两年来共治疗住院病人 347 例, 通过四组对照观察, 初步肯定了活血化瘀治疗本病的疗效, 现将结果报告于下。

临 床 资 料

一、采用随机分组及配对将 347 例分为四组, 注意了年龄、病程及类型相接近。一组用小剂量西药, 二组用小剂量西药加中药, 三组用大剂量西药, 四组用大剂量西药加中药。西药限于氯丙嗪及三氟拉嗪, 分别以日量 300 mg、30mg 以下为小剂量, 300mg 及 30mg 以上为大剂量。

二、西医诊断以 1981 年苏州精神分裂症会议所订立之诊断标准确诊, 分四个类型及其他型。病程从发病起算, 如充分缓解 5 年以上者, 从复发起算。

三、中医辨证分型分六型: 痰火内扰 (痰火型)、气郁痰结 (痰结型)、气滞血瘀 (血瘀型)、气虚痰结 (气虚型)、阴虚火旺 (阴虚型)、气阴两虚 (两虚型), 以活血主方 (大黄、香附、桃仁、当归、赤芍、川芎) 随证加减。

四、疗程及疗效标准: 治疗观察均为三个月。治愈: 症状消失, 自知力恢复, 能从事一般工作或料理家务; 显著进步: 症状基本消失, 自知力大部分恢复; 好转: 基本症状有改善; 无效: 基本症状无改善。

五、病人一般情况和四组疗效比较, 协作

表1 347例精神分裂症一般情况

组别	例数	年龄 (岁)	性 别		病 程 (年)	西 医 类 型					中 医 分 型					
			男	女		偏执	青春	紧张	单纯	其他	痰火	痰结	血瘀	气虚	阴虚	两虚
一	75	32.5±10.3	26	49	5.5±3.5	34	18	1	4	18	14	11	9	16	7	18
二	100	31.8±9.9	34	66	5.8±5.9	49	20	3	6	22	16	21	17	16	18	12
三	78	34.1±10.3	23	55	5.5±5.0	38	12	2	5	21	11	11	8	28	9	11
四	94	31.2±9.7	30	64	5.6±6.4	47	15	1	5	26	13	12	17	20	18	14
合计	347		113	234		168	65	7	20	87	54	55	51	80	52	55

分别统计了高于正常范围的项目(占70.8%)。这些异常项目在各个证型中均存在,以血瘀型为最高,异常项目率75.9%,其次为痰结型73.8%,痰火型66.7%,气虚型63.9%(阴虚及两虚型仅各检查1例,为6/7及4/7),其中以红细胞压积变化居多。这与中医理论“气郁、气滞可导致血瘀”相吻合。从我们的分型中可看到临床虽为“痰”证,却也都有血液流变学的改变。因此我们认为“血瘀”与“痰”是密切相关的。

讨 论

一、中医十分重视气血失调与精神疾病的关系。如内经有“血有余则怒,不足则恐”,张仲景有“邪哭使魂魄不安者血气少。血气少……心气虚,其人则畏,合目欲眠,梦远行而精神离散,魂魄妄行”,明代有癫为“心血不足”,“阴虚血少”之说,王清任指出“癫狂一症乃气血滞凝”等均提出了血虚、血瘀与精神疾病关系。

在上述理论指导下我们应用活血化瘀为主、以中医辨证分型为基础,中西医结合与西药对照方法,治疗精神分裂症347例。结果为:并用中药与单用西药疗效对照有高度显著差异,从而说明了活血化瘀中药能提高精神分裂症的疗效,而且能缩短疗程。

40例病人血液流变学的7项指标均高于正常,说明精神分裂症确有“血瘀”,即血粘度增加,血流缓慢^②。尽管各项指标的改变在各证型的分布上并无特异性,但它为活血化瘀提供了客观依据,进一步提示“血瘀”与精神分裂症的关系^③。

现代医学发现,给慢性精神分裂症病人颈内动脉注射¹³³氙,观察到额叶血流量减少,并以右半球更明显,经统计学处理有显著差异^④。以上都说明精神分裂症与“血瘀”关系较密切。活血化瘀治疗精神分裂症已不仅在理论上,而且在临床实践中也得到了启发。

二、对精神分裂证辨证分型的意见。

我协作组认为精神分裂证辨证分为六型(痰火、痰结、血虚、气虚、阴虚、两虚)是可行的。

由于病人的舌诊、脉象受药物及并发症影响较大,故精神症状应为中医辨证的主要依据。精神症状辨证用气、血、痰、火比脏腑更容易,更确切。347例病人的证型,以气虚痰结型稍多(80例),其余均相近(51~54例)。虚证比实证稍多,虚证比实证疗效差,这些也和一般规律相符合。

三、“血”与“痰”的关系。

我们分型立足“血”,但也并不排斥“痰”。气虚、气郁均可导致血虚、血瘀,气虚不能生化津液而痰结,气机不畅水湿内停也可成“痰”^⑤,气郁、血瘀、痰结均可化火,血虚也能生风、化火。气、血失调可直接导致精神失常,通过病理产物“痰”、“火”也可造成精神紊乱,“痰”、“火”反过来又可影响气血。故气、血、痰、火是相互联系的,六个证型间也是可以转换的。但任何研究,往往总是从一个病或一种治则着手,从个别到一般,然后再往深广发展。

(本文承黑龙江省医院中西医结合科大力协助,谨此致谢)

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沉痛悼念任应秋教授

本刊编辑委员会顾问、著名中医学家、北京中医学院任应秋教授, 因患癌症不幸于一九八四年十月十七日凌晨二时二十五分逝世, 终年七十一岁。

对任应秋顾问的不幸逝世, 我们表示最沉痛悼念!

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Abstracts of Original Articles

Sensory Disease Propagating Along the Channel

—A Clinical Report of 80 Cases

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The main symptoms of the disease are some paroxysmal morbid feelings (aesthesia or paresthesia) extending along a particular zone on the body surface. The attack begins at a fixed point and moves on with a width of about 1.5-3.0 cm at a speed of about 10-40 cm/sec. The route it follows coincides with a particular channel. Each attack lasts 3-5 minutes, leaving a transient hypoesthetic zone along the channel.

Since 1959, 224 cases of this disease have been reported in our country. The clinical features of the disorder are similar to those of the "disorder developing automatically along the channels" recorded in ancient Chinese traditional medical documents. The disease has some features of both localized sensory epilepsy and reflex epilepsy and thus may be called "sensory epilepsy propagating along the channel". (Original article on page 711)

Treatment of Schizophrenia with the Method of Activating Blood Circulation and Relieving Blood Stasis with Changes of Blood Rheology Observed

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One hundred and ninety-four cases of schizophrenia treated with TCM-WM combined were studied with 153 cases treated with WM exclusively as control. The cases were divided into six types according to TCM. The therapy employed was chiefly activating blood circulation and relieving blood stasis. Set formulas were modified to suit different symptom-complexes. The results of combined treatment were significantly better than those of the control group ($P < 0.005$). The method of activating blood circulation and relieving blood stasis not only could increase the curative effect but also shorten the course of treatment ($P < 0.01$). Tests of blood rheology were made on 40 patients. The value of each item of blood rheology test increased ($P < 0.01$), which indicated that there was blood stasis in patients of schizophrenia. The employment of the method of activating blood circulation and relieving blood stasis was thus justified. (Original article on page 714)

Observation on Short-Term Effect of 23 Cases of Leukopenia Treated Mainly with Chinese Huo Xue Hua Yu Drugs

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Twenty-three cases with leukopenia were treated with Chinese Huo Xue Hua Yu drugs, i.e., drugs with the action of activating blood flow and eliminating blood stasis: Radix Angelicae sinensis, Rhizoma Ligustici Chuanxiong, Flos Carthami, Caulis spatholobi and Radix paeoniae Rubra.

Twenty-one of the patients were hospitalized, the others were out-patients, age ranging from 21 to 55 years. Seven of them were male. All of them had diagnosis established by means of clinical and laboratory examination. Their white-cell count had been as high as 1,800 to 3,800 before the treatment with an average value of $3,228.26 \pm 542.47$ ($M \pm SD$). The course of treatment was 6 days to 14 months. Improvement was observed from 2 to 48 days, 12 days on the average. The result was excellent in 8 cases, good in 13 cases, and poor in 2 cases. The total effective rate was 21/23 (91.30%). White-cell count of all patients increased to $4,473 \pm 1,299.11$ ($M \pm SD$) after treatment. The therapeutic mechanism was supposed to be promotion of synthesis of DNA brought about by action of Chinese drugs which improved the reproduction, differentiation, maturity and release of the stem cells, stimulated the contraction of spleen and reduced the influence of splenic factor on white-cell. There was also probability that immunity-regulating effect of the Chinese drugs eliminated or reduced immunopathologic injury of white-cells.

(Original article on page 717)

Aplastic Anemia Treated with Combined Traditional Chinese and Western Medicine

—A Clinical Analysis of 52 Cases

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This paper reports 52 cases of aplastic anemia treated with combined TCM and WM. Of which 29 were idiopathic, 23 secondary, 7 acute aplastic anemia and 45 chronic aplastic anemia. The results of treatment: the cure rate of chronic aplastic anemia was 48.9%, and the total effective rate was 95.6%. Seven cases of acute aplastic anemia showed no effect.