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用伊文思蓝法观察呋喃丙胺对小白鼠胃的刺激作用及拮抗药的探讨

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摘要:

本文介绍用伊文思蓝法观察呋喃丙胺对小白鼠胃的刺激作用。动物于口服药物后即由尾静脉注入1%伊文思蓝,并于 2小时后剖杀取胃,根据胃底浆膜面的蓝色色素沉着情况,评价药物对胃的刺激作用。试验证明,小白鼠一次口服呋喃 丙胺或二甲苯后,用伊文思蓝法观察药物对胃的刺激作用与组织病理学的观察结果相仿。这种方法具有操作简便、 快速、灵敏和重现性高等优点。在拮抗试验中,发现扑尔敏、异丙嗪、苯海拉明和氯丙嗪具有较强的拮抗呋喃丙胺 对鼠胃的刺激作用,抗炎类药物次之,而阿托品则甚差。用伊文思蓝法观察的结果表明,小白鼠每天口服呋喃丙胺500 mg/kg,连续10天时,药物对鼠胃的刺激作用逐渐减轻,至给药10天后,胃的刺激反应仅及第1次给药时的1/3。若在疗 程的第1~3天,每天于口服呋喃丙胺前1小时先服扑尔敏,则呋喃丙胺对鼠胃的刺激作用,仅在给药的第三天较明显,但 轻于单服呋喃丙胺3天组。用肉眼或组织病理学方法观察胃肠病变的结果,与伊文思蓝法的基本一致。扑尔敏不影响 呋喃丙胺的抗血吸虫作用。

关键词:

# OBSERVATION ON THE IRRITATING ACTION OF FURAPROMIDUM ON MOUSE STOMACH WITH THE EVANS BLUE METHOD AND ITS EFFECTIVE ANTAGONISTS

Xiao Shuhua; Shao Baoruo; Yang Yuanging; Chen Chongqing; Yang Huizhong; Jiao Peiying and Xu Yueqin

#### Abstract:

A method to evaluate the irritating action of furapromidum (F 30066) on mouse stomach is described. Mice receiving oral doses of the drug were immediately given intravenous injection of 1% Evans blue in normal saline and were sacrificed by bleeding 2 hours later. At autopsy, the stomach was everted and the extent of the blue staining on the serous layer of the fundus was assessed visually on an arbitary scale (0-8). It was shown that the degree of blue staining caused by a single dose of furapromidum or xylol correlated well with the severity of the pathological changes of that organ. Eleven drugs were tested 🕨 Article by for their antagonistic action to the irritating effect of furapromidum on mouse stomach. Drugs were given Article by orally 1 hour before the administration of furaprornidum. It was found that chlorpheniramine, phenergan, diphenhydramine and chlorpromazine were quite active in limiting the extent of blue staining, indomethacin and mefenamic acid showed only moderate effect while atropine exhibited little effect, if at all. When mice were given furapromidum orally in the dosage of 500 mg/kg daily for 10 days, it was found by the Evans blue method that the irritating effect of the drug was reduced gradually with the increasing number of doses. The irritating action of the last dose was only about one-third that of the first. However, if chlorpheniramine was given orally 1 hour before administration of furapromidum during the first 3 days of the course, the irritating effect became evident only on the third day, and in a lcss degree than that of the corresponding group given furapromidum alone, and it gradually disappeared as the treatment was continued. These results correlated basically with the gross and microscopic pathological alterations of the stomach. The antischistosomal effect of furapromidum was practically not affected by chlorpheniramine.

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