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心元胶囊联合曲美他嗪治疗冠心病心绞痛的临床研究*

张煜 李坚[△] 龚杰 冯健 鲍小京 张能

(南京医科大学附属无锡市人民医院 心血管内科 江苏 无锡 214000)

摘要 目的:探讨心元胶囊联合曲美他嗪治疗冠心病心绞痛的临床疗效及安全性。**方法:**选择2016年7月-2018年3月我院收治的冠心病心绞痛患者134例,按治疗方式分为对照组67例及观察组67例,对照组予以曲美他嗪治疗,观察组在对照组基础上予以心元胶囊治疗。比较分析两组患者疗效、心绞痛发作次数及持续时间、血清总胆固醇(TC)、甘油三酯(TG)、肿瘤坏死因子- α (TNF- α)、可溶性细胞黏附因子-1(sICAM-1)水平的变化及不良反应的发生情况。**结果:**治疗后,观察组和对照组临床总有效率分别为92.54%、79.10%,心电图总有效率分别为89.55%、76.12%,观察组均显著高于对照组两($P<0.05$);两组心绞痛发作次数及持续时间均显著降低治疗前($P<0.05$),且观察组显著低于对照组($P<0.05$)。观察组治疗后血清TC、TG、TNF- α 、sICAM-1水平显著低于对照组($P<0.05$)。两组治疗过程中均未发生恶心、头晕头痛、心绞痛复发等不良反应。**结论:**心元胶囊联合曲美他嗪治疗冠心病心绞痛患者可有效提升患者的临床疗效,其机制可能与改善血脂水平及降低炎症反应有关。

关键词:心元胶囊;曲美他嗪;冠心病心绞痛;临床研究

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Clinical Study on Xinyuan Capsule Combined with Trimetazidine in the Treatment of Coronary Heart Disease Angina Pectoris*

ZHANG Yu, LI Jian[△], GONG Jie, FENG Jian, BAO Xiao-jing, ZHANG Neng

(Department of Cardiovascular Medicine, Wuxi people's Hospital, Nanjing Medical University, Wuxi, Jiangsu, 214000, China)

ABSTRACT Objective: To observe the clinical efficacy and safety of Xinyuan capsule combined with trimetazidine in the treatment of angina pectoris of coronary heart disease. **Methods:** 134 patients with coronary heart disease and angina pectoris admitted to our hospital from July 2016 to March 2018 were divided into the control group (67 cases) and the observation group (67 cases) according to the treatment method. The control group was treated with trimetazidine, while the observation group was treated with Xinyuan capsule on the basis of the control group. The curative effect, the frequency and duration of angina pectoris, the changes of serum total cholesterol (TC), triglyceride (TG), tumor necrosis factor- α (TNF- α), soluble cell adhesion factor-1 (sICAM-1) and the occurrence of adverse reactions were compared between the two groups. **Results:** After treatment, the total clinical effective rate of observation group and the control group were 92.54%, 79.10% respectively, the total effective rate of electrocardiogram were 89.55% and 76.12% respectively, they were significantly higher in the observation group than those of the control group ($P<0.05$). The number and duration of angina attacks in both groups decreased significantly than those before treatment ($P<0.05$), which were significantly lower in the observation group than those in the control group ($P<0.05$). The levels of serum TC, TG, TNF- α and sICAM-1 in the observation group were significantly lower than those in the control group after treatment ($P<0.05$). There was no adverse reactions such as nausea, dizziness and headache, recurrence of angina pectoris in both groups. **Conclusions:** Xinyuan capsule combined with trimetazidine can effectively improve the clinical efficacy of patients with angina pectoris of coronary heart disease with deficiency of yin and blood stasis of heart and kidney, and its mechanism may be related to the improvement of blood lipid level and the decrease of inflammatory response.

Key words: Xinyuan capsule; Trimetazidine; Coronary heart disease angina pectoris; Clinical research

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前言

心绞痛为冠心病较为常见的一种病理类型,是由冠状动脉供血不足,心肌缺血及缺氧,导致的以发作性胸痛为临床表现的综合征^[1-3]。目前用于改善缺血、减轻症状的药物主要有 β 受

体阻滞剂、硝酸酯类药物、钙通道阻滞剂及其他代谢性药物等,其中曲美他嗪可改善心肌缺血及左心室功能,减轻心绞痛^[4]。心元胶囊是一种中药制剂,具有滋肾养阴及活血化瘀的功效,用于治疗心肾阴虚及心血瘀阻型心绞痛患者^[5]。本研究采用心元胶囊联合曲美他嗪治疗心血瘀阻型冠心病心绞痛患者,探究了

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作者简介:张煜(1985-),男,硕士,主治医师,研究方向:冠心病,电话:13771550530, E-mail: zhangyu2685@163.com

[△] 通讯作者:李坚(1976-),男,本科,主治医师,研究方向:冠心病, E-mail: lijian0551@163.com

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该方案的疗效、安全性及可能作用机制,以期为冠心病心绞痛的临床治疗提供更多的参考依据。

1 资料与方法

1.1 一般资料

选取 2016 年 7 月 -2018 年 3 月我院收治的冠心病心绞痛患者 134 例作为研究对象,年龄 51~75 岁,平均年龄(63.72±9.20)岁;男 72 例,女 62 例;病程 3~15 年,平均病程(7.29±2.31)年。患者及其家属已经签署关于本研究的知情同意书。

纳入标准:符合冠心病心绞痛的相关诊断标准^[6]及符合中医的气阴两虚兼心血瘀阻证诊断标准^[7];年龄 50~75 岁;治疗前一个月内未接受类似治疗者;神经功能正常且积极配合者。排除标准:对心元胶囊及曲美他嗪药物禁忌者;妊娠或哺乳期女性;存在心率失衡及造血系统疾病者;合并心、肝、肾、肺等器官功能不全者。

1.2 分组及治疗方法

全部患者按治疗方式不同分为对照组 67 例和观察组 67 例。其中,对照组男 35 例,女 32 例,年龄 53~75 岁,平均年龄(65.37±8.60)岁,病程 3~13 年,平均病程(6.95±2.57)年。观察组男 37 例,女 30 例,年龄 51~74 岁,平均年龄(62.13±7.56)岁,病程 5~15 年,平均病程(8.29±2.47)年。两组性别、年龄及病程等方面比较差异无统计学意义($P>0.05$)。

对照组予以盐酸曲美他嗪胶囊(天津施维雅制药有限公司,规格:20 mg,产品批号:2014222)口服治疗,20 mg/次,3 次/d。观察组在对照组的基础上联合心元胶囊(天津施维雅制药有限公司,规格:20 mg,产品批号:20160118)口服治疗,0.9 g/次,3 次/d。两组均连续治疗 1 个月。

1.3 疗效判定

1.3.1 临床疗效判定^[8] 显效:治疗后病人心电图指标与相关检查均已恢复正常,临床症状消失,心绞痛发作频率较治疗前

减少≥80%;有效:治疗后病人心电图及相关检查明显改善,临床症状减轻,心绞痛发作频率较治疗前减少 50%~80%;无效:治疗后病人个症状改善情况均为达至上述标准,甚至病情恶化。总有效率=(显效例数+有效例数)×100%/总例数。

1.3.2 心电图疗效判定^[9] 显效:心电图显示正常;好转:ST 段下降,治疗后 ST 段上升≥0.05 毫伏,但未至正常范围,T 波由平坦变为直立,房室传导阻滞改善。无效:心电图无变回,甚至加重。总有效率=(显效例数+好转例数)×100%/总例数。

1.4 观察指标

观察患者治疗前后临床症状的变化,包括心绞痛发作频率及持续时间。抽取患者治疗前后静脉血,应用血脂检测仪(仪器购于上海迈普瑞生物科技有限公司)测定总胆固醇(TC)、甘油三酯(TG);应用 ELISA 法(试剂盒购于上海酶联生物公司)检测肿瘤坏死因子- α (TNF- α)、可溶性细胞黏附因子-1(sICAM-1)。

1.5 不良反应的发生情况

观察并记录患者在治疗过程中出现的相关不良反应,如恶心、头晕头痛、心绞痛复发、死亡等。

1.6 统计学方法

采用 SPSS 19.0 统计软件进行数据分析,计量资料以($\bar{x}\pm s$)表示,组间比较采用两独立样本资料的 t 检验,组内比较采用配对资料的 t 检验;计数资料分析采用 χ^2 检验。以 $P<0.05$ 为差异有统计学意义。

2 结果

2.1 两组临床疗效的比较

治疗后,观察组显效 35 例,有效 27 例,无效 5 例,总有效率为 92.54%;对照组显效 32 例,有效 21 例,无效 14 例,总有效率为 79.10%,观察组总有效率显著高于对照组,差异有统计学意义($P<0.05$)。如表 1 所示。

表 1 两组临床疗效的比较[例(%)]

Table 1 Comparison of the clinical efficacy between two groups[n(%)]

Groups	n	Excellent	Valid	Failure	Total effective rate(%)
Observation group	67	35(52.24)	27(40.30)	5(7.46)	92.54*
Control group	67	32(47.76)	21(31.34)	14(20.90)	79.10

Note: compared with the control group, * $P<0.05$.

2.2 两组心电图疗效的比较

治疗后,观察组显效 32 例,有效 28 例,无效 7 例,总有效率为 89.55%;对照组显效 26 例,有效 25 例,无效 16 例,总有效

效率为 76.12%,观察组心电图总有效率显著高于对照组,差异有统计学意义($P<0.05$)。如表 2 所示。

表 2 两组心电图疗效的比较[例(%)]

Table 2 Comparison of the ECG efficacy between two groups[n(%)]

Groups	n	Excellent	Improvement	Failure	Total Effective Rate(%)
Observation Group	67	32	28	7	89.55*
Control Group	67	26	25	16	76.12

Note: compared with the control group, * $P<0.05$.

2.3 两组临床症状的比较

治疗后,两组心绞痛发作次数及持续时间均显著降低治疗

前($P<0.05$),且观察组显著低于对照组($P<0.05$)。如表 3 所示。

表 3 两组临床症状的比较($\bar{x} \pm s$)Table 3 Comparison of the clinical symptoms between two groups($\bar{x} \pm s$)

Groups	Treatment Time	Angina Attack (Times/Weeks)	Duration (Min/ Times)
Observation Group(n=67)	Before Treatment	7.20±1.71	6.95±1.13
	After Treatment	2.53±0.80* [#]	2.71±0.62* [#]
Control Group(n=67)	Before Treatment	7.16±1.86	7.02±1.36
	After Treatment	4.90±1.22*	5.49±1.75*

Note: compared with before treatment, * $P < 0.05$, compared with the control group after treatment, [#] $P < 0.05$.

2.4 两组治疗前后血清 TC、TG、TNF- α 、sICAM-1 水平的比较

治疗后, 对照组血清 TC、TG 水平与治疗前比较无显著性差异($P > 0.05$), 而观察组血清 TC、TG 水平显著低于治疗前($P <$

0.05); 两组治疗后血清 TNF- α 、sICAM-1 水平均明显低于治疗前($P < 0.05$), 且观察组以上指标均显著低于对照组($P < 0.05$)。如表 4 所示。

表 4 两组治疗前后血清 TC、TG、TNF- α 、sICAM-1 水平的比较($\bar{x} \pm s$)Table 4 Comparison of the serum TC, TG, TNF- α , and sICAM-1 levels between the two groups before and after treatment($\bar{x} \pm s$)

Groups	Treatment time	TC(mmol/L)	TG(mmol/L)	TNF- α (ng/mL)	sICAM-1(ng/mL)
Observation group (n=67)	Before treatment	6.62±1.50	4.01±0.95	83.69±7.50	783.69±85.49
	After treatment	3.75±0.87* [#]	2.03±0.59* [#]	30.26±4.33* [#]	458.50±42.98* [#]
Control group(n=67)	Before treatment	6.59±1.36	3.94±0.86	85.17±8.03	776.20±120.37
	After treatment	6.43±1.81	3.97±0.70	49.50±4.21*	564.28±57.60*

Note: compared with before treatment, * $P < 0.05$, compared with the control group after treatment, [#] $P < 0.05$.

2.5 两组不良反应发生情况的比较

两组患者在治疗过程中均未发生恶心、头晕头痛、心绞痛复发等不良反应。

3 讨论

冠心病心绞痛主要是由冠状动脉供血缺乏、心肌暂时急剧缺血及缺氧所致使心血管疾病, 临床表现主要有胸骨后或心前区疼痛, 可放射至左臂内侧、颈项, 兼胸闷、呼吸不畅及汗出等症^[10-12]。目前, 西医治疗该病主要从改善缺血、减轻症状方面着手^[13-15], 曲美他嗪一种哌嗪类衍生物, 属抗心绞痛心血管药物, 其药理作用机制为通过抑制游离脂肪酸代谢, 促进葡萄糖代谢, 提高心肌能量供应, 进而可有效缓解心绞痛症状, 改善运动耐量, 在心绞痛、缺血性心脏病等临床实践中具有重要作用, 疗效显著, 与其他药物联用具有不良反应小等优点^[16-18]。中医认为该病属“胸痹心痛”范畴, 应依据辨证分型进行治疗^[19]。本研究纳入对象主要为气阴两虚兼心血瘀阻症患者, 治疗原则以益气养阴, 活血化瘀、通络止痛为主^[20-22]。心元胶囊是一种由何首乌、丹参及麦冬构成的中药制剂, 可滋肾养阴、活血化瘀, 有研究显示心元胶囊治疗心肾阴虚兼心血瘀阻证心绞痛患者的疗效较好^[23-25]。鉴于此, 本研究探讨了心元胶囊联合曲美他嗪治疗心绞痛的效果, 结果显示在曲美他嗪治疗基础上, 结合心元胶囊可更有效改善患者的临床治疗效果, 缓解其病情, 促进预后恢复。此外, 本研究心电图疗效结果进一步证实心元胶囊联合曲美他嗪治疗心肾阴虚兼心血瘀阻证患者的优越性。

心绞痛发作及其持续发作时间是冠心病心绞痛患者的典型临床症状, 也是评估患者病情恢复及疗效判定的重要临床指征^[26-28]。本研究显示两组治疗后心绞痛发作次数及持续时间均

显著降低治疗前, 且治疗后观察组显著低于对照组, 提示心元胶囊联合曲美他嗪对患者临床症状的改善及恢复具有促进作用。有研究显示血脂水平异常与冠心病心绞痛发作存在关联, 其中 TC、TG、LDL 在该病中呈高表达状态^[29]。此外, TNF- α 、sICAM-1 等炎症因子参与了冠状动脉粥样硬化发生与发展, 且与病变稳定性有关^[30]。本研究结果显示观察组治疗后 TC、TG、TNF- α 、sICAM-1 均显著低于对照组, 说明心元胶囊联合曲美他嗪治疗对纠正患者血脂紊乱及炎症反应具有积极意义。

综上所述, 心元胶囊联合曲美他嗪治疗心肾阴虚兼心血瘀阻证冠心病心绞痛患者可有效提升患者的临床疗效, 其机制可能与改善血脂水平及降低炎症反应有关。

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