

雷贝拉唑联合氟哌噻吨美利曲辛治疗非糜烂性胃食管反流病伴焦虑抑郁的临床观察

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摘要 目的:观察雷贝拉唑联合氟哌噻吨美利曲辛治疗非糜烂性胃食管反流病(NERD)伴焦虑抑郁的临床疗效和安全性。方法:将109例NERD伴焦虑抑郁患者随机分为对照组(52例)和观察组(57例)。对照组患者给予雷贝拉唑钠肠溶片20 mg,晨服,每日1次;观察组患者在对照组治疗的基础上给予氟哌噻吨美利曲辛片1片,晨服,每日1次。两组患者疗程均为6周。观察两组患者的临床疗效,治疗前后临床症状评分及不良反应发生情况。结果:治疗后观察组患者总有效率显著高于对照组,两组比较差异有统计学意义($P < 0.05$);治疗后两组患者各临床症状评分均显著低于同组治疗前,且观察组低于对照组,差异均有统计学意义($P < 0.05$)。两组患者治疗期间均未见明显不良反应发生。结论:雷贝拉唑联合氟哌噻吨美利曲辛治疗NERD伴焦虑抑郁较单用雷贝拉唑疗效更显著,且安全性相似。

关键词 雷贝拉唑;氟哌噻吨美利曲辛;非糜烂性胃食管反流病;焦虑抑郁

Clinical Observation of Rabeprazole Combined with Flupentixol and Melitracen in the Treatment of Non-erosive Reflux Disease

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ABSTRACT OBJECTIVE: To observe the clinical efficacy and safety of rabeprazole combined with flupentixol and melitracen in the treatment of non-erosive reflux disease (NERD) complicating with anxiety and depression. METHODS: 109 NERD patients with depression and anxiety were randomly divided into observation group (57 cases) and control group (52 cases). Control group was given Rabeprazole enteric-coated tablet 20 mg in the morning, once a day; observation group was additionally given one Flupentixol and melitracen tablet in the morning, once a day, on the basis of control group. Treatment course of 2 groups lasted for 6 weeks. Clinical efficacies of 2 groups were observed, and clinical symptom score and the occurrence of ADR were observed in 2 groups before and after treatment. RESULTS: The total effective rate of observation group was significantly higher than that of control group; there was statistical significance ($P < 0.05$). Clinical symptom score of 2 groups after treatment were significantly lower than before; that of observation group was lower than that of control group; there was statistical significance ($P < 0.05$). No obvious ADR was found in 2 groups during treatment. CONCLUSIONS: Rabeprazole combined with flupentixol and melitracen is more effective and safer than rabeprazole alone in the treatment of NERD complicating with depression and anxiety.

KEYWORDS Rabeprazole; Flupentixol and melitracen; Non-erosive reflux disease; Anxiety and depression

非糜烂性胃食管反流病(Non-erosive reflux disease, NERD)为胃食管反流病(Gastroesophageal reflux disease, GERD)中最为常见的一类消化性疾病,又称内镜阴性胃食管反流病(ENRD),约占GERD的70%,多发于瘦弱者和年轻女性^[1]。NERD为持续3个月以上胃食管反流症状的典型性疾病,该病患者在胃镜下显示胃黏膜正常,尚无糜烂性食管炎症状^[2]。多数NERD患者伴有焦虑和抑郁等神经症状。氟哌噻吨美利曲辛为抗抑郁药物,联合胃酸抑制剂和抗抑郁药用于治疗NERD伴焦虑抑郁,可显著改善患者临床症状。因此,笔者观察了雷贝拉唑联合氟哌噻吨美利曲辛治疗NERD伴焦虑抑郁的临床疗效和安全性,以为临床治疗提供参考。

1 资料与方法

1.1 一般资料

选择2013年1月—2014年1月我院收治的109例NERD

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伴焦虑抑郁患者,其中男性57例,女性52例;年龄35~60岁,平均(46.5±9.3)岁。纳入标准:(1)有反酸、胸骨后灼痛和烧心等GERD症状,但胃镜未发现胃黏膜异常;(2)GERD症状持续3个月以上,且入组前3个月每周发作3次以上;(3)经胃镜检查未发现胃溃疡、胃黏膜糜烂或Barrett食管等;(4)汉密尔顿抑郁量表(HAMD-17)评分不低于17分。排除标准:(1)胃镜检查为十二指肠溃疡、胃溃疡、胃癌者;(2)有腹部手术史、呕吐、吞咽困难、便血、发热和消瘦等症者。将所有患者按随机数字表法分为观察组(57例)和对照组(52例)。其中,观察组男性30例,女性27例;平均年龄(47.5±10.1)岁。对照组男性27例,女性25例;平均年龄(45.5±8.1)岁。两组患者性别、年龄等一般资料比较,差异均无统计学意义($P > 0.05$),具有可比性。本研究方案经我院医学伦理委员会的批准,所有患者或其家属均签署了知情同意书。

1.2 治疗方法

对照组患者给予雷贝拉唑钠肠溶片(江苏豪森药业股份

有限公司) 20 mg,晨服,每日1次;观察组患者在对照组治疗的基础上给予氟哌噻吨美利曲辛片(丹麦灵北制药有限公司,规格:10.5 mg/片)1片,晨服,每日1次。两组患者疗程均为6周。

1.3 观察指标

观察两组患者治疗前,治疗1周、2周、4周、6周的临床症状评分^[9-11]及不良反应发生情况。临床症状评分标准详见表1。

表1 临床症状评分标准

Tab 1 Clinical symptom score standards

项目	0分	1分	2分	3分
反酸	无	偶有反酸	症状介于1分与3分之间	症状难以忍受
烧心	无	偶有烧心	症状介于1分与3分之间	症状难以忍受
胸痛	无	偶有胸痛	症状介于1分与3分之间	症状难以忍受
发生频率	无	每2周1次	每2周发生2次以上	每天发生

1.4 疗效判定标准^[6]

(1)显效:临床症状总评分下降率 $\geq 80\%$; (2)有效:临床症状总评分下降率 $\geq 50\%$ 且 $< 80\%$; (3)无效:临床症状总评分下降率 $< 50\%$ 。临床症状总评分下降率=(治疗前临床症状总评分-治疗后临床症状总评分)/治疗前临床症状总评分 $\times 100\%$ 。总有效率=(显效例数+有效例数)/总例数 $\times 100\%$ 。

1.5 统计学方法

采用SPSS 17.0统计学软件对所得数据进行分析。计量资料以 $\bar{x} \pm s$ 表示,采用 t 检验;计数资料以率表示,采用 χ^2 检验。 $P < 0.05$ 为差异有统计学意义。

2 结果

2.1 两组患者治疗前后各临床症状评分比较

治疗前两组患者各临床症状评分比较,差异均无统计学意义($P > 0.05$);治疗后两组患者各临床症状评分均显著低于同组治疗前,且观察组低于对照组,差异均有统计学意义($P < 0.05$),详见表2。

表2 两组患者治疗前后各临床症状评分比较(分, $\bar{x} \pm s$)

Tab 2 Comparison of clinical symptom scores between 2 groups before and after treatment (score, $\bar{x} \pm s$)

组别	n	时间	反酸	烧心	胸痛	发生频率
观察组	57	治疗前	5.01 \pm 1.91	5.24 \pm 1.95	5.01 \pm 1.69	2.98 \pm 0.03
		治疗1周	0.77 \pm 0.46**	3.12 \pm 1.42**	2.72 \pm 1.12**	1.94 \pm 0.75**
		治疗2周	0**	1.87 \pm 1.23**	0.72 \pm 0.29**	0.78 \pm 0.11**
		治疗4周	0**	0**	0**	0**
		治疗6周	0**	0**	0**	0**
		对照组	52	治疗前	4.99 \pm 1.93	5.26 \pm 1.96
治疗1周	3.56 \pm 1.25*			3.68 \pm 1.59*	3.49 \pm 1.18*	2.21 \pm 0.73*
治疗2周	2.63 \pm 1.30*			2.56 \pm 1.18*	1.98 \pm 1.24*	1.37 \pm 0.16*
治疗4周	2.23 \pm 1.02*			1.23 \pm 0.63*	1.25 \pm 0.71*	0.81 \pm 0.09*
治疗6周	1.82 \pm 0.95*			0.82 \pm 0.43*	1.12 \pm 0.62*	0.70 \pm 0.05*

与同组治疗前比较: * $P < 0.05$; 与对照组比较: # $P < 0.05$

vs. same group before treatment: * $P < 0.05$; vs. control group:

$P < 0.05$

2.2 两组患者临床疗效比较

治疗后观察组患者总有效率显著高于对照组,两组比较差异有统计学意义($P < 0.05$),详见表3。

2.3 不良反应

两组患者治疗期间均未见明显不良反应发生。

3 讨论

GERD是由NERD、反流性食管炎和Barrett食管3个亚型组成,3个亚型不相互转换,且发病机制均不相同。临床多采用抗酸治疗GERD,常用药物为雷贝拉唑。该药为一种新型的质子泵抑制剂(PPI),含有大量的半胱氨酸残基,靶点多,具有

表3 两组患者临床疗效比较[例(%)]

Tab 3 Comparison of clinical efficacies between 2 groups [case(%)]

组别	n	显效	有效	无效	总有效率, %
观察组	57	24(42.11)	30(52.63)	3(5.26)	94.74
对照组	52	18(34.61)	24(46.82)	10(19.23)	81.43
χ^2		4.632	5.697	5.248	6.214
P		<0.05	<0.05	<0.05	<0.05

起效快、药效持续时间长和药效好等特点^[6]。但是,由于多数患者伴有一定程度的焦虑和抑郁症状,故疗效欠佳。因此,联合抗酸、抗抑郁治疗NERD,可提高疗效。

据报道,30%的NERD患者胃酸反流均在生理范围内,但食管对胃酸反流敏感性高,常常产生一系列症状。因此,抑制胃酸分泌,防止胃酸反流是治疗NERD的要法^[7]。NERD患者的强迫、躯体化、焦虑和偏执等表现显著多于健康人群,因此心理因素对药物疗效的影响越来越受到临床医师的关注。

氟哌噻吨美利曲辛是三环类抗抑郁药,作用靶点为突触前膜的多巴胺自身调节受体,可通过促进机体合成和释放多巴胺来增加突触间隙的递质含量,从而达到抗焦虑和抑郁的作用。

虽然本研究结果表明,观察组患者总有效率显著高于对照组,两组比较差异有统计学意义,但均低于以往的研究^[8-10],这可能与本研究选择的患者伴有焦虑抑郁等神经症状有关。治疗前两组患者各临床症状评分比较,差异均无统计学意义;治疗后两组患者各临床症状评分均显著低于同组治疗前,且观察组低于对照组,差异均有统计学意义,这可能与氟哌噻吨美利曲辛降低了患者内脏器官的敏感性,有效缓解了焦虑抑郁症状有关。同时,说明焦虑和抑郁为NERD发病的重要原因之一。两组患者治疗期间均未见明显不良反应发生,说明雷贝拉唑联合氟哌噻吨美利曲辛治疗NERD伴焦虑抑郁的安全性较好。

综上所述,雷贝拉唑联合氟哌噻吨美利曲辛治疗NERD伴焦虑抑郁较单用雷贝拉唑疗效更显著,且安全性相似。由于本研究纳入的样本量较小,此结论有待大样本、多中心研究进一步证实。

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复方醋酸环丙孕酮联合二甲双胍对多囊卵巢综合征患者内分泌及代谢功能的影响

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摘要 目的:观察复方醋酸环丙孕酮联合二甲双胍对多囊卵巢综合征(PCOS)患者内分泌及代谢功能的影响。方法:将63例PCOS患者随机分为对照组(31例)和观察组(32例)。对照组患者于月经来潮第5日服用复方醋酸环丙孕酮1片,每日1次,21d为1个疗程,服用1个疗程后停药等待撤退性出血后第5日起开始下个疗程,共5个疗程;观察组患者在对照组治疗的基础上服用二甲双胍500mg,每日2次。观察两组患者治疗前后多毛评分、痤疮评分、卵巢体积、内分泌指标[促卵泡激素(FSH)、黄体生成素(LH)、LH/FSH、雌二醇(E₂)、总睾酮(T)、性激素结合球蛋白(SHBG)、硫酸脱氢表雄酮(DHEAS)]、代谢指标[空腹血糖(FBG)、空腹胰岛素(FINS)、总胆固醇(TC)、甘油三酯(TG)、高密度脂蛋白(HDL)、低密度脂蛋白(LDL)]及不良反应发生情况。结果:治疗前两组患者临床症状、内分泌指标、代谢指标比较,差异均无统计学意义($P>0.05$);治疗后两组患者临床症状、LH、FSH、LH/FSH、E₂、T、DHEAS均显著低于同组治疗前,且观察组低于对照组,SHBG、TG、HDL显著高于同组治疗前,且观察组高于对照组,差异均有统计学意义($P<0.05$);TC显著高于同组治疗前($P<0.05$),但组间比较差异无统计学意义($P>0.05$);观察组患者FINS显著高于对照组,差异有统计学意义($P<0.05$)。两组患者治疗前后FBG及对照组治疗前后FINS比较,差异均无统计学意义($P>0.05$)。两组患者治疗期间均未见明显不良反应发生。结论:复方醋酸环丙孕酮联合二甲双胍可显著改善PCOS患者内分泌及代谢功能,安全性较好。

关键词 复方醋酸环丙孕酮;二甲双胍;多囊卵巢综合征;内分泌代谢

Effects of Compound Cyproterone Acetate Combined with Metformin on Endocrine and Metabolic Function of Patients with Polycystic Ovarian Syndrome

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ABSTRACT OBJECTIVE: To observe the effects of Compound cyproterone acetate combined with metformin on endocrinologic and metabolic function of patients with polycystic ovarian syndrome (PCOS). METHODS: 63 PCOS patients were randomly divided into observation group (32 cases) and control group (31 cases). Control group was treated with one Compound cyproterone acetate tablet orally once a day since the fifth day of menstruation; a treatment course lasted for 21 days, and the following treatment course was supplied on the fifth day after withdrawal bleeding; there were a total of 6 treatment courses. Observation group was additionally treated with metformin 500 mg orally twice a day on the basis of control group. Hirsutism score, acne score, ovarian volume, FSH, LH, E₂, T, SHBG, DHEAS, FPG, FINS, TC, TG, HDL, LDL and the occurrence of ADR were observed in 2 groups before and after treatment. RESULTS: Before treatment, there was no statistical significance in clinical symptom, endocrinologic index and metabolic index between 2 groups ($P>0.05$). The clinical symptom, LH, FSH, E₂, T and DHEAS of 2 groups after treatment were significantly lower than before; the observation group was lower than the control group. SHBG, TG and HDL of 2 groups after treatment were significantly higher than before; the observation group was higher than the control group; there was statistical significance ($P<0.05$). TC of 2 groups was significantly higher than before ($P<0.05$); there was no statistical significance between 2 groups ($P>0.05$). FINS of observation group was significantly higher than control group; there was statistical significance ($P<0.05$). There was no statistical significance in FBG of 2 groups and FINS of control group before and after treatment ($P>0.05$). No obvious ADR was found in 2 groups during treatment. CONCLUSIONS: Compound cyproterone acetate combined with metformin can improve endocrinologic and metabolic function of PCOS patients with good safety.

KEYWORDS Compound cyproterone acetate; Metformin; Polycystic ovarian syndrome; Endocrinologic metabolism

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