Comprehensive therapy for diabetic peripheral neuropathy
Clinical Observation

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Abstract: Purpose: To summarize the value of comprehensive therapy in the treatment of diabetic peripheral neuropathy and provide references for the clinical treatment of diabetic peripheral neuropathy with the help of TCM. Method: Select 2014–2016 years 8 month ~ 2016 years 8 patients with diabetic peripheral neuropathy who were hospitalized in our hospital, divided into experimental and reference groups, each example. The reference group was treated with constant treatment, and the experimental group was treated with TCM syndrome differentiation. Comparison of two groups of diabetic peripheral neuropathy patients before and after treatment. Results: The total effective rate of the experimental group was 93.4%, the total effective rate of the reference group was 66.7%, the difference is statistically significant (P < 0.05) before and after treatment. SNCV, MNCV, the comparison between the experimental group and the reference group was statistically significant (P < 0.05). Conclusion: The comprehensive therapy of diabetic peripheral neuropathy patients was effective and recommended to be popularized.

Keywords: Diabetic peripheral neuropathy; integrated Chinese and Western medicine treatment; curative effect analysis; nerve conduction velocity

1. Data and Methods

1.1 General Information

Select 2014 year 8 month ~ 2016 year 8 month. Monthly income in our hospital for treatment of sugar urine patients with peripheral neuropathy. The example is the object of study. Diagnostic criteria: The patient has a history of diabetes and...
has neuropathy problems, symptoms, signs comply with DPN table now, temperature abnormalities, ankle reflex disappears. Exclusion criteria: Excluding cerebral infarction, moving venous vascular lesions, lumbar lesions, liver and kidney dysfunction, and other patients[4], the is randomly divided into experimental and reference groups, with each case, and the patient and family are aware of and sign consent. Experiment Group male example, female to example; age-""years old, average age (46.5±10.5) Old 1~ year, Average Duration 6.0±2.5 year. Reference Group male example, female allexample; age- ""years old, average age (47.0±8.5) Age: Duration 1~ [year, average duration 6.5±3.2] year. There is no statistically significant difference between the two groups of DPN patients age, sex, course, symptom table, etc. P>0.05).

1.2 Method

The Reference group is treated routinely. The patients with knowledge of diabetes related to thentheteach, and control the diet of patients, according to the physical conditions of reasonable arrangements for physical exercise. In addition, according to the patient's condition for hypoglycemic drug treatment, the patient's blood glucose index different often can inject insulin. At the same time, daily oral cobalt tablets treatment therapy, 3times/D, 0.5 mg/times.

The experimental group was treated with comprehensive therapy. Routine treatment is consistent with the reference group, and the is treated with Chinese medicine on this basis. Follow the principle of TCM syndrome differentiation and treatment, 1 times/D. Treatment 1 session (1 Treatment=7days): Syndrome of Q1 deficiency and blood stasis-taking patients ' gas Sea, foot three Li, and other main points, as well as the three Yin intersection, Qu Chi, and other points, the main points of the application Compare Filiform needle complement method, with points on the need to fill the method of reinforcement, the liver kidney deficiency syndrome-the main point forthe liver Yu, Spleen Yu, Shen Yu, the acupoint is three Li, three Yin intersection, Tai Xi Acupoint and so on, the main Acupoint supplement method, phlegm and blood stasis obstruction collaterals-The main point for the foot three Li, Spleen Yu, stomach Yu, with points for the three Yin, too Chong, Qu Chi points, etc., the main point of moxibustion[5].

1.3 Therapeutic Evaluation

Effect criteria: After treatment patients with symptoms disappear and the Achilles tendon and the knee tendon reflex regression normal, mncv, Sncv return to normal. Effective criteria: Treatment of the after the treatment of patients with conscious symptoms improvement, mncv, sncv increase 5/M. Invalid standard: The above indicators have not been achieved.

1.4 Observations

Record and contrast the changes and clinical treatment effects before and after treatment for both groups of DPN patients mncv, Sncv.

1.5 Statistical method

Take SPSS 19.0 statistical software processing data, counting datain percentages (%) indicates that the X2 inspection; X±STable, using the T inspection. To PThe 0.05 is statistically significant for differences.

2. Knot Fruit

Comparison of efficacy between

2.1 Groups

Comparison of clinical therapeutic effects in patients with experimental group therapy always efficient 93.4% significantly higher than reference group 66.7%, the difference is statistically significant (P<0.05).

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2.2 before and after group treatment Mncv, SNCVIndex Comparison

to two groups DPN before and after treatment for patients MNCV, SNCV indicator ratio, before treatment, there was no statistically significant difference (P>0.05). After treatment, the experimental group was better than before and the reference group, the difference was statistically significant (P<0.05).

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The expression was sinus tachycardia, accompanied by premature beats, and the treadmill test was positive.

③ Imaging examination to remove the heart of large vessels and valve organic lesions.④ above symptoms and signs in the mood fluctuation, exertion, taking other drugs can be the inducement of repeated, violent, transient appearance or attack. Because the CN is often short of its typical feature, individual differences Da Hing often cause misdiagnosis and missed diagnoses in clinical diagnosis, and can be used in clinical routine diagnosis by heart rate variability, psychiatric stereotypes examination and psychological evaluation and other auxiliary diagnosis, improve the clinical diagnosis rate.

CN The prognosis is good, but because of the long course period, the patient's psychological negative. Theis heavier, so it is necessary to give adjuvant therapy, improve the clinical effect and improve the quality of life of patients. Oryzanol has the function of helping to sleep and sedation, improving the functions of endocrine regulation and autonomic nervous function, promoting neurological and psychiatric disorders symptom improvement, and less side effects of clinical application, has become a clinical treatment CN commonly used drugs. The Melitracen is a nervous regulator composed of two ingredients, consisting mainly of the American Melitracen and Haloperidol, which is an effective antidepressant and anti anxiety drug, which is beneficial to relieve anxiety, palpitation and chest tightness of patients. Murray Melitracen is an antidepressant that can be used to inhibit the synaptic content of the anterior membrane, inhibit its effect on the5-serotonin and norepinephrine extract, and promote God. Haloperidol can be used for dopamine receptor, facilitate the synthesis and release of dopamine, promote the content of dopamine increased, so the combination of two drugs to promote the improvement of central nervous function, play the role of resistance to anxiety, excitement and antidepressant, clinical application is widespread. The results showed that the total clinical efficiency of the observation group was higher than that of the control group, which showed that the melitracen of Haloperidol and Oryzanol combined with the treatment of CN has a significant effect on improving patients’ clinical symptoms and promoting the incidence of the signs were quickly restored to normal.

to sum up, in clear diagnostics CN On the basis of the, the combined treatment of haloperidol T-Melitracen and Oryzanol is beneficial to improve CN patients with clinically ill symptoms, promote clinical efficacy and high clinical value.

References

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