

临床研究

加味补血汤治疗气虚血瘀型
缺血性脑中风 35 例

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摘要:目的 探讨加味补血汤治疗气虚血瘀型缺血性脑中风 35 例临床效果。方法 纳入 70 例气虚血瘀型中风患者作为研究对象, 随机抽签分为两组, 每组 35 例。对照组行西医常规治疗, 治疗组在对照组基础上以加味补血汤进行治疗。比较两组治疗效果及血小板、氧化应激指标变化。**结果** 治疗组治疗显效率显著高于对照组 ($P < 0.05$)。治疗组治疗结束时、治疗 1 月及治疗后 2 月时 NIHSS 评分显著低于对照组 ($P < 0.05$)。治疗组治疗后 MDA、ox-LDL 水平与治疗前及对照组治疗后对比显著降低, 且治疗组治疗后 GSH-Px 水平与治疗前及对照组治疗后对比显著提高, 差异有统计学意义 ($P < 0.05$)。治疗组治疗后 MPV、PAgT 水平与治疗前及对照组治疗后对比显著降低, 且治疗组治疗后 PLT 水平与治疗前及对照组治疗后对比显著提高, 差异有统计学意义 ($P < 0.05$)。**结论** 加味补血汤治疗气虚血瘀型中风疗效显著, 有助于保护脑神经功能、增强血小板功能, 降低血清氧化应激水平。

关键词: 加味补血汤; 溶栓; 气虚血瘀; 中风

中图分类号: R255.2 文献标识码: B 文章编号: 1672-0571(2020)02-0062-04

DOI: 10.13424/j.cnki.mtcm.2020.02.017

Treatment of 35 Cases of Ischemic Stroke of Qi Deficiency and Blood Stasis with Modified Buxue Decoction

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Abstract: Objective To investigate the clinical effect of Modified Buxue Decoction in treating 35 cases of ischemic cerebral stroke with qi deficiency and blood stasis. **Methods** 70 patients with stroke of qi deficiency and blood stasis were randomly divided into two groups, 35 in each group. The control group was treated with conventional western medicine, and the treatment group was treated with Modified Buxue Decoction on the basis of the control group. The therapeutic effect and the changes of platelet and oxidative stress were compared between the two groups. **Results** the effective rate of the treatment group was significantly higher than that of the control group ($P < 0.05$). The NIHSS score of the treatment group was significantly lower than that of the control group at the end of the treatment ($P < 0.05$). The levels of MDA and Ox-LDL after treatment in the treatment group were significantly lower than those before treatment, and also significantly lower than those after treatment in the control group, and the levels of GSH-Px in the treatment group were significantly higher than those before treatment and after the treatment in the control group. The difference was statistically significant ($P < 0.05$). The levels of MPV and PAgT in the treatment group after treatment were significantly lower than those before the treatment and also significantly lower than those after treatment in the control group, while the levels of PLT in the treatment group were significantly higher than those before the treatment and also significantly higher than those after treatment in the control group. The difference was statistically significant ($P < 0.05$). **Conclusion** Modified Buxue