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硕 士 学 位 论 文

柴郁温胆汤治疗抑郁症气郁痰结证临床研究

Clinical Study on the Treatment of Depression Qi stagnation
and Phlegm stagnation Syndrome with Chai Yu Wen Dan
Decoction

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摘要

背景:

抑郁症是由各种原因引起的,以显著而持久的情绪低落、兴趣和活动性减低为主要临床表现的精神障碍性心理疾病。现代社会由于生活工作压力增大、节奏变快、竞争激烈等,抑郁症的发病率呈上升趋势。抗抑郁西药应用于临床已半个多世纪,证实多数药物有确切的疗效,但仍然存在抗抑郁谱窄、起效缓慢、存在不同程度不良反应、患者依从性较差等问题。近年来中药复方以其多途径、多靶点及多环节的综合药理效应治疗抑郁症已凸显一定优势。

目的:

1. 通过文献研究探索中医药治疗抑郁症的优势所在,为寻求安全有效的抗抑郁中药复方制剂提供理论依据。
2. 观察中药复方柴郁温胆汤治疗抑郁症气郁痰结证的临床疗效。

方法:

1. 系统检索近三十年来中西医关于抑郁症的认识、发病机理与治疗方法研究等文献,进行综述分析。
2. 临床试验:根据汉密尔顿量表评分及中医辨证标准,选择符合标准的抑郁症患者 60 名,随机分为治疗组与对照组,每组各 30 例,均给予心理疏导、指导合理安排日常起居饮食等。治疗组服用柴郁温胆汤,每日一剂。对照组口服舍曲林片,每次 75mg,每日一次,疗程均为 4 周。伴睡眠障碍者,两组均在晚上睡前加服氯硝基西洋片 0.5-1mg。比较两组治疗前后汉密尔顿抑郁量表(HAMD)、疗效指数 EI、副反应量表(TESS)的评分变化。

结果:

治疗前治疗组 HAMD 评分为 26.39 ± 4.49 ; 对照组为 26.28 ± 4.73 , 两组 HAMD 评分统计无差异。治疗后治疗组为 14.52 ± 3.47 ; 对照组为 15.47 ± 5.21 两组的 HAMD 总分在治疗后均有下降,治疗组与对照组间无统计学差异。治疗后治疗组总有效率为 80.00%; 对照组总有效率为 60.00%, 两组总有效率比较有统计学意义 ($P < 0.05$)。治疗组 EI 评分结果为 3.48 ± 0.23 ; 对照组 EI 评分结果为 2.16 ± 0.28 , 两组疗效具有统计学差异 ($P < 0.05$)。比较两组 TESS 的评分结果, 治疗组为

0.24±0.87；对照组为 4.32±3.41，治疗组总分显著低于对照组（ $P<0.01$ ）。

结论：

1. 通过研究，提示中医药治疗抑郁症具有疗效稳定、复发率较低、不良反应少的优势，但临床研究存在证候分类不一致，缺乏统一的疗效标准，以及对疗效机理的研究等不足之处。

2. 柴郁温胆汤对抑郁症气郁痰结证治疗效果较明显，疗效优于舍曲林，且不良反应发生率较低。

关键词：

抑郁症 气郁痰结证 中医药治疗 柴郁温胆汤

Abstract

Background:

The causes of Depression have various possibilities, it's a mental disorder disease that utter a significant prolonging emotional downfall, a lost of interest and drop-off activity as its main clinical symptoms. In modern society, the increasing pressure and paces in every aspect of life and works have led the incidence of Depression in an upward trend. The uses of western medicine in clinical treatment of Depression have been conducted for more than half a century. However, the treatment methods are still limited, and have a deliberately slow effect accompanied with a series of sub-effect and patients' incompliance. In recent year, the uses of TCM compounds have shown certain out standing result in treating Depression as to its multi-target and comprehensive effects.

Objective:

1.Through the research of medical records and literature studies to explore the advantages of TCM in treating Depression and provides theoretical basis for a safe and effective treatment.

2.To observe the clinical effect of Chaiyuwendan Decoction, in treatment of Qi and phlegm stagnation type of Depression.

Methods:

1.To provide a comprehensive analysis in pathogenesis and therapeutic method of Depression through a systematic retrieval of late thirty years' western and TCM medical records and documents.

2.Clinical trial: select 60 patients according to HAMD standard, and randomly divided up into two groups, treatment group and control group with 30 patients each. Both groups conduct psychological counseling and arrange daily routine. The treatment group was given Chaiyuwendan Decoction, once per day, and the control group was given Sertraline, 75mg every time, once per day, in a total of four weeks duration. Patients with sleep disorder were given Chlorine nitro clonazepam tablets.

Compare and analyzed two groups' result changes in HAMD, EI, and TESS score.

Result:

Before treatment, treatment group HAMD score was 26.39 ± 4.49 ; control group $26.28 \pm 4.73\%$, two groups of HAMD score statistics had no significant difference; after treatment, the treatment group was 14.52 ± 3.47 ; control group 1.547 ± 5.21 , two groups of HAMD scores before and after the treatment were decreased in the control group, treatment group and control group without statistical difference. After treatment in treatment group, the total effective rate was 80.00%; in the control group, the total effective rate is 60.00%, the total effective rate of the two groups was statistically significant ($P < 0.05$). The EI score of treatment group was 3.48 ± 0.23 , and the control group EI score was 2.16 ± 0.28 , and the curative effect of the two groups was statistically significant ($P < 0.05$). The scores of two groups of TESS were compared, the treatment group was 0.24 ± 0.87 ; the control group was 4.32 ± 3.41 , and the total score of treatment group was significantly lower than that of the control group ($P < 0.01$).

Conclusion:

1. Through the research, suggesting that traditional Chinese medicine in the treatment of depression with a stable effect, low recurrence rate, the advantage of less side effects, but there are inconsistencies in the classification of syndromes, the lack of unified standards of curative effect, and the effect mechanism research deficiencies.

2. Chaiyu Wendan Decoction on depression of qi depression and phlegm stasis treatment effect is obvious, curative effect is better than sertraline, and the incidence of side effects was low.

Keywords:

Depression; Qi and phlegm stagnation; TCM treatment; Chaiyuwendan Decoction.

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引言

抑郁症是由多种原因引起，以显著而持久的情绪低落、活动能力低下、兴趣丧失为主要临床表现的精神障碍性心理疾病^[1]，有三高(高患病率、高复发率、高致残率)二低(低诊断率、低治疗率)的病理特征^[2]，现代社会由于生活工作压力增大、节奏加快、竞争激烈等，由精神因素引起的心身疾病越来越普遍，抑郁症的发病率呈显著上升趋势，严重威胁着人类的身心健康。目前在全球范围内发病率约达 3.1%，而发达国家发病率则将近 6%^[3]，有数据显示，每一百个人当中有十到二十个人，在其一生中曾发作过至少一次的严重性抑郁症^[4]，在 2005 年亚洲精神疾病高峰论坛报告中显示中国抑郁症患者达到 2600 万^[5]。根据 WHO 提出的估算资料，抑郁症患者的数量在全球范围内达 3 亿人，而男女比例为 1:2，且有 1/3 的人曾经患过此病，其中易患此病的高危险族群，包括老年人、长期酗酒者以及有心理疾病家族史和产后体虚者或慢性病患者。研究表明，抑郁症为一种慢性严重性脑疾病，具有反复发作的特性，且有着较高的发作普及率。预测到 2020 年将成为除心血管疾病外导致人类死亡和致残的第二大疾病^[6]，根据近年来的调查数据显示，国内外均有抑郁症患者在发病期会合并发生躯体症状，其发生率超过了 90%，认为抑郁症的发病表现常出现身体部分不适的躯体症状，在很多时候都导致了错误的治疗方法的采用，进而出现不尽理想的治疗结果。一项对首发抑郁症患者 5754 例的调查访问结果提示，大多数患者会因为自身出现的躯体症状而前往相应的临床科室就诊，在这些患者当中仅有 7.2% 的人能在进行诊疗时，被发现是由抑郁症问题所引起。在一开始发病时便会自觉的到心理精神科就诊的患者只占了极少的比例(5.3%)，认为应对抑郁症发生后可能出现的躯体症状表现进行更多的研究，以期减少误诊误治的比例^[7]。根据北京心理危机研究与干预中心所提出的研究数据表示，中国一年有 28.7 万人自杀，抑郁症患者占了其中的 70%^[8]，因此，对于抑郁症的防治是现阶段的重点研究议题。西药抗抑郁剂应用于临床已半个多世纪，循证医学研究肯定了多种抗抑郁剂的临床疗效，但仍然存在着不足之处，如：抗抑郁谱窄，使用范围存在着局限性，部分抗抑郁剂对难治性抑郁症、儿童抑郁症无效；起效较慢，不

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