Clinical observation on treatment of myocardial infarction with combination of traditional Chinese and western medicine

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Abstract: Purpose Observation of combined treatment of TCM and Western medicine MI. Method Select 2013 Years 3 Month ~2015 Years 1 in our hospital M I the patient 121 example as the study object, divides it into the combination group to the case and the control group The example, the combination group uses Western medicine and the Chinese Medicine treatment, the control group only uses Western medicine treatment. Results Control group MI the effective rate of patients is 76.67%, combining groups MI Patients with 90.16%, the effective rate of the control group was significantly lower than that of the knot group, and the difference was statistically significant (PTHe0.05 ). Conclusion Combined treatment of Chinese and Western medicine can improve MI effect.

Keywords: Myocardial infarction, Western medicine, Chinese Medicine

1. Data and Methods
1.1 General Information

Select 2013 Year 3 Month ~2015 Year 1 the month of our hospital admitted to the MI Patients 121 example as a research object, divide it into associative groups” and control group. All patients with myocardial enzymes (including CK, cTnI, cTnT, AST, LDH panel MB the concentration of the) is significantly higher than normal, and the duration of chest pain is 0.5 H, and ECG compliant MI typical changes; Symptoms of TCM include pulse slip and count, the tongue coating yellow greasy, red tongue, sleepless nights, insomnia, many dreams, low heat, phlegm more than mouthbitter, chest tightness shortness of breath, heart burn, heart tightness pain and fatigue. Excluding body serious infection, before admission receiving transfusion, rehydration and dehydration treatment, patients with hematologic diseases, cerebral infarction, and shock, onset time, h. Combining group of men example, female N example; age ≤, average age (60.1±3.2) years old; right ventricle and inferior wall infarction7 example, front wall8 example, front Wall example, bottom wall13 example, extensive front wall10 example; GCS rating 8~ minutes, average (10.4±)2.1. Control group Men, example,
women, example; age+-, average age (60.9 ± 3.5) years old; right ventricle and inferior wall infarction

example, front wall7 example, front wall example, bottom wall example, extensive front wall example; GCS rating 8-, score, average (10.3 ± 2.5). There was no statistically significant difference between the general data of the two groups P > 0.05).

1.2 Method

The combination group adopts Western medicine and Chinese Medicine Therapy: (1) inM LSodium chloride Solution Add Universal U urokinase given drop therapy, 0.5/after the parameters of the coagulation parameter are normal, subcutaneous injection of 0.5ML fast Srite, injection2times/d, Continuously inject 4 Day, 4 days after the use of nitroglycerin, the dosing method for micro-pump pump, pumpamount toug/min, treatment1 weeks, then give aspirin, 0.3g/d, even continue to take 8 Week. (2) Chinese herbal Medicine main party: Safflower g, Sichuan Xiong g, Ginseng g, Hemp seed g, Angelica G, Cassia twig g, peach kernel g, fine symplectic g, Menmendo n g, radix paeonie alba g, myrrh g, Yellow essence g, turmeric g, Radix paeonie rubrag, Rehmannia glutinosag. Add and subtract: liver hyperactivity, add hook rattang, Gastrodia elata8 g; Yang, add dry ginger6 g, attach childgs, sheng, add banxia5 g, melon LouG; sleep poor, add acacia sking, wild jujube kernalen Gqi deficiency, blood stasis, add floating wheatg, Astragalus membranaceusg; Qi stagnation, blood stasis, plus bupleurum, Jade Bamboo8 g; pain, poppy shell7 g, Hyun Hu5 g; high blood pressure, add chrysanthemumg, Tianamag; arhythmia, stir-fry jujubeng, Jean Mather Pearl g. After boiling the juice of /2 Agent/d, divided4times/temperature Dress; Treatment1 weeks after lagent/D, points3times/D Wenser, 8after week stop. Control group only gives Western medicine treatment, the type of Western medicine applied, the method of administration, and the treatment time are the same as those of the MI in the group.

1.3 Curative effect judgment

After treatment, the vital signs are restored to a smooth, lingual veins are normal, MSymptom disappears, infarct veins and extension signs in electrocardiogram disappear and s-tparagraph has no abnormal fluctuations, Myocardial Enzyme spectrum test result normal, limb temperature rise, pulse is strong, heart function is obtained to significantly improve, after withdrawal follow-up A Day MI There is no sign of recurrence for the show. After treatment, the symptoms of MI were significantly alleviated, the infarct extension in the electrocardiogram, the extension signs disappeared, the results of myocardial zymogram were restored to normal, the cardiac function improved, and the follow-up of Day MI no recurrence signs for improvement. After treatment, MI symptom plus heavy, no remission, ECG progressive damage current, concurrent heart failure, invalid [2].

1.4 Statistical methods

Apply SPSS The 20.0 Statistics software analyzes the data, and the Count data uses X2 Test to P The 0.05 is statistically significant for differences.

2. knot fruit

binding Group MI the patient's effective rate is 90.16%, control group MI Patient is 76.67%, the effective rate of the control group is significantly lower than the binding group, the difference is statistically significant (P 0.05).

The heart is the ruler of themonarch, the organs, the evil of the heart, the evil and the pain, pericardium generation, seizures sometimes, true heartache although the rash can be slow, its disease will risk, painful hair can often be fatal. The real heartache pathogenesis is the false standard, the deficiency is Yin deficiency, the Qi deficiency and yang deficiency, liver stagnation, qi stagnation and blood stasis as the standard [3]. Qi and blood alternate, gas blood, bloodand blood, but blood can be loaded qi, qi deficiency, blood transport is not smooth, qi stagnation is the blood line weakness, so blood stasis. Heart of the blood, Heart Qi-deficiency blood stasis resistance, combined with
QI deficiency can cause body fluids stop, long and phlegm dampness heat, it is true heartache can be seen the tongue coating yellow greasy, thick greasy and satisfied with less. The elderly body deficiency, Su-Atsumi disease, fat Gan is really heartache caused by the cause, old and frail, then the Yang Qi gradually loss, blood line without a row of bad mooring, day long blood deposition bad, external cold evil, then the blood vesselsstasis, can cause blood stasis[4]. Fatty Gan Atsumi can cause spleen deficiency, spleen deficiency and phlegm turbid resistance

2.1 Comparison of the number of angina pectoris episodes

after treatment, the number of angina pectoris episodes after treatment of three groups of patients was compared, and their Medium-Atorvastatin Group+trimetazidine Group of angina pectoris episodes less than that of Atorvastatin Group, trimetazidine Group, data analysis, differences are statistically significant (P<0.05).

3. discussion

With the results of the above experiment, TC, hdl-c, TG, ldl-c, and Heart

The number of colic episodes was indicated, and the findings showed that the Atorvastatin group+Trimebutine After treatment with the TC, TG, ldl-c lower than the Trimetazidine group, atorvastatin He the group, hdl-c higher than the Trimetazidine group, the Atorvastatin group, the number of experiments according to the statistical software analysis found that three groups of treatment, differences have statistical significance (P<0.05).

References