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黛力新联合中药熏香治疗慢性肾衰竭伴发抑郁焦虑的效果研究*

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摘要 目的:探讨黛力新联合中药熏香治疗慢性肾衰竭伴发抑郁焦虑的临床效果。**方法:**将我院自 2017 年 10 月至 2018 年 9 月收治的慢性肾衰竭伴发抑郁焦虑患者 65 例作为研究对象,按照随机数字表法将其分为研究组 33 例和对照组 32 例,研究组患者给予黛力新联合中药熏香进行治疗,对照组患者给予黛力新进行治疗,观察和比较两组患者抑郁自评量表 (Self-rating depression scale, SDS)、焦虑自评量表(Self-Rating Anxiety Scale, SAS)及社会支持评定量表(social support rate scale, SSRS)量表评分的变化情况。**结果:**治疗前,两组患者 SAS、SDS、SSRS 评分比较差异均无统计学意义($P>0.05$)。治疗后,两组患者的 SAS 和 SDS 情绪评分均较治疗前明显降低,SSRS 评分均较治疗前明显升高,且研究组 SAS 和 SDS 情绪评分明显低于对照组,而 SSRS 评分显著高于对照组($P<0.05$)。研究组患者治疗依从率为 96.97%,口干、恶心、头晕、纳差等轻度不良反应发生率为 30.30%,均明显高于对照组(84.38%和 12.50%, $P<0.05$),两组患者在治疗过程中均未出现明显的恶性不良反应,研究组患者上述不良反应在停止熏香治疗后自行缓解。**结论:**黛力新联合中药熏香梅花香和安神香用于治疗慢性肾衰竭伴发抑郁焦虑患者能够有效的缓解患者抑郁、焦虑的不良情绪,提高社会支持和治疗依从率。

关键词:慢性肾衰竭;抑郁;焦虑;黛力新;中药熏香

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Effect of Deanxit Combined with Chinese Herbal Incense on the Chronic Renal Failure with Depression and Anxiety*

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ABSTRACT Objective: To investigate the clinical effect of Deanxit combined with traditional Chinese medicine incense on the chronic renal failure with depression and anxiety. **Methods:** 65 patients with chronic renal failure accompanied by depression and anxiety were admitted to our hospital from October 2017 to September 2018. According to the random number table method, they were divided into the study group (33 cases) and the control group (32 cases). The study group was treated with Deanxit combined with Chinese herbal incense, while the control group was treated with Deanxit. The changes of self-rating depression scale (SDS), self-rating Anxiety Scale (SAS) and social support rate scale (SSRS) were observed and compared between the two groups before and after treatment. **Results:** There was no significant difference in the SAS, SDS and SSRS scores between the two groups before treatment ($P > 0.05$). After treatment, the scores of SAS and SDS in both groups were significantly lower than those before treatment, and the SSRS scores were significantly higher than those before treatment. The scores of SAS and SDS in the study group were significantly lower than those in the control group, while the SSRS scores were significantly higher than those in the control group ($P < 0.05$). The compliance rate of study group was 96.97%, and the incidence rate of slight adverse reactions such as dry mouth, nausea, dizziness and poor acceptance was 30.30%, which were significantly higher than those of the control group (84.38% and 12.50%, $P < 0.05$). There was no obvious malignant adverse reaction in the two groups during the treatment. The adverse reactions in study group were relieved after stopping the incense treatment. **Conclusion:** Deanxit combined with Chinese herbal incense plum blossom fragrance and benzoin can effectively alleviate the depression and anxiety of chronic renal failure patients with depression and anxiety, and improve the social support and treatment compliance.

Key words: Chronic renal failure; Depression; Anxiety; Deanxit; Chinese medicine incense

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前言

由多种原因造成的慢性进行性肾实质损害即为慢性肾衰竭(chronic renal failure, CRF), 该类患者肾脏会随着病程进展发生明显萎缩, 不能维持其基本功能, 临床表现出代谢产物潴留, 水、电解质、酸碱平衡失调, 甚至累及全身其他系统和脏器^[1-3]。患者 CRF 后期需要进行血液透析来维持生命, 较长的病程和透析等治疗方案会对患者身心带来极大的创伤^[4-6]。据调查资料显示, 有超过 60% 的 CRF 患者存在不同程度的抑郁、焦虑等不良情绪, 对患者治疗的依从性的和生活质量都会产生不良影响^[7-9]。

黛力新(Deanxit)又称氟哌噻吨美利曲辛片, 属于神经阻滞剂和双相抗抑郁剂, 使用后药物中两种成分能够协调发挥调整中枢神经系统的功能, 具有抗抑郁、抗焦虑的特性^[10-12]。本研究以我院近一年来收治的 CRF 伴发抑郁焦虑的患者作为研究对象, 给予黛力新联合中药熏香进行抗抑郁治疗, 获得较好的效果, 现将结果报道如下。

1 资料与方法

1.1 一般资料

将我院自 2017 年 10 月至 2018 年 9 月收治的慢性肾衰竭伴发抑郁焦虑的患者 65 例作为研究对象, 按照随机数字表法分为研究组 33 例(黛力新+中药熏香)和对照组 32 例(黛力新), 两组一般资料比较差异均无统计学意义, 具有可比性。

1.2 纳入和排除标准

纳入标准: 符合全球肾脏病预后组织(Kidney Disease: Improving Global Outcomes, KDIGO)在 2012 年指定的《提高和管理慢性肾脏病临床实践指南》中指定的相关标准, 即肾小球滤过率(glomerular filtration rate, GFR)持续 $<60 \text{ mL/min/1.73 m}^2$ > 3 个月^[13]; 使用抑郁自评量表(Self-rating depression scale, SDS)和焦虑自评量表(Self-Rating Anxiety Scale, SAS)评定均存在不同程度的抑郁和焦虑情绪。

排除标准: 将肾脏功能完全丧失、由于各种原因不能进行

量表评分、妊娠或哺乳期妇女、存在精神病史或家族史、滥用酒精药物应对精神活性物质的患者以及合并有心脏疾病的患者排除。

1.3 治疗方法

对照组: 使用黛力新(商品名: 氟哌噻吨美利曲辛片; 生产企业: 丹麦灵北制药公司; 批准文号: 国药准字 H20080175; 规格: 20 s/盒)进行治疗, 口服, 2 次/d。

研究组: 在使用黛力新的同时进行中药熏香治疗, 两种香的组成成分如下, 梅花香: 甘松 100 g、零陵香 100 g、檀香 50 g、小茴香 50 g、丁香 30 g、冰片 15 g、分别研为细末, 炼蜜和匀, 密封, 冰箱冷藏备用; 安魂香: 沉香 80 g、安息香 100 g、乳香 60 g、白芷 60 g、小茴香 30 g、香附 50 g、分别研为细末, 炼蜜和匀, 密封, 冰箱冷藏备用; 熏香使用方法: 患者入住中药熏香病房, 在常规心理干预基础上, 每天 9 点在病房中用电熏炉, 将梅花香(按 2 g/m^2)放炉内, 炉温设定为 200°C , 熏香 30 分钟, 晚 10 点在病房中用电熏炉, 将安魂香(按 2 g/m^2)放炉内, 炉温设定为 200°C , 熏香 30 分钟, 熏香时病人需待在病房, 可在房间内自由活动, 共 10 天。

1.4 观察指标

SAS 和 SDS 评分改善情况; 使用社会支持评定量表(social support rate scale, SSRS)量表评价患者治疗前后社会支持度、治疗依从率和不良反应的发生情况。

1.5 统计学方法

本文数据采用 SPSS19.0 进行统计学分析处理, 计数资料(治疗依从率、不良反应发生率)和计量资料(SAS 评分、SDS 评分、SSRS 评分)比较使用 χ^2 或 t 检验, 以 $P<0.05$ 为差异具有统计学意义。

2 结果

2.1 两组治疗前后 SAS 和 SDS 评分的比较

治疗后, 两组 SAS 和 SDS 评分均较治疗前明显降低, 且研究组明显低于对照组($P<0.05$)。

表 1 两组慢性肾衰竭患者一般资料的比较

Table 1 Comparison of the general data between two groups of patients with chronic renal failure

Groups	n	Male/female	Age (years)	Average age (years)	Course of disease (year)	Average disease duration (years)
Research group	33	19/14	32~77	58.62± 4.19	2~12	5.62± 1.35
Control group	32	20/12	34~78	58.21± 3.98	3~11	5.48± 1.29
χ^2/t	-	0.362	-	0.461	-	0.475
P	-	>0.05	-	>0.05	-	>0.05

2.2 两组患者治疗前后 SSRS 评分比较

治疗后, 两组患者 SSRS 评分均较治疗前明显升高, 且研究组明显高于对照组($P<0.05$)。

2.3 两组患者治疗依从率和不良反应发生率比较

研究组治疗依从率为 96.97%, 口干、恶心、头晕、纳差等轻度不良反应发生率为 30.30%, 明显高于对照组 84.38% 和 12.50%($P<0.05$), 两组患者在治疗过程中均未出现明显的恶性

不良反应, 研究组患者上述不良反应在停止熏香治疗后自行缓解, 详见表 4。

3 讨论

慢性肾衰竭是多种进展性肾脏疾病持续发展的最终转归, 属于终身性慢性疾病, 发病原因主要有原发性肾小球肾炎、慢性肾盂肾炎、高血压肾小动脉硬化、糖尿病肾病、继发性肾小球

表 2 两组治疗前后 SAS 和 SDS 评分的比较

Table 2 Comparison of the SAS and SDS scores between the two groups before and after treatment

Groups	n	SAS score		SDS score	
		Before treatment	After treatment	Before treatment	After treatment
Research group	33	52.38± 9.82	37.68± 7.42	58.64± 11.26	41.52± 8.25
Control group	32	53.79± 9.58	48.57± 7.98	59.02± 11.35	53.24± 8.91
t	-	0.421	4.358	0.394	4.672
P	-	>0.05	<0.05	>0.05	<0.05

表 3 两组患者治疗前后 SSRS 评分比较

Table 3 Comparison of the SSRS scores between the two groups before and after treatment

Groups	n	Before treatment	After treatment	t	P
Research group	33	30.68± 8.23	40.97± 8.94	4.152	<0.05
Control group	32	30.75± 8.48	35.21± 8.26	3.561	<0.05
t	-	0.310	3.487	-	-
P	-	>0.05	<0.05	-	-

表 4 两组患者治疗依从率和不良反应比较[例(%)]

Table 4 Comparison of the treatment compliance and incidence of adverse reactions between two groups of patients[n(%)]

Groups	n	Compliance	Dry mouth	nausea	Dizzy	Nano difference	Total
Research group	33	32(96.97)	3(9.09)	2(6.06)	3(9.09)	2(6.06)	10(30.30)
Control group	32	27(84.38)	1(3.13)	2(6.25)	1(3.13)	0(0.00)	4(12.50)
χ^2	-	3.316	-	-	-	-	4.947
P	-	<0.05	-	-	-	-	<0.05

肾炎、肾小管间质病变、遗传性肾脏疾病以及长期服用解热镇痛剂及接触重金属等^[14-16]。已经有大量资料证实心理因素与病情进展之间存在必然联系,如积极乐观的情绪会有助于提高治疗效果,焦虑抑郁等负性情绪会进一步加重病情恶化,影响治疗效果^[17-20]。对于 CRF 患者而言,长期受到病情和治疗的影响,极易出现焦虑、抑郁的不良情绪,不利于治疗,且这种负性情绪会引起体内交感神经活动增强,引起患者体内一系列生理病理改变,如儿茶酚胺的分泌量增加引起体内脂类、促凝物质等过度释放,会进一步加重病情^[21-24]。

黛力新属于神经阻滞剂,适应症为轻、中度抑郁和焦虑。神经衰弱、心因性抑郁,抑郁性神经官能症,隐匿性抑郁,心身疾病伴焦虑和情感淡漠,更年期抑郁,嗜酒及药瘾者的焦躁不安及抑郁,每片制剂中含有每片含氟哌噻吨 0.5 mg 和美利曲辛 10 mg,其中前者属于硫杂蒯类,小剂量使用可帮助体内合成、释放多巴胺,增加突触间隙中的多巴胺含量,后者属于新型环类药物,可作用在突触前膜上,抑制去甲肾上腺素(Norepinephrine, NE)、5-羟色胺(5-hydroxytryptamine, 5-HT)的再摄取,对于合并有心血管疾病的患者要慎用^[25-27]。梅花香中甘松气味(根)辛性温、具有理气止痛、醒脾健胃的功效,零陵香祛风寒,辟秽浊,檀香具有松弛神经,安抚紧张及焦虑的功效,小茴香味辛性温,具有散寒止痛,理气和胃的功效,丁香味辛性温,具有温中降逆,散寒止痛,温肾助阳的功效、冰片味辛、苦性

微寒,可开窍,诸药合用能调节各种气血亏虚引起的失眠、多梦、乏力、倦怠、面色无华;安魂香中沉香味辛、苦,性微温,具有行气止痛,纳气平喘的功效,安息香具有去除秽恶、开窍通关的功效,乳香具有活血理气的功效,白芷味辛性温,疗风通用,其气芳香,能通九窍;小茴香味辛性温,具有散寒止痛的功效,香附味辛、微苦、性微甘,平,具有疏肝解郁,理气宽中的功效,安魂香具有安神、助眠的功效^[28-30]。

本研究中,对照组患者使用抗焦虑抑郁药物黛力新进行治疗,研究组在此基础上联合使用中药熏香梅花香和安魂香,结果显示研究组患者 SAS、SDS、SSRS 评分改善情况和治疗依从率等指标均明显优于对照组。在治疗过程中研究组有 30.30% 的患者出现轻度口干、恶心、头晕、纳差等不良反应,停止熏香后自行缓解,而这些不良反应对患者治疗并无明显的影响,可视为此次治疗安全有效。

综上所述,使用黛力新联合中药熏香梅花香和安神香治疗慢性肾衰竭办法抑郁焦虑患者,能够有效的缓解患者抑郁、焦虑的不良情绪,提高社会支持和治疗依从率。

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