

血塞通滴丸联合盐酸美金刚治疗阿尔茨海默病的临床研究

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摘要 目的:分析血塞通滴丸联合盐酸美金刚治疗阿尔茨海默病(Alzheimer's disease, AD)患者的临床疗效及安全性。**方法:**本院就诊的 AD 患者 60 例。对照组给予盐酸美金刚,观察组在对照组的基础上给予血塞通滴丸。**结果:**治疗后观察组 MMSE、ADL 及 GDS 评分明显优于对照组,差异显著(P<0.05)。治疗后观察组 TC、LDL-C 明显少于对照组,差异显著(P<0.05)。两组均未出现明显不良反应患者。**结论:**应用血塞通滴丸联合盐酸美金刚治疗 AD 患者近期疗效好,毒副作用少,临床价值高。

关键词:血塞通滴丸;盐酸美金刚;阿尔茨海默病;低密度脂蛋白胆固醇

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Clinical Aesearch of Xuesaitong Diwan and Memantine Hydrochloride Treatment of Alzheimer's Disease

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ABSTRACT Objective: Analyse therapeutic effect and safety of Xuesaitong Diwan and memantine hydrochloride treatment of Alzheimer's disease. **Methods:** 60 cases of patients with AD, divided into the observation group and the control group. The control group: memantine hydrochloride, the observation group: memantine hydrochloride and Xuesaitong Diwan. **Results:** After treatment, MMSE, ADL and GDS score of the observation group than in the control groups. Significant difference (P<0.05). After treatment, TC, LDL - C of the observation group than in the control groups. Significant difference (P<0.05). Two groups did not appear harmful response. **Conclusion:** Xuesaitong Diwan and memantine hydrochloride treatment of Alzheimer's disease is good efficacy, side effects less, clinical value is high.

Key words: Xuesaitong Diwan; Memantine hydrochloride; Alzheimer's disease

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阿尔茨海默病(Alzheimer's disease, AD)是一种进行性发展的致死性神经退行性疾病,常起病于老年或老年前期、多缓慢发病,逐渐进展,以痴呆为主要表现。本研究中,笔者采用血塞通滴丸联合盐酸美金刚治疗 AD 患者,结果取得满意疗效,现报道如下。

1 资料与方法

1.1 临床资料

选择 2008-03/2011-03 在本院就诊的 AD 患者 60 例(男 36 例 / 女 24 例),年龄 55 ~85 岁。纳入标准:符合美国精神病学会《精神疾病诊断与统计手册》第 4 版(DSM-IV)^[1]制定的 AD 诊断标准。排除标准:排除其他原因所致的痴呆及严重心、肝、肾功能不全患者。60 例 AD 患者按就诊顺序随机分成观察组和对照组两组。观察组 30 例(男 19 例 / 女 11 例),平均年龄 72.1±13.2 岁;对照组 30 例(男 17 例 / 女 13 例),平均年龄 71.8±12.8 岁。两组 AD 患者一般资料差异不显著(P>0.05),具有可比性。

1.2 方法

①对照组:给予盐酸美金刚片(丹麦灵北制药,注册证号 H20060272)口服,第 1 周 5mg,1 次 /d,睡前服用;第 2 周 5mg,

早晚各 1 次;第 3 周早晨 5mg、晚上 10mg;第 4 周 10mg,早晚各 1 次,维持该剂量至 24 周研究结束。②观察组:在对照组用药方式的基础上,加用血塞通滴丸(神威药业,国药准字 Z20050022),每次 10 丸,3 次 /d。

1.3 疗效标准

两组患者治疗 24 周后进行血脂水平检测、简易精神状态量表(MMSE)、日常生活能力(ADL)及老年抑郁量表(GDS)评分^[2-4],并根据评分判定疗效。用药前和用药 4 周、12 周、24 周时分别进行血液生化学及心电图检查,同时观察和记录不良事件的发生。

1.4 统计学方法

本组数据采用 SPSS 13.0 统计学软件进行分析处理。数据以均值±标准差($\bar{x} \pm s$)表示;组间比较,采用 χ^2 检验或 t 检验。以 P<0.05 表示差异有显著意义。

2 结果

观察组治疗后 MMSE、ADL 及 GDS 评分明显优于治疗前,差异显著(P<0.05,见表 1);治疗后观察组 MMSE、ADL 及 GDS 评分明显优于对照组,差异显著(P<0.05,见表 1)。观察组治疗后胆固醇(TC)、低密度脂蛋白胆固醇(LDL-C)、高密度脂蛋白胆固醇(HDL-C)明显优于治疗前,差异显著(P<0.05,见表 2);治疗后观察组胆固醇(TC)、低密度脂蛋白胆固醇(LDL-C)明显优于

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对照组,差异显著($P<0.05$,见表 2)。两组均未出现明显不良反应患者。

表 1 两组患者 MMSE、ADL 及 GDS 的比较($\bar{x} \pm s$)
Table 1 Comparison of MMSE, ADL and GDS between the two groups($\bar{x} \pm s$)

Group	n	MMSE		ADL		GDS	
		Before treatment	After treatment	Before treatment	After treatment	Before treatment	After treatment
Control group	30	11.84± 2.69	12.89± 1.87	45.22± 5.89	44.46± 5.93	5.49± 0.57	5.48± 0.39
Observation group	30	11.67± 2.89	13.97± 1.98*	45.53± 5.67	37.06± 6.18*	5.51± 0.56	4.80± 0.38*
T		0.236	2.172	0.208	4.732	0.137	6.840
P		>0.05	<0.05	>0.05	<0.01	>0.05	<0.01

Note: Compared with before treatment, * $P<0.05$

表 2 两组患者治疗后血脂的比较($\bar{x} \pm s$)
Table 2 Comparison of blood lipid between the two groups($\bar{x} \pm s$)

Group	n	TC		LDL-C		HDL-C	
		Before treatment	After treatment	Before treatment	After treatment	Before treatment	After treatment
Control group	30	5.28± 1.08	5.25± 1.21	3.39± 0.69	3.38± 0.42	1.09± 0.29	1.08± 0.28
Observation group	30	5.29± 1.07	3.40± 0.43*	3.38± 0.72	2.00± 0.53*	1.07± 0.28	1.12± 0.26*
T		0.036	7.891	0.055	11.177	0.272	0.573
P		>0.05	<0.01	>0.05	<0.01	>0.05	>0.05

Note: Compared with before treatment, * $P<0.05$

3 讨论

AD 也叫老年痴呆症,是一组病因未明的原发性退行性脑变性疾病,以渐进性记忆障碍、认知功能障碍、人格改变以及语言障碍等神经精神症状为特征^[5,6]。潜隐起病,病程缓慢且不可逆,临床上以智能损害为主,病理改变主要表现为脑细胞的广泛死亡^[7],皮质弥漫性萎缩,沟回增宽,脑室扩大,神经元大量减少^[8],并可见老年斑(SP)^[9],神经原纤维结(NFT)^[10]等病变,胆碱乙酰化酶及乙酰胆碱含量显著减少,颞叶及顶叶病变较显著,常伴有高级皮层功能受损及非认知性精神症状。目前认为高胆固醇血症等血管性因素在 AD 的发病中起重要作用^[11,12]。

美金刚^[13,14]是一种非竞争性 NMDA 受体拮抗剂,可通过调节 N-甲基-D-门冬氨酸受体,减少兴奋性毒性作用引起的神经元蜕变、死亡,产生神经保护作用,从而减少 AD 患者临床症状的恶化,改善生活质量,且安全性良好。Herrmann N 等^[15]将美金刚用于治疗 Alzheimer's disease 患者,结果具有显著疗效。血塞通^[16,17]是一种处方药,由三七总皂甙制成,活血化痰,通脉活络;能扩张冠脉和外周血管、降低外周阻力、减慢心率、减少和降低心肌耗氧量、增加心肌灌注量、增加脑血流量、对心肌和脑缺血有一定改善作用;具显著抑制血小板凝聚、降低血液粘稠度、抑制血栓形成的作用;此外,本品还具降血脂,抗疲劳,耐缺氧,提高和增强巨噬细胞功能等作用^[18,19]。

在本次研究中,笔者在观察组中采用血塞通滴丸联合盐酸美金刚治疗 AD 患者;在对照组使用盐酸美金刚治疗。进行疗

效比较发现,治疗后观察组 MMSE(13.97± 1.98)高于对照组 MMSE(12.89± 1.87);而观察组 ADL(37.06± 6.18)、GDS(4.80± 0.38)评分少于对照组 ADL(44.46± 5.93)、GDS(5.48± 0.39);治疗后观察组胆固醇 TC (3.40± 0.43)、低密度脂蛋白胆固醇 LDL-C (2.00± 0.53)明显少于对照组 TC (5.25± 1.21)、LDL-C (3.38± 0.42)。此外,观察组未出现明显不良反应患者。提示采用血塞通滴丸联合盐酸美金刚治疗 AD 患者近期疗效好,毒副作用少,值得临床推广应用。

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