

To Explore the Therapeutic Effect of Traditional Chinese Medicine on Coronary Heart Disease Combined with Diabetes

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Keywords: TCM Syndrome Differentiation Treatment, Coronary Heart Disease, Diabetes, Curative Effect Analysis.

Abstract: Objective: To observe the efficacy of traditional Chinese medicine treatment in patients with coronary heart disease and diabetes. A total of 70 patients with coronary heart disease and diabetes who received treatment in our hospital from March 2020 to March 2021 were randomly divided into observation group and control group. The control group was treated with conventional medicine, and the observation group was treated with TCM syndrome differentiation treatment. After 2 courses of treatment (2 months), observe the difference in curative effect between the two groups. Results: The overall curative effect of the observation group and the control group were 94.29% and 80.00%, respectively. There is a statistically significant difference between the two, $P < 0.05$. In the changes of ST segment of ECG, there was no significant difference between the two groups, $P > 0.05$. Further analysis showed that the observation group had greater changes in T wave and better blood glucose control ($P < 0.05$). After treatment, patients in the observation group had a higher quality of life score, which was significantly different from the data in the control group ($P < 0.05$). In the treatment of patients with coronary heart disease and diabetes, the use of TCM syndrome differentiation and treatment can improve the treatment effect of the patient, improve the patient's blood sugar level, and promote the patient's recovery. The effect is significant.

1 INTRODUCTION

Coronary heart disease is a common type of cardiovascular disease. Many patients often have diabetes. For these patients, clinical treatment is more difficult. Simple western medicine treatment often results in unsatisfactory results, resulting in recurrent episodes of the patient's condition, which seriously affects the prognosis (Maimaitiyiming: Abayifu. 2019). In recent years, the widespread application of traditional Chinese medicine treatment has made positive contributions to the efficacy and prognosis of patients with coronary heart disease. In Chinese medicine, coronary heart disease belongs to the category of "chest obstruction". The clinical application of TCM syndrome differentiation can improve the clinical symptoms of patients and promote the recovery of patients with coronary heart disease and diabetes (Liu, Chen, Lei, et al. 2019).

Through comparative experiments, it analyzes the effect of combined traditional Chinese and western medicine treatment and western medicine treatment on the curative effect of patients with coronary heart

disease complicated with diabetes, and discusses the clinical value of Chinese medicine treatment.

2 METHOD

2.1 General Information

A total of 70 patients with coronary heart disease and diabetes who were treated in our hospital from March 2020 to March 2021 were enrolled and randomly divided into observation group and control group, with 35 cases in each group. Among the patients in the observation group, there were 17 males and 18 females. The minimum and maximum ages were 52 and 89 years old, respectively, with an average of (63.22 ± 4.03) years old. In the control group, there were 16 males and 19 females. Their age ranged from 53 to 88 years old, with an average of (64.09 ± 4.39) years old. There was no statistically significant difference in gender and age between the two groups of patients, $P > 0.05$, which was comparable.

2.2 Treatment Methods

Patients in the control group were treated with western medicine, oral hypoglycemic drugs or subcutaneous injections of insulin, and oral aspirin and statins at the same time.

Patients in the observation group were treated with traditional Chinese medicine based on conventional Western medicine treatment. In the specific implementation process, the patients were first classified by syndrome differentiation, mainly including three types, namely the deficiency of both spleen and kidney qi and yang, the deficiency of both liver and kidney qi and yin, and the deficiency of both heart and kidney qi and yang. Among them, the liver and kidney qi and yin deficiency type, the treatment prescriptions are: Scrophulariaceae, Trichosanthes, Radix Rehmanniae, Lycium barbarum, Pueraria lobata, Taizishen, Cornus and so on. The spleen and kidney qi and yang deficiency type, its treatment prescriptions are: Atractylodes macrocephala, Codonopsis, Astragalus, Xianling spleen, Alisma, Shengdi, Eupatorium etc. Jinkui Shenqi Pills are used for the heart, kidney, qi and yang deficiency type, combined with the actual situation of the patient, to increase ginseng, polyporus, cassia twig, schisandra, and Ophiopogon. In the specific treatment, it is necessary to add Salvia miltiorrhiza, decocting each medicine with water, and take 400ml of the juice, and take it twice a day. Continuous treatment for 1 month is a course of treatment, and the observation period is 2 courses.

2.3 Observation Indicators

The treatment effect is divided into significant effect, effective and ineffective. Significant mainly means that the patient's coronary heart disease symptoms are

controlled after treatment, and the blood sugar control effect is significant; effective means that the patient's clinical symptoms are improved, and the blood sugar control effect is better; invalid means that the patient has no significant clinical symptoms after treatment Variety. Excluding the inefficiency, the total effective rate of this study can be obtained.

The electrocardiogram and blood glucose values of the two groups of patients were compared.

The quality of life scores of the two groups of patients before and after treatment were compared. A higher score indicates that the quality of life of the patient is good (Ni, Liu, Xu 2020).

2.4 Statistical Methods

To perform statistics on data and apply statistical software, SPSS20.0 is the main choice. Data analysis includes measurement data and counting data. The expression of the former is ($\bar{x}\pm s$) and the expression of the latter is (n,%). To verify the results, the t value and χ^2 value are mainly used to analyze and compare the results. When $P<0.05$, the difference is statistically significant.

3 RESULTS

3.1 Therapeutic Effect

Among the two groups of patients, the number of patients in the observation group and the control group were 33 and 28, respectively. The effective rates were 94.29% and 80.00%, respectively, and the observation group had a higher effective rate. Compared with the control group, $P<0.05$, there is a statistically significant difference.

Table 1: Curative effect of patients [n(%)].

Groups	Markedly effective	Effective	Ineffective	Efficient
Observation Group (n=35)	21 (60.00)	12 (34.29)	2 (5.71)	33 (94.29)
Control Group (n=35)	11 (31.43)	17 (48.57)	7 (20.00)	28 (80.00)
χ^2				8.964
P				<0.05

3.2 Comparison of ECG and Blood Sugar

Before treatment, there was no significant difference in the ECG and blood glucose values between the two groups of patients, $P>0.05$. After treatment, all indicators were improved, among which the

observation group had better T wave recovery and better blood sugar control. Compared with before treatment, there was a statistically significant difference ($P<0.05$). However, in the ST-segment recovery with low ECG depression, the data difference between the two groups was small, and the statistical difference was not significant ($P>0.05$).

Table 2: Comparison of electrocardiogram and blood glucose content between the two groups of patients ($\pm s$).

Groups	ST segment rise (mV)		T wave change (mV)		blood glucose level (mmol/L)	
	Before treatment	After treatment	Before treatment	After treatment	Before treatment	After treatment
Observation Group (n=35)	0.08 \pm 0.03	0.05 \pm 0.02	0.07 \pm 0.05	0.04 \pm 0.05	11.20 \pm 1.24	5.86 \pm 0.33
Control Group (n=35)	0.07 \pm 0.03	0.04 \pm 0.03	0.06 \pm 0.03	0.03 \pm 0.04	12.00 \pm 1.34	8.79 \pm 0.56
t	0.394	0.134	0.294	3.948	0.294	6.003
P	>0.05	>0.05	>0.05	<0.05	>0.05	<0.05

3.3 Quality of Life before and after Treatment

Before treatment, the quality of life scores of the two groups of patients were relatively low, $P>0.05$. After

treatment, the quality of life was improved, and the score of the observation group was higher, which was significantly different from that of the control group, $P<0.05$.

Table 3 Comparison of the quality of life of the two groups of patients before and after treatment ($\pm s$)

Groups	Before treatment	After treatment
Observation Group (n=35)	54.34 \pm 3.22	76.94 \pm 4.39
Control Group (n=35)	55.04 \pm 3.85	66.05 \pm 4.09
t	0.294	8.967
P	>0.05	<0.05

4 CONCLUSIONS

The clinical morbidity of coronary heart disease patients with diabetes is relatively high, and the mortality and disability rate of patients are relatively high (Shi 2019). Diabetes not only causes large vessel disease in patients, but also infringes on coronary and cerebral arteries, as well as coronary heart disease and cerebral infarction. At the same time, there will be diabetic microvascular disease, such as fundus disease, which poses a greater threat to the patient's health (Weng, Liu, Lin, et al. 2019). When clinically treating patients, western medicine is usually applied,

but this treatment method is not ideal. Cause the patient's condition to recur, which is not conducive to the improvement of the patient's efficacy. From the perspective of traditional Chinese medicine, it is believed that the pathogenesis of coronary heart disease is mainly based on the deficiency and the real. This deficiency is mainly due to insufficient qi and blood, and the patient has viscera deficiency, phlegm turbidity and blood stasis. Looking at diabetes from the perspective of Chinese medicine, it is considered that it belongs to the category of "diabetes". The main pathogenesis leading to the onset of the patient is kidney overwork, improper diet, fever and dryness,

etc. (Zhang 2020). Combining the two diseases is considered to be the primary deficiency, and the standard real supplementary. In the case of the original deficiency, it will lead to the patient's disease, while the standard is the result. According to the situation of deficiency of both qi and blood, deficiency of both yin and yang, and dryness and heat of yin, timely treatment is given to patients to reduce or avoid the occurrence of disease (Wang, Wang, He, et al. 2019).

In clinical treatment of patients with coronary heart disease and diabetes, it is necessary to start with the actual situation of the patient and give the patient a syndrome differentiation treatment. The specific classification can start from the deficiency of qi and blood, yin and yang, or according to the etiology of the patient's viscera. During the specific treatment process, patients are given hypoglycemic drugs. At the same time, supplemented with Danshen can promote blood circulation and remove blood stasis, and promote the recovery of patients (Shi, Ni, Feng, et al. 2019). The results showed that the observation group had better curative effect. Moreover, the patient's ECG T wave changes more, the blood sugar level is lower, and the quality of life is higher. And both formed a significant difference with the control group ($P < 0.05$). It shows that applying traditional Chinese medicine treatment methods to patients with coronary heart disease complicated with diabetes has a better clinical effect. According to the actual clinical syndrome of the patient, suitable treatment drugs can be selected for the patient to achieve both the symptoms and the root cause, which has significant significance for the improvement of the clinical symptoms and the prognosis of the patient.

In summary, the application of TCM syndrome differentiation treatment methods to patients with coronary heart disease complicated with diabetes has significant clinical effects and can improve the symptoms of patients. Lowering the patient's blood sugar and improving the patient's quality of life are significant for the rehabilitation of patients and can be promoted and used.

In the process of writing this thesis, I strengthened my understanding of my profession. I learned more about the principles of being a person and doing things, so that I have a deeper understanding of issues in related professional fields. As this article is about to close, I would like to sincerely thank the relevant people who have provided guidance to my thesis. Thank you for the thought guidance for me in the process of writing this thesis. Thank you for your careful guidance during the creation of the thesis. Thank you for reviewing me carefully when the paper

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