

山海丹 V 号对大鼠实验性心肌缺血的作用

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摘要 用结扎冠脉制造大鼠心肌缺血模型,结扎冠脉 15 分钟后经十二指肠给药,记录给药前后心电图及用

药后 15、45、65、105、165 分使大鼠心率减慢($P < 0.05 \sim 0.01$)。

N-BT 染色法定量测定结扎 3 小时后心肌梗塞面积。结果,山海丹 V 号能在给药后 15、45、65、105、165 分使大鼠心率减慢($P < 0.05 \sim 0.01$);结扎冠脉后 15 分各组 ST 段均明显升高,山海丹 V 号 1.4、2.8g/kg 能明显降低 ST 段($P < 0.01$);山海丹 V 号(0.7、1.4、2.8g/kg)能减少心肌梗塞面积($P < 0.01$)。

主题词 心肌缺血/中医药疗法 @ 山海丹 V 号

2.2 对大鼠心肌缺血的作用:心电图 ST 段的变化是反映心肌缺血严重程度敏感的指标。大鼠 ST 段通常呈 RS-T 型^[3],正常情况下 II 导联 ST 段常略有抬高,一般不超过 0.1mV。结扎冠脉前除山海丹 V 号小剂量组 ST 段稍高外,其余各组均无差异。结扎后各时间各组 ST 段变化值(结扎后 ST 段值-结扎前 ST 段值),表 2 示,结扎冠脉后 15 分各组 ST 段均明显升高,山海丹 V 号 1.4、2.8g/kg 能明显降低 ST 段($P < 0.01$),

成,是以治疗冠心病药物山海丹为基础,适合治疗伴有高血压的冠心病。为阐明山海丹 V 号的药理作用,我们对其在心肌缺血、血脂、血液流变学等多方面的作用进行了研究,本文报道了山海丹 V 号对实验性心肌缺血的影响。

2.3 对急性心肌梗塞范围的作用:结扎冠脉后 3 小时,用 NB-T 染色法确定心肌梗塞面积。生理盐水组为 $19.3 \pm 4.3\%$,山海丹 V 号 0.7g/kg 组为 10.0 ± 2.1 ($P < 0.01$), 1.4g/kg 组为 $9.2 \pm 1.6\%$ ($P < 0.01$), 2.8g/kg 组为 $9.3 \pm 1.4\%$ ($P < 0.01$),心得安组(0.01g/

ABSTRACTS OF ORIGINAL ARTICLES

Infantile Asthma Treated by Both Benefitting and Attacking Principles

Chen Jin, Luo Guangliang

100 cases of infantile asthma were treated with a self-formulated Long-term Asthmatic Recipe with satisfactory results. Comparison of its results with control group treated with western drugs and self-control was of significance. The etiology, pathogenesis and therapeutic measures were discussed on a clinical basis. It is claimed that the root cause of repeated attacks of infantile asthma is phlegm hidden in the lung and Qi-deficiency of the Kidney and the pathological characteristic of this ailment is the co-existence of sthenia and asthenia status.

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Key Words: asthma/TCM therapy treatment of both benefitting and attacking methods

(Original article on page 666)

Chronic Cholecystitis Treated with Qingdanling (Gall-benefitting) Capsule. Analysis of 94 Cases.

Xing Ping

The treating group was compared with a control group of 80 cases treated with Xiaoyan Lidan (Anti-inflammation and cholagogic) tablet. After a course of 2-month treatment, the total effective rate of Qingdanling group was 98.93%, that of Xiaoyan Lidan tablet group was 88.75%, the difference being significant ($P < 0.01$).

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Key Words: cholecystitis/TCM therapy chronic diseases @ Qingdanling Capsule

(Original article on page 671)

Exploration on Therapeutic Action of Principle of Stasis-Removing-Purgation on Menorrhagia due to Ectopic Endometrium and Its Mechanism.

Zhang Zhifeng, Yu Chaoqin, Wang Dazeng, et al

Two remedies, Neiyi No. 1 and Neiyi No. 2 pills were

compounded on the treating principle of stasis-removing-purgation, yielded significant effect on menorrhagia, as well as definite improvement of local signs. The levels of premenstrual plasmal prostaglandin E₂, F₂₂ were higher than normal and the plasmal B-endorphin, lower than normal. However, after treatment, the former lowered and the latter, elevated.

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Key Words: Ectopic endometrium/TCM therapy menorrhagia/TCM therapy @stasis-removing-purgation

(Original article on page 679)

Actions of Shanhaidan V on Experimental Myocardial Ischemia in Rats.

Liu Yi, Hu Mei, Cao Yongxiao, et al

To rat model of myocardial ischemia induced by ligation of coronary artery, Shanhaidan V was given via duodenum 15 minutes after ligation. ECG and quantitative measurement of the area of infarction by NBT staining 3 hours after ligation were performed before and after drug administration. Results showed that the heart beat rates 15, 45, 65, 105, 165 minutes after administration of Shanhaidan V were slowed down ($P < 0.05 - 0.01$). ST segment in all groups markedly elevated 15 minutes after ligation. When Shanhaidan V was given in 1.4, 2.8 g/kg dose, ST segment markedly lowered ($P < 0.01$). Shanhaidan V (0.7, 1.4, 2.8 g/kg) also decreased the area of infarction ($P < 0.01$). Conclusion: Shanhaidan V ameliorated the degree of ischemia in rat's ischemic cardiac muscle; reduced the infarct area and slowed down rate of heart beat.

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Key Words: myocardial ischemia/TCM therapy @ Shanhaidan V

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