

经验交流

# 椎动脉型颈椎病的中医治疗

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**摘要** 运用中药止眩汤加手法综合治疗椎动脉型颈椎病175例, 疗效满意, 总有效率达99.4%。中药由补阳还五汤合导痰汤化裁而成, 具有补气活血, 导痰祛瘀, 镇惊安神作用。手法以提颈拔项法和旋转摇项法为主。

**关键词** 椎动脉型颈椎病 中医药疗法

颈椎病中椎动脉型是仅次于脊髓型的严重疾患。我所自1986年以来, 用中药、手法综合治疗本病, 获得较好疗效, 现报道如下。

### 临床资料

本组175例中, 男52例, 女123例; 年龄在22~74岁之间, 平均为46.8岁, 以36~55岁者占全部病例的64.57%; 职业: 干部98人, 工人67人, 农民10人; 发病时间: 1天~25年; 病因: 有明显外伤史34例, 转颈引起发作92例, 长期低头, 伏案工作者87例, 受凉史78例, 平素有高枕习惯44例, 不明原因者24例。症状、体征及辅助检查见表1、2。

表1 症状分类

症状	例	百分率 (%)	症状	例	百分率 (%)
1. 颈部僵凝	168	96.0	6. 失眠	58	33.1
2. 颈部活动受限	172	98.3	7. 视力下降	22	12.6
3. 头晕	173	98.8	8. 肩部疼痛	45	25.7
4. 恶心、呕吐	82	46.8	9. 上肢疼痛	32	18.3
5. 猝倒	32	18.3	10. 耳鸣或失听	28	16.0

从表1、2可以看出本病压痛点的存在<sup>[1]</sup>伴颈部僵凝、活动受限, 头晕兼消化、视、听及肢体方面等临床特征, 而且在压痛点附近均可触及痛性结节、条索状变形, 结合病史, 并参照X光片表现, 诊断上并不困难, 脑血流图检查可供参考。作者以四步辨证法<sup>[1,2]</sup>诊断椎动脉型颈椎病尚未发现误诊病例。

### 治疗方法

#### 1. 中药治疗

**表2 体征及辅助检查**

	体征及辅助检查	例数	百分率 (%)	
体 征	压痛点	175	100	
	条索状改变、剥离	68	38.8	
	压顶试验	96	54.8	
	臂丛牵拉试验	43	24.6	
	痛性结节	C2、3	43	24.6
		C3、4	62	35.4
C4、5		89	50.9	
C5、6		94	53.7	
放射科检查	后纵韧带钙化	75	42.8	
	颈曲改变	74	42.3	
	钩椎关节	C3、4	63	36.0
		C4、5	84	48.0
		C5、6	76	43.2
		C6、7	73	41.7
脑血流图 (57例)	颈内动脉弹性降低	8	14.0	
	椎动脉轻度收缩性改变	14	24.6	
	脑血流图 I 级改变	6	10.5	
	脑血流图 I~II 级改变	23	40.3	
	脑血流图 II 级改变	12	21.0	

**止眩汤:** 当归9g 黄芪30g 桃仁9g 赤芍9g 地龙9g 丹参9g 制南星9g 枳实9g 半夏9g 陈皮9g 茯苓9g 天麻9g 龙齿15g 甘草6g。

**适应证:** 以眩晕甚至猝倒兼有恶心、呕吐痰涎或黄苦水, 舌质绛苔白而腻, 脉弦滑等。

**加减法:** 恶心呕吐甚者加旋复花、姜汁代赭石; 心悸失眠者加硃茯神、磁石、天竺黄、重用龙齿; 眩晕甚者加磁石、僵蚕、钩藤、牡蛎、重用龙齿; 疼痛甚者加炮甲、三七。

**2. 手法治疗:** 以预备手法及提颈拔项法:

旋转摇颈法<sup>〔2〕</sup>为主进行治疗。

3. 疗程：中药2天一付，分数次频频温服。手法每周2~3次，2周为一疗程，停药3天开始第二疗程。连续治疗对症状重者尤佳。

#### 治疗结果

1. 疗效标准：痊愈：以椎动脉供血不足的主要症状及体征消失，颈曲恢复正常，恢复原工作。6个月以内无复发者；好转：眩晕、恶心、呕吐、压痛点、痛性结节等主要症状消失，颈部轻度发僵，活动稍有不便，颈曲基本恢复；进步：主要症状及体征明显减轻，尚不能坚持工作；无效：治疗前后症状及体征无改变。

2. 治疗结果：本组175例经治疗后，痊愈91例(52%)，好转62例(35.4%)，进步21例(12%)，无效1例(0.6%)，总有效率99.4%。中药内服、手法治疗主症消失在3~60天之间。随访时间最长6年，最短1月。

#### 典型病例

××，男，56岁，医生。1986年11月29日晨起突感头晕、颈部僵硬，不能活动，伴恶心呕吐，颈部转侧上症加重，呕吐物为食物残渣及黄苦水，步态不稳，欲倒之状，以双手扶下颌托颈来诊。血压13.3/8.0kpa，压顶试验阳性；臂丛牵拉试验阳性，触诊左侧颈3、4、4、5有痛性结节，X光片示颈4~5椎间孔变窄，钩椎关节增生，颈曲消失。舌质绛、苔白腻，脉弦滑。当即给予手法治疗，头晕、恶心呕吐明显好转，内服止眩汤，间服复方丹参片，治疗一个疗程痊愈，随访6年无复发。

#### 讨论

本组病例有颈部僵凝者占96%，从软组织损伤角度来看。颈椎在负重下有较大活动，其稳定性除颈椎椎体本身外，软组织亦起着主要作用，长期积累性损伤可先破坏软组织对颈椎的稳定性，若颈椎有退行性改变，则软组织在超过正常生理负荷下负重以保持颈椎的负重、活动，因此出现颈部僵凝是必定的。僵是指颈部活动时不舒畅，凝是指当触诊诸肌肉、韧带、筋膜时有凝滞稍僵硬的感觉。治疗时一

且僵凝得到松解，则颈部体征很快恢复，反之则病久难愈，作者手法中推拿、点穴均可达到“以松止痛”的目的。

止眩汤由补阳还五汤、导痰汤复方化裁而成，有补气活血、导痰祛瘀、镇惊安神的功效。真眩晕见“医林绳墨”。指眩晕突然发作，并伴景物旋转，恶心呕吐者。古人有“无虚不作眩”，“无痰不作眩”，近人有“无瘀不作眩”之说。内经病机十九条云：“诸风掉眩，皆属于肝”。肝藏血，为“罢极之本”，主疏泄，与精神活动有关。肝阴虚则头晕，视力减弱，烦躁失眠，阴虚心能潜阳则虚风内动，肝气疏泄不能，则脾虚生痰，失其藏血之职则血瘀不行。本方诸药中大都具有入肝脾心肺四经的药，有补气血祛瘀通络及导痰的方药组成，更兼主人肝、心的天麻、龙齿，所以其止眩作用显著。蒋氏<sup>〔3〕</sup>对活血化瘀治则的研究得出，从细胞形态学角度证实了减轻炎症反应程度，缩短炎症反应时间，同时还有提高动物脑组织cAMG含量，抑制血小板聚集作用，降低中枢神经细胞兴奋性等作用。所以无论从中医理论角度，还是从实验研究方面都说明本方组合严谨，确有临床功效。除此之外，我们认为推拿手法具有活血止痛、解痉散瘀、温经散寒，兼有松解粘连、活络利节作用，二者相辅，效果益彰<sup>〔2〕</sup>。

中药内服、推拿治疗椎动脉型颈椎病，临床效果是肯定的，本文175例中痊愈率在52%，好转率35.4%，(随访定为6个月)，关于本病的诊断作者提倡的“四步辨病”诊断法既注重了软组织损伤理论，又考虑到参考实验手段的辅助检查，我们观察发现改善软组织劳损，使椎体内外平衡失调达到恢复，对放射检查及脑血流图检查出现的阳性结果仅供参考。

#### 参考文献

1. 徐光耀. 压痛点浅识. 中国中医骨伤科杂志 1991; 7(1): 54.
2. 王惠. 颈椎病的辨证施法(附71例报告). 中国中医骨伤科杂志 1990; 6(6): 33.
3. 蒋位庄, 等. 活血化瘀对模拟神经根炎治疗作用的实验研究. 中国骨伤 1987; (1): 10.

## Abstract of Original Articles

### Experimental study and Clinical observation on the mechanism of steroid induced ischemic necrosis of the femoral head

Wang Kun-zheng (王坤正) et al

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Sixty-four Japanese White rabbits were randomly divided into two groups: Hydrocortisone acetate of 8mg/kg were injected

Hypodermically to the experimental group and normal saline 0.32mg/kg to the control group in the same way every week. The results showed that application of the steroid drug could produce fat degeneration and necrosis of osteocytes and fat embolism in the small blood vessels of the femoral head. The abnormal hypertrophied fat cells in the bone marrow compressed small veins in the femoral head to cause blood stasis of the capillaries. The growth and regeneration of the capillary were inhibited.

Clinically, 109 cases of steroid induced ischemic necrosis of femoral head were treated with repair of deformed head, filling cancellous bone into the necrotic area and grafting fibula with anastomosis of blood vessels. Followed up studies from 1-10 years postoperatively showed that the excellent and good rate was 86.6%.

**key words** Femoral head necrosis, hydrocortisone acetate, pathology

(Original article on page 5 )

### Influence of plasma B-endorphin, cAMP, cGMP and PGE2 contents during finger pressure manipulation in treating waist-leg pain

Jiang Hong (姜宏) et al

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RIA method was applied to determine the amount of plasma P-endorphin, cAMP, cGMP and PGE2 pre- and posttreatment in 64 cases waist-leg pain patients treated with finger pressure manipulation on acupoints. The results showed that during the instant of releasing of waist pain there was evident of raising of plasma P-endorphin ( $p < 0.05$ ) in the markedly effective group, but there was no definite change ( $p < 0.05$ ) of cAMP, cGMP and PGE2 contents. It is considered that the analgesic effect of manipulation is probably due to selective activity of endo-analgesic system of the organism in promoting increasing of P-endorphin.

**Key words** Finger pressure manipulation radioimmunoassay (RIA), waist-leg pain

(Original article on page 8 )

**Vertebral type of cervical spondylosis treated with traditional Chinese medicine**

Wang Hui (王惠) et al

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One hundred and seventy-five cases of vertebral type of cervical spondylosis were treated by comprehensive therapy of Chinese herbs, Zhi xuan Tang and manipulation with satisfactory results. The total effective rate was 99.4%. The Chinese herbs were modified by Bu Yang Huan Wu Tang and Dao Tan Tang. It bears the action of invigorating Qi and activating blood circulation, eliminating of phlegm and removing stasis, relieving muscular spasm and tranquilizing the mind. Manipulation of lifting, shifting and rotating shaking Yao methods on the neck were applied.

**Key words** Vertebral type of cervical spondylosis, traditional Chinese medicinal therapeutic method

(Original article on page 10)

**Analysis of chronic lower third tibia-fibula fracture treated with sliding bone-plate transplantation method**

Bi Da-wei (毕大卫) et al

*The Red Cross Hospital, Hangzhou(310004)*

Twenty-one cases of chronic lower third tibia-fibula fracture were treated with modified boneplate sliding transplantation method and external fixator. The results showed that an excellent and good rate was 90.3%. It is superior than traditional transplantation plus long leg plaster of paris fixation.

**Key words** Fracture of tibia and fibula, bone transplantation, fracture fixator

(Original article on page 12)

**Adjustable balancing traction fixator in treating unstable fracture of the tibia and fibula**

Jiang Ming-xuan (姜明轩) et al

*Tianjin Hospital (300211)*

Sixty five cases of unstable fracture of the tibia and fibula were treated with adjustable balancing traction fixator. The results showed that all were healed, average clinical healing time being 8.4 weeks. The recovery of the function of knee and ankle joints within three months was around 98%. The rate of excellent and good was 92.3%.

**Key words** Adjustable balancing traction fixator. fracture of the tibia and fibula

(Original article on page 19)