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Treatment of Knee Osteoarthritis with Traditional Chinese Medicine Sloughing Clinical Efficacy Study

Liang Wen*
Zhengmo Town Health Center, Shijiazhuang, Hebei, 050000, China

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ABSTRACT

To explore the clinical effect of the treatment of knee osteoarthritis with traditional Chinese medicine. Methods: 152 patients with knee osteoarthritis who were treated in our hospital from July 2018 to April 2020 were divided into two groups. Group A (control group) was treated with conventional western medicine, i.e. celecoxib 200 mg capsule +Glucosamine hydrochloride capsule 0.75g, group B (observation group): the treatment of traditional Chinese medicine sloughing using our experience formula, and further comparative evaluation of the treatment effect of the two groups. Results: the effective rate was 75% in the control group and 92% in the observation group. Conclusion: in the treatment of knee osteoarthritis, traditional Chinese medicine is more effective than western medicine.

1. Introduction

Knee osteoarthritis (KOA) is a chronic arthritis disease characterized by the deformation and loss of articular cartilage and the regeneration of bone at the edge and under the cartilage. The initial site of the disease is cartilage. The main symptoms were joint pain, limited movement and joint deformity. [1] The incidence rate of female is more than that of men over the age of 50, which seriously affects the walking function of the elderly and reduces their quality of life. At present, the exact etiology and pathological mechanism of the disease in western medicine are not completely clear, there are many theories: biochemical theory, mechanics theory, genetic theory, inflammatory theory, etc. in addition, age, environment, trauma, obesity, eating habits and metabolism and other related factors are also widely valued. Despite various etiology theories, the exact cause of OA is still unknown. At present, the mechanism of the disease is still unknown. [2] Western medicine treatment is represented by anti-inflammatory and analgesic drugs and non steroidal anti-inflammatory drugs, which have more adverse reactions. In this context, it provides a broad space for giving full play to the advantages of traditional Chinese medicine in the treatment of knee osteoarthritis. Pain is the main symptom of knee osteoarthritis, so it belongs to the category of “Bi syndrome” in traditional Chinese medicine, which is a special type of Bi syndrome. Chinese doctors have studied the disease in depth in the past dynasties. According to Huangdi’s Internal Classic, “the wind, cold and dampness are three kinds of mixed Qi, and the combination is bi. The winner of wind is Xingbi, the winner of cold is Tongbi, and the winner of moisture is Zhubi. [3] Arthralgia, shut also, that is to close the meaning of obstruction. It is pointed out that Bi syndrome is

*Corresponding Author:
Liang Wen,
Zhengmo Town Health Center, Shijiazhuang, Hebei, 050000, China;
Email: 971351161@qq.com
caused by wind, cold and dampness blocking meridians.” Su Wen, Wei Lun Pian said: “kidney, water dirty. Now, if the water is too strong for fire, the bones will be withered and the marrow will be empty, so the feet will not allow the body. The hair is osteopenia.” Synopsis of the Golden Chamber - Chapter of apoplectic history and disease says that “the pulse of Cunkou is deep and weak, sinking is the main bone, weak is the main muscle”. Chaoyuanfang of Sui Dynasty pointed out clearly in the theory of the origin of various diseases: “there are also those who suffer from blood Qi deficiency and wind evil.” According to the secret recipe of xianshili shangdun, a Taoist in the Tang Dynasty, bruises and blood stasis can also cause Bi syndrome; in the Jin and Yuan Dynasties, it was recognized that “man of labor” and “overworked” can also cause Bi syndrome. According to the above discussion on Bi syndrome, the medical experts in this period have realized that chronic strain can cause some bi syndrome. Therefore, weakness of Qi and blood is the internal pathogenesis, external attack of wind, cold and dampness is the external factor causing arthralgia, and block of meridians and Qi and blood is the main pathogenesis of arthralgia. This paper focuses on the analysis of the efficacy of traditional Chinese medicine in the treatment of knee osteoarthritis.

2. Data and Methods

2.1 General Treatment

152 patients with OA were selected from July 2018 to April 2020. They were randomly divided into observation group and control group with 76 cases in each group. Inclusion criteria: (1) participate in the study voluntarily, know and sign the consent. (2) Over 40 years old (including 40 years old) and under 65 years old (including 40 years old), male and female are not limited. (3) The diagnostic criteria of Western Medicine (in clinical practice, they are ① ② ③ ④ or ① ② ④ ⑤): ①. The pain of knee joint is often repeated in the past 2 weeks. There is fricative sound during the activity ③. The morning stiffness of knee joint is ≤ 30 minutes ④. The middle-aged and old patients (≥ 40 years old) ⑤. The hypertrophy of knee joint ends is accompanied by hyperostoeogeny. (4) Diagnosis and treatment standard of traditional Chinese medicine: ①. At the beginning, knee joint pain is common, slight activity can be alleviated, symptoms aggravate with climate change, repeatedly lingering. ②. Occult onset, slow onset, most common in the elderly. ③. Local joints may be swollen, and there are often friction sounds or prick sounds when moving. ④. In severe cases, muscle atrophy, joint deformity, and hunchback can be seen. Exclusion criteria: (1) patients with Alzheimer’s disease or mental illness; (2) patients with metabolic diseases (such as diabetes mellitus) and other bone diseases; (3) patients with severe stomach disease and liver and kidney dysfunction; women in lactation or pregnancy; (4) patients with infectious diseases or malignant tumors; (5) patients with osteoarthritis caused by allergic substance, osteomyelitis, bone tumor and bone tuberculosis; (6) patients without inclusion criteria. Follow the doctor’s advice, can’t judge the curative effect, the incomplete information affects the curative effect evaluation; 7) patients with skin related diseases should not be treated with traditional Chinese medicine sloughing.

2.2 Method

(group A) control group: the routine western medicine treatment plan was adopted, that is: celecoxib capsule 200mg bid + glucosamine hydrochloride capsule 0.75gbid, the standard of celecoxib capsule discontinuation was pain score less than 3 points, no pain aggravation was observed for two days after discontinuation, and the longest oral administration could not exceed two weeks. If the treatment plan needs to be adjusted for more than two weeks, discontinue the trial study of this patient. Glucosamine hydrochloride capsules were orally administered for 6 weeks.

(group B) observation group: with our experience: Gentiana macrophylla, Carthamus tinctorius, stretch-weed, shuijingcaechuan Achyranthes bidentata, Duhuo, haiyinpoteng, Hai Tong pi, zaojiaoci, Chuanwu, Caowu, frankincense, myrrh, Sumu, LULUTONG, papaya and Luffa. The preparation room of our hospital formulates the above drugs according to a certain proportion, and then makes them into powder, and equips them according to 40g per bottle. Use 20g once a day for two weeks. Chinese medicine sloughing method: take out 20g Chinese medicine powder, add 10ml white vinegar into Chinese medicine powder, and mix into paste. Unfold 2 sterile gauze sheets, spread them on the treatment plate, place the traditional Chinese medicine in paste shape on the sterile gauze sheets, and then cover them with 2 sterile gauze sheets. Then apply it to the affected area.

After the treatment, the clinical effects of the two groups were compared.

2.3 Evaluation Criteria

The clinical efficacy is divided into four levels, namely: Cure: the clinical symptoms disappeared and the function of knee joint returned to normal. Significant effect: the main clinical symptoms disappear, the knee joint function basically recovers, can participate in labor and work. Effective: the main clinical symptoms basically disappeared, the knee joint function basically recovered or
significantly improved, life can not be self-care into self-care, or lost work and labor ability into work and work ability partial recovery.

Invalid: compared with before treatment, there was no improvement in all aspects.

The total effective rate is the sum of $\frac{1}{1} + \frac{2}{2} + \frac{3}{3}$.

2.4 Statistical Analysis

Spss20.0 was used to process the data, among which (x + s) was used to represent the measurement data, and t test was used; percentage (%) was used to count the data, and chi square test was used; in addition, P < 0.05 showed that the data of the two groups were statistically significant $^{[10]}$.

3. Results

Compared with the data of the two groups, the overall effective rate of the observation group is higher than that of the control group, with significant difference (P < 0.05), as shown in the table:

<table>
<thead>
<tr>
<th>Group</th>
<th>Cure</th>
<th>Effective</th>
<th>Effective</th>
<th>Invalid</th>
<th>Total efficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control group</td>
<td>1</td>
<td>24</td>
<td>35</td>
<td>16</td>
<td>79%</td>
</tr>
<tr>
<td>Observation group</td>
<td>6</td>
<td>36</td>
<td>30</td>
<td>4</td>
<td>94%</td>
</tr>
</tbody>
</table>

4. Discussion

Knee osteoarthritis is the most common in the elderly, both men and women can have disease. The incidence rate of knee osteoarthritis is significantly higher due to the longer life expectancy of the population, especially in the elderly with obesity. Knee osteoarthritis belongs to the category of “Bi syndrome” in traditional Chinese medicine because of the main symptom of “pain”. Chinese doctors of all ages have carried out a more in-depth study of the disease. According to the Huang Di’s Internal Classic Bi Lun chapter, the wind, cold and dampness are mixed, and the combination of them is bi $^{[11]}$. The winner of wind is Xingbi, the winner of cold is Tongbi, and the winner of moisture is Zhubi. Arthralgia, shut also, that is to close the meaning of obstruction. “On the long thorn section” said: “disease in the bone, bone weight can not be lifted, bone marrow pain, cold to, known as bone Bi”. The main symptoms of knee osteoarthritis are “joint pain, limited movement and joint deformity”, which has a huge impact on the health of patients and seriously reduces the quality of life. Therefore, once the knee osteoarthritis is diagnosed, it should be treated as soon as possible $^{[12]}$. Western medicine treatment mainly includes non steroidal anti-inflammatory drugs and cartilage protective drugs. Celecoxib capsule has negative effects on platelet aggregation, gastrointestinal function and renal function. Glucosamine hydrochloride capsule is also used with caution in the treatment of liver and kidney insufficiency. The traditional Chinese medicine of our department has the effect of dispelling wind and dampness, promoting blood circulation and removing blood stasis, unblocking collaterals and relieving pain. Through the direct action of drugs on the affected joints, the local blood circulation can be improved, the local inflammation can be eliminated, and the clinical symptoms can be relieved. Traditional western medicine has many side effects and high price, while traditional Chinese medicine has the characteristics of convenient use, small side effects, low price and simple operation $^{[13]}$.

In conclusion, the traditional Chinese medicine sloughing treatment of knee osteoarthritis has a significant effect, many advantages, can reduce the pain of patients, improve the quality of life. It has good social and economic benefits and should be popularized.

References


