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中药外用治疗直肠癌术后放化疗后局部复发的探索

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摘要: 直肠癌术后、放化疗后局部复发患者主要采用放射治疗、化疗以及中医中药等多学科、多层次、多方位的综合治疗。患者大多经过多程治疗后复发,体质较差,甚至有明显的恶病质,对这类患者进行大剂量放、化疗或对产生耐药的患者再次进行放疗或者化疗,只能使虚弱的生命更加垂危,加速患者死亡,中医药治疗在此阶段优势凸显出来。中医药外用治疗以扶正祛邪为法则,攻补兼施,达到改善生活质量的作用,所以在直肠癌术后放化疗后局部复发的治疗方法中,中医药外用治疗值得进一步研究探索。

关键词: 直肠癌;局部复发;中医中药;外用

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Search for Using External Treatment of Traditional Chinese Medicine in the Treatment of Rectal Cancer Recurrence after Postoperative and Chemoradiation

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ABSTRACT: At present, the first choice of rectal cancer recurrence after postoperative and chemoradiation is synthetic treatment of the multi-disciplinary, multi-level, multi-facet, such as chemoradiation, herb comprehensive. In clinical, most of these patients have the poor physical condition, even obvious cachexia, which can not tolerate chemotherapy and re-course radiotherapy. Accordingly, it is believed that external treatment of Traditional Chinese Medicine can treat rectal cancer after chemoradiation though reinforcement and elimination in combination, which can anti-recurrence and metastasis, improve the survival rate.

Key words: Rectal cancer; Local Recurrence; Traditional Chinese Medicine; External treatment

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直肠癌发病率高于结肠癌,约占结直肠癌的60~75%,WHO在2008年公布中国结直肠癌5年生存率是32%,北美高达61%,低位直肠癌由于生理解剖位置以及等多种原因导致复发率高^[1-2]。据估计美国2010年有将近39670人新罹患直肠癌^[3]。全世界结直肠癌的发病率一直呈显著上升趋势^[4-7]。结直肠癌在美国发病列常见肿瘤第四位、死亡位第二位,在1990~2006年间,结直肠癌死亡率的下降超过了33%^[8]。2010年,美国大致有39,670例新发的直肠癌(其中男性22,620例,女性17,050例)。同年,估计美国将有51,370名患者死于结直肠癌^[9]。下降的原因是筛查的普及,提高了早诊率及治疗手段的进步。直肠癌发病率在全球范围没有下降的倾向,尤其是在中国,直肠癌在经济越发达的城市中,其发病率更是显现出增高趋势。

1 直肠癌临床治疗现状

直肠癌总体发病率以每年1-2%左右的程度升高,由于直肠癌解剖部位与周围各个脏器都有着至关重要的联系,因此在人群中的发病率、病因、临床表现、病理分型、疾病治疗方式的

选择和远期预后等多个方面都和结肠癌存在一定的区别。治疗直肠癌失败最突出的原因是局部复发和转移。对于直肠癌术后、放化疗后局部复发的患者,如无法再次实施根治性手术治疗,则推荐包括放射治疗、化疗、生物治疗和中医中药的多学科综合治疗。临床实践证明,直肠癌术后、放化疗后局部复发患者经历了多种治疗后,多数体质差,甚至有明显的恶病质,对这类患者进行大剂量放、化疗,或对产生耐药的患者再次进行化疗,仅仅只能使虚弱的生命更加垂危,加速了患者死亡,此类患者的再程治疗更需要中医药来缓解症状,改善生活质量。

直肠癌局部复发(LRRC)较前已有明显下降,但其5年生存率仍较低,局部复发率仍有2.6%-11.5%。导致直肠癌局部复发的危险因素非常多,比如环周切缘(CRM)阳性、吻合口肿瘤细胞的种植、肿瘤部位、临床病理分期、隐匿性微转移、侵犯周围淋巴管血管、手术医生操作水平等。其中最重要的是环周切缘(CRM)阳性^[9-12],目前国外已经有很多文献报道^[13],环周切缘(CRM)状态可以反映手术的根治程度,并且环周切缘对肿瘤患者的局部控制和远期生存率及生活质量有着深远显著的影响。

2 中药辅助治疗的特色与优势

姑息性放射治疗能改善直肠癌患者的生存质量,减轻血便,控制疼痛。化疗联用分子靶向药物治疗直肠癌可以很大程

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度的提高治疗的有效率,可使一定程度的不可切除患者变为可切除。化学治疗在延长患者生存期方面也发挥一定的作用。临床中大部分直肠癌术后放、化疗后局部复发患者发现时往往已经是疾病的中晚期,复发后的再程治疗应更综合、更人性化地考虑患者的生理、心理及经济等条件,采取中医药单纯治疗或中西医结合治疗。经过多年的研究探索及临床实践,中医药在抑瘤止痛、缓解症状如便秘、腹泻、腹胀等积累了丰富的经验

2.1 中医治疗渊源

查阅中医文献,直肠癌无单列,归类于癌(岩),古籍见于“肠菴”、“肠中积聚”、“症瘕”、“脏毒”、“伏梁”、“腹痛”及“痢疾”等病症中,中医中直肠癌无单列,归类于大肠癌的治疗范围内。^[14]我国明朝的《外科正宗》中就记载到:“夫脏毒者,醇厚味,勤劳辛苦,蕴毒流注肛门结成肿块”。

2.2 中医药外用治疗

中药外用治疗以扶正祛邪为法则,攻补兼施,对直肠癌术后、放化疗后复发的患者具有明显的治疗效果和较小的毒副作用。

王洪水选取病理明确诊断为腺癌的患者,采取中药保留灌肠的方法进行治疗研究。便血及止血都较治疗前有显著的疗效,并且部分患者肛门处疼痛、排液及肿物大小都明显好转^[15]。郭小培等选取不能以及不愿意手术的晚期直肠癌病人,采用化岩汤保留灌肠大于1小时治疗3个疗程(每个疗程10天,1个疗程后隔一天再行下一疗程),治疗后,患者的腹痛、排便习惯、便血、不完全肠梗阻及消瘦等症状均取得了不同程度的改善,本研究表明了采用化岩汤灌肠治疗对于不适合手术治疗的直肠癌患者可以提高免疫功能,稳定瘤体,延长生存期^[16,17]。

杨晓霞等应用中药灌肠配合FD方案治疗23例直肠癌Miles'术后患者,对照组第1年、2年及3年生存率各为63.2%、42.1%、21.1%;治疗组第1年、2年及3年生存率各为81.0%、61.9%、42.9%。两组比较有显著差异($P<0.05$)。对照组的复发率亦明显高于治疗组,显示出中药能降低直肠癌术后患者的复发转移率,并且延长患者的生存期^[18,19]。

陈璋秀等选取32例直肠癌Miles'术后的患者,中药水煎至约2000 mL,采用中药洗剂研究其促进伤口愈合的临床价值,治疗后,观察组伤口的平均愈合时间明显短于对照组,显示中药对于促进直肠癌伤口的愈合具有积极意义^[20]。

张彩云等选取8例I期或行姑息性手术切除再复发的晚期直肠癌患者,采用中药灌肠治疗,调整药液温度至37℃,保留灌肠,保留2小时以上为佳。提示中药可以效的减轻疼痛、缓解患者症状,并且能够明显改善生存质量^[21]。

在我国传统医学中,经过历代的研究,中药外用治疗方法是至关重要的,治疗直肠癌的历程中,经过不断的摸索与实践自始至终都占据着非常重要的地位,并取得了显著的成绩。中药外用能减轻直肠癌术后、放化疗后的患者肛门疼痛及便血等症状,降低放化疗的毒副作用,促进术后伤口的愈合等多方面都发挥了显著的作用,并且还能延长患者生存期及提高生活质量。尽管有着上述各种优势,但是现在中医中药的广泛应用还存在各种各样的障碍,如相关研究文献及理论不够详尽,治疗效果评价体系并不完善,对于疗效的判断,国内以及国际上没有一致的标准,中药方剂选择的主观性太强,随意性比较大,

组方庞大和纷杂,浪费药材,治疗机理不明。还有一些研究存在样本量过少的问题。很多属于治疗经验性的文章,其可重复性尚存疑等问题!

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