

自拟益肾健脾化痰方治疗绝经后脾肾阳虚型骨质疏松症的临床研究

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摘要:目的 观察自拟益肾健脾化痰方治疗绝经后脾肾阳虚型骨质疏松症的临床疗效。**方法** 2016年1月—2017年1月,选取我院120例绝经后脾肾阳虚型骨质疏松症患者,随机分为观察组60例,2016年1月—2017年1月,选取我院60例绝经后脾肾阳虚型骨质疏松症患者,随机分为观察组30例,2016年1月—2017年1月,选取我院30例绝经后脾肾阳虚型骨质疏松症患者,随机分为观察组15例,2016年1月—2017年1月,选取我院15例绝经后脾肾阳虚型骨质疏松症患者,随机分为观察组7例,2016年1月—2017年1月,选取我院7例绝经后脾肾阳虚型骨质疏松症患者,随机分为观察组3例。结果 观察组总有效率为93.33%,对照组为80.00%, $P<0.01$;2. 观察组腰椎L2~L4、股骨颈、Ward's三角、(B-ALP)、(TRACP)均显著降低($P<0.01$),观察组降低更显著($P<0.01$);2. 观察组雌二醇(E_2)、IGF-1均显著升高($P<0.01$),观察组升高更显著($P<0.01$);2. 两组不良反应发生率均无显著差异($P>0.05$)。结论 自拟益肾健脾化痰方治疗绝经后脾肾阳虚型骨质疏松症具有显著疗效,且不良反应少,值得推广应用。

关键词: 绝经后脾肾阳虚型骨质疏松症; 自拟益肾健脾化痰方

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Clinical Curative Effects Analysis of Self-made Yishen Jianpi Huayu Formula in the Treatment of Syndrome of Spleen and Kidney Yang Deficiency of Postmenopausal Osteoporosis

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ABSTRACT: OBJECTIVE To study the Clinical curative effect of self-made Yishen Jianpi Huayu Formula in the treatment of syndrome of spleen and kidney yang deficiency of postmenopausal osteoporosis. **METHODS** From January 2016 to January 2017, 120 postmenopausal osteoporosis patients included in our hospital were selected and randomly divided into the observation group and the control group by random number, 60 cases in each group. Both groups were given calcium carbonate D3 tablets. On the basis of this, the control group was given xianlinggubao capsules, and the observation group was given self-made Yishen Jianpi Huayu Formula. Both groups were treated for three months. **RESULTS** After treatment, the total clinical symptoms cores of lumbar and back pain, soreness and weakness of waist and knees, increasing of night urine, aversion to cold and cold limbs and lassitude in both groups were decreased significantly($P<0.01$), but the observation group decreased more significantly ($P<0.01$). After treatment, the total effective rate in the observation group was 93.33%, which was significantly higher than that in the control group (80.00%, $P<0.01$). The bone mineral density of lumbar spine, L2~L4, femoral neck, greater trochanter of femur and Ward's pyramidal bone were significantly increased compared with pretreatment ($P<0.01$), but the observation group increased more significantly ($P<0.01$). Bone specific alkaline phosphatase (B-ALP) and tartrate resistant acid phosphatase(TRACP) in both group were decreased significantly ($P<0.01$) compared with pretreatment, but the observation group decreased more significantly ($P<0.01$). Estradiol (E_2), insulin growth factor (IGF-1) in both group were increased significantly compared with pretreatment ($P<0.01$), and the observation group increased more significantly ($P<0.01$). The adverse events occurrence rates in both groups had no significant difference ($P>0.05$). **CONCLU-**

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SION Self-made Yishen Jianpi Huayu formula can significantly improve the clinical symptoms of postmenopausal osteoporosis, and improve patients' bone metabolism and bone mineral density at the same time. Its action mechanism may be associated with increased estrogen and IGF-1 levels.

KEY WORDS: self-made Yishen Jianpi Huayu formula; postmenopausal osteoporosis; clinical effect

(OP), 600mg/ , 1 , 1 1 , 3 。 , () , 5~10 a , 2 , 3 ; 25%~50% , : 20 g, 20 g, 20 g, 20 g, 20 g, 15 g, 15 g, 15 g, 15 g, [1]。 15 g, 15 g, 10 g, 10 g, 6 g。 , 1 , , 200~300 mL, , 1 [2]。 , , 1 , 3 。 ; , [3]。 2.2 ①2 , , , , 3

1 临床资料

2016 1 —2017 1 1 , 0 。 《 120 (PMOP) , 》[6] : 《 [4] , >90% ; 《 [5] , 70%~ ① ;② 90% ; ③ 50~70 ;④ , 30%~70% ; ① , ≤30% 。 = (-) / × ③ 3 100%。 = (+ +) / ×100%。 ② X ;④ L2~L4、 、 ;⑤ 3 ;⑥ 、Ward's ;③ : - (B-ALP) - (TRACP); (E₂)、 (IGF-1);④ 、 、 、 2.3 SPSS 18.0 , ($\bar{x} \pm s$, t , 0.05), 。 χ^2 , $P < 0.05$ 。

2 方法 **3 结果**
2.1 3.1 2
2 D3 (: , 2 , 、 、 、

($P < 0.01$), ($P < 0.01$)。 1。
 表1 2组治疗前后临床症状改善情况比较($\bar{x} \pm s, n=60$)

2.87±0.73	1.25±0.51	1.08±0.32	1.29±0.44	1.17±0.51	7.66±1.01
1.10±0.41 ^{##}	0.44±0.31 ^{##}	0.55±0.42 ^{##}	0.50±0.31 ^{##}	0.52±0.34 ^{##}	3.11±0.89
2.92±0.88	1.29±0.66	1.05±0.41	1.24±0.51	1.20±0.44	7.70±0.97 ^{##}
2.08±0.68 ^{**}	0.93±0.51 ^{**}	0.73±0.31 ^{**}	0.81±0.53 ^{**}	0.82±0.41 ^{**}	5.37±0.87 ^{##}

: , * * $P < 0.01$; , # # $P < 0.01$ 。

3.2 2 : , $\chi^2 = 4.615, ** P < 0.01$ 。

93.33% 3.3 2
 80.00% ($P < 0.01$)。 2。

表2 2组临床疗效比较($n=60$)

					/%
13	18	25	4	93.33 ^{**}	
6	15	28	12	80.00	

Ward's ($P < 0.01$), (2 L2~L4、) (L2~L4、) ($P < 0.01$)。 3。

表3 2组治疗前后骨密度指标比较($\bar{x} \pm s, g \cdot cm^{-2}$)

n	L2~L4	Ward's		
60	0.73±0.12	0.71±0.10	0.62±0.14	0.63±0.06
60	0.98±0.14 ^{###}	0.94±0.09 ^{###}	0.87±0.11 ^{###}	0.88±0.08 ^{###}
60	0.75±0.11	0.68±0.08	0.61±0.12	0.64±0.09
60	0.84±0.13 ^{**}	0.80±0.11 ^{**}	0.77±0.14 ^{**}	0.75±0.10 ^{**}

: , * * $P < 0.01$; , # # $P < 0.01$ 。

3.4 2
 2 B-ALP、TRACP 4 (6.67%), 3 (5.00%), 2
 ($P < 0.01$), ($P < 0.01$)。 ($P > 0.05$)。

4. 讨论

表4 2组治疗前后骨代谢指标比较($\bar{x} \pm s, U \cdot L^{-1}$)

n	B-ALP	TRACP
60	25.67±4.02	7.86±1.20
60	19.10±3.34 ^{##}	5.10±1.01 ^{##}
60	25.71±4.11	7.87±1.19
60	22.35±3.03 ^{**}	6.25±1.12 ^{**}

: , * * $P < 0.01$; , # # $P < 0.01$ 。

3.5 2 E_2 、IGF-1
 2 E_2 、IGF-1 ($P < 0.01$), ($P < 0.01$)。 5。

表5 2组治疗前后 E_2 、IGF-1水平比较($\bar{x} \pm s$)

n	$E_2 /$ ($ng \cdot L^{-1}$)	IGF-1/ ($ng \cdot mL^{-1}$)
60	22.69±4.10	78.66±11.57
60	35.33±4.54 ^{##}	125.80±12.61 ^{##}
60	21.75±4.01	79.07±13.16
60	27.30±3.73 ^{**}	108.27±13.10 ^{**}

: , * * $P < 0.01$; , # # $P < 0.01$ 。

3.6 2
 2

