论著

基于甘草对醋芫花泻下逐水效应的影响探讨反药组合配伍禁忌机制

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摘要 目的 探讨醋芫花与甘草配伍禁忌的可能机制,以理解泻下逐水的原理。方法 采用醋芫花粉末和甘草水提液,醋芫花剂量为0.12,0.18和0.24 g·kg $^{-1}$,甘草剂量为0.2,0.4和0.8 g·kg $^{-1}$,采用2因素4水平析因设计方案给小鼠分组并一次性ig给药,记录小鼠ig给药后0 $^{-4}$ h内每小时每只小鼠的排尿量,同时记录每只小鼠首次排便时间和0 $^{-4}$ h内排便次数及其粪便形状。采用单因素方差分析和重复测量方差分析对不同时间段小鼠排尿量和排便次数分别进行统计学分析。结果 与正常对照组比较,醋芫花0.12和0.18 g·kg $^{-1}$ 单用具有明显的利尿泻下作用,以利尿作用较为显著,药后1 $^{-2}$ h时段排尿量增加,比正常对照组增加45%(P0.01);甘草3个剂量单用未表现出促进或抑制利尿的作用。醋芫花0.12 g·kg $^{-1}$ 与甘草配伍合用,与等剂量醋芫花0.12 g·kg $^{-1}$ 单用组比较,药后1 $^{-2}$ h内小鼠排尿量明显减少(P0.01),提示甘草可抑制醋芫花的利尿作用。与正常对照组比较,醋芫花0.18 g·kg $^{-1}$ 单用可显著增加小鼠的干便重量和排便次数(P0.01),与甘草配伍合用对小鼠排便量和排便次数无明显影响。结论 在《中华人民共和国药典》等效剂量范围内,醋芫花与甘草反药组合可明显拮抗醋芫花的利尿作用,提示甘草"甘缓守中"的药性可减缓芫花"利水"的作用,这可能是芫花与甘草配伍禁忌的原因之一。

关键词 <u>醋芫花</u> <u>甘草</u> <u>药物配伍禁忌</u> <u>利尿</u> <u>泻下逐水</u> 分类号 **R285**

Incompatibility mechanism on the basis of expelling water retension with drastic purgative of vinegar-processed *Flos Genkwa* influenced by *Radix et Rhizoma Glycyrrhizae*

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Abstract

OBJECTIVE To investigate the possible mechanism of incompatibility of vineger-processed *Flos Genkwa* (FGV) combined with *Radix et Rhizoma Glycyrrhizae* (RRG). **METHODS** According to factorial design, the diuretic effect was studied by weighing method to observe the urine amount of mice. The urine weight of each hour (from 0 to 4 h) was taken respectively after the mice were ig given FGV 0.12, 0.18 and 0.24 g • kg⁻¹, RRG decoction 0.2, 0.4 and 0.8 g • kg⁻¹ and their combinations, respectively, while the purgation effect was studied by observing the first defecation time, feces pellets and feces shape within 4 h after drug administration. The urine weight of each hour was statistically analyzed by traditional statistical approaches and repeated measurements, respectively. **RESULTS** Compared with normal control group, FGV 0.18 g • kg⁻¹ showed diuretic and purgation effect, and the urine weight was increased by 45% in the first and second hour, respectively (*P*<0.01). RRG decoction showed no influence on the diuretic effect. The combination of FGV 0.12 g • kg⁻¹ and RRG 0.2, 0.4 and 0.8 g • kg⁻¹ could significantly decrease urine weight within 2 h after administration (*P*<0.01), suggesting

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