

舒肝宁注射液对药物中毒患者肝脏的保护作用

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【摘要】目的 观察舒肝宁注射液对药物中毒患者肝功能的保护作用。**方法** 选择2015年1月至2016年8月吉林大学第一医院二部急救医学科收治的药物中毒患者140例,按计算机产生的随机数字分为观察组和对照组,每组70例。所有病例入院后均给予解毒、排毒、保护器官、对症支持等常规治疗。观察组在上述常规治疗基础上缓慢静脉滴注(静滴)舒肝宁注射液20 mL(加入10%葡萄糖注射液250 mL),每日1次,两组疗程均为14 d。于治疗前和治疗后7 d、14 d检测两组患者血清丙氨酸转氨酶(ALT)、天冬氨酸转氨酶(AST)、总胆红素(TBil)水平以评价肝功能情况。**结果** 两组患者治疗前血清ALT、AST、TBil水平比较差异均无统计学意义(均 $P>0.05$);随治疗时间延长,两组上述指标均逐渐降低,治疗14 d达最低水平,且以观察组治疗14 d的降低程度较对照组更显著[ALT(U/L): 32.6 ± 10.8 比 98.3 ± 34.5 , AST(U/L): 39.4 ± 14.3 比 138.5 ± 25.6 , TBil($\mu\text{mol}/\text{L}$): 4.8 ± 1.7 比 13.2 ± 2.3 , 均 $P<0.05$]。**结论** 舒肝宁注射液对药物中毒患者肝功能有保护作用。

【关键词】 舒肝宁注射液; 药物中毒; 肝功能

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【Abstract】Objective To investigate the clinical liver function protective effect of Shuganning injection for treatment of patients with drug poisoning. **Methods** One hundred and forty patients with drug poisoning consistent with the criteria of enrollment into the study were admitted into the Department of Emergency Medicine in the First Hospital of Jilin University—the Eastern Division from January 2015 to August 2016, and they were randomly divided into observation group and control group by the computer generated random numbers, 70 cases in each group. After admission, all the cases were treated with routine treatment including detoxification, removal of toxin, organ protection, symptomatic and supporting treatment, etc. Based on the routine treatment, additionally, Shuganning injection 20 mL + 10% glucose injection 250 mL, intravenous drip slowly, once a day was given in the observation group; the therapeutic course was 14 days in both groups. The changes of serum glutamic transaminase (ALT), aspartate aminotransferase (AST) and total bilirubin (TBil) levels were determined before and 7 and 14 days after treatment respectively to evaluate the situation of liver function in the two groups. **Results** Before treatment, there were no statistical significant differences in the levels of serum ALT, AST and TBil in the two groups (all $P > 0.05$); with the prolongation of treatment, the above-mentioned indexes of the two groups were gradually reduced, on the 14th day after treatment, they reached the lowest levels, and the degree of decrease in level on the 14th day in the observation group was more significant than that in the control group [ALT (U/L): 32.6 ± 10.8 vs. 98.3 ± 34.5 , AST (U/L): 39.4 ± 14.3 vs. 138.5 ± 25.6 , TBil ($\mu\text{mol}/\text{L}$): 4.8 ± 1.7 vs. 13.2 ± 2.3 , all $P < 0.05$]. **Conclusion** Shuganning injection has a protective effect on liver function in patients with drug poisoning.

【Key words】 Shuganning injection; Drug poisoning; Liver function

舒肝宁注射液是一种中药复合制剂,具有良好的抗病毒、保肝和护肝作用,在临床应用广泛。本科应用舒肝宁注射液结合常规治疗药物中毒患者,疗效满意,现报告如下。

1 资料与方法

1.1 一般资料: 选择2015年1月至2016年8月吉林大学第一医院二部急救医学科收治的药物中毒患者415例,根据各药物中毒临床严重程度评分标准分为轻、中、重度。既往有急慢性肝病及其他存在影响观察指标患者15例未列入试验中。最终纳入符合本试验条件合并肝功能损害患者140例,其中

男性47例,女性93例;年龄(47.5 ± 16.3)岁。中毒后就诊时间:8 h以内21例,8~24 h 56例,24 h以上63例。

1.2 研究分组: 将140例药物中毒合并肝功能损害患者按计算机产生的随机数字分为观察组和对照组,每组70例。

1.3 伦理学: 本研究符合医学伦理学标准,并经本院医学伦理委员会批准,所有治疗和检测方法均取得患者或家属知情同意。

1.4 治疗方法: 所有病例入院后均给予解毒、排毒、保护器官、对症支持等常规治疗。观察组在上

述常规治疗基础上给予舒肝宁注射液(贵州瑞和制药有限公司生产,国药准字Z20025660)20 mL加入到10%葡萄糖注射液250 mL中,缓慢静脉滴注(静滴),每日1次,连用14 d。

1.5 观察指标:于治疗前和治疗后7 d、14 d检测两组患者血清丙氨酸转氨酶(ALT)、天冬氨酸转氨酶(AST)、总胆红素(TBil)水平以评价肝功能情况。

1.6 统计学处理:使用SPSS 20.0统计软件处理数据,符合正态分布的计量资料以均数±标准差($\bar{x} \pm s$)表示,两组比较采用t检验;计数资料采用 χ^2 检验, $P < 0.05$ 为差异有统计学意义。

2 结 果

2.1 两组一般资料比较(表1):两组患者性别、年龄、就诊时间、住院时间、中毒程度等一般资料比较差异均无统计学意义(均 $P > 0.05$),说明两组资料均衡,有可比性。

表1 两组患者一般资料比较

组别	例数 (例)	性别(例)		年龄 (岁, $\bar{x} \pm s$)	就诊时间 (h, $\bar{x} \pm s$)
		男性	女性		
对照组	70	25	45	46.8 ± 16.7	19.78 ± 10.51
观察组	70	22	48	48.2 ± 15.8	19.91 ± 9.31
组别	例数 (例)	住院时间 (d, $\bar{x} \pm s$)		中毒程度(例)	
		轻度	中度	重度	
对照组	70	17.1 ± 1.6	21	45	4
观察组	70	17.2 ± 1.8	22	44	4

2.2 两组血清ALT、AST、TBil水平比较(表2):治疗前两组患者血清ALT、AST、TBil水平比较差异均无统计学意义(均 $P > 0.05$);随治疗时间延长,两组上述指标均逐渐降低,治疗14 d达最低水平,且观察组的降低程度较对照组更显著(均 $P < 0.05$)。

表2 两组患者治疗前后肝功能指标比较($\bar{x} \pm s$)

组别	例数 (例)	ALT (U/L)	AST (U/L)	TBil (μmol/L)
对照组				
治疗前	70	253.7 ± 34.5	376.2 ± 49.5	17.2 ± 2.4
治疗后7 d	70	108.2 ± 35.4 ^a	236.4 ± 27.8 ^a	14.5 ± 1.6 ^a
治疗后14 d	70	98.3 ± 34.5 ^a	138.5 ± 25.6 ^{ab}	13.2 ± 2.3 ^{ab}
观察组				
治疗前	70	265.3 ± 32.1	384.7 ± 50.8	16.8 ± 2.8
治疗后7 d	70	72.5 ± 18.6 ^a	96.3 ± 28.4 ^a	9.8 ± 2.6 ^a
治疗后14 d	70	32.6 ± 10.8 ^{bcd}	39.4 ± 14.3 ^{bcd}	4.8 ± 1.7 ^{bcd}

注:与治疗前比较,^a $P < 0.05$;与治疗7 d比较,^b $P < 0.05$;与对照组比较,^c $P < 0.05$

3 讨 论

根据近年我国大样本流行病学调查研究发现,药物中毒人次数呈逐年增加趋势,造成药物中毒的常

见药物分别是抗焦虑、解热镇痛、抗炎、抗风湿及抗精神病药等^[1],此类药物通常对肝损伤较大,服用过量时,可引起不同程度肝损伤^[2-3],实验室检查常以转氨酶和胆红素升高为主,严重者还可引起急性肝衰竭,虽经积极治疗,但仍有死亡发生^[4-5]。

中药及中药制剂通过保护肝细胞膜、抑制肝细胞凋亡和坏死、促进肝细胞再生、改善肝功能、缓解肝组织病理改变等作用,在治疗肝损伤方面有独特优势^[6]。舒肝宁注射液是由陈茵、栀子、黄芩、板蓝根、灵芝等提取物和植物单体成分组合构成,具有清热解毒、利湿退黄、益气扶正和保肝护肝的功效。舒肝宁注射液可以减轻急性肝损伤的胞质疏松化、细胞水肿、炎性细胞浸润等病理改变,从而发挥良好的保肝作用^[7]。目前临幊上主要用于治疗急慢性病毒性肝炎,其保肝、降胆、退黄等疗效确切^[8]。同时,也有研究发现,舒肝宁注射液对药物性肝损伤^[9]和蛇咬伤患者的肝功能有一定的保护作用^[10]。

本研究表明,药物中毒后出现肝损伤患者应用舒肝宁注射液治疗7 d后观察组血清ALT、AST、TBil均较对照组降低,治疗14 d降低更明显。提示药物中毒所致急性肝损伤患者应用舒肝宁注射液对肝功能的恢复有积极作用。

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本刊常用的不需要标注中文的缩略语

- 诱导型一氧化氮合酶(inducible nitric oxide synthase, iNOS)
神经型一氧化氮合酶(neuronal nitric oxide synthase, nNOS)
内皮型一氧化氮合酶(endothelial nitric oxide synthase, eNOS)
平均动脉压(mean aortic pressure, MAP)
早期目标导向治疗(early goal directed treatment, EGDT)
核转录因子- κ B(nuclear factor- κ B, NF- κ B)
心血管疾病(cardiovascular disease, CVD)
中链三酰甘油(medium-chain triglyceride, MCT)
三酰甘油(triglyceride, TG)
总胆固醇(total cholesterol, TC)
低密度脂蛋白胆固醇
(low density lipoprotein cholesterol, LDL-C)
高密度脂蛋白胆固醇
(high density lipoprotein cholesterol, HDL-C)
磷酸盐缓冲液(phosphate-buffered saline, PBS)
酶联免疫吸附试验
(enzyme-linked immunosorbent assay, ELISA)
重症急性胰腺炎(severe acute pancreatitis, SAP)
连续静脉-静脉血液滤过
(continuous veno-venous hemofiltration, CVVH)
腹腔间隔室综合征(abdominal compartment syndrome, ACS)
血细胞比容(hematocrit, HCT)
急性肾损伤(acute kidney injury, AKI)
急性呼吸窘迫综合征
(acute respiratory distress syndrome, ARDS)
多器官功能障碍综合征
(multiple organ dysfunction syndrome, MODS)
多器官功能衰竭(multiple organ failure, MOF)
序贯器官衰竭评分
(sequential organ failure assessment, SOFA)
急性肾衰竭(acute renal failure, ARF)
改善全球肾脏病预后组织
(Kidney Disease Improving Global Outcomes, KDIGO)
重症加强治疗病房(intensive care unit, ICU)
全身炎症反应综合征
(systemic inflammatory response syndrome, SIRS)
中性粒细胞明胶酶相关脂质运载蛋白
(neutrophil gelatinase-associated lipocalin, NGAL)
受试者工作特征曲线
(receiver operating characteristic curve, ROC)
ROC曲线下面积(The area under ROC curve, AUC)
拯救脓毒症战役(Surviving Sepsis Campaign, SSC)
心率(heart rate, HR)
白细胞计数:white blood cell count, WBC)
溃疡性结肠炎(ulcerative colitis, UC)
红细胞沉降率(erythrocyte sedimentation rate, ESR)
C-反应蛋白(C-reactive protein, CRP)
肿瘤坏死因子- α (tumor necrosis factor- α , TNF- α)
随机对照试验(randomized controlled trial, RCT)
高血压脑出血(hypertensive intracerebral hemorrhage, HICH)
颅内血肿微创穿刺清除术
(micro-invasive craniopuncture scavenging technique, MPST)
优势比(odds ratio, OR)
均数差(mean difference, MD)
实时动态血糖监测系统
(real-time continuous glucose monitoring system, RTGMS)
灌注指数(perfusion index, PI)
磁共振成像(magnetic resonance imaging, MRI)
美国国立卫生研究院卒中量表
(National Institutes of Health stroke scale, NIHSS)
丙二醛(malondialdehyde, MDA)
超氧化物歧化酶(superoxide dismutase, SOD)