1- gera: 37260/di/re

P6 ACUPUNCTURE: AN EFFECTIVE NON-TOXIC ANTI-EMETIC IN CANCER CHEMOTHERAPY. DUNDEE JW ET AL. british journal of anaesthesia. ;:1322. (eng). Patients avec cancer du testicule et subissant une chimiothérapie. l'électroacupuncture au 6MC diminue l'incidence des nausées et vomissements. voir ref. géra [38868].

2- gera: 158693/di/ra
EFFECT OF ELECTROACUPUNCTURE PRECONDITIONING ON SERUM S100BETA AND NSE IN PATIENTS UNDERGOING CRANIOCEREBRAL TUMOR RESECTION. LU ZH, BAI XG, XIONG LZ, WANG YH, WANG Y, WANG Q. chinese journal of integrated medicine. ;16(3):229-33 (eng).

OBJECTIVE: To investigate the effect of electroacupuncture preconditioning on the serum level of S100 calcium-binding protein beta (S100beta) and neuron-specific enolase (NSE) in patients undergoing craniocerebral tumor operation. METHODS: A total of 32 patients, who would go through craniocerebral tumor resection under general anesthesia, were randomly assigned to two groups, 16 in each group. Patients in the electroacupuncture (EA) group received electroacupuncture on Fengfu acupoint (Du16) and Fengchi acupoint (GB20) for 30 min, 2 h before operation. The stimulus is 1-4 mA with a density wave frequency of 2/15 Hz. Patients in the control group received no pretreatment. Anesthesia was maintained with remifentanil at the dose of 4-8 mg/kg per hour, pumped intravenous drip of vecuronium at 1.0-2.0 microg/kg each hour, and discontinuous intravenous dripped with vecuronium bromide at 0.5-1 mg. The serum levels of S100beta and NSE were measured with ELISA before operation, before skin incision, after tumor removal, at the end of operation, and at 24 h after operation. RESULTS: The serum level of S100beta and NSE did not change before skin incision. The serum level of NSE increased significantly and the level of S100beta increased insignificantly after the tumor resection. The serum levels of S100beta and NSE in the EA group and the control group were 1.16+/-0.28 microg/L vs 1.47+/- 0.33 microg/L, 24.7+/-13.3 microg/L vs 31.4+/-14.1 microg/L at the end of the operation, respectively. Twenty-four h after operation, the correspondence indices were 1.18+/-0.31 microg/L vs 1.55+/- 0.26 microg/L, and 25.5+/-12.4 microg/L vs 32.4+/- 11.7 microg/L. The two indices at these two time points were significantly increased than those before operation, respectively (P<0.05). At the end of the operation and 24 h post- operation, the serum levels of S100beta and NSE in the EA group were significantly lower than those in the control group (P<0.05). CONCLUSION: Electroacupuncture Fengchi and Fengfu for 30 min before craniocerbral tumor operation could decrease the serum level of S100beta and NSE, thus may have potential protective effect on brain damage, which needs to be further studied.

3- gera: 15075/di/ra

HOMEOSINIATRIE ET CANCER. CABANNES. revue internationale d'acupuncture. 1952;4(2):49-53 (fra).

4- gera: 11222/di/ra

OBSTETRICS AND GYNECOLOGY IN PAST TEN YEARS. LIM KAMTI. chinese medical journal. 1959;79(5):375-83

Revue de l'obstétrique et de la gynécologie en Chine dans les années 50 avec mention du traitement du cancer du col et du choriocarcinome par acupuncture et plantes médicales.

5- gera: 15060/di/ra [ONCOLOGIE CLINIQUE ET EXPERIMENTALE EN RPC]. YEH SDJ. american journal of chinese medicine. 1973;1(2):193-224 (eng).

6- gera: 18278/di/ra

ANTICANCER CHINESE HERBAL MEDICINES. YEH SDJ. american journal of chinese medicine. 1973;1(2):271-4

7- gera: 3955/di/ra

INTRODUCTION ELEMENTAIRE A L'ETUDE DE LA LOI

DES CINQ ELEMENTS. RUBIN M. meridiens. 1974;25-26:57-62 (fra*).

La loi des cinq éléments a longtemps été une des énigmes de la médecine chinoise traditionnelle. Rares sont les acupuncteurs qui, dans leur pratique quotidienne, savent en tirer les enseignements. Le Docteur M.Rubin s'efforce dans son article d'en dégager des principes d'application pratique. Après un bref rappel de la conception philosophique taoïste de l'univers, il passe en revue les domaines thérapeutiques couverts par cette théorie. Après avoir cité la médecine préventive et les techniques d'harmonisation, l'auteur insiste sur les possibilités qu'offre "cette loi des 5 éléments" pour une meilleure compréhension de la météoro-pathologie (influence des climats sur les maladies) et des relations psyché-soma et soma-psyché. Il conclut sur un appel à la recherche et à l'exploitation en commun des possibilités thérapeutiques originales qu'offre l'acupuncture ainsi comprise.

8- gera: 15063/di/ra

NEUF REACTIONS A LA RADIOTHERAPIE TRAITEES PAR ACUPUNCTURE. HOPITAL UNIVERSITAIRE DE TIANJIN. meridiens. 1974;27-28:61-65 (fra*).

9- gera: 17663/di/ra

CHINESE MEDICAL THERAPY AND THE USE OF AN ELECTRIC NEEDLE ON PAIN DUE TO CANCER. WATANABE Y ET AL. journal of the kyoto pain control institute. 1974;3:8-21 (eng).

10- gera: 18299/di/ra

THE EARLY DETECTION OF CARCINOMA OF THE ESOPHAGUS. THE CO-ORDINATING GROUP FOR THE RESEARCH. american journal of chinese medicine. 1974;2(4):367-74 (eng).

11- gera: 13591/di/el

[TRAITEMENT DES TUMEURS CERVICALES]. X. in a research into acupuncture and its clinical practice, commercial press, hong kong. 1975;:62-4 (eng).

12- gera: 1070/di/ra

IL'ACUPUNCTURE DANS LE TRAITEMENT DE LA DOULEUR CANCEREUSE]. CHU LSW ET AL. american journal of acupuncture. 1976;4(4):323-31 (eng).

13- gera: 2272/di/ra

TRAITEMENT PAR ACUPUNCTURE DU MYELOME MULTIPLE]. MICHIKO ET AL. journal of the kyoto pain control institute. 1976;1:12-20 (eng).

14- gera: 6448/di/ra

[MORT DANS LA DIGNITE, TRAITEMENT DE LA DOULEUR CANCEREUSE PAR ACUPUNCTURE]. LEE JF. acupuncture and electrotherapeutics research. 1976;2(1-2):137 (eng).

15- gera: 3112/di/ra

COMMENT IDENTIFIER ET LOCALISER UNE TUMEUR EN AURICULOMEDECINE. NOGIER ET AL. auriculomedecine. 1977;9:27 (fra).

16- gera: 6462/nd/re

[DOULEUR CANCEREUSE TRAITEE PAR ACUPUNCTURE ET STIMULATION ELECTRIQUE]. WEN HL. modern medicine asia. 1977;13:12 (eng).

17- gera: 6470/di/ra

JOBSERVATIONS SUR LA STIMULATION ELECTRIQUE DU NOYAU CAUDE CHEZ L'HOMME ET L'ACUPUNCTURE DANS LE TRAITEMENT DES DOULEURS REBELLES]. HUASHAN HOSPITAL. chinese medical journal. 1977;3(2):117-24 (eng).

1) La stimulation électrique du noyau caudé a un effet antalgique chez 5 patients avec cancer métastasé. 2) Cette même stimulation électrique renforce l'action de l'acupuncture : les deux techniques se potentialisent. 3) Des potentiels évoqués non spécifiques peuvent être enregistrés au niveau du noyau caudé durant l'acupuncture.

18- gera: 15080/di/ra

[EFFETS DE L'ACUPUNCTURE DANS LE TRAITEMENT DES EFFETS SECONDAIRES DE LA RADIOTHERAPIE]. CHUNG C ET AL. acupuncture research quarterly. 1977;3-4:135-6 (eng).

Cas d'un patient traité par radiothérapie pour cancer nasopharyngé, se plaignant de troubles sensitifs et moteurs de la région cervicale et buccale, traitement par 4GI et 34VB.

19- gera: 17671/di/ra

THE ANTITUMOR EFFECTS AND PHARMACOLOGY **ACTIONS OF HARRINGTOMINE. DEPARTMENT OF** PHARMACOLOGY, INSTITUTE*. chinese medical journal. 1977;6:131-6 (eng).

20- gera: 1335/nd/re

IDIAGNOSTIC ORIENTAL CHEZ LES PATIENTS AVEC CANCER DE L'ESTOMAC]. GARNERY JP ET AL. kitasato arch exper med. 1978;51(3-4):81 (eng).

21- gera: 4410/di/th

ETUDE DE MODIFICATIONS ELECTRIQUES DES POINTS D'ACUPUNCTURE APRES IRRADIATION. LACROIX AM. these medecine, montpellier. 1978;302: (fra).

Ce travail effectué à l'U-103, nous a permis de mettre en évidence quelques faits importants. Le temps de latence : la mise en évidence des points chinois en courant alternatif n'est pas spontanée, elle survient après un temps de passage de courant variable, il est apparu dans les multiples mesures effectuées que cette durée est constante pour le même animal. Cette notion nécessite des études complémentaires qui pourront être poursuivies dans un avenir très proche. Les résultats expérimentaux complétés par l'étude clinique ont permis de mettre en évidence la possibilité d'individualiser par des méthodes électriques, des points de moindre résistance et de moindre impédance correspondants aux points chinois. Les points d'acupuncture conservent ces propriétés particulières même après une irradiation à forte dose. La tentative d'analgésie effectuée chez le lapin a démontré la réalité de ces zones. Cependant, la discrémination de ces points devient impossible lorsque la peau a subit des modifications importantes : réactions inflammatoires aiguës, nécrose. Nous avons conscience que cette étude ne peut être considérée que comme l'hypothèse de départ pour une investigation plus large. L'étude histologique de l'ultrastructure des points d'acupuncture poursuivie par le Service du Professeur Senelar à Montpellier pourra peut être donner des explications plus précises à ces fait expérimentaux.

22- gera: 18385/di/ra

LOW BACK PAIN. CHUNG C ET AL. acupuncture research quarterly. 1978;8:139-43 (eng).

L'échec du traitement par acupuncture conduit à pratiquer un bilan clinique et paraclinique étendu qui révèle un carcinome au niveau du rein droit avec métastases au niveau du muscle Psoas, des poumons et du foie. Ce cas prouve pour l'auteur la nécéssité pour les acupuncteurs d'être médecins.

23- gera: 3092/di/ra

L'AURICULOMEDECINE PEUT-ELLE APPORTER UNE SOLUTION AU DIAGNOSTIC PRECOCE DU CANCER ?.

NOGIER P. auriculomedecine. 1979;16:3-8 (fra).

24- gera: 6504/di/ra

[A PROPOS DU TRAITEMENT PAR ACUPUNCTURE DES ETATS HYPERALGIQUES GRAVES]. GURTIER J.

akupunktur. 1979;1:37 (deu).

Douleurs fantômes après amputation, douleurs chroniques post-zostériennes, douleurs néoplasiques des cancers inopérables ou en phase terminale. Implantation d'aiguilles à demeure et électrostimulation avec courant alternatif régulier, fréquences variables, intensité maximale aux points : 26E, 30VB, 60V, puncture quotidienne du point auriculaire Shen Men laissé en place 2 h.

25- gera: 6518/nd/th

CONCEPTION DE LA DOULEUR EN ORIENT ET EN OCCIDENT. BARDON M. these medecine, tours. 1979;240:149P (fra).

Médecine occidentale. Médecine orientale. Faut-il choisir? Non. Chacune en tant que médecine humaine est imparfaite et a ses limites. Médecine occidentale et médecine orientale sont complémentaires. La médecine orientale, médecine très ancienne, avait besoin de se rénover au contact de l'Occident : sur le plan chirurgical, chimiothérapique. Mais, cette médecine doit être traduite et adaptée à l'homme occidental ; c'est là une barrière difficile à franchir que celle du langage. Toutefois, progressivement, les verrous des textes chinois s'ouvrent : et la médecine chinoise met en valeur : 1) la médecine de l'homme total, dans son environnement, biologique, physique et social, 2) ainsi que la notion de terrain chez le malade, notion qui devient très actuelle en Occident. Mais sa véritable traduction aux yeux des Occidentaux sera la preuve scientifique qui ouvrira enfin la grande porte à la fusion de la médecine orientale dans la thérapeutique occidentale. Dejà, les premiers tours de clefs sont donnés avec les récentes découvertes : de la neuro-endocrinologie, de la bio-électricité, de la cancérologie avec la fonction immunologique ou bioélectrique des cellules cancéreuses. Alors, plus qu'apaiser les douleurs des cancéreux, elle pourrait, peut-être, utilisée à temps, avant que les réponses immunologique ou bioélectrique des cellules cancéreuses. Alors, plus défense de l'individu, car selon les textes chinois : "Rien ne sert de chasser l'hôte, si l'on ne referme pas la porte". Porte cependant qui doit rester toute grande ouverte, pour la Médecine Chinoise et ses perspectives d'avenir.

26- gera: 11809/di/ra

[DIAGNOSTIC ORIENTAL DES MALADES AVEC CANCER DE L'ESTOMAC]. GARNERY JP. american journal of chinese medicine. 1979;7(1):91-9 (eng).

27- gera: 12292/di/ra

EFFECTS OF ELECTRO-ACUPUNCTURE ON WBC, RBC AND BLOOD PROTEIN IN THE X-IRRADIATED RATS (ABSTRACT). DOU MONG HAU. acupuncture research quarterly. 1979;10:45 (eng*).

16 rats sont répartis en 4 groupes : contrôle (A), contrôle acupuncture (B), contrôle irradiation (C) et groupe experimental. 2 à 3 séances d'acupuncture (20 minutes, 4 GI + 6RTe + 39VB). L'action de l'acupuncture est significative sur la leucocytose, les lymphocytes, neutrocytes, hematies et la concentration en hemoglobine.

28- gera: 13714/di/ra

[ANALGESIE PAR ACUPUNCTURE : ABLATION D'UNE TUMEUR CERVICALE DE 9, 5 LIVRES]. JAYASURIYA A ET AL. american journal of acupuncture. 1979;7(2):157-160 (eng).

This is a case report describing the surgical removal of a large mixed parotid tumor using acupuncture analgesia. Fifty mgm of Pethidine was used as an adjuvant drug. No other analgesic drugs were employed.

29- gera: 15065/di/ra

[MEDECINE NUCLEAIRE ET RECHERCHE CARCINOLOGIQUE EN CHINE]. YEH SDJ. american journal of chinese medicine. 1979;7(2):149-55 (eng).

30- gera: 15066/di/ra

TRAITEMENT DU CANCER PAR LES GUERISSEURS TIBETAINS]. BURANG T. american journal of chinese medicine. 1979;7(3):294-6 (eng).

31- gera: 1456/di/ra

QUELQUES MODIFICATIONS DE CRITERES PHYSIOLOGIQUES AU COURS DES INTERVENTIONS POUR CANCER DE L'OESOPHAGE SOUS ANESTHESIE PAR *. LIU YINGTAO. mensuel du medecin acupuncteur. 1980;75:161 (fra).

32- gera: 3114/di/ra

DEUX RAPPORTS SUR LES INCIDENCES D'UN CHAMP MAGNETIQUE TOURNANT SUR LE DEVELOPPEMENT TUMORAL. SANTINI. auriculomedecine. 1980;19:10 (fra).

33- gera: 5922/di/cg

[ETUDE DE L'ACUPUNCTURE AURICULAIRE]. XU

RUIZMENG ET AL. advances in acupuncture and acupuncture anaesthesia,beijing. 1980;107:120 (eng). L'acupuncture auriculaire est développée depuis l'antiquité chinoise. 2) Utilisée dans 14886 cas elle est efficace dans 90,1 %. 3) Utilisation dans 3181 cas d'analgésie chirugicale. 4) Intérêt diagnostique : relation entre chondroplasie et tumeur. 5) innervation de l'oreille. 6) Etude de la résistivité des points auriculaires.

34- gera: 6550/di/th

PLACE DE L'ACUPUNCTURE DANS LE TRAITEMENT DES DOULEURS REBELLES DES CANCERS DEPASSES.
JUBINEAU-ZELPHATI C. these medecine,montpellier.
1980;128:93P (fra).

1) L'introduction à l'acupuncture, la philosophie, la médecine chinoise. 2) Le concept douleur en médecine chinoise. 3) Etat de l'antalgie en cancérologie. 4) Procédés actuels des bilans de la douleur. 5) Action de l'acupuncture sur les douleurs rebelles.

35- gera: 12303/di/ra

EFFECTS OF ELECTROACUPUNCTURE ON THE FUNCTION OF SOME LEUKOCYTIPOEITIC ORGANS IN THE GAMMA- IRRADIATED MICE. DOU MONG HAU. acupuncture research quarterly. 1980;13:21-32 (eng). The effects of electroacupuncture on the DNA and RNA biosyntheses in bone marrow, spleen and thymus of the 500 rads gamma ray-irradiated mice were studied. Two hundred male young mice (ICR strain) were divided into four groups. Group A served as normal control. Group B, as the experimental control, was exposed to 300 rads gamma ravirradiation. Groups C and D, as the experimental groups, were treated with electroacupuncture at two or three-day intervals before and after being exposed to gamma ray-irradiation respectively. Three points were chosen: one was similar to man's Hoku (Li4), and the other two points were similar to man's Hsuanchung (G39) and Sanyinchiao (Sp6) respectively. The duration of each electroacupuncture was 10 minutes. The biosyntheses of DNA and RNA in bone marrow, spleen and thymus were determined by the radioisotope incorporation and the scintillation spectrometer counting methods. The present results revealed that the irradiation of 500 rads gamma ray exerted pronounced inhibitory effect on the DNA and RNA biosyntheses in the bone marrow, spleen id thymus of the mice. They showed that the animals, treated with electroacupuncture before being exposed to gamma rayirradiation, had no significant elevation of the nucleic acids biosyntheses in the bone marrow, spleen and thymus of the mice. However, they revealed that electroacupuncture had a significant promotion of the recovery of DNA and RNA biosyntheses in these leuckocytopoietic organs of the gammaray-irradiated mice.

36- gera: 12304/di/ra

PRELIMINARY STUDY ON THE EFFECTS OF MOXIBUSTION ON THE GAMMA-RAY-IRRADIATED MICE. JING-CHONG WU ET AL. acupuncture research quarterly. 1980;15:91-105 (eng).

The effects of moxibustion on some blood components and the concentration of hemoglobin and serum protein were assessed in the present study. A total of 144 young male mice (ICR strain) were divided into three groups. Group A served as the control Group B. the experimental control, was exposed to 500 rads gamma-ray-irradiation. Group C, the experimental group, was treated with moxibustion at two-or three day interval after being exposed to gamma-ray- irradiation. We chose three pairs of points from those which were similar to man's, Shen-. Yu (B23), Ta-Chang-Yu (B25), Kuan-Yuan-Yu (B26), Hsiao-Chang-Yu (B27) and Pang-Kuang-Yu (B28) etc. Blood samples were measured on day 0. 5, 12, 19, 26 and 33 postirradiation. The experiment led to the following conclusions: 1) The moderate dosage of gamma-ray-irradiation had an evident detrimental effect on the erythrocytes, total leukocytes, lymphocytes. monocytes and neutrophils. It also had an inhibitory effect on the hemoglobin and serum protein syntheses in mice. 2) Moxibustion was able to help to gammaray-irradiated mice to receiver the number of eryrthrocytes, total leukocytes, lymphocytes, monocytes and neutrophils. With respect to the concentrations of serum protein and

hemoglobin, moxibustion was also able to help their recovery in the gamma-ray-irradiated mice.

37- gera: 15067/di/ra

[UTILISATIONS DES PLANTES COMME MEDICAMENTS ANTI-CANCEREUX]. BIN HSU. american journal of chinese medicine. 1980;8(4):301-6 (eng).

38- gera: 15083/di/tt

TREATMENT OF TOXIC SIDE EFFECTS RESULTING FROM RADIATION AND CHEMOTHERAPY BY TRADITIONAL CHINESE MEDICINE. CHEUNG CS ET X, Y ET Z. traditional chinese medical publisher,san francisco. 1980;:40P (eng).

39- gera: 16093/di/cg

OBSERVATION OF CHANGES OF PLASMA CORTISOL BEFORE AND AFTER INDUCTION OF ACUPUNCTURE ANESTHESIA AND DRUG ANESTHESIA IN TUMOR PATIENTS. ZANG JUNFANG ET AL. advances in acupuncture and acupuncture anaesthesia, beijing. 1980::465 (eng).

40- gera: 17432/nd/re

[ACÜPUNCTURE REFLEXOTHERAPY IN THE REHABILITATION OF PATIENTS WITH RADIATION FIBROSIS AND SECONDARY NEURITIS]. ZUBOVA ND ET AL. med radiol (mosk). 1980;25(8):64-6 (rus).

41- gera: 18338/di/ra

HEPATIC CANCER IN CHINESE: A CHAPTER IN "GEOGRAPHIC PATHOLOGY". WELLMANN KF ET AL. american journal of chinese medicine. 1980;8(1-2):1-16 (eng)

42- gera: 23149/di/ra

SOME CHANGES OF PHYSIOLOGICAL AND BIOCHEMICAL INDICES DURING OPERATION OF ESOPHAGEAL CARCINOMA UNDER ACUPUNCTURE ANESTHESIA. LIU YINGTAO ET AL. advances in acupuncture and acupuncture anaesthesia, beijing. 1980;:161 (eng).

43- gera: 313/di/ra

[VALEUR DIAGNOSTIC DE LA PROTUSION DU POINT AURICULAIRE DANS LE CANCER DU FOIE ET D'AUTRES AFFECTIONS]. HE CHENGJIAN ET AL. shanghai journal of traditional chinese medicine. 1981;9:26 (chi).

44- gera: 344/di/ra

[TRĂITEMENT PAR LASER D'AFFECTIONS COURANTES EN CHIRURGIE ET ACUPUNCTURE EN REPUBLIQUE POPULAIRE DE CHINE: RAPPORT PRELIMINAIRE]. XIU BING WEI. acupuncture and electrotherapeutics research. 1981;6(1):19-31 (eng).

Les médecins dans la République Populaire de Chine ont fait beaucoup de progrès dans l'application clinique de la technique du laser aux sciences médicales. Le rayon laser est hautement concentré et peut coaguler, évaporer et couper les tissus vivants, le rendant utile en chirurgie, particulièrement celle de la tête et de la face. Il est employé (laser CO) pour l'élimination des naevi, mélanomes, carcinomes, en concentrant les rayons à haute intensité. Il est aussi employé (laser He Ne) avec succès pour la reprolifération du cheveu dans certaines formes de chutes capillaires, en irradiant la calvitie avec des rayons diffus de basse intensité et dans les problèmes gynécologiques et obstétricaux, tel que la correction des malpositions foetales par l'application de rayon laser He Ne à basse intensité aux points d'acupuncture effectifs. Dans ce rapport préliminaire, sont présentés des exemples de données cliniques tirés de nos résultats avec des patients traités par des rayons laser pour des problèmes médicaux variés, inclus des

45- gera: 572/di/ra

[OBSERVATION CLINIQUE SUR LE TRAITEMENT PAR LA MTC DU CANCER NASOPHARYNGE AVEC METASTASE CERVICALE]. ZHANG JINGSHU. journal of new chinese medicine. 1981;13(11):33 (chi).

46- gera: 3094/di/ra

[EFFETS DES EXTRAITS DE SPIROBOLUS BUGII SUR LES TUMEURS TRANSPLANTEES DE LA SOURIS]. JIANG TINGLIANG. journal of traditional chinese medicine. 1981;1(1):27 (eng).

Spirobolus bungii (yanshangiong) est un insecte utilisé traditionnellement dans la province de Henan dans le cancer de l'oesophage. Dans le livre classique Ben Cao Cang Mu, il est décrit comme ayant une activité sur le "e chuang" (maladie maligne). Certaines maladies "e chuan" comme le "Ehengjia Jiju" (tumeur de l'abdomen avec distension et douleur) ou le "Shi jian", ou encore le "Shi rong" paraissent correspondre aux tumeurs malignes de la médecine moderne. Le vanshangion apparait ainsi comme un agent anti-tumeur utilisé depuis la dynastie Ming. L'étude de son action sur la souris montre effectivement une haute efficacité.

47- gera: 3095/di/ra

[OBSERVATION DE L'EFFET DES EXTRAITS DE SPINOBOLUS BUNGII SUR LES CELLULES CANCEREUSES]. JIANG TINGLIANG. journal of traditional chinese medicine. 1981;1(1):34 (eng).

Les extraits ont un effet cytolytique direct sur les cellules cancéreuses qui débute une heure après le traitement.

48- gera: 3116/di/ra

TRAITEMENT DU TERRAIN EN CANCEROLOGIE. NOGIER. auriculomedecine. 1981;22:9 (fra).

49- gera: 3117/di/ra

PROJET D'UN ESSAI CONTROLE SUR L'APPORT DE L'AURICULOMEDECINE DANS LE DIAGNOSTIC EN CANCEROLOGIE. PUJOL ET AL. auriculomedecine. 1981;25:9 (fra).

50- gera: 3118/di/ra [EFFETS DE L'AIL, DE DROGUES CHINOISES ET D'ACIDES AMINES SUR LES CELLULES TUMORALES DE L'ASCITE D'ERLICH CHEZ LA SOURIS]. CHOY YM ET AL. american journal of chinese medicine. 1981;1(4):69 (eng). Les substances diminuent de façon significative le nombre de cellules tumorales libres dans la cavité péritonéale et prolonge la durée de vie de 50 %.

51- gera: 4797/di/ra

IRECHERCHES SUR L'ASPECT LINGUAL DE 1046 PATIENTS AVEC TUMEUR MALIGNE COMPARE A CELUI DE 500 SUJETS SAINS]. CHEN ZELIN. chinese journal of modern developments in traditional medicine. 1981;1(2):81

La fréquence de la langue pourpre (49,6 %) est 3,9 fois plus importante que chez les sujets sains. La langue rouge est moins fréquente. La langue sans enduit est plus fréquente (radiothérapie nasopharyngée ou du cancer du col). De même la langue oedématiée (30,2 %), la langue fissurée (25,4 %) et les varicosités des veines sublinguales (49,7 %). L'examen de la langue peut être utile dans le diagnostic, la conduite thérapeutique et le pronostic des cancers. Les langues bleutées sont de mauvais pronostic.

52- gera: 4977/nd/th
PLACE DE L'IRIDOLOGIE DANS LE DIAGNOSTIC DU CANCER. GUICHES JE. these medecine, montpellier. 1981;107:74P (fra).

53- gera: 6562/nd/re

[USE OF NEEDLE REFLEX THERAPY IN THE TREATMENT OF THE PAIN SYNDROME OF ONCOLOGY PATIENTS]. ZUBOVA ND ET AL. vetn akad med nauk sssr. 1981;(8):87-90 (rus*).

54- gera: 12295/di/ra

[QUELQUES EFFETS HEMATOLOGIQUES DE LA MOXIBUSTION SUR LE COBAYE IRRADIE AUX RAYONS X]. HAU DM. acupuncture research quarterly. 1981;17:7-8

55- gera: 14245/di/ra

[DOULEUR DE L'EPAULE PAR METASTASE DE CANCER

DU SEIN]. CHUNG C. acupuncture research quarterly. 1981;18:58 (eng).

56- gera: 18364/di/ra

SARTAN (CANCER) AND ITS TREATMENT IN UNANI MEDICINE. ASLAM M ET AL. american journal of chinese medicine. 1981;9(2):95-107 (eng).

57- gera: 18409/di/ra

SOME HEMATOLOGICAL EFFECTS OF MOXIBUSTION ON THE RAY IRRADIATED MICE (abstract). WU CC ET AL. acupuncture research quarterly. 1981;17:22-3 (eng). Etude sur 144 souris réparties en 3 groupes : (A) contrôle, (B) irradiation 500 rads, (C) irradiation suivie de moxibustion au niveau des points 22V, 25V, 26V et 28V. La moxibustion permet une normalisation du nombre d'erythrocytes, leucocytes, lymphocytes et monocytes. (voir article complet ref. GERA [12304]).

58- gera: 93/di/ra

[LE DIAGNOSTIC DES FORMES CLINIQUES DANS LE TRAITEMENT DES DYSPHAGIES DU CANCER DE L'OESOPHAGE. A PROPOS DE 40 CAS]. WANG YOUMIN. shanghai journal of traditional chinese medicine. 1982;7:8 (chi).

59- gera: 94/di/ra

[OBSERVATIONS CLINIQUES SUR LA TRIPLE COMBINAISON ACUPUNCTURE-MOXIBUSTION-PHYTOTHERAPIE DANS LE TRAITEMENT DU CANCER DE *1. ZHU RUGONG ET AL. chinese acupuncture and moxibustion. 1982;2(4):22 (chi*).

Acupuncture et moxibustion sont utilisées pour renforcer l'énergie vitale et disperser les facteurs pathogènes. Les plantes médicinales sont utilisées pour renforcer les fonctions immunologiques de l'organisme, inhiber le développement des cellules cancéreuses et prolonger la survie des patients. Un effet positif est observé chez 12 patients (60 %), aucun effet n'est observé chez 8 patients (40 %).

60- gera: 120/di/ra

[TRĂITEMENT PAR MTC DU CANCER DE LA VULVE]. LIU YUE. shanghai journal of traditional chinese medicine. 1982;8:23 (chi).

61- gera: 438/di/ra

[DISCUSSION SUR LE TRAITEMENT DU CANCER DU FOIE BASE SUR LA THEORIE RATE-ESTOMAC]. YU ERXING. shanghai journal of traditional chinese medicine. 1982;1: (chi).

62- gera: 476/di/ra

[MEDECINE CHINOISE ET MEDECINE OCCIDENTALE DANS LE TRAITEMENT DE 238 CAS DE MOLE HYDATIFORME MALIGNE]. CHENG YONG ET AL. shanghai journal of traditional chinese medicine. 1982;3:30 (chi).

63- gera: 700/di/ra

JOBSERVATION SUR LES EFFETS THERAPEUTIQUES A LONG TERME DE LA PHYTOTHERAPIE TRADITIONNELLE DANS LES TUMEURS DE LA VESSIE]. XIE TONG ET AL. shanghai journal of traditional chinese medicine. 1982;4:11 (chi).

64- gera: 886/di/ra

[CANCER ET ASPECT DE LA LANGUE]. CHEN ZELIN ET AL. journal of new chinese medicine. 1982;14(6):42 (chi).

65- gera: 888/di/ra

[ASPECT LINGUAL DANS 500 CAS DE CARCINOME DE L'OESOPHAGE ET DU CARDIA]. LI PEIWEN. journal of traditional chinese medicine. 1982;23(9):23 (chi).

66- gera: 1248/di/ra [PHYTOTHERAPIE TRADITIONNELLE DANS LE TRAITEMENT DES TUMEURS DE LA THYROIDE, A PROPOS DE 2 CAS]. ZHU CHANGSHENG. shanghai journal of traditional chinese medicine. 1982;4:16 (chi). 67- gera: 1308/di/ra

[OBSERVATIONS SUR LA MICROCIRCULATION DE 52 PATIENTS AVEC CANCER DE L'OESOPHAGE ET DE 40 PATIENTS AVEC EPITHELIOSE OESOPHAGIENNE *]. WANG JIEMIN ET AL. shanghai journal of traditional chinese medicine. 1982;9:47 (chi).

68- gera: 1311/di/ra

[TRAITEMENT COMBINE MTC-MO, DANS LE TRAITEMENT DU CANCER DE L'ESTOMAC AU STADE TARDIF. ANALYSE DE 53 CAS]. WANG GUANTING ET AL. shanghai journal of traditional chinese medicine. 1982;8:25 (chi).

69- gera: 1319/di/ra

[OBSERVATIONS SUR L'EFFET THERAPEUTIQUE A LONG TERME SUR LE STADE III DU CANCER DE L'ESTOMAC ET EXPLORATION DE L'ACTION *]. COLLABORATED RESEARCH GROUP *. journal of traditional chinese medicine. 1982;23(3):21 (chi).

70- gera: 1402/di/ra

[OBSERVATIONS SUR 74 CAS DE CANCER PRIMITIF DU FOIE AU STADE II TRAITES PAR PLANTES TRADITIONNELLES]. LAI YUNGCHUNG ET AL. revue de mtc du yunnan. 1982;3(1):16 (chi).

71- gera: 1461/di/ra
[OPERATION RADICALE POUR CANCER GASTRIQUE SOUS ANESTHESIE COMBINEE EPIDURALE LASER ACUPUNCTURE]. WANG YOULIANG ET AL. chinese acupuncture and moxibustion. 1982;2(6):23 (chi*). Clinical observation of 10 cases of radical operation of gastric cancer under laser-epidual combined anesthesia was made The results showed that this method had remarkably analgesic effect, which provided a new way for overcoming the incompleteness of acupuncture anesthetic analgesia. When this method was applied, the epidual anesthetic doses were obviously reduced, and the influence of hemodynamics reduced as well, however, the anesthetic safety was increased. The anesthetic effect of this method is markedly higher than that of acupuncture anesthesia group (P<0.005).

72- gera: 1497/di/ra

60 ČAS DE CANCER DU SEIN OPERES SOUS ANESTHESIE PAR ACUPUNCTURE. HOPITAL DES TUMEURS DE HANGZHOU. mensuel du medecin acupuncteur. 1982;93:928 (fra).

73- gera: 1956/di/ra

ANALGESIE ACUPUNCTURALE DANS L'EXTRACTION DES TUMEURS DE LA SELLE TURCIQUE. JIN DEFANG ET AL. mensuel du medecin acupuncteur. 1982;87:678-9 (fra).

74- gera: 1993/di/ra

JOBSERVATIONS SUR LE TRAITEMENT DE L'EPITHELIOMA BASOCELLULAIRE DE LA PAUPIERE]. XIAO ZIRONG ET AL. revue de mtc du yunnan. 1982;3(3):14

75- gera: 2147/di/ra [LA MTC DANS LE TRAITEMENT DU CANCER PRIMITIF DU POUMON, ANALYSE DE 62 CAS]. SHEN PEIAN ET AL. shanghai journal of traditional chinese medicine. 1982;7:9

76- gera: 3090/di/ra

[EFFETS DES HERBES MEDICINALES TRADITIONNELLES, DE LA TEINTURE DE CRAPAUD ET DE L'ADENOSINE 3' 5' CAMP SUR LES CELLULES DE *]. WANG KUN REN ET AL. chinese medical journal. 1982;95(7):527 (eng).

Dans le premier groupe il est pratiqué une injection intrapéritonéale de 0,2 ml de la composition de MTC (TCMC) et de teinture de crapaud. La TCMC comporte : herba solani nigri, herba solani lyrati, herba duchesnea indica focke, radix angelicae sinensis, radix curcumae, radix salviae miltiorrhizae. Parallèlement pendant 8 jours sont injectés 0,3 ml de teinture de crapaud . Le deuxième groupe recoit pendant la même

période cAMP et aurinophylline, le troisième groupe reçoit une solution saline comme contrôle . Dans les deux premiers groupes la croissance cellulaire est inhibée. Un élément intéressant est que dans les deux cas la concentration de cAMP est augmentée et que la croissance cellulaire varie en sens inverse avec le niveau intracellulaire de cAMP. Cela suggère que l'association TCMC + teinture de crapaud agit sur le taux de cAMP cellulaire en inhibant la 3, 5 cAMP-PDE.

77- gera: 3097/di/ra

TESTS NOUVEAUX CONCERNANT LE CANCER. NOGIER P. auriculomedecine. 1982;27:33-4 (fra).

78- gera: 3098/di/ra A PROPOS DU DIAGNOSTIC ET DU TRAITEMENT DU TERRAIN CANCEREUX EN AURICULOMEDECINE. NOGIER P. auriculomedecine. 1982;27:35-6 (fra).

79- gera: 6594/di/re

STUDIES WITH ELECTRO-ACUPUNCTURE. RICO RC ET AL. journal of medicine. 1982;13(3):247-51 (eng). Etude sur 22 cas de douleur cancéreuses. 10 cas d'excellents résultats, 3 bons résultats, 2 moyens et 7 faibles ou

80- gera: 10313/di/ra [QI GONG TRADITIONEL DANS LA LUTTE CONTRE LE CANCER]. VON ZLLER. akupunktur. 1982;1:48 (deu).

81- gera: 10345/di/ra

QIGONG - CHINESE BREATHING EXERCISE. KOH TC. american journal of chinese medicine. 1982;10(1-4):86-91 (ena).

Qigong is an ancient Chinese breathing exercise with meditation which is being developed today for therapy of chronic illnesses in the People's Republic of China. It is claimed to cure gastric ulcers, hypertension, anxiety neurosis, otitis media, cancer and has even been used as a form of anaesthesia. Although the physiological effects produced by Qigong resemble those of meditation, there are certain features that are unique and often mysterious. Research in the future may prove Qigong tho be a useful adjunct in the practice of medicine.

82- gera: 11260/di/ra

REMOVING UTERINE TUMORS WITH TRADITIONAL **CHINESE HERBS: TWO APPROACHES TRANSLATED** FROM CHINESE REPORTS. CHEUNG CS. journal of the american college of traditional chinese medicine. 1982;1:64-70 (eng).

83- gera: 13566/di/ra

[COMBINAISON DES PLANTES MEDICALES CHINOISES ET DE LA RADIOTHERAPIE DANS LE TRAITEMENT DU CANCER DU NASO-PHARYNGE. RAPPORT *]. CAI WEIMING ET AL. journal of the american college of tcm. 1982;2:1-8 (eng).

84- gera: 15061/di/tt TREATING CANCER WITH CHINESE HERBS. HONG-YEN HSU. oriental healing arts institute, los angeles. 1982;:330P (eng).

85- gera: 17669/nd/re

[CHANGE IN THE FUNCTIONAL STATUS OF THE HEMOSTATIC SYSTEM DURING ACUPUNCTURE REFLEXOTHERAPY OF LATE RADIATION-INDUCED DISORDERS OF BLOOD AND LYMPH CIRCULATION]. CHEKALINA SI ET AL. med radiol (mosk). 1982;2758):73-4 (rus).

86- gera: 18805/di/ra

THE EFFECTS OF ULTRA-VIOLET LASER RADIATION ON CANCER. XIU-BING WEI ET AL. acupuncture and electrotherapeutics research. 1982;7(1):27-38 (eng).

87- gera: 19255/nd/re

PSYCHISME ET MORBIDITE : LE STRESS ET LE CHAGRIN PEUVENT-ILS DEPRIMER L'IMMUNITE ?. MACEK C. jama. 1982;248:405 (fra).

Les états émotionnels peuvent affecter fortement la susceptibilité à la maladie et la réaction immunitaire. Le meilleur indice de prévision de maladie maligne est la perte récente d'un être proche. la dépression réactionnelle à un deuil peut déprimer le système immunitaire favorisant la croissance de tumeurs microscopiques jusque là bien contrôlées.

88- gera: 127/di/ra

A PROPOS DU CANCER DU COL UTERIN. MINH L. revue francaise d'acupuncture. 1983;33:33-37 (fra). Il est un fait acquis par les études épidémiologiques que l'étiogénèse du cancer du col utérin dépend des facteurs mutagènes, tels les virus, et des facteurs cocarcinogènes, inflammatoires et infectieux sexuellement transmissibles. Mais elle dépend aussi du terrain de l'hôte avec ses réactions immunitaires de défense. L'auteur pense que si l'on interprète ces faits selon le concept de la médecine traditionnelle chinoise, les virus agiraient comme une énergie perverse de nature Yin, la défense de l'hôte étant assurée par l'énergie Wei. Ainsi, l'auteur se demande si on peut, chez les femmes à risque, tout en traitant la lésion du col utérin, intervenir auprès de l'énergie Wei de défense en agissant sur son élaboration et sa distribution et en l'orientant par des points appropriés vers l'appareil génital et vers

89- gera: 1341/di/ra

[189 CAS DE CANCERS DE L'ESTOMAC AU DERNIER STADE TRAITES PAR LA MEDECINE CHINOISE]. TAN XIN MIN. revue de mtc du yunnan. 1983;4(1):10 (chi).

90- gera: 2148/di/ra

[ANALYSE CLINIQUE DE 68 PATIENTS AVEC CANCER BRONCHIQUE]. GU ZHENDONG ET AL. journal of the shandong college of traditional chinese medicine. 1983;7(2):8 (chi).

91- gera: 2943/di/re

IMMUNE RESTORATION AND/OR AUGMENTATION OF LOCAL GRAFT VERSUS HOST REACTION BY TRADITIONAL CHINESE MEDICINAL HERBS. SUN YAN ET AL. cancer. 1983;52(1):70-3 (eng).

92- gera: 3099/di/ra

[PHARMACO-CONISATION PAR DROGUES TRADITIONNELLES CHINOISES DANS LE TRAITEMENT DU CANCER DU COL DE L'UTERUS AU STADE PRECOCE]. XANG XUEZHI ET AL. chinese journal of integrated traditional and western medicine. 1983;3(3):156 (chi*).

93- gera: 3106/di/ra

[TRĂITEMENT DE D'ADENOPATHIE CERVICALE METASTATIQUE ULCEREE]. DUANG FENGWU ET AL. journal of traditional chinese medicine. 1983;24(7):18 (chi).

94- gera: 3107/di/ra

[EFFETS A COURT TERME DE TAB, GINSENG ET RABDOSIA AMETHYSTOIDES (BENTU) HARA SUR LE CANCER DE L'ESTOMAC OPERE, RAPPORT DE 101 CAS]. X. journal of traditional chinese medicine. 1983;24(7):27 (chi).

95- gera: 3109/di/ra

[TRAITEMENT INTEGRE MTC-MO DANS LE TRAITEMENT DES TUMEURS MALIGNES DE LA BOUCHE ET MAXILLAIRE, DISCUSSION DE 46 CAS]. QIU WEILIU ET AL. shanghai journal of traditional chinese medicine. 1983;8:17 (chi).

96- gera: 3110/di/ra

[ETÜDE CONTROLEE SUR LE TRAITEMENT DES CANCERS NASOPHARYNGES PAR DROGUES D'ACTIVATION DU SANG ET DE LEVEE DE LA STASE SANGUINE *]. CAI WEIMING ET AL. journal of traditional chinese medicine. 1983;24(9):36 (chi).

97- gera: 3111/di/ra

[OBŠERVATIONS SUR LES EFFETS A COURT TERME DU TRAITEMENT PAR MTC DE 58 CAS DE CANCER GASTRIQUE]. ZHUANG YONGHONG ET AL. shanghai journal of traditional chinese medicine. 1983;10:9 (chi).

98- gera: 3119/di/ra

[THE INFLUENCE ON IMMUNITY OF NASOPHARYNGEAL CARCINOMA PATIENTS TREATED BY ACUPUNCTURE]. XIE MINGYING ET AL. chinese acupuncture and moxibustion. 1983;3(5):5 (chi*).

This paper has made the experiments and control observation on raising the immunity of the nasopharyngeal carcinoma patients by acupuncture. The results showed that the immune strength was related to the course of disease, and held that continuous observation of the dynamic change of immunity had an active significance in estimating the prognosis of tumor. Acupuncture is of certain value to increasing the immunity of the tumor patient, but is free of marked protection against lymphocyte lesion caused by radiation.

99- gera: 3120/di/ra

[FUNCTION OF ACUPUNCTURE REINFORCING AND REDUCING ON TOXIC REACTION ON CHEMICAL ANTICARCINOGEN]. ZHEN KEYAN ET AL. chinese acupuncture and moxibustion. 1983;3(5):17 (chi*). Etude de la réaction toxique dans 3 groupes (tonification, dispersion et contrôle) de chimiothérapie après opération radicale pour cancer du sein. 1) Les modifications des leucocytes sont mineures dans les groupes sous acupuncture, alors qu'une importante leucopénie est observée dans le groupe de contrôle. 2) Anorexie et nausée sont améliorées par dispersion et tonification. 3) En cas de chimiothérapie, l'acupuncture a un effet protecteur vis-à-vis des cellules

100- gera: 3122/nd/re

[SYMPOSIUM TENU A DALIAN SUR LA CHIMIOTHERAPIE ET LA PHARMACOLOGIE DES CANCERS]. X. acta pharmaceutica sinica. 1983;18(2):879 (chi).

101- gera: 3123/di/ra

[TRAITEMENT DU CANCER BRONCHIQUE AU STADE TARDIF PAR "RENFORCEMENT DE LA RESISTANCE AU CANCER" PAR COMBINAISON MTC-MO]. WANG XIMIN ET AL. fujian journal of traditional chinese medicine. 1983;101:16 (chi).

102- gera: 4810/di/ra

[RELĂTION ENTRE ASPECT LINGUAL ET ASPECT DE LA FIBROGASTROSCOPIE]. YIN FENGLI ET AL. journal of traditional chinese medicine. 1983;3(1):49-54 (eng). Etude de 447 patients porteurs d'affections gastriques. Il apparaît : 1) Qu'un enduit jaune est en corrélation avec une gastrite superficielle chronique (congestion, oedème, érosion et saignement de la muqueuse). En MTC l'enduit jaune est relié à la chaleur de l'estomac. 2) Il y a une relation entre l'épaisseur de l'enduit et la sécrétion de la muqueuse gastrique. L'enduit est mince ou absent en cas de gastrite atrophique et est épais en cas de congestion et hypersécrétion muqueuse (gastrite superficielle, gastrite hypertrophique, ulcère et cancer gastrique. Il y a également une relation entre l'évolution de l'affection et l'épaisseur de l'enduit. 3) Une langue pâle est associée à une pâleur de la muqueuse gastrique (gastrite atrophique). 4) Une langue rouge sombre est associée à des saignements gastriques et congestion de la muqueuse. 5) Les ulcères du bulbe ont un aspect glossoscopique normal alors que les ulcères gastriques ont un enduit jaune épais. Les ulcères duodénaux correspondent à un vide-froid à l'état latent et à un froid et chaleur associés en poussée. Les ulcères gastriques correspondent à la chaleurhumidité

103- gera: 5058/di/ra

[DECOUVERTES CLINIQUES EN UTILISANT L'ELECTRO-ACUPUNCTURE DE VOLL (EAV)]. LAM F ET AL. american journal of acupuncture. 1983;11(1):23-9 (eng).

Présentation de 11 cas de diagnostic utilisant l'EAV. Six cas ont été diagnostiqués tumeur malignes, 3 saignements intestinaux et 1 comme affection chronique dégénérative. Tous les diagnostics ont été confirmés par des explorations conventionnelles.

104- gera: 6598/rd/ra

[EVALUATION DES INDICATIONS DE L'ACUPUNCTURE DANS LE TRAITEMENT DE LA DOULEUR CANCEREUSEI. KAMEI ET AL. journal of the japan society of acupuncture and moxibustion. 1983;33(1):25-32 (jap*).

Sur 434 cas l'acupuncture a été utilisée dans 157 cas (36 %). Après application de divers types d'acupuncturo- moxibustion, une amélioration nette est observée dans 14 à 26 % des cas. L'acupuncture est plus efficace après intervention radicale que dans les cas inopérables avec métastases. 10 cas (6 %) sont aggravés après acupuncture.

105- gera: 6601/di/ra

ACUPUNTURA EN EL TRATAMIENTO DEL DOLOR ONCOLOGICO. CRESPO DE LA ROSA JC. sociedad espanola de medicos acupuntores sema. 1983;13:10-2 (esp).

106- gera: 6630/di/re

EXPERIENCE D'UNE CONSULTATION D'ANALGESIE DANS UN CENTRE ANTICANCEREUX. PICHARD E. medecine et hygiene. 1983;41:3440-2 (fra).

107- gera: 9261/di/ra

[TRAÏTEMENT MTC-MO DES EFFETS SECONDAIRES DE LA CHIMIOTHERAPIE DE LA MOLE ET DU CHORIO-CARCINOME: RAPPORT DE 15 CAS]. FU XINGSHENG ET AL. chinese journal of integrated traditional and western medicine. 1983;3(3):159 (chi*).

La chimiothérapie a des effets secondaires sévères : 1) Nausés et vomissements. 2) Douleur abdominale et diarrhée. 3) Ulcération de la muqueuse buccale. 4) Troubles de l'hématopoïèse. 5) Septicémie. 6) Entérite pseudomembraneuse. La combinaison MTC-MO donne de bons résultats dans le traitement des effets secondaires. Les points importants sont : 1) Renforcer les liquides Yin par la MTC. 2) Traitement précoce des effets secondaires. 3) Attention particulière à l'évolution des effets secondaires.

108- gera: 10953/di/ra

[ADENOME CHROMOPHOBE DE LA GLANDE PITUITAIRE]. ZHENG JING HUA ET AL. journal of the american college of traditional chinese medicine. 1983;1:63-5 (eng).

L'adénome chromophobe de la glande pituitaire est classée en MTC dans les syndromes vide de Yin avec chaleur interne. Suivant l'évolution il pourra exister ensuite un vide de Rate ou un vide des reins. Suivent plusieurs traitements à base de phytothérapie chinoise en fonction des syndrômes.

109- gera: 10987/nd/ra

[TUMEURS ET HYPERPLASIES COMME COMPLICATION DES HEPATITES CHRONIQUES ET LEUR TRAITEMENT PAR MTC]. SHI JIZHAO. chinese medical journal. 1983;96(9):655 (eng).

Une étude sur 1512 membres du personnel hospitalier montre que les manifestations tumorales ou hyperplastiques (goître, kyste du sein, kiste de l'ovaire, lipome, polype cervical, colique, fibrome ...) sont plus fréquent chez les patients avec hépatite chronique. La symptomatologie de l'hépatite chronique peut être groupée en deux syndromes : foie (distention du thorax, douleur hépatique ou splénique, irritabilité, langue bleutée et pouls tendu lié à la stagnation de l'énergie vitale) ou syndrome rate (inapétence, distention abdominale, selles molles, perte de poids, fatigue générale, oèdeme, langue pâle, pouls fin lié au vide de l'énergie vitale de la rate). Selon la MTC, les formations tumorales sont dues à la stagnation de l'énergie dans le foie et la rate. Quand il y a une stagnation de l'énergie du foie (hyperfonction) cela entraîne un vide de l'énergie de la rate (hypofonction). La constatation de tumeurs associées à une hépatite chronique est conforme aux théories de la MTC.

110- gera: 11143/di/ra

JACTION HYPOLIPEMIANTE PLASMATIQUE ET STIMULANTE DE LA LIPOGENESE DES SAPONINES DU **GINSENG CHEZ LE RAT AVEC TUMEUR** TRANSPLANTEE]. MASAHIRO YAMAMOTO ET AL. american journal of chinese medicine. 1983;11(1-4):88-95 (eng).

111- gera: 11738/di/ra

[70 CAS DE CANCER DU COLON TRAITES PAR MATERIA MEDICA CHINOISE]. ZHAIFAN. journal of zhejiang traditional chinese medicine college. 1983;7(6):22 (chi).

112- gera: 11774/di/ra

[TUMEUR DU PYLORE TRAITEE PAR LE SANG ET LA PLUME DE LA QUEUE DU CANARD BLANC]. XU SHANSUN. zhejiang journal of traditional chinese medicine. 1983;18(5):210 (chi).

113- gera: 11777/di/ra [EFFETS A COURT TERME DE TAB. GINSENG ET RABDOSIA AMETHYSTOIDES (BENTU) HARA SUR LE CANCER DE L'ESTOMAC OPERE. RAPPORT DE 101 CAS]. COORDINATED RESEARCH GROUP OF *. zhejiang journal of traditional chinese medicine. 1983;24(7):27 (chi).

114- gera: 12313/di/ra

[OBSERVATIONS CLINIQUES SUR L'ACTION DE DIETHYL-ESTER RUBIA CORDIFOLIA L SUR LA NUMERATION LEUCOCYTAIRE DANS LES LEUCOPENIES]. ZHANG ZHAOHE. chinese journal of integrated traditional and western medicine. 1983;3(2):98 (chi*).

DRC est utilisé dans les leucopénies de causes variables. 1) En cas d'infection virale ou bactérienne on observe une augmentation des leucocytes 24-96 heures après la prise. 2) En cas de leucopénie d'origine toxique (benzène) ou iatrogène (immuno-dépresseur, anti-mitotique) DRC a un effet supérieur aux médicament habituels. 3) En cas de leucémie lymphocytaire aigue, DRC a une action synergique avec les médicaments habituels.

115- gera: 12315/di/ra

EFECTOS DE LA MOXIBUSTION EN LA FUNCION DE ALGUNOS ORGANOS LEUCOCITOPOYETICOS EN RATONES. DOU MONGHAU. revista uruguaya de acupuntura. 1983;26:12-9 (esp).

Etude des effets de la moxibustion sur la biosynthése d'ADN et ARN dans la moëlle osseuse, le thymus et la rate chez le rat après irradiation aux rayons gamma (500 rads). 150 rats sont divisés en trois groupes : groupe A, contrôle, groupe B exposition au rayonnement, groupe C traitement par moxibustion après exposition au rayonnement. La biosynthése d'ARN et ADN est évaluée par determination de l'incorporation de radio-isotopes. L'irradiation a un effet inhibiteur significatif sur la biosynthèse. La moxibustion accroît de façon significative la synthése après irradiation.

116- gera: 13930/di/ra

[TRAITEMENT DU CANCER BRONCHIQUE AU STADE TARDIF PAR "RENFORCEMENT DE LA RESISTANCE AU CANCER" PAR COMBINAISON MTC-MO]. WANG XIMIN ET AL. fujian journal of tcm. 1983;101:16 (chi).

117- gera: 15079/nd/th

L'ACUPUNCTURE DANS LA LUTTE CONTRE LES VOMISSEMENTS SECONDAIRES AUX CHIMIOTHERAPIES ANTI- CANCEREUSES. DESNOS P. these medecine, caen. 1983;1144:134P (fra).

118- gera: 15082/di/ra

[LES ALIMENTS ET LE CANCEREUX]. WANG XI AO. journal of the american college of tcm. 1983;2:45-7 (eng).

119- gera: 18436/di/ra

SOME HEMATOLOGICAL EFFECTS OF MOXIBUSTION ON X-RAY IRRADIATED GUINEA PIGS. (abstract). HAU DM. acupuncture research quarterly. 1983;25:18 (eng). La moxibustion appliquée après irradiation permet une normalisation plus rapide du compte leucocytaire et des globules rouges, mais également des concentrations d'hémoglobine, protéines plasmatiques, albumines et alpha et beta globulines. (voir article complet ref GERA [12329]).

120- gera: 3026/di/ra

[ETUDE DE L'ACTION DES POLYSACCHARIDES D'ASTRAGALUS SUR LES ACTIVITES BIOLOGIQUES]. SHEN MEILING. chinese journal of integrated traditional and western medicine. 1984;4(10):615 (chi*).

Astragalus Mongolicus a un effet hépatotrope, préventif des infections, et antitumoral chez la souris. Etude expérimentale sur son action immunologique.

121- gera: 3029/di/ra

THE EFFECTS OF MOXIBUSTION AT HEAT AND SPLEEN EAR-POINTS ON THE PERIPHERAL LEUKOCYTE COUNT AND ANTI-COBROTOXIN-TOXIOD PRODUCTION. HUA CHOUE-HUANG. acupuncture research quarterly. 1984;31:81-90 (eng).

This paper investigates variations in the white blood cell count and antibody production in rabbits cased by auricular moxibustion. Peripheral leukocyte counts increased significantly at 1 and 2 hour intervals following moxibustion at heat and spleen points respectfully. The antibody titer in the moxibustion at heat-point group was higher than in the control group. The highest antibody titer of the control and the moxibustion at heat- point groups was seen at days 30 and 40 after immunization, respectfully. Six day intervals of every other day moxibustion stimulation in rabbits enhanced the peripheral leukocyte count. Significant leukocytosis effects were seen in both the heat and spleen points moxibustion groups. However, there was no significant difference between the effects of moxibustion at heat-point and that of moxibustion at spleen point regarding leukocytosis effects after long-term moxibustion.

122- gera: 3030/di/re

L'EST REJOINT L'OUEST DANS L'EQUILIBRATION DU YIN ET DU YANG IMMUNOLOGIQUE. MACEK C. jama edition francaise. 1984;9(82):372-8 (fra).

Compte-rendu du symposium sino-américain tenu à Beijing sur le thème "interaction entre la médecine traditionnelle chinoise et la médecine occidentale : impact sur l'immunologie". Etude des plantes à action anti-cancéreuse, et immunostimulante. Rapport d'études cliniques, intérêt des plantes d'activation de la circulation sanguine et levée de

123- gera: 3124/di/ra

[ANALYSE CLINIQUE DU TRAITEMENT DE LA LEUCEMIE AIGUE PAR COMBINAISON MTC-MO]. WANG JING. journal of traditional chinese medicine. 1984;24(12):26 (chi).

124- gera: 3126/di/ra

[METHODES DE SUPPORT DE VITALITE ET DE L'ESSENCE VITALE DANS LE TRAITEMENT DU CANCER PRIMITIF DU FOIE A UN STADE AVANCE 31 CAS]. LIN ZONGGUANG. shanghai journal of traditional chinese medicine. 1984;2:7 (chi).

125- gera: 4823/di/ra

[ANALYSE DES MODIFICATIONS LINGUALES DANS 213 CAS DE CARCINOME]. XU FEI ET AL. chinese journal of integrated traditional and western medicine. 1984;4(1):28 (chi*)

1) Etude sur 90 sujets normaux. On n'observe pas de dilatation veineuse, de stase ou de pétéchie sur les faces ventrale ou dorsale de la langue. 2) Dans les 213 cas de cancer on observe une langue livide ou pourpre, il y a une dilatation, stase ou varicosité de la face ventrale, la face dorsale ou le corps est légèrement enflé avec pétéchies. Ceci est particulièrement marqué chez les sujets avec cancer du foie qui présentent pigmentation et pétéchies le long du bord de la langue (une ligne angioïde noire, la ligne du cancer du foie). Dans les cas de cancer de l'estomac, de l'oesophage ou de la région cardiale on observe également stase veineuse ou pétéchies le long du bord ou à l'apex de la langue. Les patientes avec cancer du col présentent une pointe de la langue rouge ou framboisée. 3) Le pH de la surface de la langue est de 4,5 à 5,8 en cas de cancer du foie et de 5,4 à 6,5 en cas de cancer de l'estomac. 4) La microcirculation est observée dans 15 cas de cancer du foie : il existe une stagnation du sang dans 11 cas. Dans les cas ou l'hémoglobine descend à 7 g %, la microcirculation devient plus rapide et la langue devient rouge, au-dessous de 5 g % la langue devien pâle. Dans ce dernier cas la ligne du cancer du foie et les dilatations veineuses

126- gera: 5067/di/ra

[DIAGNOSTIC DU CANCER PAR LA METHODE NEUROMETRIQUE (RYODORAKU)]. KOBAYASHI T. american journal of acupuncture. 1984;12(4):305-12 (eng). Etude chez 169 patients avec cancer comparés à un groupe de contrôle. L'étude de la résistivité montre une différence signigicative entre les deux groupes : le Ryodoraku permet un diagnostic, mais également un pronostic.

127- gera: 5233/di/ra

[CARACTERISTIQUES DE LA CROISSANCE DES TUMEURS TRANSPLANTEES CHEZ LA SOURIS AVEC VIDE DE RATE ET CONSTATATIONS CLINIQUES]. YU ERXING ET AL. shanghai journal of traditional chinese medicine. 1984;1:46 (chi).

128- gera: 6644/di/ra

TRAITEMENT PAR ACUPUNCTURE DE LA DOULEUR D'UN CANCER VISCERAL. TRINH R ET AL. revue française de mtc. 1984;104:544-5 (fra).

Action antalgique de l'acupuncture sur un cas de cancer du pancréas inopérable.

129- gera: 6646/rd/ra

[EFFETS DE L'ANALGESIE PAR ACUPUNCTURE DANS LA DOULEUR DES CANCERS URINAIRES]. TOSHIKAZU T ET AL. journal of the japan society of acupuncture and moxibustion. 1984;33(3):285-2 (jap*).

Etude chez 32 patients de l'électro-acupuncture (1Hz) pendant 20 à 30 minutes. Le traitement a une action chez les patients avec métastase osseuse, mais non en cas d'atteinte neurologique.

130- gera: 7556/di/ra

[OBSERVATION PRELIMINAIRE SUR LES RESULTATS DU TRAITEMENT DES GLIOMES CEREBRAUX PAR LA "POUDRE ANTI-TUMEUR"]. SONG MULING. chinese journal of integrated traditional and western medicine. 1984;4(1):10 (chi*).

Traitement de 47 cas. Une amélioration est obtenue dans 68,1 % des cas modérés et précoces. La préparation est peu toxique, simple, économique, et d'utilisation facile.

131- gera: 11073/di/ra

[INTRODUCTION AU TRAITEMENT EXTERNE DU CANCER DU FOIE]. ZHOU DANHAN. zhejiang journal of traditional chinese medicine. 1984;19(10):462 (chi).

132- gera: 11268/di/ra

[LESIONS CERVICALES PRECANCEREUSES AU STADE MOYEN OU EVOLUE TRAITEES PAR LA METHODE D'INCISION ET CONISATION PAR PLANTES MEDICI*]. YANG XUEZHI ET AL. journal of traditional chinese medicine. 1984;25(10):19 (chi).

133- gera: 11272/di/ra

[RESULTATS A LONG TERME DU TRAITEMENT PREVENTIF ET CURATIF DU CANCER DU COL PAR PLANTES MEDICINALES CHINOISES (CUI TUO DING-CTD)]. LIU CHANGJIANG ET AL. chinese journal of oncology. 1984;6(6):450 (chi).

Depuis 1973, 96 patients avec lésions cervicales (30

hyperplasies squameuse atypique et 66 carciomes) sont traités par CTD. La guérison à court terme et long terme en cas d'hyperplasie est de 100 %. La guérison à court terme des carcinomes est de 91 % (29/32). A long terme de 100 % (24/24). Sur 34 patientes avec carcinome étendu, 27 sont traitées par CTD seul. A court terme la guérison est de 52 % (14/27), à long terme 100 % (13/13). 7 autres patientes ont été traités en association avec la radiothérapie. Elles ont été toutes guéries. Les effets secondaires sont modérés et n'influencent pas la fonction ovarienne.

134- gera: 11490/di/ra

[TRAĬTEMENT DU CANCER DU SEIN PAR LE HEXIANGZHUANG QIGONG]. SHI SHIAI. qigong and

science. 1984;9:11 (chi).

135- gera: 11491/di/ra

[EFFETS DU GINSENG ET DE LA GELEE ROYALE SUR LES CELLULES HUMAINES DU CANCER DU SEIN MCF-7]. ZHU-SAN YE ET AL. international journal of chinese medicine. 1984;1(1):39-40 (eng).

136- gera: 11634/di/ra

[AMELIORATION DES FONCTIONS DIGESTIVES DES CANCEREUX AVEC VIDE DE RATE]. YU RENCUN ET AL. chinese journal integrated of traditional and western medicine. 1984;4(1):113 (chi).

Etude de la vitesse du transit par absortion d'une capsule avec radio isotopes radiactifs. La vitesse est élevée chez les sujets cancéreux avec vide de Rate par rapport aux sujets sans vide de rate ou au groupe de contrôle. La vitesse se normalise avec les médicaments Jian Pi Bu Qi, tonifiants de la rate.

137- gera: 11728/di/ra

[RELIEF OF OESOPHAGEAL CARCINOMATOUS OBSTRUCTION BY ACUPUNCTURE]. FENG RUZHEN. journal of traditional chinese medicine. 1984;4(1):3-4 (eng*).

1) Groupe 1: 17V, 46V, 21V, 6MC. Groupe 2: 22VC, 12VC 12VC, 36E, 4Rte. En cas de glaires et constipation : 25V, 25E et 40E. En cas de douleur thoraciques irradiant vers le dos : 15V + points ashi. Pour sensations d'obstruction : 7MC. 2) L'acupuncture est pratiquée 2 jours consécutifs : 1er groupe le 1er jour, puis 2ème groupe le 2ème, intervalle de 3 jours libres puis recommencer l'acupuncture pendant deux jours. Séance de 20 minutes.

138- gera: 11730/di/ra

[COMBINAISON PLANTES MEDICINALES-CHIMIOTHERAPIE DANS LE CANCER DE L'OESOPHAGE]. ZHU-SAN YE. international journal of chinese medicine. 1984;1(2):49-53 (eng).

139- gera: 11804/di/ra

[GASTRITE ATROPHIQUE AVEC METAPLASIE EPITHELIALE INTESTINALE TRAITEE PAR MTC : RAPPORT DE 35 CAS]. CHEN ZEMIN ET AL. journal of traditional chinese medicine. 1984;25(4):36 (chi).

140- gera: 11861/di/ra

[EFFÉT INHIBITEUR DE CORDYCEPS SUR LA CARCINOGENESE DE L'ESTOMAC CHEZ SUR LA SOURIS]. LIN PEIZHONG ET AL. chinese journal of oncology. 1984;6(5):335 (chi)

Cordyceps inhibe la cancérisation de lésions précancéreuses induites expérimentalement chez la souris.

141- gera: 11872/di/ra

[TRAITEMENT PAR MTC DE 24 CAS DE CANCER DE L'ESTOMAC EVOLUES]. TANG XING MING. zhejiang journal of traditional chinese medicine. 1984;19(10):464 (chi).

142- gera: 12025/di/ra

[TRAÏTEMENT DU CANCER DU RECTUM PAR QIGONG]. ZHAO SUWEN. qigong. 1984;5(3):104 (chi).

143- gera: 12046/di/ra

[TRAITEMENT DU CANCER DU RECTUM PAR LE NOUVEAU QIGONG]. YIE YIFANG. qigong and science. 1984;9:10 (chi).

144- gera: 12327/di/ra

[TABLETTE D'ELEVATION DES GRANULOCYTES DANS LE TRAITEMENT DE 360 CAS DE LEUCOPENIE APRES $\textbf{IRRADIATION].} \ \textbf{ZHAO LIGUI ET AL. } \textbf{shaanxi journal of}$ traditional chinese medicine. 1984;5(9):12 (chi).

145- gera: 12329/di/ra
EFFECTS OF ELECTROACUPUNCTURE ON LEUKOCYTES AND PLASMA PROTEIN IN X-IRRADIATED RATS. HAU DM. american journal of chinese medicine. 1984;12(1-4):106-114 (eng).

The effects of electroacupuncture on leukocytes and plasma protein on the X ray-irradiated rats were investigated in the present study. The results showed that X-irradiation had an evident inhibitory effect on the counts of total leukocytes, lymphocytes and neutrocytes, and the concentration of the total plasma protein, plasma albumin, globulin and alpha and beta-globulin in X-irradiated rats. The electroacupuncture was able to help the X-irradiated rats to recover the counts of the total leukocyte, lymphocyte and neutrocyte. The electroacupuncture had a helpful tendency to recover the concentration of the total plasma protein, albumin, globulin, and alpha- and beta-globulin in the irradiated rats.

146- gera: 13504/di/ra [CAS DE CANCER NASOPHARYNGE GUERI PRINCIPALEMENT PAR PLANTES MEDICINALES]. HUANG LIN ET AL. journal of new chinese medicine. 1984;12:33 (chi).

147- gera: 13505/di/ra

[TRAÏTEMENT DE LA RHINITE ALLERGIQUE PAR ÎNJECTION DE MAGNOLIA LILIFLORA DESR DANS LA SOUS MUQUEUSE NASALE]. WANG TING CHU ET AL. chinese journal of integrated traditional and western medecine. 1984;4(12):278 (chi*).

1 ml à 30 % est injecté chaque jour bilateralement. Traitement durant 10 jours, principalement en cas de rhinite allergique mais également rhinite vasomotrice, rhinite médicamenteuse et rhinite hypertrophique modérée. 202 patients sont traités de février 78 à février 80 : 73,3 % ont une amélioration et 1,9 % aucun effet. La rémission est supérieure à un an et en cas de récidive, les signes sont moins importants. L'étude de l'écoulement nasal montre une disparition ou une diminution de l'éosinophilie.

148- gera: 13931/di/ra

[TRAÎTEMENT DU CANCER BRONCHIQUE PAR MTC]. ZHOU DAIMAN. journal of new chinese medicine. 1984;1:16 (chi).

149- gera: 13937/di/ra

IRELATION ENTRE LE TAUX DE SURVIE DE 3 FORMES CLINIQUES DE CANCER PULMONAIRE ET LE TAUX DE NUCLEOTIDES PLASMATIQUES]. WANG ZHENGCHANG ET AL. chinese journal of integrated traditional and western medicine. 1984;4(1):23 (chi*)

Il y a une relation entre le taux de cAMP et la survie. La survie des patients avec vide de Yin ou vide de Qi + vide de Yin est supérieure à ceux avec vide de Qi après traitement. Le taux de cAMP des patients avec vide de Qi est bas et n'est pas modifiée après traitement alors que le taux de cAMP des patients avec vide de Yin est elevé ou que celui des patients vide de Qi + vide de Yin est bas, mais qu'il s'éleve avec traitement.

150- gera: 13938/di/ra [RELATION ENTRE LA CLASSIFICATION ANATOMO-CLINIQUE ET TRADITIONNELLE DES CANCERS BRONCHOGENIQUES]. QU SHUFEN ET AL. chinese journal of integrated traditional and western medicine. 1984;4(1):21 (chi*)

420 cas sont classées selon la MTC en: 1) Vide de Qi, 2) stase du sang et de l'énergie, 3) vide de Yin, 4), Vide de Qi et de Yin, 5), Vide de rate avec humidité-glaire. Cette classification est comparée avec la classification TNM. 1), Vide de Qi apparait en relation avec TNM 1 et 2. 2), vide de rate et vide de Qi et vide de Yin avec TNM 3 et 4. 3), Stase sang et énergie et vide de Yin au stade intermédiaire.

151- gera: 13939/di/ra

[DISCUSSION SUR LE TRAITEMENT DU CANCER PULMONAIRE SELON LES FORMES CLINIQUES DE LA MTC]. CAI JI MING. zhejiang journal of tcm. 1984;19(10):462 (chi).

152- gera: 14126/di/ra

[GUERISON D'UN CAS D'OSTEO-ANGIOSARCOME]. HU ANBANG ET AL. shanghai journal of tcm. 1984;7:26 (chi). 153- gera: 15051/di/ra

[EFFET DE L'HYPERTHERMIE LOCALE PRODUITE PAR AIGUILLE ELECTRIQUE SUR LES CARCINOMES TRANSPLANTES DE LA SOURIS]. TANG XUEZHENG ET AL. chinese acupuncture and moxibustion. 1984;4(1):16 (chi*).

L'aiguille thermo-électrique a été inventée par le département d'acupuncture de l'institut de MTC de Mongolie interieure. Un taux de régression de 60 à 90 % selon les tumeurs est obtenu. Le mécanisme d'action selon la MTC et la MO est discuté.

154- gera: 15052/di/ra

TRAITEMENT DU CANCER BRONCHO-PULMONAIRE PAR MTC]. ZHOU DAINAM. journal of new chinese medicine. 1984;1:16 (chi).

155- gera: 15053/di/ra
[APPLICATION DE LA DETERMINATION DU **COMPLEMENT C3 AU TRAITEMENT PAR MTC DU** CANCER DU POUMON]. ZHANG YUZHENG ET AL. chinese journal of oncology. 1984;6(1):43 (chi). Utilisation du taux C3 comme index de l'efficacité thérapeutique de la MTC.

156- gera: 15055/di/ra

[ETUDE DES PRINCIPES ANTIMITOTIQUES DE RABDOSIA MACKOPHYSIA]. CHEN PEIYUAN ET AL. chinese traditional and herbal drugs. 1984;15(2):5 (chi).

157- gera: 15059/di/ra

JEFFET ANTI-MITOTIQUE DE EUPHORBIA FISCHERIANA STEUD SUR LA TUMEUR TRANSPLANTEE DE LA SOURIS]. SHENTU JIN ET AL. chinese journal of integrated traditional and western medicine. 1984;4(1):46 (chi*).

158- gera: 15062/di/ra [TRAITEMENT DES CANCERS PAR MEDICAMENTS TRADITIONNELS (2 CAS)]. ZHANG WENYAO ET AL. shanghai journal of tcm. 1984;5:20 (chi).

159- gera: 15071/di/ra

[ACUPUNCTURE EN COMBINAISON AVEC LA CHIMIOTHERAPIE ET LA RADIOTHERAPIE CHEZ LES PATIENTS CANCEREUX]. XIA YUQING ET AL. journal of tcm. 1984;25(7):58 (chi).

160- gera: 15072/di/ra

[TRAÎTEMENT DES TUMEURS PAR LA DROGUE CHOUKECHONG]. CHEN JIAYUE. revue de mtc du yunnan. 1984;5(2):49 (chi).

161- gera: 15073/di/ra

IRECHERCHE SUR LE TRAITEMENT DE L'HEPATOME PAR LE LUXIANCAO B]. BAI SHU XUN ET AL. revue de mtc du yunnan. 1984;5(3):53 (chi).

162- gera: 15074/di/ra

L'ACUPUNCTURE ET LE CANCER. LIU ZHUOYOU. mtc et acupuncture. 1984;7(2):17-8 (fra).

1) L'examen de l'oreille permet un diagnostic du cancer, notamment quant au cancer du foie. 2) Une douleur au point Hxing Dashih (à mi-distance entre 36V et 40V) est significative de néoplasie, la palpation des points Shu permet la localisation. 3) Les modifications radiologiques induites par la puncture du 36E permettent de différencier l'ulcère gastroduodénal du cancer. 4) L'acupuncture permet de diminuer les effets secondaires de la radiothérapie (36E, 12VC, 6Rte et 3F) ou de la chimiothérapie. 5) La technique d'incision (ablation du tissu graisseux sous-cutané) permet, sauf dans les cas d'obstruction complète d'améliorer le transit oesophagien en cas de cancer. 7) L'acupuncture améliore les index immunologiques.

163- gera: 15084/nd/ra

IMECANISME DU TRAITEMENT DU CANCER PAR QIGONG]. PAN YUXIAO. qigong and science. 1984;9:3 (chi).

164- gera: 15085/nd/ra

[PREVENTIONS ET TRAITEMENT DU CANCER PAR LE NOUVEAU QIGONG]. HEBIN. qigong and science. 1984;9:5 (chi).

165- gera: 15086/di/ra

[RAYONS Y ET TRAITEMENT DU CANCER PAR QIGONG]. X. qigong and science. 1984;9:8 (chi).

166- gera: 15087/di/ra

ICONSTITUANTS DE L'HUILE ESSENTIELLE DU RHIZOME DE ATRACTYLODES MACROCEPMALA PRODUITE A PINGJIANG ET SES EFFETS ANTI-TUMORAUX]. TANG DEPENG ET AL. qigong and science. 1984;9:43 (chi).

167- gera: 15088/di/ra

[ACTION ANTI-TUMORALE DES EXTRAITS DE MU LAN (INDIGOFERA TINCTORIA)]. X. chinese pharmaceutical bulletin. 1984;19(9):55 (chi).

168- gera: 15090/di/ra

[TRAÏTEMENT DE LA FIEVRE DES TUMEURS MALIGNES]. LU XIAO FU. zhejiang journal of tcm. 1984;19(10):259 (chi).

169- gera: 15091/di/ra

[EXPERIMENTAL OBSERVATION ON TREATING ACUTE RADIATION SICKNESS BY MEANS OF REPLENISHING VITAL ENERGY AND DISPERSING BLOOD STASIS.]. WANG HONG FU ET AL. chinese journal of integrated traditional and western medicine. 1984;4(6):357 (chi*). [Analyse en Anglais dans Abstract and review of clinical TCM, . Réf. GERA n°19631].

170- gera: 15092/di/ra

[TRAÏTEMENT PAR ACUPUNCTURE DE LA REACTION A LA RADIOTHERAPIE CHEZ DES PATIENTS AVEC TUMEUR MALIGNE]. XIA YUQING ET AL. chinese acupuncture and moxibustion. 1984;4(6):6 (chi*). La puncture de 6MC + 11GI + 36E renforce l'hématopoïese et améliore les signes cliniques (nausée, vomissements, vertiges et insomnies).

171- gera: 15093/di/ra

[CAS DE CANCER NASO-PHARYNGE GUERI PRINCIPALEMENT PAR PLANTES MEDICINALES]. HUANGLIN ET AL. journal of new chinese medicine. 1984;12:33 (chi).

172- gera: 15097/di/ra

JOBSERVATIONS SUR LES METASTASES DE CANCERS BASES SUR LA THEORIE DU YIN YANG ET DES 5 ELEMENTS (résumé)]. DUK SU CHANG. international journal of chinese medicine. 1984;1(3):47 (eng).

173- gera: 15098/di/ra

[AGENTS ANTI-TUMORAUX DES PLANTES CHINOISES (résumé)]. KUO-HSIUNG LEE. international journal of chinese medicine. 1984;1(3):52 (eng).

174- gera: 15099/di/ra

IPLANTES CHINOISES ANTI-CANCEREUSES: RELATIONS STRUCTURE-ACTIVITE (résumé)]. LIEN EJ ET AL. international journal of chinese medicine. 1984;1(3):53 (eng).

175- gera: 15100/di/ra

STUDY OF THERAPEUTIC EFFECTS OF MOXIBUSTION ON MICE BEARING SUBCUTANEOUS TUMOR (abstract). HAU DM ET AL. international journal of chinese medicine. 1984;1(3):57-8 (eng).

Résumé de l'article ref. GERA [18430].

176- gera: 15101/di/ra

[REPARATIONS DES LESIONS DE LA RADIOTHERAPIE PAR GINSENG (résumé)]. TAKEDA. international journal of chinese medicine. 1984;1(3):60 (eng).

177- gera: 18430/di/ra

PRELIMINARY STUDY ON EFFECTS OF MOXIBUSTION ON MICE BEARING SUBCUTANEOUS TUMOR. HAU DM ET

AL. acupuncture research quarterly. 1984;31:91-7 (eng). The present study was conducted to determine the effects of moxibustion on mice bearing subcutaneous tumor. In this research, a total of 166 male young mice (ICR strain), 6-8 weeks of age, were chosen to implant Ehrlich ascites tumor tells (1x10 puissance 7) in the sacral subcutaneous area. When the subcutaneous tumor (ST) of mice few to 10 ± 2 mm in diameter, they were divided into the control and experimental groups. The experimental group was treated with moxibustion on those skin points near ST. The results revealed a mortality rate within 120 days after moxibustion treatment to be 14.3% (85.8% for tumor control). The tumor consul rate in the moxibustion group was 95.2% (14.2% for tumor control). The mean surviving time within 120 days for the moxibustion group was 99.5 days (46.3 day for the control). Therefore some therapeutic effects in the experimental group treated with moxibustion were observed.

178- gera: 19533/di/ra

A SURVEY OF CHINESE ANTICANCER HERBS: 1) CROTALARIA SESSILIFLORA, 2) (NUNG-CHI-LI) AND PYRROLIZIDINE ALKALOIDS. WEN Y LI ET AL. bulletin of the oriental healing arts institute. 1984;9(7):321-32 (eng).

179- gera: 19772/di/cg
[ACUPUNCTURE ANESTHESIA IN THE RADICAL OPERATION OF THYROID CANCER]. ZHOU QUANRUI ET AL. second national symposium on acupuncture and moxibustion, beijing. 1984;:181 (chi).

180- gera: 23167/di/ra

RADICAL TREATMENT OF CARCINOMA VENTRICULI AND SUBTOTAL GASTRECTOMY UNDER COMBINED **ACUPOINT LASER IRRADIATION-EPIDURAL** ANESTHESIA. YU ZHIQIN ET AL. second national symposium an acupuncture and moxibustion, beijing. 1984;:195 (eng)

181- gera: 6689/di/ra

[CAS CLINIQUE: TRAITEMENT PAR ACUPUNCTURE D'UN SYNDROME DOULOUREUX D'UN CANCER VISCERAL]. TRINH R ET AL. rivista italiana di mtc. 1985;1:29 (ita).

182- gera: 6700/di/me

APPORT DE L'ACUPUNCTURE AU TRAITEMENT DE LA **DOULEUR EN SERVICE DE CANCEROLOGIE, ETUDE** PORTANT SUR 30 CAS SUIVIS DE 1982 A 1984. RIBETON L. memoire d'acupuncture, bordeaux 2. 1985;:44P (fra). 30 malades souffrant de douleurs liées à un cancer ont été traités en service hospitalier de 1982 à 1984. Un traitement antalgique acupunctural était entrepris lorsque la thérapeutique médicamenteuse préalablement instituée s'avérait insuffisante. Résultats : effet moyen ou important : 13 cas ; résultat nul : 11 ; cas ininterprétables : 4. Ont été également étudiés les facteurs que représentent le mécanisme de la douleur, et le type de traitement médicamenteux associé.

183- gera: 9355/di/ra

[TRAÏTEMENT PAR COMBINAISON MTC-MO DES EFFETS SECONDAIRES DE LA CHIMIOTHERAPIE DES TUMEURS TROPHOBLASTIQUES]. GUI GUIFEN. chinese journal of integrated traditional and western medicine. 1985;5(4):202

Les effets secondaires entrent dans le cadre d'énergie perverse de l'estomac, de chaleur endogène par vide de Yin ou vide de Qi et de Yin. Randomisation en 3 groupes : 1) Traitement par MTC durant la chimiothérapie. 2) Traitement par MTC après. 3) Chimiothérapie seule. Les effets secondaires sont moindres dans le premier groupe.

184- gera: 11124/di/ra

[ANALYSE CLINIQUE DE 22 CAS DE CANCER DU FOIE TRAITES PAR LIANHUAPIAN AVEC SURVIE SUPERIEURE A 1 AN]. ZHOU DAIHAN ET AL. journal of new chinese medicine. 1985;17(6):21 (chi).

185- gera: 11134/di/ra

[EFFECT OF DISODIUM CANTHARIDATE AND INJECTIO HERBAE SARCANDRAE ON ENERGY AND CYCLIC

NUCLEOTIDE METABOLISM IN HEPATOMA 22 CELLS*]. ZHANG YINGHUA CHEN XING ET AL. chinese journal of integrated traditional and western medicine. 1985;5(11):686 (chi*).

186- gera: 11135/di/ra

[OBSERVATIONS CLINIQUES SUR LE TRAITEMENT DE 60 CAS DE CANCER PRIMITIF DU FOIE]. PAN MINQIU ET AL. shanghai journal of traditional chinese medicine. 1985:11:13 (chi).

187- gera: 11140/di/ra

ITRAÏTEMENT DE 73 CAS DE CANCER PRIMITIF DU FOIE AU STADE 3]. TANG XINMIN. shanghai journal of traditional chinese medicine. 1985;12:11 (chi).

188- gera: 11492/di/ra [CANCER DE LA GLANDE MAMMAIRE TRAITE PAR COMBINAISON MTC-MO, RAPPORT DE 134 CAS]. GUANG'ANMEN HOSPITAL. journal of traditional chinese medicine. 1985;26(3):41 (chi).

189- gera: 11495/di/ra

[CONTRIBUTION DE LA THERMO-MOXIBUSTION AU TRAITEMENT CHIRURGICAL DU CANCER MAMMAIRE TRANSPLANTE CHEZ LA SOURIS]. STERNFELD M ET AL. acupuncture and electrotherapeutics research. 1985;10(1-2):73-8 (eng).

190- gera: 11672/di/ra

IDIAGNOSTIC DES CANCERS DIGESTIFS PAR LA METHODE D'INSPECTION DE LA MTC]. PAN DENIAN. journal of traditional chinese medicine. 1985;26(6):51 (chi).

191- gera: 11731/di/ra

[TRAITEMENT DE 60 CAS DE TUMEURS DE L'OESOPHAGE ET DU CARDIA PAR COMBINAISON MTC-MO]. HEBEI PROVINCIAL HOSPITAL. journal of new chinese medicine. 1985;17(9):23 (chi).

192- gera: 11732/di/ra

[OBSERVATION ON 32 CASES OF ADVANCED CARCINOMA OF OESOPHAGUS AND PREVENTRICULUS TREATED BY MOF III PLAN IN COMBINATION WITH FU ZHEN*. YANG CHONGJIANG ET AL. chinese journal of integrated traditional and western medicine. 1985;5(11):666 (chi*).

193- gera: 11897/di/ra

IOBSERVATION ON THE CURATIVE EFFECT OF POSTOPERATED LATE GASTRIC CANCER BY FU ZHENG ANTI-CANCER METHOD COMBINED WITH CHEMOTHERAPY]. WANG GUANTING ET AL. chinese journal of integrated traditional and western medicine. 1985;10(5):612 (chi*).

194- gera: 12055/di/ra

[TRAÎTEMENT DE LA RECTITE APRES IRRADIATION, ANALYSE DE 104 CAS]. XIONG NANHUA ET AL. journal of traditional chinese medicine. 1985;26(11):30 (chi).

195- gera: 12057/di/ra

IEXPLORATION OF THE RELATION AMONG DIFFERENTIAL TYPES OF RECTAL CANCER CLASSIFIED BY TCM FROM THE OBSERVATION OF IMMUNOLOGICAL *]. XU JIPING ET AL. chinese journal of integrated traditional and western medicine. 1985;5(2):92 (chi*). From 58 cases of rectal cancer, the experiments in question showed that differential types classified by TCM have specific immunological functions, which has been proved by both the cellular and humoral immunity and C3 test. Significant difference (P <0.01) has been found through a contrast between Shi and Xu groups. The Shi group shows excessiveness symptom-complex, including: (1) stagnant and noxious heat; and (2) dampness and heat. The Xu group shows deficiency symptom-complex, including: (1) deficiency of both Qi (vital energy) and blood; (2) insufficiency of Yang (vital function) of spleen and kidney; and (3) insufficiency of Yin (vital essence) of the liver and kidney. To every type, the

test of cellular immunity is more sensitive than those responding to the humoral test. On the other hand, the C3 of the Xu group stage III and IV is less than the normal as well as the Shi group (Stage I and II). It is considered that C3 is consumed by the immunologic reaction due to the increase in cancer cells. The experiments can help TCM practitioners with diagnosis and prescription.

196- gera: 13941/di/ra

[CONDUCTIBILITE ELECTRIQUE AU NIVEAU DES POINTS D'ACUPUNCTURE DU POUMON CHEZ DES SUJETS SAINS ET ATTEINT DU CANCER DU POUMON]. SULLIVAN SG ET AL. american journal of acupuncture.

1985;13(3):261-66 (eng).

Mesure de la conductibilité des points du poumon chez 4 patients porteurs de cancer du poumon et 36 sujets sains. On ne retrouve que 4 faux positifs avec cette méthode de diagnostic

197- gera: 14985/di/ra

CAS CLINIQUE: DOULEUR METASTATIQUE DU CANCER DE LA PROSTATE. IGLESIAS MARCOS LM. medicina tradicional china. 1985;4:21 (esp).

198- gera: 15104/di/ra
[ETUDE DES COMPOSANTS ANTI-MITOTIQUES DE RABDOSIA NERVOSA]. XU MEIJUAN ET AL. chinese traditional and herbal drugs. 1985;16(2):3 (chi).

199- gera: 15105/di/ra

[DETECTION ET TRAITEMENT DES MICRO-CANCERS]. KOBAYASHI T. american journal of acupuncture.

1985;13(2):137-47 (eng).

Detection par analyses biologiques et traitement par vitamines A, C, E et plantes médicinales.

200- gera: 15106/di/ra

[DIAGNOSTIC DU CANCER PAR AURICULO-MEDECINE]. KLIEN MD ET AL. der akupunkturarzt aurikulotherapeut. 1985;1:20-1 (deu).

201- gera: 15107/di/ra

IDIAGNOSTIC PRECOCE DES MICRO-CANCERS PAR LE CANCER CHECK OF RELATED ACUPUNCTURE MERIDIAN]. KOBAYASHI T. american journal of acupuncture. 1985;13(1):63-8 (eng).

Il apparait une difference entre le groupe porteur de microcancer (au niveau du milligramme) et groupe sans cancer.

202- gera: 15108/di/ra

[PRESCRIPTIONS UTILISEES CONCERNANT EN CANCEROLOGIE]. HONG YEN MSU ET AL. bulletin of the oriental healing arts institute. 1985;10(6):223-51 (eng).

203- gera: 15109/di/tt

STRUCTURE ACTIVITY RELATIONSHIP ANALYSIS OF ANTICANCER CHINESE DRUGS AND RELATED AGENTS. LIEN EJ ET LI WY. oriental healing arts institute,los angeles. 1985;:150P (eng).

Etude de 120 plantes utilisées dans le traitement du cancer en médecine chinoise. Revue des études scientifiques ayant mis en évidence une activité cytotoxique et/ou anti-tumorale.

204- gera: 15110/di/ra

[DIFFERENCES ENTRE LE COTE DROIT ET GAUCHE **DETERMINES PAR RYODORAKU CHEZ LES PATIENTS** CANCEREUX]. KOBAYASHI T ET AL. american journal of acupuncture. 1985;13(3):241-6 (eng).

On observe une asymétrie dans la résistivité électrique des points d'acupuncture en cas de cancer. Discussion de la signification du phenomène.

205- gera: 15111/di/ra

[REVUE DES ETUDES CLINIQUES ET EXPERIMENTALES SUR LE TRAITEMENT DES TUMEURS PAR LA METHODE DE TONIFICATION DE LA RATE *]. LU LIN A ET AL. shanghai journal of tcm. 1985;12:38 (chi).

206- gera: 15112/di/ra

[EFFETS COMBINES DE L'IRRADIATION FRACTIONNEE ET DE LA MOXIBUSTION SUR LA TUMEUR TRANSPLANTEE CHEZ LA SOURIS]. DOU MONGHAU ET AL. acupuncture research quarterly. 1985;36:101-9 (eng).

207- gera: 15113/di/ra

[ACTIVITE ANTI-TUMORALE ET PRODUCTION DU FACTEUR DE NECROSE TUMORALE PAR PLANTES MEDICINALES CHINOISES]. HARANAKA K ET AL. journal

of tcm. 1985;5(4):271-8 (eng).

208- gera: 15114/nd/re

ANTITUMOR ACTIVITIES AND TUMOR NECROSIS **FACTOR PRODUCIBILITY OF TRADITIONAL CHINESE** MEDICINES AND CRUDE DRUGS. HARANAKA K ET AL. cancer immunol immunother. 1985;20(1):1-5 (eng).

209- gera: 16675/di/re

ACUPUNCTURE AND MALIGNANT PAIN PROBLEMS. FILSHIE J ET AL. european journal of surgical oncology. 1985;11(4):389-94 (eng).

210- gera: 18851/di/ra

CORONA DISCHARGE PHOTOGRAPHY OF HUMAN BREAST TUMOR BIOPSIES. REIN G. acupuncture and electrotherapeutics research. 1985;10(4):305-8 (eng).

211- gera: 19693/di/ra [OBSERVATION A LONG TERME SUR 150 CAS DE **CANCER NASOPHARYNGE TRAITES PAR LA DECOCTION FU ZHENG SHENG JIN ET RADIOTHERAPIE].** PAN MINGJI ET AL. chinese journal of integrated traditional and western medicine,. 1985;5(2):83 (chi*). La décoction "activation des défenses et stimulation de la sécrétion salivaire et des liquides organiques" est administrée dans les suites de la radiothérapie sur 2 à 3 ans ou plus. Au total 100 doses au minimum et 1200 doses au maximum (moyenne 400) sont administrées. La décoction diminue les séquelles de la radiothérapie. La survie à 5 ans est de 58 % et à 10 ans de 30.5 %, ce qui est supérieur à ce qui est rapporté avec la radiothérapie seule.

212- gera: 19803/di/ra

[TREATMENT OF LUNG CANCER WITH BORDIN METASTASIS BY USING INTRAVENOUS DRIP OF 10% EMULSION OF BRUCCA JAVANICA SEMINAL OIL]. SU SHOUYUAN ET AL. chinese journal of integrated traditional and western medicine. 1985;5(2):86 (chi*) 10 à 40 ml par jour : L'injection quotidienne pendant 30 jours constitue un traitement. 1 à 19 traitements ont été appliqués avec des doses totales de 70 à 740 g. Aucun effet secondaire (nausée, vomissement, leucopénie..) n'a été observé. Diminution de la pression intracranienne et amélioration des paralysies et de l'appétit.

213- gera: 22512/di/cg "LA DOULEUR EN CANCEROLOGIE". RIBETON L ET AL. 14ème congres national d'acupuncture, paris. 1985;:37-42

214- gera: 32282/di/ra

[TCM DIFFERENTIAL DIAGNOSIS OF FACIAL PARALYSIS TREATED BY ACUPUNCTURE COMBINED WITH INFRARED RADIATION]. ZHANG LUN, CHEN RUISHEN. journal of new chinese medicine. 1985;17(12):24 (chi).

215- gera: 32846/di/ra

IDR LU XIAO-FU'D EXPERIENCE IN TREATMENT OF METASTATIC CARCINOMA OF CERVICAL LYMPH WITH GECKO]. DING HOU-DI ET AL. zhejiang journal of traditional chinese medicine. 1985;21(1):4 (chi).

216- gera: 32878/di/ra

[TREATING BENIGN TUMOR WITH "HUA JIAN TANG"]. ZHAO ZHEN-XING. zhejiang journal of traditional chinese medicine. 1985;21(2):114 (chi).

217- gera: 36282/di/re

ESSAI RANDOMISE D'ANALGESIE ELECTRO-

ACUPUNCTURALE CONTRE ANALGESIE CLASSIQUE PER ET POST OPERATOIRES CHEZ LE PATIENT CANCEREUX. POULAIN P ET AL. bull cancer. 1985;72:342

218- gera: 40340/nd/re

TREATMENT OF THE ADVERSE EFFECTS OF RADIOTHERAPY OF NASOPHARYNGEAL CANCER AND ACUTE AND CHRONIC PHARYNGITIS WITH BIYANLING]. FENG SUO AN. journal of new chinese medicine. 1985;17(8):28. (chi).

219- gera: 40850/rd/ra

1178 CASES OF ESOPHAGUS-CARDIA CANCER TREATED WITH COMPOUND BAJIAO JINPAN DECOCTION]. MA JI FU. liaoning journal of traditional chinese medicine. 1985;9(8):23. (chi*).

220- gera: 40899/nd/re

THE CURATIVE VALUE OF SHENLING BAISHU POWDER IN TREATING THE ADVERSE EFFECTS IN **GASTROINTESTINAL TRACT CAUSED BY** RADIOTHERAPY AND CHEMOTHERAPY]. LI ZI XIU ET AL. guizhouyiyao. 1985;9(3):7-8 (chi*).

221- gera: 58567/nd/re

ANALGESIA POR ACUPUNTURA EN EL TRATAMIENTO POR RADIUM INTRACAVITARIO EN EL CANCER DEL UTERO. URGELLES MACHADO ET AL. rev cuba oncol. 1985;1(3):263-70 (esp*).

La acupuntura como metodo, existe desde los siglos V-II a.n.e. Ademas de otros factores terapeuticos, se le conocen dos propiedades fundamentales: analgesico y regulador de la energia. La acupuntura analgesica para operaciones quirurgicas comienza a desarrollarse en 1958 en China. Posteriormente, se extendio a Viet Nam y otros paises. En estos momentos, es un metodo que se desarrolla satisfactoriamente en muchos paises occidentales. Por otra parte, uno de los tratamientos por radiaciones para el cancer del utero (cuello y cuerpo) es la colocacion intrauterina y en la vagina, de radium 226. Como proceder analgesico empleamos los puntos 3 H y 6 B, los cuales se han utilizado con este mismo fin en la interrupcion del embarazo con resultados satisfactorios. A diez pacientes con diagnostico de cancer de utero tomadas al azar, se les aplico acupuntura para obtener analgesia y facilitar la colocacion del radium en la cavidad intrauterina y en la vagina. No se utilizo ningun tipo de medicamento complementario. Encontramos que el 70% de los casos se clasifico con resultados excelentes, el 10% con resultados buenos y el 20% con resultados regulares. Se observo ademas que hay una tendencia al incremento del umbral del dolor en la misma medida que aumenta la edad de las pacientes. Consideramos que este es un metodo util y sencillo que evita las complicaciones propias de la anestesia (AU)

222- gera: 15033/di/ra

[ETAT IMMUNOLOGIQUE DE PATIENTS AVEC CANCER TRAITES PAR ACUPUNCTURE]. XIA YUQIN ET AL. chinese acupuncture and moxibustion. 1986;6(2):17 (chi*).

223- gera: 15116/di/ra

AN APPROACH TO THE EFFECT ON TUMORS OF **ACUPUNCTURE IN COMBINATION WITH RADIOTHERAPY** OR CHEMOTHERAPY. XIA YUQING ET AL. journal of tcm. 1986;6(1):23-6 (eng*).

76 patients avec cancer (poumon, oesophage ou estomac) traîtés par chimiothérapie ou radiothérapie sont randomisés en 2 groupes : 1) acupuncture et 2) contrôle. L'acupuncture : 36E + 6MC associés à des points fonctions de la localisation et du syndrome, tonification, séance quotidienne de 15-30 minutes. Séries de 30 séances. On observe sous acupuncture : une élévation du poids, une amélioration des symptômes, une diminution des effets secondaires, un maintien ou une élévation des fonctions immunitaires (Rosette, leucocytes, plaquettes, mais non

224- gera: 15117/di/ra

[PLANTES FU-ZHEN DANS LE TRAITEMENT DU

CANCER]. WEN-YEN LI ET AL. oriental healing arts international bulletin. 1986;11(1):1-8 (eng).

225- gera: 15118/di/ra

[AGENTS ANTICANCEREUX DERIVES DE PLANTES MEDICINALES CHINOISES]. LEE KUO-HSIUNG. oriental healing arts international bulletin. 1986;11(2):53-72 (eng).

226- gera: 15121/di/ra

[CLASSIFICATION DES PLANTES CHINOISES ANTIMITOTIQUES ET SIGNIFICATIONS]. TIAN JINGZHEN. journal of shandong college of tcm. 1986;10(2):16 (chi).

227- gera: 16580/di/re
LAM QUA AND THE DEVELOPMENT OF A WESTERNIZED MEDICAL ICONOGRAPHY IN CHINA. GILMAN SL. medical history. 1986;30(1):57-69 (eng).

Dans l'oeuvre de Lam Qua, peintre cantonnais du XIXème, on trouve une série de portraits réalistes, à la peinture à l'huile, de malades porteurs de volumineuses tumeurs. Ce travail réalisé à la demande des médecins missionnaires, reflète la volonté de domination occidentale. Etude des rapports Chine/Occident dans l'évolution d'une iconographie médicale moderne en Chine. L'Europe a réussi à imposer aux chinois son mode de représentation, mais si les chinois l'ont accepté c'est pour le maitriser au profit de leurs propres aspirations nationales.

228- gera: 16730/di/ra
[AN ANALYSIS OF CURATIVE EFFECT OF 320 CASES OF GASTRIC CANCER TREATED WITH LI WEI HUA JIE **DECOCTION IN COMBINAISON WITH SURGICAL*1. PAN** MINGJI ET AL. chinese journal of integrated traditional and western medicine. 1986;6(5):268 (chi*).

229- gera: 16743/di/ra

[CLINICAL ANALYSIS OF THE TONGUE PICTURE IN 130 PATIENTS WITH PRIMARY LIVER CARCINOMA]. LI NAIMIN. chinese journal of integrated traditional and western medicine. 1986;6(3):143 (chi*).

230- gera: 18605/di/ra

SIGNIFICANCE OF MERIDIAN ABNORMALITES SPECIFIC TO CANCER. KOBAYASHI T. american journal of acupuncture. 1986;14(2):139-42 (eng).

231- gera: 19836/nd/re

EFFECTS OF A BLENDED CHINESE MEDICINE, XIAO-CHAI-HU-TANG, ON LEWIS LUNG CARCINOMA GROWTH AND INHIBITION OF LUNG METASTASIS, *. ITO H ET AL. japanese journal of pharmacology. 1986;41(3):307-14 (eng).

232- gera: 20550/di/ra

[ACUPUNCTURE MOXIBUSTION, ENKEPHALIN, IMMUNITY AND TUMOR]. CHENG BAIHUA. chinese acupuncture and moxibustion. 1986;6(5):28 (chi*). L'acupuncture peut entrainer la libération d'Enkephalines endogènes. L'auteur de l'article décrit la régulation de l'immunité, et l'action sur le mécanisme de croissance des tumeurs, de l'acupuncture, à partir de la libération d'enkephaline d'origine neurologique, en combinaison avec le développement de l'immunité moderne. En général, maladies et tumeurs sont traitées par régulation des fonctions immunitaires de l'organisme.

233- gera: 20601/di/ra

[CLINICAL AND EXPERIMENTAL STUDY ON THE ANTITUMOUR EFFEC OF COCKROACH EXTRACT]. CHEN LIMING ET AL. chinese journal of integrated traditional and western medicine. 1986;6(11):647 (chi*).

234- gera: 22469/di/ra

EFFECT OF ACUPUNCTURE ANESTHESIA FOR THYROIDECTOMY ON SISTER CHOROMATID **EXCHANGES (SCE) AND RNA/DNA RATIONS IN** LYMPHOCYTES]. LÍU YINTAO ET AL. acupuncture research. 1986;11(2):91-6 (chi*).

The effect of acupuncture anesthesia (AA) for thyroidectomy on SCE RNA/DNA ration in lymphocytes was studied in 11 cases blood samples from peripheral vein were collected prior

to AA (negative control), 3 hrs, and 6 days after AA and with mitomycin (positive control). One part of each sample was subjected to Bre Drd-dye technique for detection of SCE, the other part for RNA/DNA ratios measured by CTAB method. From the results we may conclude that the phenomenon of mutation could no be induced by AA and SCE. Analysis may be considered a fairly good indicator for mutagenic activity in the study of AA. The quantitative ratio of RNA/DNA in three groups were 11.033 (in preanesthesia), 7. 498 and 9. 159 (3 hrs and 6 days post-AA, respectively). There were no significant differences among the RNA/DNA ratios between pre- AA and post-AA samples. The fact that either SCE or RNA/DNA ratio did not show any significant changes after AA provided strong support to the concept that acupuncture is harmless in the respect of carcinogenesis.

235- gera: 22780/di/ra
[OBSERVATION ON THE CURATIVE EFFECT OF 44 CASES OF RADIOACTIVE RECTITIS AFTER TREATING CERVICAL CANCER]. ZHANG ZHAOHUA. chinese acupuncture and moxibustion. 1986;6(3):18-20 (chi*).

236- gera: 23257/di/ra

JA STUDY OF RELATIONSHIP AMONG INTESTINAL METAPLASIA, GASTRIC CARCINOMA AND SPLEEN **DEFICIENCY SYNDROME BY THE HISTOCHEMICAL** STAIN*]. YIN GUANGYAO ET AL. chinese journal integrated traditional and western medicine. 1986;6(7):392 (chi*)

Etude des relations entre gastralgies vide de rate, et le taux de métaplasie gastrique ou intestinale, et le taux plamatique de

237- gera: 23258/di/ra

JA PRELIMINARY STUDY ON RELATIONSHIPS BETWEEN SYNDROME DIFFERENTIATION OF 104 STOMACHACHE PATIENTS AND THEIR PATHO-HISTOLOGICAL*]. ZHU YUNHUA ET AL. chinese journal integrated traditional and western medicine. 1986;6(7):396 (chi*).

Différenciation de 104 cas de gastralgie en 3 types : vide du rechauffeur moyen et stagnation du Qi, dysharmonie entre foie et estomac, vide de Yin de l'estomac. L'étude anatomopathologique après gastrectomie montre une fréquence plus élevé des ulcères et des gastrites aigues dans le premier type (P<0,05). De même dans ce premier type sont également plus fréquents les métaplasies intestinales sévères et les cancers gastriques in situ.

238- gera: 23380/di/ra

[A RESEARCH ON ANTICARCINOGENIC ACTIVATION OF **ACORUS CALAMUS. ANTICARCINOGENIC ACTIVATION** OF ASARONE ON HUMAN CARCINOMA CELLS]. HU BOYUAN ET AL. chinese journal of integrated traditional and western medicine. 1986;6(8):480 (chi*).

239- gera: 24689/di/ra

STUDY ON THERAPEUTIC EFFECT OF **ELECTROACUPUNCTURE AND IRRADIATION ON MICE** BEARING SUBCUTANEOUS TUMOR. DOU-MONG HAU. acupuncture research quarterly. 1986;37:1-8 (eng). The effects of electroacupuncture (EA) and fractionated irradiation (RT) on mice bearing subcutaneous humor (ST) was investigated in the present study. A total of 300 male young mike (ICR strains), 6-8 weeks old were inoculated with Ehrlich ascitik tumor tells (1x10 7) into their subcutaneous sacral tissue. When each tumor had grown to 0.45 ± 0.2 cm3, the animals were divided into five groups. Groups A and B served as the normal and tumor controls. Group C was exposed to 3500 rads of 137 Cs gamma-rays in 10 fractions (one fraction each day). Group D was treated with EA in 10 fractions (one fraction each day). Group E was treated with a combination of EA and RT. The therapeutic effect, leukocyte counts and the biosynthetic rate of DNA in splenic lymphoid cells were also investigated. The results revealed that the best therapeutic effect was obtained from group E. Some therapeutic effects also occurred in group C. However, the effect is not conspicuous in the group treated with EA alone. The present result also revealed that total leukocyte, lymphocyte, neutrophil and monocyte counts were significantly higher in the experimental control group than in the normal control. Nevertheless, gamma-irradiation had a considerable inhibitory effect on total leukocyte counts in group C. Electroacupuncture brought about a recovery to the leukocyte counts and synthetic DNA rate in the splenic lymphoid cells of the gamma-ray irradiated mice bearing subcutaneous tumor.

240- gera: 24693/di/ra

EFFECTS OF ELECTROACUPUNCTURE ON CELLULAR IMMUNOCOMPETENCE OF X-IRRADIATED MICE. JING-CHONG WU ET AL. acupuncture research quarterly. 1986;10(3):77-83 (eng)

The present study was conducted to evaluate the effect of electroacupuncture (EA) on cellular immunocompetence of gamma-irradiated mice. One hundred and eighty young male mice (ICR strains) were divided into three groups. Group A served as the normal control. Group B, as the experimental control, was exposed to 400 rads of gamma-ray-irradiation. Group C, as the experimental group, was treated with EA after being exposed to gamma ray-irradiation. Six to eight mice from each group were sacrificed on days 1, 5, 12, 19, 26 and 33 post-irradiation. The body and splenic weights of mice in each group were measured. The degree of transformation in splenic cells of mice was determined by using mitogen stimulation. radioisotope incorporation and the scintillation spectrometer counting methods. The results revealed that irradiation with 400 rads of gamma-rays inhibited the body and splenic weights and exerted a pronounced inhibitory effect on the incorporative rate of 3H-thymidine after being stimulated by mitogens such as PHA, PWM, ConA and LPS in the splenic lymphoid cells. EA helped to restore cellular immunocompetence to the gamma ray-irradiated mice.

241- gera: 30265/di/ra

[14 CASES OF PELVIC NONVEGETATIVE TUMOR TREATED WITH COMBINATION OF TCM AND WESTERN MEDICINE]. YANG XUANZHI ET AL. fujian journal of traditional chinese medicine. 1986;17(2):22-9 (chi).

242- gera: 30269/di/ra

[ALKALOIDAL ANTICANCER PLANTS IN FUJIAN AND TAIWAN PROVINCES]. JIN QIYANG ET AL. fujian journal of traditional chinese medicine. 1986;17(2):45-60 (chi).

243- gera: 30274/di/ra

IOBSERVATION OF 7 SURVIVOR WITH ADVANCED PRIMARY HEPATOCARCINIMA TREATED WITH ELIMINATING THE STAGNANT AND ACTIVATING THE BLOOD *]. ZHANG KEPING. fujian journal of traditional chinese medicine. 1986;17(3):10-11 (chi).

244- gera: 30307/di/ra

THERAPEUTIC EFFECT OF 66 CASES OF PRIMARY LIVER CANCER TREATED WITH XIAO ZHENG YI GAN PIAN]. COOPERATIVE GROUP OF FUZHOU. fujian journal of traditional chinese medicine. 1986;17(6):16-7 (chi).

245- gera: 30527/di/ra

[EXPERIENCE IN TREATING TWO CASES OF LARYNGEAL TUMOR]. HUA LIANGCAI. journal of tcm. 1986;27(4):45-6 (chi).

246- gera: 30644/di/ra

[FOUR CASES OF LIVER CANCER TREATED ON THE BASIS OF SYNDROME-DIFF. CAO YONGKANG. journal of traditional chinese medicine. 1986;27(12):16-20 (eng).

247- gera: 31010/di/ra

[TREATMENT OF THE GERONTAL INTESTINE CANCER WITH CHINESE MEDICINE]. WANG XU-AO. journal of zhejiang tcm college. 1986;1(10):21 (chi).

248- gera: 31786/di/ra

[ANALYSIS OF THE THERAPEUTIC EFFECTS OF 78 CASES OF RECTAL CANCER TREATED BY TCM COMBINED WITH WESTERN MEDICINE]. MA JIFU. liaoning journal of tcm. 1986;10(1):11 (chi).

249- gera: 31787/di/ra

[THE INVESTIGATION ON THE APPLICATION OF "SUPPLEMENTING THE VITAL ENERGY (QI) AND NOURISHING YIN" AS THE MAIN METHOD TO*]. WANG XIMING. liaoning journal of tcm. 1986;10(1):15 (chi).

250- gera: 31809/di/ra

[ANALYSIS OF TONGUE PICTURES IN 100 CASES OF LUNG CANCER]. LI PEIWEN. liaoning journal of tcm. 1986;10(3):23 (chi).

251- gera: 31851/di/ra

[OBSERVATION OF TONGUE PICTURES ON 596 CASES OF CANCERS]. LIU JIAXIANG ET AL. liaoning journal of traditional chinese medicine. 1986;10(7):19 (chi).

252- gera: 33044/di/ra

[105 CASES WITH PULMONARY CARCINOSIS TREATED BY YANG SHAO-SHAN APPLYING "CLEAR AWAY LUNG-HEAT AND NOURISH YIN TANG"]. ZHOU XI-GUANG. zhejiang journal of traditional chinese medicine. 1986;21(5):489 (chi).

253- gera: 33083/di/ra

JACUPUNCTURE EFFECTS ON IMMUNOCOMPETENCE OF SMALL RAT WITH TUMOR]. LI YAN ET AL. zhejiang journal of traditional chinese medicine. 1986;21(8):376 (chi).

254- gera: 33156/di/ra

[ONE CASE EXPERIENCE OF TREATING MANDIBULAR ENAMELOBLASTOMA WITH TCM]. LU KAI. hubei journal of traditional chinese medicine. 1986;4:39 (chi).

255- gera: 40187/nd/re

[EFFECTS OF MATRINE ON THE INHIBITION OF THE PROLIFERATION OF P815 CANCER CELLS BY MACROPHAGES]. SHANG HONG SHENG ET AL. journal of beijing medical university. 1986;18(2):127-30 (chi*). Résumé Acme (870524). ACME:870524

256- gera: 40202/nd/re

[EFFECTS OF IRISQUINONE ON CYCLIC NUCLEOTIDES IN PLASMA. CANCER AND OTHER TISSUES OF MICE BEARING U14 TUMOR]. WANG SHI XIAN ET AL. chinese journal of clinical oncology. 1986;13(4):241-43 (chi*). Résumé Acme (870539). ACME:870539

257- gera: 40204/nd/re

[EFFECT OF SECRETIO BUFONIS INJECTION OF THE HEMOPOIETIC FUNCTION OF IRRADIATED MICE]. LIU JIA WEI ET AL. chinese journal of hematology. 1986;7(7):405-07 (chi*).

Résumé Acme (870541). ACME:870541

258- gera: 40287/rd/ra

[SURVIVAL OF SEVEN CASES OF ADVANCED PRIMARY HEPATOMA TREATED BY ELIMINATING STASIS, **ACTIVATING BLOOD, DISSIPATING HEAT AND** DETOXIFICATION]. ZHANG KE PING. fujian journal of traditional chinese medicine. 1986;17(3):10-1 (chi*).

259- gera: 40297/rd/ra

TREATMENT OF 136 CASES OF GASTROINTESTINAL CANCER WITH CHINESE MEDICINES]. ZHANG SHI XIONG. shaanxi traditional chinese medicine. 1986;7(3):111-12

Résumé Acme (870634). ACME:870634

260- gera: 40388/nd/re

[TREATMENT OF ADVANCED GASTRIC CANCER WITH MFO CHEMOTHERAPY AND CHINESE MEDICINES]. ZENG XIAN WEN ET AL. chinese journal of clinical oncology. 1986;13(3):145-46 (chi*)

Résumé Acme (870728). ACME:870728

261- gera: 40496/nd/re

[EFFECTS OF 10-HYDROXYCAMPTOTHECINE ON CHROMATIN PROTEIN SYNTHESIS IN MOUSE HEPATOMA CELLS]. LING YI HE ET AL. acta pharmacologica sinica. 1986;7(3):285-88 (chi*).

Résumé Acme (870886). ACME:870886

262- gera: 40544/nd/re

[COCARCINOGENIC EFFECTS OF EXTRACTS OF WILKSTROEMIA CHAMAEDADAPHNE AND TUNG OIL]. SUN YU ET AL. chinese journal of pathology. 1986;15(1):9-11 (chi*)

Résumé Acme (870934). ACME:870934

263- gera: 40604/nd/re

[TREATMENT OF 77 CASES OF BREAST CANCER WITH TENGHUANG]. LEI QIU MO ET AL. cancer research in prevention and treatment. 1986;13(2):111. (chi*). Résumé Acme (870994). ACME:870994

264- gera: 40940/di/ra

[TREATMENT OF 42 PATIENTS WITH ESOPHAGUS CARCINOMA BY COMPOUND LIZARD TINCTURE]. SONG HONG EN ET AL. journal of traditional chinese medicine. 1986;3:25-6 (chi*).

265- gera: 52389/di/ra

[INHIBITORY EFFECTS OF STELLERA CHAMAEJASME ON THE GROWTH OF TRANSPLANTABLE TUMOR IN MICE]. YANG BAO YIN ET AL. bulletin of chinese materia medica. 1986;11(1):55-6 (chi).

266- gera: 52807/di/ra
[ANTINEOPLASTIC ACTION OF EFFECTIVE COMPOUNDS FROM GUAN ZHOUG (DRYOPTERIS CRASSIRHIZOMA NAKAI)]. LI DEHUA ET AL. chinese traditional and herbal drugs. 1986;17(6):14-5 (chi).

267- gera: 11534/nd/re

[ACUPUNCTURE EFFECTIVENESS IN TREATING PATIENTS WITH LATE RADIATION DAMAGE TO THE SKIN]. X. voprosy kurortologii fizioterapii i lechebnoi fizichesskoi kultury. 1987;4:55-6 (rus).

268- gera: 19944/nd/re

[EFFECTIVENESS OF VARIOUS THERAPEUTIC SCHEMES FOR PATIENTS WITH RADIATION EDEMA OF THE EXTREMITIES]. KUZMINA EG ET AL. meditsinskaia radiologiia. 1987;32(3):18-22 (rus). Résumé anglais, août 1987.

269- gera: 20093/di/ra

ENHANCEMENT OF IMMUNOSURVEILLANCE IN CANCER PATIENTS. KOBAYASHI T ET AL. american journal of acupuncture. 1987;15(1):25-33 (eng).

270- gera: 20099/di/ra

AN EFFECTIVE PROGRAM FOR CANCER PREVENTION. KOBAYASHI T. american journal of acupuncture. 1987;15(3):215-20 (eng).

271- gera: 20103/di/ra

BENEFICIAL EFFECTS OF ELECTRICAL ACUPUNCTURE ON IRRADIATED MICE. SIN YM ET AL. american journal of acupuncture. 1987;15(3):239-44 (eng).

Severe systematic injury was induced in mice by exposing them to single doses of either 500r, 750r, or 1,000r whole body ionizing radiation. Following this, mice of the test group were given daily treatments of electrical acupuncture stimulation. The results demonstrated that acupuncture-treated irradiated mice showed a lesser decrease in percentage of blood cell components as compared to the untreated, irradiated mice. The acupuncture-treated 500r irradiated mice showed a significant increase in platelet count. However, this trend was absent in mice exposed to a higher dose of 750r after acupuncture treatment. From these findings, some possible mechanisms of acupuncture therapy on irradiated animals are discussed.

272- gera: 20263/di/ra [CLINICAL OBSERVATION OF TREATING CANCER OF STOMACH AND ESOPHAGUS BY ACUPUNCTURE]. CUI KAIXIAN. chinese acupuncture and moxibustion. 1987;7(2):7-9 (chi*).

Etude de 11 cas de cancer de l'oesophage et de 19 cas de cancer de l'estomac. L'acupuncture stimule les fonctions immunitaires et prolonge la survie, particulièrement chez les patients qui refusent la chimiothérapie et la chirurgie. Points principaux: 12VC, 36E, 6Rte, 17VC, 40E, 21V. Manipulation par enfoncement-retrait et rotation jusqu'à irradiation du degi à la région malade. Séance de 20 minutes avec manipulations ou électrostimulation.

273- gera: 20352/di/ra

EFFECT OF ACUPUNCTURE ON 44 CASES OF RADIATION RECTITIS FOLLOWING RADIATION THERAPY FOR CARCINOMA OF THE CERVIX UTERI. ZHANG

ZAOHUA. journal of tcm. 1987;7(2):139-40 (eng). Les rectites sont une complication fréquente des traitements par radiothérapie des cancers du col de l'utérus. Dans cette étude, portant sur 44 cas, on utilise l'acupuncture aux points 4GI, 25E, 37E, 36E combinés avec les points 6VC, 6Rte, 34VB, 39E. Il y a guérison dans 32 cas, amélioration importante dans 4 cas, amélioration dans 8 cas, pas d'échec. L'acupuncture présente une action analgésique, antiinflammatoire, et cicatrisante sur la muqueuse rectale. Elle régularise en outre le transit intestinal.

274- gera: 20360/di/ra
[USE OF "SRRS" RECIPE ON TREATMENT OF LATE STAGE LIVER CANCER PATIENTS AND THEIR EXPERIMENTAL INVESTIGATIONS]. QIU JIAXIN ET AL. chinese journal of integrated traditional and western medicine. 1987;7(5):275 (eng).

275- gera: 20436/di/cg

THE DUAL ACTIONS OF "EVEN MOVEMENF OF **NEEDLING" IN REGULATING BODY AND TUMOR** TEMPERATURE IN PATIENTS OF BENIGN TYROMA. XUE LIGONG ET AL. selections from articles abstracts on acupuncture and moxibustion, beijing. 1987;:149 (eng). Etude de la température cutanée au creux axillaire et de la température du centre du goitre prise par une aiguillethermométre. Traitement selon la technique du Dr Guo Xiazhong. Il existe une relation entre efficacité thérapeutique et diminution de la température au niveau du goitre.

276- gera: 20528/di/ra

[EFFECT OF LONG KUI INJECTION CO ON HEPATOMA H22 ASCITES TUMOUR CELLS IN MICE]. LÜ GUIZHI ET AL. chinese journal of integrated traditional and western medicine. 1987;7(2):97 (chi*).

277- gera: 20583/di/ra
[A CLINICAL STUDY ON TREATMENT OF MALIGNANT TROPHOBLASTIC NEOPLASIA WITH TRICHOSANTHIN]. HUANG YUELAN. chinese journal of integrated traditional and western medicine. 1987;7(3):154 (chi*).

278- gera: 20594/di/ra

ITREATING NASOPHARYNGEAL CARCINOMA WITH COMBINED RADIATION THERAPY AND TONG QIAO HUO XUE DECOCTION]. LIAO YUPING ET AL. chinese journal of integrated traditional and western medecine. 1987;7(4):214 (chi*)

A series of 57 cases with nasopharyngeal carcinoma treated by different regimes were analyzed. The patients were divided into two groups randomly, one group used combined radiotherapy with Tong Qiao HUG Xue decoction and another radiotherapy alone, as a control. The method and dose of irradiation were similar in both groups. The cancer reduced in size quickly in the combined group than the control when the given dose reached 45 Gy (P<O.oS). The results showed that the decoction used in the combined group raised the radiosensitivity/ of the tumor. The 3- and 5- year survival rates for the combined group were 48.4% and 41.9%, and for the control 42.3°., and 30.8% respectively. The percentage of the combined group was superior to that with radiotherapy alone but was not significant statistically

279- gera: 20659/di/ra

[CLINICAL AND EXPERIMENTAL OBSERVATION OF QIGONG THERAPY FOR POSTOPERATIVE MALIGNANT TUMOR OF GI TRACT]. LIU DEFU ET AL. chinese journal of integrated traditional and western medicine.

1987;7(8):465 (chi*).

This article reports multiparameter such as fibronectin, WBC count, factor VIII related antigen, immunologic reaction, cancer embryonic antigen (CEA) and the tongue picture were used to observe their changes before and after Qigong exercises. All of the cases were pathologically confirmed GI tract malignant tumor patients with lymphatic metastasis who received surgical operations. Most of their CEA value were higher than 15 ng/ml (normal value < 15 ng/ ml). Number of cases were 31, male 19, female 12. After Qigong exercise their serum fibronectin and WBC count increased, P < 0.001 and P < 0.05 respectively. The .tongue picture also had some changes, part of the yellow slimy coating evolved into white slimy or white thin coating, the signs of blood stasis in tongue also improved somewhat, but immunologic reaction and CEA remained stable and unchanged such as the rate of lymphoblastic transformation, IgG, IgA, IgM, etc.. (P > 0.05). The results of the above mentioned examinations revealed that Qigong exercises was beneficial to the GI malignant tumor patients. Because only over two months training was performed, a longer follow up is necessary, so that the CEA and other parameters may improve. The importance of Qigong meditation was discussed. It was conceived that the Qigong meditation could reach a "Qigong Status", which caused the plasma cortisol decrease. In Qigong Status, the function of protective inhibition of the brain enhanced. Qigong exercise could also dredge the channel system, harmonize Qi and blood and strengthen the function of nonspecific resistance against diseases.

280- gera: 20687/di/ra

[BRIGHT PROSPECTS FOR TMC-WM TREATMENT OF TUMOR]. EDITORIAL. chinese journal of integrated traditional and western medicine. 1987;7(12):711 (chi*).

281- gera: 20689/di/ra

[CLINICAL AND EXPERIMENTAL STUDIES OF SHENGXUE TANG COMBINED WITH CHEMOTHERAPY IN TREATING LATE STAGE GASTRIC CANCER]. RAO XIEQING ET AL. chinese journal of integrated traditional and western medicine. 1987;7(12):715 (chi*).

282- gera: 20692/di/ra

[A STUDY OF BLOOD STASIS AND CANCER WITH EXTRACORPOREAL THROMBOSIS AND BLOOD PLATELET ADHERENCE]. X. chinese journal of integrated traditional and western medicine. 1987;7(12):726 (chi*).

283- gera: 20695/di/ra

[A PRELIMINARY STUDY ON RELATIONSHIP BETWEEN "LINE OF GANYIN" AND HEMORHEOLOGY OF PRIMARY LIVER CANCER PATIENTS]. WANG RONGPING. chinese journal of integrated traditional and western medicine. 1987;7(12):734 (chi*).

284- gera: 20696/di/ra [A STUDY OF PSORALEA CORYLIFOLIA EXTRACT AGAINST AMINO-FORMAL ETHYLATE INDUCED LUNG ADENOCARCINOMA IN MICE]. YANG YICAN ET AL chinese journal of integrated traditional and western medicine. 1987;7(12):736 (chi*).

285- gera: 20698/di/ra

[SOME SUGGESTION OF RESEARCH ON TCM-WM PREVENTION AND TREATMENT OF TUMOR WITH DEVELOPMENT IN DEPTH]. YU RENCHUN. chinese journal of integrated traditional and western medicine. 1987;7(12):745 (chi*).

286- gera: 20699/di/ra

[ADVANCE ON TCM-WM PREVENTION AND TREATMENT OF TUMOR AND STUDY OF ANTI-CANCER TRADITIONAL CHINESE DRUGS]. YU GUIQING ET AL. chinese journal of integrated traditional and western medicine.

1987;7(12):757 (chi*).

287- gera: 20976/di/cg

ACUPUNCTURE FOR TREATMENT OF PAIN ASSOCIATED WITH MALIGNANCY. AUNG S. in compilation of the abstracts of acupuncture and moxibustion papers, beijing. 1987;:53 (eng).

288- gera: 21202/di/ra

IRELATIONSHIP BETWEEN TONGUE PICTURE AND **EPITHELIAL CELLS OF TONGUE IN PATIENTS WITH** GASTRIC CANCER. AN ANALYSIS OF 50 CASES]. QIN JIHUA ET AL. chinese journal of integrated traditional and western medicine. 1987;7(1):30 (chi*).

289- gera: 21226/di/cg

EXPERIMENTAL STUDY OF ANTITUMOR EFFECT OF MOXIBUSTION. YANG YOUMI ET AL. in compilation of the abstracts of acupuncture and moxibustion papers, beijing. 1987;:181 (eng).

290- gera: 21227/di/cg INDUCTION OF TUMOR RESISTANCE IN MICE BY **ACUPUNCTURE STIMULATION AND-PHENYLALANINE** ADMINISTRATION (abstract). NORIO SHIMURA ET AL. in compilation of the abstracts of acupuncture and moxibustion papers, beijing. 1987;:182 (eng). Acupuncture et D-Phénylalanine diminuent de façon significative la croissance du sarcome-180 chez la souris.

291- gera: 21228/di/cg
ENHANCEMENT OF IMMUNE RESPONSIVENESS AND ANTITUMOUR EFFECT BY ACUPUNCTURE AND D-PHENYLALANINE (abstract). NORIO SHIMURA ET AL. in compilation of the abstracts of acupuncture and moxibustion papers, beijing. 1987;:183 (eng). L'acupuncture inhibe la croissance du sarcome-180 chez la souris. Cet effet est renversé par Levallorphan, un antagoniste de la morphine.

292- gera: 22022/di/cg
THE PRELIMINARY EXPLORATION OF USE ON DIAGNOSING TUMOUR WITH DETERMINING TEMPERATURE OF ACUPOINTS. BAI ZHENQIN ET AL. in selections from article abstracts on acupuncture and moxibustion, beijing. 1987;:160-1 (eng).

293- gera: 22156/di/re

ANTIMACASSARS GINSENG AND JUNKS. HUMPHRIES M. british medical journal (clinical research ed).

1987;295(6613:1646-7 (eng).

Courte note de voyage à Canton d'un médecin anglais à l'occasion d'un congrès de pathologie pulmonaire (diagnostic des tumeurs par glossoscopie, traitements par phytothérapie...).

294- gera: 22308/nd/re

[ACUPUNTURE EFFECTIVENESS IN TREATING PATIENTS WITH LATE RADIATION DAMAGE TO THE SKIN]. X. voprosy kurortologii, fiziioterapii i lechebnoi fizicheskoi kultury. 1987;:55-6 (rus).

295- gera: 22394/di/th

ACUPUNCTURE ET TOXICITES DIGESTIVE HAUTE ET GENERALE DE LA CHIMIOTHERAPIE ANTICANCEREUSE. LAN CHOW WING TF. these medecine, bordeaux 2.

1987;:52P (fra).

La chimiothérapie des cancers mammaires présente une toxicité digestive (et générale) importante. Notre but est d'évaluer l'utilité de l'acupuncture dans ce domaine par l'étude comparative de deux protocoles, l'un antiémétique et l'autre neurosédatif. Nous avons réalisé un essai clinique randomisé, en simple aveugle, à la Fondation Bergonié sur des patientes traitées en ambulatoire par un des protocoles chimiothérapiques suivants : AVM, CMF, EVM, MTV. Les malades étaient séparées en deux groupes pour plus d'homogénéité statistique. Groupe A : patientes traîtées par acupuncture dès leur premier cycle de chimiothérapie. Groupe B : patientes résistantes à un traitement antiémétique classique bien conduit. Une analyse statistique n'a été possible que pour le groupe A. L'acupuncture semble utile dans ce domaine ; le protocole antiémétique semble supérieur au protocole neurosédatif.

296- gera: 22691/di/el

COLITIS: A COMPLICATION OF RADIATION THERAPY IN THE TREATMENT OF CERVICAL. A STUDY OF 104 CASES, XIONG NANG HUA ET AL. in colitis and scleroderma, harmonious sunshine cultural center, san francisco. 1987;:71-5 (eng).

297- gera: 23285/di/ra

EFFECTS OF MICROWAVE ACUPUNCTURE ON THE IMMUNOLOGICAL FUNCTION OF CANCER PATIENTS. CHENGJIANG H ET AL. journal of traditional chinese medicine. 1987;7(1):9-11 (eng).

298- gera: 24169/di/re

LES MEDECINES ALTERNATIVES OU PARALLELES EN CANCEROLOGIE. SCHRAUB S. concours medical.

1987;109(25):2303-9 (fra).

De nouvelles méthodes parallèles non prouvées sont apparues ou ont pris une certaine diffusion en France, qu'il s'agisse de l'iridologie pour le dépistage des terrains cancéreux ou du traitement par produits chimiques, vitamines, et surtout régimes. Les derniers en date, le régime du Dr Kousmine et l'instinctothérapie, rejoignent les très nombreux produits et régimes recommandés comme traitement du cancer. Une grande partie des traitements parallèles trompe le public en lui faisant croire qu'un retour à la nature permettra au corps entier de reprendre le dessus d'une maladie probablement déclenchée par notre civilisation moderne. Dans d'autres cas, la confusion entre conseil alimentaire préventif et régimes thérapeutiques permet à certains de diffuser des méthodes pouvant faire perdre des chances de guérison au malade. Les traitements psychologiques et psychiatriques méritent une approche particulière lorsqu'ils sont employés par des gens compétents comme support pour passer un cap difficile, à condition qu'ils soient imposés au patient et que ces derniers n'abandonnent pas leur thérapeutique efficace. Il convient de signaler une modification récente de la prescription des traitements parallèles, il sont actuellement prônés comme adjuvants des traitements classiques, ce qui permet à leurs promoteurs de n'encourir aucune condamnation morale ou pénale. L'évolution sociologique de la maladie aboutit à une prise en charge plus importante de son affection par le patient, ce qui oblige le praticien à fournir un plus grand nombre d'explications au malade. Le généraliste a donc besoin de beaucoup d'informations sur ces traitements parallèles. Quant à l'expérimentation des thérapeutiques parallèles, celle-ci se heurte à deux obstacles de taille, l'absence d'accord sur la méthodologie de l'essai employé, car la grande majorité des tenants des thérapeutiques parallèles refuse la méthodologie des essais thérapeutiques, notamment l'essai randomisé, et l'importance des crédits à mettre en oeuvre qui seraient ainsi détournés de l'expérimentation de produits porteurs d'espoir.

299- gera: 24238/di/ra

BODY RESISTANCE SUPPORTING TREATMENT OF TCM FOR ADVANCED PRIMARY LUNG CANCER OF NON SMALL- CELL TYPE. LIU JIAXIANG ET AL. international conference on tcm and pharmacology, shanghai. 1987;:427-9 (eng).

300- gera: 24239/di/ra

TREATMENT OF POSTOPERATIVE ADVANCED GASTRIC CANCER WITH "SUPPORTING THE RIGHTEOUS AND ANTI- CANCER" HERBS. WANG GUANTING ET AL. international conference on tcm and pharmacology, shanghai. 1987;:430-1 (eng).

301- gera: 24240/di/ra

EFFECT OF TRADITIONAL CHINESE MEDICINE TO IMPROVE BODY HEALTH AND SURVIVABILITY OF ADVANCED LUNG CANCER PATIENTS. PIAO BINGKUI. international conference on tcm and pharmacology, shanghai. 1987;:432-3 (eng).

302- gera: 24241/di/ra

CLINICAL RESEARCH ON THE THERAPEUTIC EFFECTS

OF HECHAN TABLETS IN LUNG CANCER. ZHOU DALHAN ET AL. international conference on tcm and pharmacology, shanghai. 1987;:434-5 (eng).

303- gera: 24242/di/ra

EXPERIENCE IN THE TREATMENT OF INTRACRANIAL TUMOR. QIAN BOWEN ET AL. international conference on tcm and pharmacology, shanghai. 1987;:436-7 (eng).

304- gera: 24243/di/ra

METHODS OF SOOTHING LIVER REDUCING PHLEGM AND CEASING WIND IN TREATING PRIMARY TUMOURS OF CENTRAL NERVOUS SYSTEM. YU MIN ET AL. international conference on tcm and pharmacology, shanghai. 1987;:438-40 (eng).

305- gera: 24244/di/ra SPLEEN-STENGTHENING AND QI-REGULATING PRINCIPLE IN TREATING PRIMARY LIVER CANCER. YU ERXIN ET AL. international conference on tcm and pharmacology, shanghai. 1987;:441-2 (eng).

306- gera: 24245/di/ra

TREATMENT OF PRIMARY HEPATIC CANCER OF THE II AND III STAGES WITH CHINESE MEDICINAL HERBS. PAN MINQUI ET AL. international conference on tcm and pharmacology, shanghai. 1987;:443-4 (eng).

307- gera: 24246/di/ra

TREATMENT OF PRIMARY HEPATIC CARCINOMA WITH TCM. LEI YOUNZHONG ET AL. international conference on tcm and pharmacology, shanghai. 1987;:445-6 (eng).

308- gera: 24247/di/ra

CHINESE HERBAL TREATMENT FOR MALIGNANT TUMORS OF DIGESTIVE SYSTEM AND ITS EXPERIMENTAL STUDY. QIU JIAXIN ET AL. international conference on tcm and pharmacology, shanghai. 1987;:447-8 (eng).

309- gera: 24249/di/ra

TREATING CANCER OF THE LARGE INTESTINE (III STAGE, POST SURGERY) WITH AN INTEGRATED TREATMENT OF TCM AND WESTERN MEDICINE. SUN GUIZHI ET AL. international conference on tcm and pharmacology, shanghai. 1987;:451-2 (eng).

310- gera: 24250/di/ra AN OBSERVATION OF THE CLINICAL VALUE OF

ABNORMAL SUBLINGUAL VEINS. CHEN JIANMIN ET AL. international conference on tcm and pharmacology, shanghai. 1987;:453-4 (eng). Etude clinique des veines sublinguales chez 400 patients avec cancer comparés à 280 patients non cancéreux. L'examen porte sur 1) La présence de varicosités, 2) La longueur de la manche principale, 3) Le trajet, 4) La couleur, 5) Le diamètre, 6) Les colatérales. Les anomalies sont plus fréquentes dans le groupe des patients cancéreux dans le sens d'une stase du

311- gera: 24253/di/ra

EFFECT OF CORDYCEPIN ON IMMUNITY OF CANCER PATIENTS. ZHAO GUANLIN ET AL. international conference on tcm and pharmacology, shanghai. 1987;:461-2 (eng).

312- gera: 24257/di/ra

EFFECT OF BENEFITING QI ON LEUKOCYTES AFTER CHEMOTHERAPY. ZHANG LIYIN ET AL. international conference on tcm and pharmacology, shanghai. 1987;:469-70 (eng).

313- gera: 24259/di/ra

TREATING LEUKEMIA AND MALIGNANT HISTIOCYTOSIS SUCCESSFULLY USING THE THEORY OF FEBRILE DISEASES CAUSED BY LATENT EVIL. JIANG JIANFU. international conference on tcm and pharmacology, shanghai. 1987;:474-6 (eng).

314- gera: 24351/di/ra **OBSERVATION ON TREATMENT OF 50 CASES OF**

LEUKOPLASIA WITH ATYPICAL HYPERPLASIA BY HERBAL MEDICINE TO PREVENT PRECANCEROUS AND*. CHEN XIYI ET AL. international conference on tcm and pharmacology, shanghai. 1987;:691-2 (eng). 1000 cas confirmés de leucoplasie vulvaire ont été traités entre 77 et 86. Parmi eux 50 cas d'hyperplasie atypique considérée comme précancéreuse (6 de stade II, 44 stade I) âgés entre 26 et 70 ans, durée de l'évolution 3 mois à 46 ans. Ces 50 patientes ont été traitées par phytothérapie : bains et applications locales (cf.liste des plantes). Dans les stades II une préparation est aussi donnée par os (cf. liste). Les résultats sont obtenus après 6 mois à 1 an de traitement. Guérison dans 20 cas (40%), très nette amélioration 15 cas (30%), légère dans 12 cas (20%). Pas d'évolution cancéreuse observée. La leucoplasie est liée à un dysfonctionnement énergétique entre foie, rate et rein. La phytothérapie en question, révitalise le sang, élimine la stagnation, tonifie la rate et le rein et chasse le vent-chaud.

315- gera: 24356/di/ra

EFFECT OF MEDICINAL CAKE (ROD) ON EARLY CERVICAL CANCER. YANG XUÈZHI ÉT AL. international conference on tcm and pharmacology, shanghai. 1987;:700-1 (eng).

Après avoir calciné de l'arsenic et de l'alun selon un procédé traditionnel alchimique, on y incorpore du réalgar et Commiphora Myrrha afin de faire des ovules gynécologiques. L'ovule est placé dans le canal cervical ou sur le col provoquant une nécrose des tissus, puis se détachent et sont expulsés provoquant une "conisation clinique" traitant ainsi le cancer débutant du col. Cette thérapie a été établie après de longs essais cliniques, chimiques, toxicologiques et pharmacologiques. L'indication en est le carcinome intra épithélial, le carcinome épithélial du col la, et les lésions précancéreuses du col. De 1973 à 86, 140 cas de cancer intraépithélial et 93 cas de stade la ont été traités ainsi. 8 décèdent de maladies internes entre 3 et 9 ans après le traitement, 1 d'un cancer primaire du Poumon, 2 d'accidents. 222 vont bien, 184 ont été suivies au-delà de 5 ans, 78 audelà de 10 ans. La survie dans ces deux cas est de 100%. 4 femmes stade la ont donné naissance à des enfants. Cette thérapie n'a pas d'effets secondaires, elle maintient les fonctions physiologiques et la fertilité, évitant complications et séquelles de la chirurgie et radiothérapie.

316- gera: 24406/di/ra

THE CLINICAL OBSERVATION ON THE TREATMENT OF **CANCER BY ELECTROHEATED NEEDLE. TANG** XUEZHENG. international conference on tcm and pharmacology, shanghai. 1987;:813-4 (eng).

317- gera: 24609/di/ra

EFFECT OF "EXTERNAL QI" ON CANCER CELLS. LIU DEFU ET AL. international conference on tcm and pharmacology, shanghai. 1987;:1008-9 (eng).

318- gera: 24610/di/ra

EFFECTS OF "EXTERNAL QI" OF QIGONG ON HUMAN LIVER CANCER CELLS (BEL-7402). CHEN YUANFENG ET AL. international conference on tcm and pharmacology, shanghai. 1987;:1010-1 (eng).

319- gera: 25289/di/cg

A STUDY OF ELECTROSTIMULATION OF ACUPOINTS ON ALLEVIATING THE HARM OF HEMOGRAM INDUCED BY ANTICANCER DRUGS (abstract). NIU HAITONG ET AL. selections from article abstracts on acupuncture and moxibustion, beijing. 1987;:608. (eng*). Stimulation chez le lapin des points JING (electrostimulation directe sans aiguille). Différence significative par rapport au groupe de contrôle quant au nombre de leucocytes après

320- gera: 25290/di/cg

médicaments antibiotiques.

EFFECTS OF ACUPUNCTURE ON LEUKOCYTE PHAGOCYTOSIS. ZHOU YOUNGXIANG ET AL. selections from article abstracts on acupuncture and moxibustion,

beijing. 1987;:608 (eng*).

Etude chez 66 patients: 40 avec tumeurs malignes et 26 avec lésions inflammatoires. Les patients sont répartis en deux groupes: acupuncture (36E, 6MC ou 6Rte) ou contrôle. L'acupuncture élève de façon significative la phagocytose. Voir article complet réf. GERA [22888].

321- gera: 25310/di/cg

EXPERIMENTAL STUDY OF ANTITUMOR EFFECT OF MOXIBUSTION (1). YANG YOUMI ET AL. selections from article abstracts on acupuncture and moxibustion, beijing. 1987;:629 (eng).

322- gera: 25311/di/cg EXPERIMENTAL STUDY OF ANTITUMOR EFFECT OF MOXIBUSTION.(3). YANG YOUMI ET AL. selections from article abstracts on acupuncture and moxibustion, beijing. 1987;:630 (eng).

323- gera: 26438/di/el

CANCER PAIN AMELIORATED BY INTRATHECAL INJECTION OF DYNORPHIN A-(1-13)-AMIDE. HAN JS ET AL. in han js, the neurochemical basis of pain relief by acupuncture, beijing. 1987;:261-262 (eng) Résumé de l'article paru dans Journal of Beijing Medical University 18 (2): 111-112, 1986.

324- gera: 30049/di/ra

ISTUDY ON THE EFFECT OF QIGONG WAIQI ON HUMAN CARCINOMA CELLS]. FENG LIDA ET AL. acta medica sinica. 1987;2(5):18-20 (chi).

325- gera: 30052/di/ra

[ANTINEOPLASTIC ACTION OF STEROID GLYCOSID OF CYNANCHUM BUNGEI DECNE]. GU LIGANG ET AL. acta medica sinica. 1987;2(5):25-26 (chi).

326- gera: 30137/di/ra

[CLINICAL EVALUATION OF CHINESE TRADITIONAL MEDICINE FOR LUNG CANCER: A REPORT OF 95 CASES]. CHEN REI-SHEN ET AL. beijing journal of traditional chinese medicine. 1987;(1):18-19 (chi).

327- gera: 30146/di/ra

[CLINICAL INVESTIGATION OF 303 CASES OF ESOPHAGEAL CARCINOMA TREATED COORDINATELY BY ACUPUNCTURE]. HAO WEN-SHENG. beijing journal of traditional chinese medicine. 1987;(1):36 (chi).

328- gera: 30184/di/ra

[COMPARATIVE THERAPEUTIC EFFICACY OF CHINESE TRADITIONAL LIVER COMPOSITUS, RADIOTHERAPY, AND CHEMOTHERAPY FOR 112 CASES OF MODERA*]. LI YUEHENG. beijing journal of traditional chinese medicine. 1987;(3):36-38 (chi).

329- gera: 30356/di/ra

[CANCER AND PICTURE OF THE TONGUE]. TONG GUOQUON ET AL. fujian journal of traditional chinese medicine. 1987;18(4):23-4 (chi).

330- gera: 30369/di/ra

[AN ADVANCED CASES OF LIVER CANCER TREATED BY SLOW ATTEMPT TO NOURISH YIN]. YAN WANGGUI. fujian journal of traditional chinese medicine. 1987;18(6):33-44

331- gera: 30372/di/ra

[ALKALOIDS OF ANTICANCER PLANTS IN FUJIAN AND TAIWAN PROVINCE (CONTINUED)]. HUAN ZHEYUAN ET AL. fujian journal of traditional chinese medicine. 1987;18(6):50-5 (chi).

332- gera: 30738/di/ra

ICLINICAL STUDY AND MECHANISM ON TREATMENT OF PRIMARY LIVER CANCER BY INVIGORATING SPLEEN AND REGULATING QI]. YU ERXIN ET AL. journal of traditional chinese medicine. 1987;28(7):28-30 (chi).

333- gera: 30746/di/ra

[DIAGNOSIS AND TREATMENT OF ESOPHAGEAL CANCER AND GASTRIC CANCER]. WANG JIMIN ET AL. journal of traditional chinese medicine. 1987;28(9):10-2

334- gera: 31292/di/ra

[EXPERIENCE OF LIU JIAXIANG FOR TREATMENT OF MALIGNANT CEREBROMA]. XU ZHENYE. shanghai journal of tcm. 1987;7:8 (chi).

335- gera: 31649/di/ra

[CARCINOMA OF BREAST TREATED BY QI JIA JUAN YAN DECOCTION, A REPORT OF 1 CASE]. HU RONGXUE ET AL. shaanxi journal of tcm. 1987;8(4):165 (chi).

336- gera: 31693/di/ra
[LATE GASTRIC CANCER TREATED BY MATERIA MEDICA WITH CHEMOTHERAPY]. GONG HAO. shaanxi journal of tcm. 1987;8(7):310 (chi).

337- gera: 32068/di/ra

[CLINICAL OBSERVATION ON USE OF MAJOR QI-RECEPTION DECOCTION WITH ADDITIVES FOR PREOPERATIVE IN PATIENTS OF LARGE INTESTINE CANCER]. YE ZHAOWEN. shanghai journal of traditional chinese medicine. 1987;10:26 (chi).

338- gera: 32218/di/ra

[TALK ABOUT NEOPLASTIC DISEASE RECORDED, IN BOOK "THE CANON OF INTERNAL MEDICINE"]. ZHOU GOO-QI. journal of tcm and chinese materia medica of jilin. 1987;3:1 (chi).

339- gera: 32548/di/ra

[TONGUE PICTURE OF ESOPHAGEAL CARCINOMA: A STUDY OF 100 CASES]. LIN HAOJIANG. journal of new chinese medicine. 1987;19(10):13 (chi).

340- gera: 32564/di/ra

[THE PILL OF RADIX MOMORDICAE FOR THE PREVENTION OF RECURRENCE OF MALIGNANT TUMOR AFTER OPERATION]. LU WENQI. journal of new chinese medicine. 1987;19(11):21 (chi).

341- gera: 32674/di/ra

[THE RELATIONSHIP BETWEEN TYPES OF TONGUE AND **BLOOD CIRCULATION HEMORHEOLOGY IN ESOPHAGUS** CANCER PATIENTS]. LI PEIWEN. journal of beijing tcm college. 1987;6:42 (chi).

342- gera: 32727/di/ra

[PRELIMINARY OBSERVATION OF EFFECTING ON CANCER OF SMALL WRITE RAT WITH THE "OUTER QI"]. X. breath exercice (an exercice for health and longevity). 1987;7(2):150 (chi).

343- gera: 32736/di/ra

[EXPERIMENTAL OBSERVATION ON TREATMENT OF MALIGNANT TUMOR WITH "ZHOU TIAN MING MENG GONG"]. HOU SHENG ET AL. breath exercice (an exercice for health and longevity). 1987;7(3):101 (chi).

344- gera: 32795/di/ra

[OBSERVATION ON QI GONG SELF-CONTROL METHOD AFFECTING SELF-ELIMINATION RATE OF CANCEROUS PATIENT(S PERIPHERY BLOOD CELLS]. HU XUE-LIAN ET AL breath exercise (an exercise for health and longevity). 1987;8(4):147 (chi).

345- gera: 32826/di/ra

["ZHEN-FA" INDUCING INTERFERON TO TREAT CARCINIMA. OBSERVATION ON 18 CASES]. NI YONG-WEN ET AL. breath exercice (an exercice for health and longevity). 1987;8(11):498 (chi).

346- gera: 32947/di/ra

TREATING MALIGNANT TUMOR OF DIGESTIVE SYSTEM IN GROUPS WITH HERBA SARCANDRAE AND

GOSSYPOL]. HU BU-JU ET AL. zhejiang journal of traditional chinese medicine. 1987;22(9):400 (chi).

347- gera: 33204/di/ra

[CLINICAL ANALYSIS ON 45 CASEE OF THYROID TUMOR TREATED BY TCM]. TANG YING. hubei journal of traditional chinese medicine. 1987;4:17 (chi).

348- gera: 33208/di/ra

[APPLICATION OF "DISPERSING STASIS AND ALLEVIATING PAIN PASTE" IN TREATING TUMORS]. SUN ZHONGYI. hubei journal of traditional chinese medicine. 1987;4:25 (chi).

349- gera: 33229/di/ra

[ONE CASE REPORT FOR CURING STOMACH CANCER]. LI BIYI. hubei journal of traditional chinese medicine. 1987;6:28 (chi).

350- gera: 38868/di/re

ACUPUNCTURE TO PREVENT CISPLATIN-ASSOCIATED VOMITING. DUNDEE JW ET AL. lancet. 1987;1:1083. (eng). Etude chez 10 patients recevant une chimiothérapie par Cisplatin pour cancer du testicule. Chaque patient subit 5 à 6 séances sur 3 jours, séances espacées d'au moins 8 h (electroacupuncture au 6MC). Une séance est réalisée avec un point placebo au niveau du coude. Le 6MC a un effet antiémétique significativement supérieur au point placebo.

351- gera: 40485/nd/re

JEFFECT OF ORIDONIN AND BLEOMYCIN A5 ON DNA SYNTHESES IN TUMOR AND BONE MARROW CELLS]. SHOU MA GANG ET AL. acta pharmacologica sinica. 1987;8(1):83-6 (chi*).

Résumé Acme (870875). ACME:870875

352- gera: 41113/nd/re

[RADIOPROTECTIVE EFFECT OF ANGELICA SINENSIS]. ZHANG LI QIN ET AL. chinese journal of radiological medicine and protection. 1987;7(4):281. (chi*). Résumé Acme (880106). ACME:880106

353- gera: 41210/nd/re

TREATMENT OF EARLY HEPATOMA WITH COMPOUND MUJI GRANULE]. HAN XUE HUA ET AL. chinese journal of cancer. 1987;6(1):46-8 (chi*). Résumé Acme (880203). ACME:880203

354- gera: 41486/rd/ra

[TREATMENT OF 112 CASES OF PRIMARY HEPATOMA, A COMPARISON BETWEEN HERBAL DECOCTIONS, CHEMOTHERAPY AND RADIOTHERAPY]. PAN MIN QIU ET AL. beijing journal of traditional chinese medicine. 1987;3:36-8 (chi*).

355- gera: 41627/nd/re

IPREVENTION OF CANCER WITH ROSA ROXBURGHII JUICE. III. INHIBITION OF THE FORMATION OF N NITROSOPROLINE IN MAN]. LIN DONG XIN ET AL. journal of beijing medical university. 1987;19(6):383-85 (chi*). Résumé Acme (880715). ACME:880715

356- gera: 41644/nd/re

JEFFECTS OF DANGGUI BUXUETANG INJECTION ON CELLULAR IMMUNITY INPATIENTS RECEIVED BRAIN TUMOR OPERATION]. WANG YI CHENG ET AL. chinese journal of immunology. 1987;3(6):356-57 (chi*). Résumé Acme (880732). ACME:880732

357- gera: 41748/nd/re

[TREATMENT OF CHEMOTHERAPY-INDUCED LEUKOPENIA WITH GINSENOSIDES]. ZHOU JI CHANG ET AL. cancer research on prevention and treatment. 1987;14(3):149-50 (chi*). Résumé Acme (880836). ACME:880836

358- gera: 41749/nd/re

TREATMENT OF 47 HEPATOCARCINOMA WITH LIANHUA TABLET]. ZHENG RU QI ET AL. guangzhou medical

journal. 1987;18(2):48-50 (chi*). Résumé Acme (880837). ACMÉ:880837

359- gera: 41791/nd/re

[ELECTRON MICROSCOPIC STUDY ON THE TREATMENT OF CERIVX CANCER WITH XIANGYE TIANZHUKUI AND CISPLATIN]. ZHAUNG YUAN ZHONG ET AL. cancer research on prevention and treatment. 1987;14(1):13-4

360- gera: 52109/di/ra

[PRELIMINARY STUDIES ON MECHANISM OF ANTINEOPLASTIC ACTION OF INJECTION OF SANSHENG COMPOSITE]. ZENG ZHAOXIAN ET AL. bulletin of chinese materia medica. 1987;12(11):45-51 (chi).

361- gera: 52227/di/ra [STUDY ON LEWIS LUNG CANCER OF MICE TREATED WITH CORDYCEPS SINENSIS AND ITS ARTIFICIAL CULTURED MYCELIA]. ZHANG SHU LAN ET AL. bulletin of chinese materia medica. 1987;12(2):53. (chi).

362- gera: 80235/di/ra

RADIATION PROTECTION BY CHINESE MEDICINAL HERBS. MORIO YONEZAWA ET AL. oriental healing arts international bulletin. 1987;12(1):39-9 (eng).

363- gera: 81409/di/ra
CHINESE MATERIA MEDICA FOR RADIATION PROTECTION. HU BI ET AL. abstracts of chinese medicine. 1987;1(3):475-90 (eng).

364- gera: 81412/di/ra

ANTINEOPLASTIC TERPENOIDS FROM CHINESE MEDICINAL PLANTS. KUO HSIUNG L ET AL. abstracts of chinese medicine. 1987;1(4):606-25 (eng).

365- gera: 85047/di/re

OPTIMIZING ANTIEMESIS IN CANCER CHEMOTHERAPY. DUNDEE JW ET AL. british medical journal. 1987;294:179.

Note préliminaire sur l'action antiémétique de l'électroacupuncture dans les chimiothérapies.

366- gera: 22187/di/re

L'APPORT DE L'ACUPUNCTURE DANS LES ALGIES PELVIPERINEALES CHRONIQUES ET NEOPLASIQUES. TRINH R. mediterranee medicale. 1988;375:13-19 (fra).

367- gera: 22612/di/ra

SURGERY IN ANCIENT CHINA. WU YING-KAI ET AL. chinese medical journal. 1988;101(2):79-83 (eng). Apercus sur l'histoire de la chirurgie, de la dynastie zhou à la dynastie ming : anesthésie, infections des tissus mous, cancers, réductions des fractures et exercices physiques de rééducation.

368- gera: 22888/di/ra

THE EFFECT OF ACUPUNCTURE ON THE PHAGOCYTIC **ACTIVITY OF HUMAIN LEUKOCYTES. ZHOU RONGXING** ET AL. journal of traditional chinese medicine. 1988;8(2):83-4 (eng).

To study the effect of acupuncture in treatment of infectious diseases, 66 adult patients in the wards of general surgery were given acupuncture once daily for 3 days after operation. of 40 patients with malignant tumors, 20 received acupuncture and 20 served as controls. Of 26 patients with inflammatory lesions, 17 received acupuncture and 9 served as control. Acupoints used were Zusanli (ST36) supplemented by Neiguan (P6) or Sanyinjiao (SP6) according to the type of operation. It was shown that, compared with the control, leukocyte phagocytis was enhaced after three days of acupuncture in all patients (P<0.01).

369- gera: 22898/di/ra THERAPEUTICAL EFFECTS OF JIAN PI YI SHEN PRESCRIPTION ON THE TOXICITY REACTIONS OF POSTOPERATIVE CHEMOTHERAPY IN PATIENTS WITH *. NING CHUNHONG. journal of traditional chinese medicine. 1988;8(2):113-6 (eng).

370- gera: 22909/di/ra

EFFECTS OF GINSENOSIDE ON THE NATURAL KILLER **CELL-INTERFERON-INTERLEUKIN-2 REGULATORY** NETWORK AND ITS TUMOR INHIBITING EFFECT. YANG GUIZHEN ET AL. journal of traditional chinese medicine. 1988;8(2):135-40 (eng).

371- gera: 23029/di/ra

[EFFECT OF DUCHESNEA INDICA ON EXTRACORPOREAL ESOPHAGEAL CANCER CELLS]. ZHANG ZHONGXING ET AL. chinese journal of integrated traditional and western medicine. 1988;8(4):221 (chi*).

372- gera: 23062/di/ra

IEXPLORING THE RELATIONSHIP BETWEEN BODY SURFACE AND INTERNAL ORGANS BY MEASURING THE TEMPERATURE OF ACU-POINTS]. LI PEIQUN ET AL chinese acupuncture and moxibustion. 1988;8(2):32 (chi*). Etude de la température mesurée au niveau des points xindaxi et 13V dans un groupe avec cancer du poumon (113 cas) et un groupe de contrôle. Il apparait une différence significative entre les deux groupes.

373- gera: 23063/di/ra

[ACUPUNCTURE ANESTHESIA IN THE RADICAL OPERATION OF THYROID CANCER]. ZHOU QUANRAI ET AL. chinese acupuncture and moxibustion. 1988;8(2):34

Analgésie par acupuncture lors de thyroidectomie totale pour cancer thyroïdien. 129 cas, 134 interventions chirurgicales. 3 groupes de points sélectionnés : 1er groupe (21 patients) acupuncture somatique ou auriculaire. 2ème groupe (25 patients) acupuncture somatique plus auriculopuncture, 3ème groupe (88 patients) acupuncture somatique plus rhinopuncture. Points principaux: 6MC, 4GI. Auriculopuncture : Shen Men, Jiaogan, Fei, Jing, Naso : Shuangen, Fei, Throghxin, Yanhou. Meilleur effet avec acupuncture somatique plus rhinopuncture.

374- gera: 23082/di/ra

IREPORT ON ACUPUNCTURE TREATMENT OF 303 CASES OF ESOPHAGEAL CANCER]. SHAO WENSHENG. chinese acupuncture and moxibustion. 1988;8(1):23 (chi*). [303 cas de concers de l'oesophage traités par acupuncture]. L'auteur à traité 3303 cas de cancer de l'oesophage par acupuncture, dont 6 cas pris au début et 2297 cas d'évolutions moyenne ou ancienne. Les points utilisés : Lianguan (23VC), jiuwe(15VC), Shangwan (13VC), Zhongwan (12VC), Xiawan (10VC), Jianli (11VC), Weishang (PC 14, 4d. de part et d'autre du 10VC), Xuanji (21VC), Huagai (20VC), Zigong, Yutang (18VC), Zhongting (16VC), Burong (19E), Chengman (20E), Liangmen (21E), Guanmen (22E), TTaiyi (23E), Huaroumen (24E). Les points sont utilisés par groupes de 3, avec une séance par jour, technique enfoncement-retrait sans laisser les aiguilles en place, 15 séances par traitement. Les 6 patients traités précocement sont toujours vivants, ce depuis plus de 8 ans. 96,37 % des autres patients ont vu leur dysphagie s'amender et ont pu s'alimenter, leur vie a été prolongée.

375- gera: 23083/di/ra

[DIAGNOSIS OF LUNG CANCER IN EARLY STAGE WITH DOUBLE IMAGES OF BRONCHOGRAPHY UNDER ACUPUNCTURE ANESTHESIA (ATTACHED WITH THE *)]. FAN SHAOYU. chinese acupuncture and moxibustion. 1988;8(1):25 (chi*).

L'anesthésie par acupuncture pour les bronchographies et scopies permet une meilleure qualité d'images et une meilleure approche dans le diagnostic des cancers des poumons.

376- gera: 23325/di/ra

DRAMATIC RESPONSE TO COMBINED USE OF TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) AND ELECTROACUPUNCTURE. CHOUDHURY KJ. american journal of acupuncture. 1988;16(1):53-4 (eng).

377- gera: 23327/di/ra

CARROT JUICE IN CHINA: CANCER CONTROL WITH VEGETABLE EXTRACTS (note). X. american journal of acupuncture. 1988;16(1):92. (eng).

378- gera: 23415/di/ra

[ANTITUMOR EFFECT OF GYPENOSIDE]. WANG YUQIN ET AL. chinese journal of integrated traditional and western medicine. 1988;8(5):286-94 (chi*).

379- gera: 23459/nd/re [ACUPUNCTURE IN EDEMA OF THE EXTREMITIES FOLLOWING RADIATION OR COMBINATION THERAPY OF **CANCER OF THE BREAST AND UTERUS]. BARDYCHEV** MS ET AL. voprosy onkologii. 1988;34(3):319-22 (rus*). Acupuncture was carried out in 141 sufferers from late-onset radiation injuries to skin and soft tissues. 122 patients (86%) revealed clinical manifestations of edema of varying gravity in arms and legs, while 19 (14%) suffered radiation-induced neuritis or plexitis accompanied by edema. Radionuclide and rheographic studies as well as evaluation of hemostatic function showed acupuncture to be an effective treatment for edema and pain. It also improved lymph flow, rheovasographic indexes and normalized hemostasis. The best results were obtained in cases of stage I-II edema.

380- gera: 23758/nd/re

[EFFECT OF ANALGETIC ELECTROACUPUNCTURE ON THE HEMOSTATIC SYSTEM IN CANCER PATIENTS]. LIAN NV ET AL. anesteziologiia i reanimatologiia. 1988;1:52-4 (rus*).

381- gera: 23822/di/ra

THE USE OF HUANG-QI IN THE TREATMENT OF CANCER. JIN LAN. journal of chinese medicine. 1988;28:26-7 (eng).

382- gera: 23865/di/ra [EXPLORATION ON RELATIONSHIP BETWEEN PULSE, TONGUE PICTURE AND BIOCHEMICAL, IMMUNOLOGICAL CHANGES OF PRIMARY HEPATIC CARCINOMA]. TAO XIAOCHEN ET AL. chinese journal of integrated traditional and western medicine. 1988;8(7):405-7 (chi*).

383- gera: 23927/di/ra

CERVICAL NEOPLASIA: THE CASE FOR AN ALTERNATIVE TO SURGERY. LYTTLETON J. journal of chinese medicine. 1988;27:3-8 (eng).

384- gera: 24041/di/ra

A PROPOS D'UNE OBSERVATION D'AMENORRHEE. PHUTTHAVONG P. revue francaise de mtc. 1988;130:229-

L'observation présentée concerne une jeune fille de 17 ans présentant depuis environ quatre mois une aménorrhé secondaire après traitement radiothérapique et chimiothérapique pour une tumeur d'Ewing de la branche ischio- pubienne droite. En M.T.C., cette aménorrhée est due à une déficience de Qi des reins et de la rate ayant entrainé un vide de Qi et de Sang avec stase relative de Sang au niveau pelvis et tarissement du Chong Mai, du Ren Mai et des vaisseaux de l'utérus. Il existe également un retentissement secondaire sur le Shen. Le traitement par acupuncture a amené un rétablissement des régles dès la deuxième séance et une amélioration importante de l'état général. Ces règles désormais normales avec un recul de six mois.

385- gera: 24499/di/ra

[ACUPUNCTURE AND ACU-POINTS INJECTION FOR CANCER PAIN]. CHEN YUFEN. chinese acupuncture and moxibustion. 1988;8(5):30 (chi*).

De janvier à juin 84, 86 patients ont été suivis pour des cancers à un stade évolué ; 78 d'entre eux présentaient des douleurs d'intensité variable, dont 24 souffraient de douleurs sévères. Les patients ont été divisés en 2 groupes : un groupe de 20 malades traités par acupuncture et injections aux points d'acupuncture, sans recevoir d'analgésique. L'autre groupe (66 cas) n'a été traité qu'avec des analgésiques. Le premier groupe a eu non seulement une diminution des douleurs cancéreuses, mais les patients ont eu une survie prolongée.

386- gera: 24527/di/ra

IDISCUSSION ON RELATIONSHIP BETWEEN DEFICIENCY-SYNDROMES AND IMMUNITY IN MALIGNANT TUMOR PATIENTS]. XU JIPING ET AL. acta medica sinica. 1988;3(5):22 (chi).

387- gera: 24665/di/ra

BIMODAL EFFECT OF MOXIBUSTION ON MAMMARY CARCINOMA TRANSPLANTED IN BALB/C MICE. STERNFELD M. american journal of acupuncture.

1988;16(4):358-61 (eng).

La moxibustion a été utilisée comme traitement sur des carcinomes mammaires transplantés chez les souris balb/c. Ce traitement a été utilisé aprés injection sous-cutanée de 2x10 à la puissance 5, cellules tumorales dans la région lombaires (niveau L3-L5). L'application indirecte de moxas au 14VG, a été la plus efficace sur le processus de rejet de la tumeur et sur la prolongation de la survie. L'application directe de Moxas au 23V, 24,25V, a été suivie d'une accélération de la croissance de la tumeur par rapport au groupe controle.

388- gera: 25333/di/ra

ION FACTORS RELATED TO ABNORMALITY OF SUBLINGUAL VEIN IN 530 CANCER PATIENTS]. CHEN JIANMIN. chinese journal of integrated traditional and western medicine. 1988;8(10):580 (chi*).

389- gera: 25410/di/re

THE NON-DRUG TREATMENT OF NEURALGIC AND **NEUROPATHIC PAIN OF MALIGNANCY. FILSHIE J. cancer** surveys. 1988;7(1):161-93 (eng).

Current non-drug treatment of neuropathic pain with stimulation techniques and nerve blocking techniques is reviewed. Many specific methods including electrical nerve stimulation. acupuncture, sympathetic blockade, epidural and intrathecal blocks, neurosurgical and psychological techniques are described. The move away from destructive procedures to non-destructive methods is noted. Shortcomings in the methods available highlight the fact that further study in this field is necessary.

390- gera: 25423/di/re

THE ROLE OF TRADITIONAL CHINESE MEDICINE IN SUPPORTIVE CARE OF CANCER PATIENTS. SUN Y. recent results in cancer research. 1988;108:327-34 (eng).

391- gera: 25537/di/ra

ACUPUNCTURE OF TREATMENT OF PAIN ASSOCIATED WITH MALIGNANCY (résumé). AUNG H ET AL. acupuncture and electrotherapeutics research. 1988;13(4):242. (eng).

392- gera: 25732/di/ra

EFFECT OF PLANT POLYSACCHARIDES ON T AND B LYMPHOCYTES IN TUMOR TRANSPLANTED MICE IRRADIATED BY X-RAY. GU YUANXI ET AL. journal of tcm (english edition). 1988;8(4):277-281 (eng).

393- gera: 25737/di/ra

ELECTRIC STIMULATION OF ACUPOINTS IN ALLEVIATING HEMOGRAM ABNORMALITY DUE TO CYCLOPHOSPHAMIDE INJECTION IN ANIMALS. NIU HAITONG. journal of tcm (english edition). 1988;8(4):301-304 (eng).

1. Bone marrow inhibition caused by injection of cyclophosphamide can be alleviated and the reduced leucocyte count recovered by galvanic stimulation on acupoints in domestic rabbits, the changes being significantly faster than in the control group. 2. Electric stimulation on acupoints without a piercing acupuncture needle is painless, simple and free of such side effects in conventional acupuncture as fainting or inadvertent breaking of the needle during treatment. The patients have less apprehension of the procedure. As to the proper strength of current and length of time for electric stimulation, these remain for further study.

394- gera: 25955/di/el

BASĂL CELL CARCINOMA. LIANG JIAN-HUI. in a

handbook of traditional chinese dermatology, blue poppy press, boulder. 1988;:134-136 (eng).

395- gera: 26554/di/ra

[EFFECTS OF ACUPUNCTURE ON DYSURIA AFTER RADICAL OPERATION FOR CERVICAL CARCINOMA]. SUMIE TOYODA ET AL. journal of japan society of acupuncture. 1988;38(2):202-205 (jap*).

396- gera: 27725/di/ra

THE USE OF CHINESE HERBAL MEDICINE IN CANCER PREVENTION AND CHEMOTHERAPY: A SURVEY. LIEN EJ. oriental healing arts international bulletin. 1988;13(2):59-68 (eng).

397- gera: 33301/di/ra

[2 CASES OF ADVANCED LUNG CANCER TREATED MAINLY BY NO. 1 AND NO. 2 ANTICANCER POWER]. HE JINSHAN. fujian journal of traditional chinese medicine. 1988;19(2):41 (chi).

398- gera: 33309/di/ra

[EFFECT OF MOXIBUSTION AT DAZHUI (DU 14) ON TRANSPLANTED TUMOR IN MOUSE]. SUN LANYING. fujian journal of traditional chinese medicine. 1988;19(3):34 (chi).

399- gera: 33337/di/ra
[PRIMARY BRONCHOGENIC CARCINOMA TREATED WITH HERBAL LUNG COMPOUND: A REPORT OF 78 CASES]. LI YUEHENG ET AL. beijing journal of traditional chinese medicine. 1988;1:22 (chi).

400- gera: 33560/di/ra

[PRIMARY TUMOR OF CENTRAL NERVOUS SYSTEM TREATED AS WIND-PLEGM. ANALYSIS OF 67 CASES]. YU MIN ET AL. journal of tcm. 1988;29(1):26 (chi).

401- gera: 33575/di/ra

[TCM TREATMENT OF LUNG CANCER]. LEI YONGZHONG, ET AL. journal of tcm. 1988;29(2):25 (chi*).

402- gera: 33590/di/ra

[CLINICAL STUDY ON ANALGESIC EFFECT OF VENENUM BUFONIS OINTMENT IN CANCER PATIENTS. A RANDOM DOUBLE-BLIND COMPARATIVE OBSERVATION.*]. LIU JIAXIANG. journal of tcm. 1988;29(3):30 (chi).

403- gera: 33595/di/ra

[TREATMENT OF CAULIFLOWER-LIKE HYPERPLASTIC CUTANEUM CARCINOMA WITH ELECTRICAL HEAT-PRODUCING NEEDLE- ANALYSIS OF 10 CASES]. LI HANYOU. journal of tcm. 1988;29(3):52 (chi).

404- gera: 33776/di/ra

IRECENT PROGRESS IN THE TREATMENT OF ADVANCED LUNG CARCINOMA WITH CHINESE HERBAL DRUGS]. LI YONGJIAN ET AL. jiangsu journal of tcm. 1988;9(6):35 (chi).

405- gera: 33843/di/ra

[LONG TERM FOLLOWUP OF SURVIVAL RATE OF PATIENTS WITH BRONCHOGENIC CARCINOMA OF LUNG TREATED BY REINFORCING THE VITAL ENERGY AND *]. XU JIPING ET AL. jiangsu journal of tcm. 1988;9(12):37 (chi).

406- gera: 41677/nd/re

[EFFECTS OF ANGELICA SINENSIS POLYSACCHARIDE ON HEMOPOIETIC STEM CELLS IN IRRADIATED MICE]. MEI QI BING ET AL. acta pharmacologica sinica. 1988;9(3):279-82 (chi*) Résumé Acme (880765). ACME:880765

407- gera: 42145/nd/re [EFFECTS OF ANEMARRHENA ASPHODELOIDES SAPONIN ON HUMAN HEPATOCARCINOMA MODEL IN NUDE RATS]. YE SHENG LONG ET AL. tumor. 1988;8(5):259-60 (chi*).

408- gera: 42177/nd/re

IPROMOTING EFFECT OF WIKSTROEMIA CHAMAEDAPHNE ON EXPERIMENTAL NASOPHARYNGEAL CARCINOMA IN RATS]. TANG WEI PING ET AL. chinese journal of cancer. 1988;7(3):171-73 (chi*).

409- gera: 42462/nd/re

[PROTECTIVE EFFECT OF 6, 7 DIMETHOXYCOUMARIN IN MICE GIVEN ON TIME WHOLE BODY -IRRADIATION]. WAN YAO DE ET AL. chinese journal of radiological medicine and protection. 1988;8(2):94-9 (chi*).

410- gera: 42650/nd/re

[PROTECTIVE EFFECT OF 6, 7-DIMETHOXYCOUMARIN IN MICE GIVEN ONE TIME WHOLE BODY -IRRADIATION]. WAN YAO DE ET AL. chinese journal of radiological medicine and protection. 1988;8(2):94-9 (chi*).

411- gera: 43732/di/ra

[EXPERIENCE IN TREATMENT OF INFERTILITY CAUSED OF FEMALE GENITALS TUMOR]. SONG GUANJI. journal of zhejiang traditional chinese medical college. 1988;12(2):26 (chi).

412- gera: 48535/di/ra

[OUTER QI GONG HELPED ELIMINATION OF TUMOR]. CHEN YAN. **qi-gong.** 1988;9(6):275 (chi).

413- gera: 51565/di/ra

[SYMPTOM-SIGN DIFFERENTIATION ASSOCIATED WITH "ANTI-TUMOR AGENT" FOR 61 CASES OF INTESTINAL CANCER. QIAN BOWEN. shanghai journal of traditional chinese medicine. 1988;7:6-7 (chi).

414- gera: 51597/di/ra

ISUMMATION ON SYMPTOM-SIGN DIFFERENTIATION AND TREATMENT OF ADVANCED RECTAL CANCER. MA JIFU. shanghai journal of traditional chinese medicine. 1988;9:7. (chi).

415- gera: 51626/di/ra

[HERBAL CHINESE MEDICINE FOR 4 CASES OF INFANTILE TUMOUR. YANG MENGLAN ET AL. shanghai journal of traditional chinese medicine. 1988;11:10-1 (chi).

416- gera: 51627/di/ra

[IMPLICATION OF SERUM LYSOZYME ACTIVITY AND TONGUE COLOUR CHANGES IN CANCER PATIENTS. SHEN LING ET AL. shanghai journal of traditional chinese medicine. 1988;11:12-3 (chi).

417- gera: 51633/di/ra

[INJECTION OF FRUCTUS BRUCEAE MILK FOR METASTASIS OF LUNG CANCER TO BRAIN. FAN ZHONGZE ET AL. shanghai journal of traditional chinese medicine. 1988;11:24-5 (chi).

418- gera: 51681/di/ra

[42 CASES OF RADIOTHERAPY REACTION IN **ESOPHAGEAL CANCER TREATED WITH "YANG YIN QING** RE TANG" DECOCTION. LIU HAO JIANG. tianjin journal of traditional chinese medicine. 1988;3:6-10 (chi).

419- gera: 51757/di/ra

[ANALYSIS OF DEATH TIME IN 454 CASES OF PRIMARY HEPATIC CANCER. WANG RONG PING. zhejiang journal of traditional chinese medicine. 1988;23(3):126-32 (chi).

420- gera: 51912/nd/re

[ANTINEOPLASTIC EFFECT AND TOXICITY OF TIANXIAN PILL]. LI DE HUA ET AL. chinese journal of clinical oncology. 1988;15(6):323-25 (chi*).

421- gera: 51913/nd/re

[PRELIMINARY STUDIES ON THE ANTITUMOR EFFECT OF TIANXIAN PILL]. ZHENG SHENG ET AL. chinese journal of clinical oncology. 1988;15(6):325-28 (chi*).

422- gera: 51914/nd/re

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423- gera: 51915/nd/re

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424- gera: 51916/nd/re

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425- gera: 51917/nd/re [RADIOSENSITIZING EFFECT OF TIANXIAN PILL ON CULTURED HELA CELLS]. ZHU LI XUN ET AL. chinese journal of clinical oncology. 1988;15(6):337-39 (chi*).

426- gera: 51918/nd/re

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427- gera: 51920/nd/re

[INFLUENCE OF TIANXIAN PILL ON THE IMMUNITY OF MICE]. QU BAO XI ET AL. chinese journal of clinical oncology. 1988;15(6):344-46 (chi*).

428- gera: 51921/nd/re

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429- gera: 52026/di/ra

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430- gera: 52078/di/ra

[ISOLATION AND IDENTIFICATION OF ANTI-TUMOR CONSTITUENT, GINSENOSIDE-RH2]. CHEN YINGJIE ET AL. bulletin of chinese materia medica. 1988;13(1):40-3

431- gera: 52477/di/ra

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432- gera: 52532/di/ra

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433- gera: 52952/di/ra

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434- gera: 53109/di/ra

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435- gera: 53179/di/ra

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436- gera: 53285/di/ra

[OUTER QI GONG HELPED ELIMINATION OF TUMOR]. CHEN YAN. qi gong. 1988;9(6):275-77 (chi).

437- gera: 53380/di/ra

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438- gera: 53600/di/ra

THE EFFECT OF MOXIBUSTION ON HEMOPOISTIC FUNCTION OF ENDOXAN MICE]. GUI JINSHUI. shanghai journal of acupuncture and moxibustion. 1988;4:23-4 (chi).

439- gera: 61684/nd/re

[EFFECTS OF ACTINIDIA CHINENSIS IN THE PREVENTION OF CANCER. VI. INHIBITORY EFFECTS ON THE FORMATION OF N-NITROSOPROLINE IN VIVO IN. XU YONG ET AL. acta nutrimenta sinica. 1988;10(2):130-133

440- gera: 61686/nd/re

[CANCER PREVENTION EFFECT OF ACTINIDIA CHINENSIS. VII. INHIBITION ON N-NITROSOPROLINE FORMATION IN VIVO IN CHRONIC ATROPHIC GASTRITI. XU YONG ET AL. acta nutrimenta sinica. 1988;10(3):230-233 (chi*).

441- gera: 61688/nd/re

[CYTOCIDAL EFFECT OF LYCOBETAINE (AT-1840) AND PARVOVIRUS H-1 (PVH-1) ON GASTRIC CANCER CELLS]. WU YUN LIN ET AL. reproduction and contraception. 1988;11(12):683-688 (chi*).

442- gera: 80602/di/ra

44 CASES OF RADIATION RECTITIS DUE TO THE CARCINOMA OF CERVIX TREATED BY ACUPUNCTURE. WANG XINMING. chinese journal of acupuncture and moxibustion. 1988;1(3-4):71-2 (eng).

443- gera: 80615/di/ra

ACUPUNCTURE, OPIOID PEPTIDES, IMMUNITY AND TUMOR. CHENG BAIHUA. chinese journal of acupuncture and moxibustion. 1988;1(3-4):107-111 (eng).

Revue générale sur les relations entre endorphines et système immunitaire. L'action de l'acupuncture sur le système immunitaire semble passer par le système des endorphines.

444- gera: 81421/di/ra

NATURAL ANTINEOPLASTIC COMPOUNDS AND THEIR STRUCTURE-ACTIVITY RELATIONSHIPS. LOU FENG CHANG ET AL. abstracts of chinese medicine. 1988;2(4):484-95 (eng).

445- gera: 82446/di/ra

ACUPUNCTURE/ACUPRESSSURE AS AN ANTIEMETIC: STUDIES OF ITS USE IN POST-OPERATIVE **VOMITING, CANCER CHEMOTHERAPY AND SICKNESS OF** EARLY PREGNANCY. DUNDEE J. complementary medical

research. 1988;3(1):2-14 (eng). Studies on the use of P6 (Neiguan) acupuncture or acupressure as an antiemetic have been reviewed. Both manual and electro (10z) acupuncture applied for five minutes given at the same time as a preoperative opioid will significantly reduce the incidence of postoperative : sickness in patients undergoing minor gynaecological operations under a standard non-emetic anaesthetic. This protection is not afforded by stimulation of a point at the right elbow ("dummy" acupuncture). Problems were encountered in applying these findings to patients having cancer chemotherapy and for ethical reasons only a limited control (dummy) study was possible. Patients who had previously been sick following cancer chemotherapy, and who were very likely to have sickness on the second occasion, were subjected to P6 electroacupuncture at the same time as giving the infusion of the chemotherapeutic agent and this produced a partial reduction in sickness. The antiemetic effects only lasted for 8 hours and an alternative means of teaching patients to do this themselves is currently being studied. Acupressure at P6 point

will significantly reduce the incidence of morning sickness of early pregnancy as compared with a control group and a group of women using pressure at another "dummy" point. The problems encountered in these studies are reviewed but no suggestions have been made as to the reasons for this beneficial therapeutic effect. Despite wide dissemination of this knowledge no-one has yet attempted to confirm or refute the

446- gera: 85022/di/re
RANDOMIZED COMPARISON OF THE ANTI-EMETIC EFFECTS OF OF METOCLOPRAMIDE AND ELECTRO ACUPUNCTURE IN CANCER CHEMOTHERAPY. DUNDEE JW ET AL. british journal of clinical pharmacology. 1988;25:678-9 (eng).

Etude contrôlée chez 20 patients sous chimiothérapie répartis en 2 groupes : 1) Métoclopramide 10mg IV . 2) Acupuncture au 6MC. Les résultats sont similaires dans les deux groupes, mais le traitement IV semble plus simple à

447- gera: 135852/di/me
TRADUCTIONS DE TEXTES SUR LE QIGONG ET COMMENTAIRES. BELOTEL-GRENIE. memoire lea, aixmarseille. 1988;0:191P (fra).

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448- gera: 25552/di/ra

[THE RELATIONSHIP BETWEEN TYPING OF GASTRIC CARCINOMA ACCORDING TO TCM THEORIES AND CLINICAL PATHOLOGICAL CLASSIFICATION]. QU SHUFEN ET AL. chinese journal of integrated traditional and western medicine. 1989;9(1):144 (chi*).

449- gera: 25717/di/ra

ITHE EFFECTS OF SRRS RECIPE ON THE FORMATION OF RAT LIVER CANCER]. QIU JIAXIN ET AL. chinese journal of integrated traditional and western medicine. 1989;8(12):735-736 (chi*).

450- gera: 25767/di/ra

[APPLICATION OF VITAMIN K3 POINT INJECTION IN THE TREATMENT OF UPPER GI BLEEDING CAUSED BY HEPATOMA]. LIU LUMING. chinese acupuncture and moxibustion. 1989;9(1):9-12 (chi*).

451- gera: 25776/di/ra

[GENERAL SCREENING OF TUMOUR WITH ACU-POINT **DETECTION].** LI PEIQUEN ET AL. chinese acupuncture and moxibustion. 1989;9(1):40-42 (chi*).

Cette méthode de diagnostic se base sur le principe que les organes et les viscères se manifestent à l'extérieur à travers les méridiens et les points d'acupuncture et que les sujets sains ont des organismes équilibrés avec une symétrie respectée. En effet on sait que la différence de température (delta T°C) (relevée) dans les points symétriques ou homologues ne dépasse pas normalement 0,5°C. Dans n'importe quelle pathologie cette condition d'équilibre peut être altérée et on peut trouver, sans aucune spécificité, des différences de température dépassant 0,5°C. Toutefois deux points ont été relevés : xin da et xin nei, qui fonctionneraient en temps que "marqueurs" respectivement pour les tumeurs malignes et les tumeurs bénignes. Sur un total de 728 personnes contrôlées la différence de température en xin da a dépassé 0,5°C chez 18 personnes, seulement chez 4 d'entre eux a été confirmée la pathologie (22%); tandisqu'en xin nei la différence de tempéraure supérieure à 0,5°C a été relevée dans 65 cas chez lesquels a été confirmé le diagnostic de tumeur bénigne chez 51 personnes (66%).

452- gera: 26916/di/ra

[PRELIMINARY STUDY OF TCM-WM TREATMENT FOR PATIENTS WITH PRIMARY LIVER CARCINOMA]. LING HONGYING ET AL. chinese journal of integrated traditional and western medicine. 1989;9(6):348-350 (chi*).

453- gera: 26940/di/ra

[PRIMARY RESEARCH ON LUNG CANCER TREATED BY QI TO PLACE OF DISEASE]. LI YUNGGUANG. chinese acupuncture and moxibustion. 1989;9(3):24-26 (chi*).

454- gera: 26941/di/ra

[ORIGINAL CANCER TREATED BY ACUPUNCTURE AND INJECTION ON THE POINTS]. CHEN YUFEN. chinese acupuncture and moxibustion. 1989;9(3):27-29 (chi*).

455- gera: 26943/di/ra

[EXPERIMENTAL STUDY OF ANTITUMOR EFFECT OF MOXIBUSTION]. YANG YOUMI. chinese acupuncture and moxibustion. 1989;9(3):32-33 (chi*).

456- gera: 27147/di/ra

AN ELECTROPHYSIOLOGIC VIEW OF ACUPUNCTURE: **ROLE OF CAPACITIVE AND CLOSED CIRCUIT CURRENTS** AND THIER CLINICAL EFFECTS IN THE TREATMENT OF CANCER AND CHRONIC PAIN. NORDENSTRÖM BEW. american journal of acupuncture. 1989;17(2):105-117 (eng).

457- gera: 27403/di/ra

RECHERCHES EXPERIMENTALES ET RESULTATS THERAPEUTIQUES SUR LE QI GONG MEDICAL ET LE QI GONG THERAPEUTIQUE. REQUENA Y. meridiens.

1989;85:81-97 (fra*).

Ce présent article dresse un panorma succinct des récentes recherches expérimentales en thérapeutique par le Qi Gong et dégage les indications majeures : hypertension et maladies coronariennes, cancers et déficits immunitaires, troubles digestifs, myopie, asthme, pathologie fonctionnelle.

458- gera: 27453/di/ra

BILAN EXPERIMENTAL CLINIQUE ET OBSERVATION DU QI GONG DANS LES MALADIES DE L'APPAREIL

DIGESTIF. REQUENA Y. acupuncture. 1989;101:37-46 (fra). Sont présentées dans cet article les observations préliminaires de validation clinique du Qi Gong en gastro-entérologie ainsi que des témoignages auto-biographiques propres à introduire le sujet et à sensibiliser le milieu médical sur cette technique thérapeutique.

459- gera: 27921/di/el

RESEARCH ON BREAST TUMOURS. GUO CHENGJIE. essentials of contemporary chinese acupuncturists' clinical experiences, foreign lang. 1989;:515-20 (eng).

460- gera: 29713/di/cg CLINICAL VALUE OF AURICULAR INSPECTION ON THE DIAGNOSIS OF ESOPHAGEAL AND CARDIAL CANCER. XU RUIZHENG. international symposium on diagnosis and treatment with auricular points, beijing. 1989;:107-8 (eng).

461- gera: 29714/di/cg **AURICULAR CHANGES OF CANCER PATIENTS.** ZHU DAN. international symposium on diagnosis and treatment with auricular points, beijing. 1989;:108-9 (eng).

462- gera: 29727/di/cg
EAR-POINT DETECTION IN NEOPLASTIC DISEASE. A **CLINICAL STUDY OF 200 CASES. CHANG YISONG.** international symposium on diagnosis and treatment with auricular points, beijing. 1989;:124-5 (eng).

463- gera: 29728/di/cg AURICULAR DIAGNOSIS OF 64 CASES OF CANCERS AND 49 CASES OF HEPATITIS. LI YANHEN ET AL. international symposium on diagnosis and treatment with auricular points, beijing. 1989;:125-6 (eng).

464- gera: 29756/di/cg

CLINICAL OBSERVATION OF 30 CASES SUFFERING CANCER OF ESOPHAGUS AND STOMACH TREATED WITH ACUPUNCTURE COORDINATED EAR NEEDLING. CUI KAIXIAN. international symposium on diagnosis and treatment with auricular points, beijing. 1989;:150-1 (eng).

465- gera: 33978/di/ra [EFFECTS OF BUZHONG YIQI DECOCTION ON ANTICANCER ACTIVITY AND TOXICITY INDUCED BY CYCLOPHOSPHAMIDE]. JI YUBIN, ET AL. china journal of chinese materia medica. 1989;14(3):48 (chi*).

466- gera: 34308/di/ra

[APPLICATIONS OF MEDICINAL HERBS WITH REPLENISHING EFFECTS FOR COMBINED TREATMENT OF PRIMARY HEPATOCARCINOMA]. FANG L. journal of traditional chinese medicine. 1989;30(5):27-9 (chi).

467- gera: 34328/di/ra

[DISCUSSION ON TCM PREVENTION AND TREATMENT FOR CARCINOMA OF STOMACH]. GUIQING Y ET AL. journal of traditional chinese medicine. 1989;30(6):48-52

468- gera: 34340/di/ra [DISCUSSION ON METHODOLOGY FOR TCM PREVENTION AND TREATMENT OF CANCER]. JIANMIN C ET AL. journal of traditional chinese medicine. 1989;30(7):43-6 (chi).

469- gera: 34361/di/ra

[TEN YEARS' FOLLOW-UP FOR THERAPEUTIC EFFECT OF TCM TREATMENT OF CERVICAL CARCINOMA AT STAGE II AND III-ANALYSIS OF 30 CASES. JINGFENG T. journal of traditional chinese medicine. 1989;30(9):30-4 (eng).

470- gera: 34405/nd/re

[TREATMENT OF CARCINOMA OF DIGESTIVE TRACT IN THE MIDDLE AND LATER STAGES WITH CHINESE HERBAL DRUGS: A REPORT OF 48 CASES]. FAN D. jiangsu journal of tcm. 1989;10(8):5-7 (chi).

471- gera: 34428/nd/re

[EXPERIENCE WITH THE TREATMENT OF RADIATION STOMATITIS : A REPORT OF 25 CASES]. ZONGLIANG Z ET AL. jiangsu journal of tcm. 1989;10(10):6-7 (chi).

472- gera: 34429/di/ra

[A CASE REPORT OF ABSCESS AND METASTATIC CARCINOMA OF LYMPHADEN AFTER OPERATION FOR CARCINOMA OF MAXILLARY SINUS]. KANGZHI C. jiangsu journal of tcm. 1989;10(10):8-9 (chi).

473- gera: 34433/nd/re

[APPLICATION OF "SHEN MAI" BEVERAGE WITH ADDITIVES IN PREVENTING AND TREATING CARCINOMAS]. JINGFANG Z. jiangsu journal of tcm. 1989;10(10):23-4 (chi).

474- gera: 34583/di/ra
[CLINIC OBSERVATION OF CHEMOTHERAPY WITH CHINESE MATERIA MEDICA FOR LATE NEOPLASMS]. MINGRUI L. shaanxi traditional chinese medicine. 1989;10(9):389-391 (chi).

475- gera: 34617/nd/re

ITREATING 16 CASES OF ADVANCED LUNG CANCER WITH JINYAN PILL AND FUKANG TANG]. YIMIN Z. shandong journal of tcm. 1989;3:10-1 (chi).

476- gera: 34618/nd/re

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477- gera: 34708/nd/re

IQUANTITATIVE OBSERVATION OF AFP IN PATIENTS OF II STAGE PRIMARY LIVER CANCER TREATED WITH HERBAL CHINESE MEDICINE]. LIYING Z ET AL. shanghai journal of tcm. 1989;3:16. (chi).

478- gera: 34722/nd/re

[CLINICAL OBSERVATION ON USE OF HERBAL CHINESE MEDICINE FOR REDUCTION OF TOXIC SIDE EFFECTS OF ANTI- TUMOUR DRUGS]. RUZHONG O. shanghai journal of tcm. 1989;4:14. (chi).

479- gera: 34809/nd/re

[PENG PANCHI'S EXPERIENCE OF USING QI-BENEFITING AND YIN-NURSING THERAPY FOR POST-OPERATIVE OVARIAN CANCER CHEMOTHERAPY REACTION]. AIWU L ET AL. shanghai journal of tcm. 1989;10:17. (chi).

480- gera: 34816/nd/re

[EFFECT OF TREASURE PLASTER WITH ADDITIVES FOR 48 CASES OF CANCEROUS PAIN. BAOQIN L. shanghai journal of tcm. 1989;10:34-5 (chi).

481- gera: 34933/di/ra

TREATMENT OF ESOPHAGOCARDIAL OBSTRUCTION CAUSED BY CARCINOMA OF ESOPHAGUS AND CARDIAC CANCER WITH "ZHI GE SAN". 118 CASES]. JI-FU M. zhejiang journal of tcm. 1989;24(6):246. (chi).

482- gera: 34934/di/ra [TREATING CARCINOMATOUS FEVER WITH "ZHUYE SHIGAO TANG"]. JIA-JUN C. zhejiang journal of tcm. 1989;24(6):247-253 (chi).

483- gera: 34972/di/ra

TREATING DIGESTIVE TRACT REACTION CAUSED BY TUMOR CHEMOTHERAPY WITH "JIANG NI TANG"]. HUAI-WEN X. zhejiang journal of tcm. 1989;24(1):5. (chi).

484- gera: 35018/di/ra

[A SUMMARY OF THE DIAGNOSIS AND TREATMENT OF PRIMARY CARCINOMA OF LIVER]. YI HUANG-SHAN ET AL. zhejiang journal of tcm. 1989;24(12):562. (chi).

485- gera: 35059/di/ra

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486- gera: 35167/di/ra

TREATMENT OF CORPUS CARCINOMA BY HEATED NEEDLE AND CHINESE MEDICINE: A REPORT OF THREE CASES]. YU ZHIHUI. new journal of traditional chinese medicine. 1989;21(3):31-6 (chi).

487- gera: 35194/di/ra

ITREATMENT OF NASOPHARYNGEAL CARCINOMA BY TCM COMBINED WITH WESTERN MEDICINE : A CLINICAL ANALYSIS OF 95 CASES]. LUO JINGGUANG ET AL. new journal of traditional chinese medicine. 1989;21(5):37. (chi*).

488- gera: 35270/di/ra

[MULTIPLE MYELOMA: A CASE REPORT]. JIANG XIZHENG. new journal of traditional chinese medicine. 1989;21(11):39. (chi).

489- gera: 35392/di/ra

[CLINIC OBSERVATION OF CHEMOTHERAPY WITH CHINESE MATERIA MEDICA FOR LATE NEOPLASMS]. LI MINGRUI. shaanxi traditional chinese medicine. 1989;10(9):389-391 (chi).

490- gera: 35457/di/ra

ICONTRAST ON TONGUEGRAPH OF PATIENTS CAUSED BY SOME CLINICAL USUAL DEEPER MALIGNANT TUMOUR. ANALYSIS OF 301 CASES]. SHI BIAN-ZHEN ET AL. shanxi journal of traditional chinese medicine. 1989;5(2):31-21 (chi).

491- gera: 35514/di/ra

["NEW QI-GONG THERAPY" TREATMENT OF MALIGNENT TUMOR. OBSERVATION ON 16 CASES]. XIE FU-TI ET AL. qi-gong (an exercice for health and longevity). 1989;10(6):256-7 (chi).

492- gera: 35520/di/ra

[DIFFERENCIATION OF TREATMENT OF CANCER WITH QIGONG THERAPY]. ZHAO SONG-LING. qi-gong (an exercice for health and longevity). 1989;10(5):182-6 (chi).

493- gera: 35562/di/ra

[TALKING ABOUT TREATMENT OF CARCINOMA WITH PRACTISING QIGONG]. LIU PEI-QIOU. qi-gong (an exercice for health and longevity). 1989;10(3):130. (chi).

494- gera: 37305/di/re

FAR-EASTERN INTERPRETATION OF CELLULAR PATHOLOGY: YANG-TYPE COMPONENTS OF A PANCREATIC ACINAR TUMOR. BRATILA FC ET AL. rev roum med, med int. 1989;27(4):323-6 (eng).

495- gera: 42318/nd/re

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496- gera: 42360/nd/re

[TREATMENT OF 42 CASES OF CHEMOTHERAPY. INDUCED LEUKOPENIA WITH MODIFIED BAZHEN DECOCTION]. XIANG YAO QIAN ET AL. hunan zhongyizazhi. 1989;5(4):12-4 (chi*).

497- gera: 42463/nd/re [EFFECTS OF CHINESE TEAS ON THE OCURRENCE OF ESOPHAGEAL CANCER INDUCED N-NITROSOMETHYLBENZYLAMINE IN RATS]. HAN CHI ET AL. chinese journal of preventive medicine. 1989;23(2):67-70 (chi*).

498- gera: 42464/nd/re

[RADIATION-PROTECTIVE EFFECTS OF PLANT POLYSACCHARIDES]. WANG BING JI ET AL. chinese journal of radiological medicine and protection. 1989;9(1):24-6 (chi*).

499- gera: 42651/nd/re

[EFFECTS OF CHINESE TEAS ON THE OCCURRENCE OF ESOPHAGEAL CANCER INDUCED BY N-NITROSOMETHYLBENZYLAMINE IN RATS]. HAN CHI ET AL. chinese journal of preventive medicine. 1989;23(2):67-70 (chi*).

500- gera: 50313/di/ra

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501- gera: 50318/di/ra

[CHINESE QIGONG CURE MY LYMPHOMA]. FENG YANG-YI. qi-gong (an exercise for health and longevity). 1989;10(12):555-7 (chi).

502- gera: 50464/di/ra

IONE CASE REPORT ON TREATED LYMPHOSARCOMATOSIS BY TRADITIONAL CHINESE MEDICINE]. XIE HAI ZHOU ET AL. journal of beijing college of traditional chinese medicine. 1989;1:30. (chi).

503- gera: 51887/nd/re

IBLOCKING EFFECT OF THE JUICE OF HIPPOPHAE RHAMNOIDES ON SYNTHESIS OF N NITROSODIMETHYLAMINE IN RAT]. LI YONG ET AL. acta nutrimenta sinica. 1989;11(1):47-53 (chi*).

504- gera: 51888/nd/re [EFFECT OF SODIUM GLYCYRRHETINATE ON TRANSPLANTED MOUSE TUMORS]. QIN HONG ET AL. journal of lanzhou medical college. 1989;15(3):113-18 (chi*).

505- gera: 51894/nd/re

[ANTINEOPLASTIC EFFECT OF VINCRISTINE-IgG CONJUGATE AGAINST HEPATOMA]. YU ZHU YUAN ET AL. tumor. 1989;9(4):154-56 (chi*).

506- gera: 51897/nd/re

[EFFECT OF TRICHOSANTHIN PROTEIN AND POLYSACCHARIDE ON CHORIOCARCINOMA CELL IN VITRO]. WANG YI FU ET AL. tumor. 1989;9(3):106-08 (chi*).

507- gera: 51899/nd/re

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508- gera: 51933/nd/re

[EFFECTS OF LYCIUM BARBARUM POLYSACCHARIDE AND ITS COMBINATION WITH CORYNEBACTERIUM PARVUM ON THE TUMORISTATIC ACTIVITY OF PERITONEA. ZHANG YONG XIANG ET AL. chinese journal of pharmacology and toxicology. 1989;3(3):169-74 (chi*).

509- gera: 51936/nd/re

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510- gera: 51937/nd/re

[EFFECTS OF ANTICANCER NO. 8 ON TUMOR-BEARING MICE]. HOU DE HUI ET AL. journal of china pharmaceutical university. 1989;20(6):348-50 (chi*).

511- gera: 61630/nd/re

[EXTRACTION OF ANTICANCER COMPONENTS FROM RABDOSIA GLAUCOCALYXI. PIAO LONG QIA ET AL. journal of yanbian medical college. 1989;12(2):106-08

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513- gera: 80102/di/ra

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514- gera: 80276/di/ra

EFFECTS OF MOXIBUSTION ON CELLULAR IMMUNOCOMPETENCE OF Y-IRRADIATED MICE. DOU-MONG HAU ET AL. american journal of chinese medicine. 1989;17(3/4):157-164 (eng).

The effects of moxibustion on cellular immunocompetence of y-irradiated mice were investigated in this study. A total of 240 male young mice (ICR strain), 6-8 weeks of age, were chosen and divided into three groups. Group A was the normal control. Group B, the experimental control, was treated with 400 rad whole body y-irradiation. Group C, the experimental group, was treated with moxibustion (MT) after being exposed to yirradiation. Six to eight mice from each group were sacrificed on days 1, 5, 12, 19, 26 and 33 post-irradiation. The body and splenic weights of mice in each group were measured. The cellular immunocompetence was measured by 3H-thymidine uptake in each experimental mouse. The results revealed that 400 rad of y-ray irradiation inhibited the increase of body and splenic weights, and exerted a pronounced inhibitory effect on the incorporative rates of 3H-thymidine after being stimulated by mitogens such as PHA, PWM, Con A and LPS in the splenic lymphoid cells. MT seemed to help the recovery of the cellular immunocompetence in the y-ray irradiated mice.

515- gera: 80451/di/ra

VERLANGERUNG DER ANALGERSIEDAUER TRANSKUTANER ELEKTRISCHER NEUROSTIMULATION (TENS) BEI ONKOLOGISCH KRANKEN DURCH **ELEKTROAKUPUNKTUR IN DEN PUNKTEN DI 4 UND M** 36. HAKL L ET AL. deutsche zeitschrift fur akupunktur. 1989;32(1):10-2 (deu).

516- gera: 80686/di/ra

TREATMENT OF PAIN ACCORDING TO SYNDROME **DIFFERENTIATION IN 169 CASES OF LIVER CANCER. LIU** LUMING ET AL. journal of traditional chinese medicine. 1989;9(4):277-80 (eng).

In 169 cases with liver cancer pain the therapeutic effects of TCM and the authors' "analgesic therapy of four steps" were analysed. The results were that most patients with advanced liver cancer had mild pain, and only a small number of patients (14. 2%) had moderate or severe pain. By the first step analgesic therapy 46. 1% of the patients were relieved and with the second or third step of analgesic therapy, 93. 5% of the patients were relieved. Only 6. 5% of the patients with grade III pain needed the fourth step therapy. With TCM treatment alone, the remission rate of grade I and , grade II pain was 100% and 76. 9% respectively. Analgesic therapy of four steps produced less side effects or addiction to

517- gera: 80729/di/ra

A STUDY ON THE ANTI-CANCER EFFECT OF NINGXIA WOLFBERRY. HU QINGHE ET AL. journal of traditional chinese medicine. 1989;9(2):117-24 (eng).

518- gera: 80730/di/ra
INFLUENCE OF MEDICINAL HERBS DECOCTED WITH DIFFERENT UTENSILS ON COLONY FORMATION OF GASTRIC CARCINOMA CELLS. QIU JIAXIN ET AL. journal of traditional chinese medicine. 1989;9(2):125-27 (eng).

519- gera: 83114/nd/re

ELECTROTHERAPY AND HYPERBARIC OXYGEN: PROMISING TREATMENTS FOR POSTRADIATION COMPLICATIONS. KING GE ET AL. j prothet dent. 1989;62(3):331-4 (eng).

520- gera: 83133/di/re

JAPANESE MODIFIED TRADITIONAL CHINESE MEDICINES AS PREVENTIVE DRUGS OF THE SIDE EFFCTS INDUCED BY TUMOR NECROSIS FACTOR AND LIPOPOLYSACCHARIDE. SATOMI N ET AL. mol biother. 1989;1(3):155-62 (eng).

521- gera: 83167/di/re

PRESSURE PREVENTS NAUSEA. STANNARD D. nursing times. 1989;85(4):33-4 (eng).

Rapport de 2 cas de patients sous chimiothérapie. L'acupression au 6MC réduit les nausées et vomissements.

522- gera: 83179/di/re
ACUPUNCTURE PROPHYLAXIS OF CANCER CHEMOTHERAPY INDUCED SICKNESS. DUNDEE JW ET AL. journal of the royal society of medicine. 1989;82(5):268-71 (eng).

In a multi-facet study we evaluated the efficacy of P6 electroacupuncture (10 Hz applied for 5 min) as an antiemetic in patients receiving a variety of cancer chemotherapy drugs. The study involved 130 (15 in an open pilot study, 10 in a randomized placebo controlled crossover study and 105 in a definitive study) patients who had a history of distressing sickness after previous treatment, and who, on the basis of a previous survey, would be expected to have a 96% chance of this with subsequent therapy. Sickness was either completely absent or reduced considerably in 97% of patients and no side effects were encountered. The limited crossover study, using a 'dummy' acupuncture (ACP) point showed that the beneficial effects were limited to the P6 point. Logistic and ethical considerations excluded the possibility of carrying out a larger placebo-controlled study. While in our hands P6 ACP was an effective antiemetic in patients having cancer chemotherapy, because of the time involved and the brevity of the action (8 h) an alternative approach to electro-ACP is required before this technique is adopted clinically.

523- gera: 29025/di/cg CANCER, AIDS, AND IMMUNITY: ZHEN QI FU ZHENG PREPARATIONS, THE CHINESE AZT. YU HU. proceedings of the fifth international congress of chinese medicine, berkeley. 1990;:23. (eng).

524- gera: 29027/di/cg

CHINESE HERB "DESTAGNATION" SERIES I: COMBINATION OF RADIATION WITH DESTAGNATION IN THE TREATMENT OF NASOPHARYNGEAL CARCINOMA (NPC): A PROSPECTIVE RANDOMIZED TRIAL ON 188 CASÉS. GUO ZHEN XU. proceedings of the fifth international congress of chinese medicine, berkeley. 1990;:25. (eng).

525- gera: 29030/di/cg

CLINICAL OBSERVATION AND EXPERIMENTAL RESEARCH IN THE TREATMENT OF ADVANCED HEPATOMA BY CHINESE HERBS. JIA XIN QIU. proceedings of the fifth international congress of chinese medicine, berkeley. 1990;:28. (eng).

526- gera: 29100/di/cg

CANCER-CURING WALKING STYLE OF QIGONG. SONG XIANG ZHANG proceedings of the fifth international congress of chinese medicine, berkeley. 1990;:98. (eng).

527- gera: 29133/di/cg
TREATMENT OF CANCER BY GUO LIN'S MOVING QIGONG. YUAN CHAO GUAN. proceedings of the fifth international congress of chinese medicine, berkeley. 1990;:132. (eng).

528- gera: 29336/di/ra

INSPECTION DE LA LANGUE EN PRATIQUE ONCOLOGIQUE. MORELLI G ET AL. revue française d'acupuncture. 1990;64:19-25 (fra*).

Intérêt de l'examen de la langue et de son évolution au cours de la maladie cancéreuse.

529- gera: 29343/di/ra HIGH INCIDENCE OF STOMACH CANCER DETECTION USING THE BI-DIGITAL O-RING TEST IN COMPARISON WITH STANDARD LABORATORY TESTS (ABSTRACT). SHIMOTSUURA Y ET AL. acupuncture and

electrotherapeutics research. 1990;15(3-4):276. (eng).

530- gera: 29351/di/ra

CLINICAL USES OF P6 ACUPUNCTURE ANTIEMESIS. DUNDEE JW ET AL. acupuncture and electrotherapeutics research. 1990;15(3-4):211-15 (eng).

Having seen pregnant women pressing the P6 point as a preventative for morning sickness, stimulation of this point for 5-10 minutes by invasive (manual or electrical acupuncture) or non-invasive (transcutaneous electrical stimulation or acupressure) means was studied as an antiemetic. In well controlled studies it was shown that acupuncture administered before the opioid premedication significantly reduced postoperative sickness for 6-8 hours. Non-invasive methods were effective for a shorter period of time, with nausea and/or vomiting often occurring after 2 hours. To be effective the treatment has to be given before the opioid. Its effect can be abolished by local anesthesia. Stimulation of a dummy point near the elbow is ineffective. While acupressure reduces morning sickness, the pressure has to be applied for 5 minutes every 2 hours. There is probably a large psychological element in this. The most rewarding results are obtained when P6 stimulation is used in conjunction with standard antiemetics before cancer chemotherapy. Here again the invasive approach is more effective than non-invasive. Recent studies have involved self-stimulation using a portable batter-operated square wave stimulator fixed at 10 Hz, and a large EKG surface electrode on the P6 point. Stimulation is applied for 5 minutes every two hours. While modern antiemetics can control vomiting, they are relatively ineffective against nausea, but this can be controlled by regular use of the stimulator. The results are most promising.

531- gera: 29494/di/tt

CERVICAL DYSPLASIA AND PROSTATE CANCER HPV. A HIDDEN LINK ?. FLAWS B. blue poppy press, boulder. 1990;:318P (eng).

532- gera: 29902/di/el

CARCINOMA OF LUNG. SHAO NIAN-FANG. the treatment of knotty diseases, shandong science and technology press. 1990;:240-7 (eng).

533- gera: 29903/di/el

ESOPHAGEAL CARCINOMA AND GASTRIC CARCINOMA. SHAO NIAN-FANG. the treatment of knotty diseases, shandong science and technology press. 1990;:247-59 (eng).

534- gera: 36862/di/ra

EL AJO Y SUS PROPIEDADES ANTICANCEROSA. LIU JINZHOU. medicina holistica, revista de medicinas complementarias. 1990;24:76. (esp).

Breve referencia a estudios japoneses y amiricanos sobre celulas cancerosas y la reaccion inmunitaria del organismo, a estudios epidemiologicos chinos en grandes consumidores de ajo que presentan una incidencia de cancer de estomago menor y a sus componentes y mecanismo de accion.

535- gera: 60049/di/ra

[SUMMARIZING BRIEFLY ON 30 CASES OF ULCERATIVE STOMATITIS CAUSED BY RADIOTHERAPY AND CHEMOTHERAPY]. ZHU ZHUANGZHUANG ET AL. hubei journal of traditional chinese medicine. 1990;1:25. (chi).

536- gera: 60155/di/ra

[EXPERIENCE WITH CURING COMPLICATIONS CAUSED BY RADIOTHERAPY AFTER SURGERY FOR CARCINOMA OF ESOPHAGUS]. PAN LIQUN. jiangsu journal of traditional chinese medicine. 1990;11(4):8-11 (chi).

537- gera: 60203/di/ra

[RECENT PROGRESS IN THE DIAGNOSIS AND TREATMENT OF LUNG CANCER BY TCM]. JI GUANG ET AL. jiangsu journal of traditional chinese medicine. 1990;11(1):36-45 (chi).

538- gera: 60315/di/ra

[CURE OF POSTOPERATIVE ULCER FOR MAMMARY CANCER]. WANG YUZHANG. beijing journal of traditional chinese medicine. 1990;3:3-5 (chi).

539- gera: 60359/di/ra

[CLINICAL OBSERVATION AND EXPERIMENTAL STUDY ON TREATMENT OF MODERATE-LATE GASTRIC CANCER WITH CHEMOTHERAPY MATCHING SHENGXUE TANG]. BEIJING HOSPITAL OF TRADITIONAL CHINESE. beijing journal of traditional chinese medicine. 1990;1:46-9 (chi).

540- gera: 60415/di/ra

[STUDIES ON THE ANTITUMOR ACTION OF LIGNUM SAPPAN]. REN LIANSHENG ET AL. china journal of chinese materia medica. 1990;15(5):50-1 (chi*).

541- gera: 60500/di/ra

IANALYSES OF CURATIVE EFFECT OF BONE HYPERPLASIA TUMOR WITH FUGUIGUNING TABLETS ON 362 CASES]. XI YONG LIN ET AL. chinese traditional patent medicine. 1990;12(3):21-3 (chi).

542- gera: 60716/di/ra

[AN OBSERVATION ON LONG-TERM FOLLOW-UP RESULT AFTER RADIOTHERAPY IN PATIENTS OF NASOPHARYNGEAL CARCINOMA WITH BLUE PURPISH TONGUE]. ZHANG BEI ET AL. journal of traditional chinese medicine. 1990;31(4):29-30 (chi).

543- gera: 60746/di/ra

THE SYNERGETIC EFFECT OF ZU ZHENG XIAN PRESCRIPTION ON THE RADIOTHERAPY OF MALIGNANT TUMOR. CLINICAL AND EXPERIMENTAL RESEARCHES]. SUN HUALI. journal of traditional chinese medicine. 1990;31(6):25-9 (chi).

544- gera: 60760/di/ra

[TREATMENT OF LATE CARDIAL AND ESOPHAGEAL CARCINOMA BY LOCAL INJECTION BASED ON COMBINATION OF TCM AND WESTERN MEDICINE]. WU PEIJUN. journal of traditional chinese medicine. 1990;31(7):33-6 (chi).

545- gera: 60763/di/ra

[A MÅGNETIC PIECE APPLIED TO NEIGUAN POINT FOR PREVENTION AND CURE OF NAUSEA AND VOMITING CAUSED BY CIS-DIAMMINO-DICHLOROPLATINUM]. LIU SHAOXIANG ET AL. journal of traditional chinese medicine. 1990;31(7):42. (chi).

546- gera: 60780/di/ra

[OBSERVATION ON THE EFFECT OF MASSAGE ON TRANSPLANTED TUMOR OF MICE]. LI ZHENGYU ET AL. journal of traditional chinese medicine. 1990;31(8):49-50 (chi).

547- gera: 60791/di/ra

[CLINICAL OBSERVATION AND MECHANICAL RESEARCH ON THE TONGUE APPEARANCE OF PATIENTS WITH CARCINOMA]. CHEN JIANMIN. acta medica sinica. 1990;5(1):35-7 (chi).

548- gera: 60804/di/ra

[EXPERIMENTAL OBSERVATION OF CHINESE MEDICATION COMPOUND NO.3 ON BOTH ANTIAGING AND INHIBITION OF TUMOR]. LIU GUANGPU ET AL. acta medica sinica. 1990;5(2):30-3 (chi*).

549- gera: 60806/di/ra

[REPORT OF INTERMEDIATE AND TERMINAL LUNG CANCER TREATED WITH FUFEI DECOCTION]. XU JIPING ET AL. acta medica sinica. 1990;5(2):37-8 (chi).

550- gera: 60816/di/ra

[80 CASES OF PRIMARY BRONCHIAL PULMONARY SQUAMOUS CELL CARCINOMA TREATED WITH CHINESE HERBS AND CHEMOTHERAPY]. PAN MINQIU ET AL. acta medica sinica. 1990;5(3):19-21 (chi*).

551- gera: 60817/di/ra

[EXPERIMENTAL RESEARCH ON THE COUNTERACTION OF CARCINOMA WITH RED PENOY ROOT 801]. HU SUKUN ET AL. acta medica sinica. 1990;5(3):22-6 (chi).

552- gera: 60871/di/ra

[RESEARCH ON BLOOD PICTURE INJURY DUE TO ANTICANCER MEDICINE IMPROVED BY ELECTRICAL STIMULATION ON POINTS]. NU HAITUNG ET AL. chinese acupuncture and moxibustion. 1990;10(2):28-30 (chi*). 12 rabbits were selected in this group, 6 of them were injected cyclophosphamide, the other 6 rabbits were don electrical stimulation on points to observe changes of white cells. It was found that white cells of stimulating group was raised. It was so difference with comparative group after statistics.

553- gera: 60908/di/ra

[PRIMARY DISCUSSION ABOUT THE EAR POINT NAMED AND LOCATION OF PROBE IN DIAGNOSIS FOR TUMOR]. CHANG YISONG. chinese acupuncture and moxibustion. 1990;10(4):24-6 (chi*).

554- gera: 60916/di/ra

[APPLICATION OF REGULATING QI IN TREATING TUMOR]. ZHAO SHUZHEN ET AL. journal of zhejiang college of traditional chinese medicine. 1990;14(4):4-8 (chi)

555- gera: 60929/di/ra

[DISCUSSION OF THE MECHANISMS FOR TREATING LATE HEPATOCARCINOMA BY NOURISHING YIN AND REMOVING HEAT]. CHEN PEIFENG. journal of zhejiang college of traditional chinese medicine. 1990;14(3):28-32 (chi).

556- gera: 60931/di/ra

[DIETETIC THERAPY OF CARCINOMAS (I)]. ZHANG XIANXIAN. journal of zhejiang college of traditional chinese medicine. 1990;14(3):41-5 (chi).

557- gera: 61170/di/ra

[THE DETECTION OF ANTI-CANCER BIOLOGICAL EFFECT OF NAPHTHOQUINONE PIGMENT L III]. LU GUIRONG ET AL. chinese journal of integrated traditional and western medicine. 1990;10(7):422-25 (chi*).

558- gera: 61171/di/ra

[THE ADJUSTABLE ACTION OF PI SHEN RECIPE ON IMMUNE FUNCTION OF MICE WITH L 1210 ASCITES]. DUAN SHAOJIN ET AL. chinese journal of integrated traditional and western medicine. 1990;10(7):426-28 (chi*).

559- gera: 61172/di/ra

[STUDY ON ANTI-CANCER EFFECTS OF SANJIE PELLET]. LIU JINFANG ET AL. chinese journal of integrated traditional and western medicine. 1990;10(7):429-32 (chi*).

560- gera: 61173/di/ra

[THE INHIBITORY EFFECT OF LIUWEI DIHUANG DECOCTION ON INDUCED MUTATION AND SPONTANEOUS TUMOR]. ZHAO LIANGFU ET AL. chinese journal of integrated traditional and western medicine. 1990;10(7):433-46 (chi*).

561- gera: 61180/di/ra

[CURATIVE EFFECTS OF MODIFIED XIAO JIN PILLS AND CHEMICAL TREATMENT AFTER OPERATION IN PATIENTS WITH MID AND LATE PHASE OF GASTRIC]. ZHOU AGAO ET AL. chinese journal of integrated traditional and western medicine. 1990;10(6):343-44 (chi*).

562- gera: 61181/di/ra

[STUDY ON THE RELATIONSHIP BETWEEN THE TONGUE COLOUR CHANGES AND THE RED CELL IMMUNE ADHERENCE ACTIVITY IN THE MALIGNANT BONE TUMOR]. SHEN LIN ET AL. chinese journal of integrated traditional and western medicine. 1990;10(6):345-47 (chi*).

563- gera: 61184/di/ra

[EFFECTS OF FU ZHENG JIE DU DECOCTION CYCLOPHOSPHAMIDUM ON THE PRODUCTION OF TUMOR NECROSIA FACTOR IN MICE]. WEI YULIN ET AL. chinese journal of integrated traditional and western medicine. 1990;10(6):353-55 (chi*).

564- gera: 61214/di/ra

[STUDY ON PREVENTION OF RADIATION ON LUNG INJURY BY SALVIA MILTIORRHIZA IN MICE]. DU HONGWEN ET AL. chinese journal of integrated traditional and western medicine. 1990;10(4):230-35 (chi*).

565- gera: 61259/di/ra

[EMPHASIZING THE EFFECT OF SPACE-TIME ON THE STUDY OF TCM-WM. A HYPOTHESIS BASED ON THE APPLICATION OF ZI-WU-LIU-ZHU IN THE TREATMENT]. LIU LUMING ET AL. chinese journal of integrated traditional and western medicine. 1990;10(1):50-8 (chi).

566- gera: 61325/di/ra

[THERAPEUTIC OBSERVATION GASTROINTESTINAL REACTION OF RADIO AND CHEMOTHERAPY BY EAR POINTS]. HUANG XIMEI ET AL. chinese acupuncture and moxibustion. 1990;10(5):7-8 (chi*).

The gastrointestinal reaction of radio and chemotherapy for a long time, has been an outstanding question in the treatment of carcinomatosis. The author stuck Semen Vaccariae seeds on ear points, like adrenal, stomach, mouth (or lung), brain (or occiput), ear-shenmen and asked the patients to press the points for four or five times a day, each time one minute. In general, at the first day of ear treatment, the gastrointestinal reaction might be relieved, and three days later symptoms disappeared or greatly alleviated. Among 139 cases, 22 cases were not obviously relieved, which were regarded as failed. According to author's observation, the curative effect wasn't related with the types of primary affection and the course of chemotherapy, but was closely connected with the degree of the patient's reaction.

567- gera: 61346/di/ra

[STUDY ON IMMUNE FUNCTION OF CANCER PATIENTS WITH SPLEEN DEFICIENCY SYNDROME]. YU REN CUN ET AL. chinese journal of integrated traditional and western medicine. 1990;10(9):535-37 (chi*).

According to this study, the immunological function was aberrant in cancer patients with Spleen-deficiency syndrome. The TII cell in normal persons (n = 26) was 30, 86 + -9.70%(means +/- S) and in these cases (n = 43) was 22. 62 +/- 9. 92%, P less than 0. 002. The cytotoxicity of NK cell in patients (n = 59) was 17. 65 +/- 10. 58%, in normal controls (n = 43)was 25. 51 +/- 14. 10%. The combining ability of NK cell in patients (n = 48) was 39. 11 +/- 19. 43%, the normal persons (n = 41) was 55. 88 +/- 17. 94%. It showed that the immune function of the cancer patients with Spleen- deficiency syndrome were markedly lower than that of normal persons. The serum IgA in saliva of patients (n = 37) was 0. 44 +/- 0. 17 microgram/ml. It was much higher than that of normals' (n = 24, 0. 30 +/- 0. 06 microgram/ml), P less than 0. 001. Some patients' NK cell function and the level of level of SIgA in saliva were recovered to normal after treatment of Shengxue Tang which could strengthen the Spleen and replenish the Kidney. These studies proved that the TCM played an important role for modulating immune function in treating cancer patients.

568- gera: 61348/di/ra

[INVESTIGATION ON BLOOD STASIS SYNDROME OF PATIENTS WITH GASTRIC MALIGNANT TUMOR PRE, POST- OPERATION AND BEFORE DEATH]. ZHOU A GAO ET AL. chinese journal of integrated traditional and western medicine. 1990;10(9):540-42 (chi*).

In the past three years, the authors observed substance of tongue and 5 indexes of blood coagulation (AT-III, Fn, Fa, VIII R:Ag and beta TG) for a long time in 140 patients of gastric malignant tumor pre-operation, one month post-operation and 3 months before death. All patients were verified as gastric carcinoma by pathological section. The results showed that the positive rate of substance of tongue in patients pre-operation was as high as 58% (51/88), 5 indexes of blood coagulation in patients had obvious difference (P less than 0.001) comparing to that of healthy persons. This implied it existed relationship between gastric malignant tumor and blood stasis in TCM and accorded with diagnosis of blood stasis syndrome. With the resection of tumor focus, the states of blood stasis in patients had been improved to a certain extent. But the positive rate of substance of tongue post-operation was still as high as 51. 1% (45/88) comparing to that pre-operation (P greater than 0.05), 5 indexes of blood coagulation in patients post-operation had no obvious improvement comparing to those pre-operation. This showed that the simple resection did not basically improve blood stasis in patients. The another important result was that the substance of tongue and 5 indexes of blood coagulation of 23 patients in last 3 months before death had more obvious blood stasis comparing to those post-operation even those pre-operation. This explained that blood stasis is one of the main characters of gastric malignant tumor before death. In conclusion, the extent of blood stasis syndrome can be used as an objective index to judge seriousness and prognosis of gastric malignant tumor patients' condition.

569- gera: 61383/di/ra

[EXPLOITATION OF ANTITUMOR MEDICINAL PLANTS V. COMPARING THE CONTENTS OF THALIDASINE IN THE ROOTS OF NODDINE MEADOWRUE (THALITRUM SQ. ZHOU YU ET AL. chinese traditional and herbal drugs. 1990;21(9):13-4 (chi*).

570- gera: 61471/di/ra

IBLOCK TREATMENT OF THE PRECANCEROUS CHANGE OF ESOPHAGEAL CANCER WITH ANTICANCER TABLET B]. ZHANG JINSHENG ET AL. journal of traditional chinese medicine. 1990;31(10):23-5 (chi).

571- gera: 61519/di/ra

TREATMENT OF HEMATOCHEZIA AFTER RADIOTHERAPY FOR UTERINE CANCER]. NAO JIANHE. new journal of traditional chinese medicine. 1990;22(9):30. (chi).

572- gera: 61521/di/ra

[TREATMENT OF NASOPHARYNGEAL CARCINOMA BY RADIOTHERAPY COMBINED WITH CHINESE DRUGS : AN ANALYSIS OF 200 CASES SURVIVING FOR MORE THAN FIVE YEARS]. ZHENG WENXUAN ET AL. new journal of traditional chinese medicine. 1990;22(9):35-6 (chi).

573- gera: 61527/di/ra

[ANTIONCOTIC MIXTURE AND ANTIHYSTEROMYOMA PILLS FOR 100 CASES OF HYSTEROMYOMA AND OVARIAN CYST]. MA FEIYA. shanghai journal of traditional chinese medicine. 1990;9:12. (chi).

574- gera: 61563/di/ra

[KILLING EFFECT OF PSORALEN OR ADDITION **IRRADIATION ON MOUSE SARCOMA CELLS].** ZHAO JIANBN ET AL. shaanxi traditional chinese medicine. 1990;11(9):427. (chi).

575- gera: 61572/di/ra

[INVIGORATE THE SPLEEN AND REMOVE BLOOD STASIS FOR MIDDLE AND LATER PERIOD CANCER OF LIVER]. XIE YUANMING. shaanxi traditional chinese medicine. 1990;11(10):448-49 (chi).

576- gera: 61585/di/ra

[50 CASES OF MIDDLE AND ADVANTAGE ESOPHAGUS CANCER TREATED BY WESTERN MEDICINE COMBINED WITH TCM]. MA TINGXING ET AL. shandong journal of traditional chinese medicine. 1990;5:34-9 (chi).

577- gera: 61589/di/ra

[EXPLORATION AND ANALYSIS OF QIAN BOWEN'S ACADEMIC THINKING FOR TREATMENT OF GASTRIC CANCER]. JIN LAN. shanghai journal of traditional chinese medicine. 1990;10:7-9 (chi).

578- gera: 61592/di/ra

JUSE OF HERBAL CHINESE DRUGS TO CURE 1 CASE OF INTRACTABLE HEADACHE AFTER OPERATION ON INTRACRANIAL OSTEOSARCOMA, OSTEOCYTE TUMOR]. GU BOKANG ET AL. shanghai journal of traditional chinese medicine. 1990;10:19. (chi).

579- gera: 61722/nd/re

[EFFECTS OF PHYTOLACCA ACINOSA POLYSACCHARIDE I ON CYTOXITOCITY OF MOUSE PERITONEAL MACROPHAGES AND ITS PRODUCTION OF TUMOR NECROSIS. ZHANG JUN PING ET AL. acta pharmacologica sinica. 1990;11(4):375-377 (chi*).

580- gera: 61774/di/ra

[TREATMENT OF COMPLETE OBSTRUCTION OF ESOPHAGUS WITH SHI DAO TONG : AN OBSERVATION OF CURATIVE EFFECT ON 200 CASES]. JIN SHUWEN ET AL. new journal of traditional chinese medicine. 1990;22(8):34-5 (chi).

581- gera: 61776/di/ra

[TCM TREATMENT OF CARDIAL CANCER WITH POSTOPERATIVE DIARRHEA : AN ANALYSIS OF 30 CASES]. ZHANG XINGRUI ET AL. new journal of traditional chinese medicine. 1990;22(8):39. (chi).

582- gera: 61839/di/ra [TCM TREATMENT OF RADIATION ENCEPHALOMYELOPATHY]. WANG SHIZHEN. new journal of traditional chinese medicine. 1990;22(3):34-5 (chi).

583- gera: 61840/di/ra

TREATMENT OF PERIPHERAL LUNG CANCER BY HUA TAN JIE WAN : A CASE REPORT]. LIANG HAO ET AL. new journal of traditional chinese medicine. 1990;22(3):36. (chi).

584- gera: 61893/di/ra

[PREVENTING AND TREATING 210 CASES OF CANCER WITH "NEW QI GONG THERAPY"]. WU GEN FU ET AL. qi gong. 1990;11(6):243-45 (chi).

585- gera: 61993/di/ra

[EFFECT OF POINT INJECTION ON HEPATIC HEMODROMOGRAM OF LIVER CANCER PATIENTS]. LIU LUMING. shanghai journal of acupuncture and moxibustion. 1990;1:4-5 (chi).

586- gera: 62053/di/ra

[APPLICATION OF EXTRA ACUPOINTS IN QUALITATIVE DIAGNOSIS OF TUMORS]. GAO GUI ET AL. liaoning journal of traditional chinese medicine. 1990;14(5):33. (chi).

587- gera: 62098/di/ra

[MANIFESTATIONS OF SUBLINGUAL MINOR BLOOD VESSEL OF PATIENTS UPPER DIGESTIVE TRACT CANCER]. JIN HONGJIANG. shandong journal of traditional chinese medicine. 1990;3:30. (chi).

588- gera: 62127/di/ra

[INJECTION OF AT AGENT (VB17 SIMILARITY) FOR 324 CASES OF PRIMARY LIVER CANCER]. LEI YONGZHONG ET AL. shanghai journal of traditional chinese medicine. 1990;8:9-10 (chi).

589- gera: 62180/di/ra

[GENERAL SITUATION OF PHARMACOLOGICAL STUDY ON CHINESE MATERIA MEDICA FOR PRIMARY LIVER CANCER]. NING ZEPO. shanghai journal of traditional chinese medicine. 1990;4:30-2 (chi).

590- gera: 62181/di/ra

[EFFECT OF SPLEEN STRENGTHENING AND QI REGULATING DRUGS ON RAT'S LIVER TUMOUR INDUCED BY ETHYLENE ESTROGENIC PHENOL]. ZHANG QINRONG ET AL. shanghai journal of traditional chinese medicine. 1990;4:33-6 (chi).

591- gera: 62182/di/ra

[EFFECT OF QI BENEFITING DECOCTION ON MICE'S WHITE CELLS AFTER CHEMOTHERAPY]. ZHANG LIYING ET AL. shanghai journal of traditional chinese medicine. 1990;4:37. (chi).

592- gera: 62208/di/ra

[SUPPORTING VITAL ESSENCE IN PREVENTION AND TREATMENT FOR LIVER CANCER]. WANG XIWEN. shanghai journal of traditional chinese medicine. 1990;2:26-33 (chi).

593- gera: 62216/di/ra

[CLINICAL THERAPY OBSERVATION OF SIDE EFFECTS OF CHEMOTHERAPY IN PATIENTS WITH FUZHENG GRANULE]. LI BINGYING ET AL. shanxi journal of traditional chinese medicine. 1990;6(4):16-7 (chi).

594- gera: 62619/di/ra

[A CASE CONTROL STUDY ON SUBLINGUAL VEIN AMONG 200 PATIENTS WITH TUMORS]. SHI ZHIYUN ET AL. traditional chinese medicinal research. 1990;3(3):13-5 (chi*)

Investigation of status of sublingual vein was carried out among 200 cases of tumors. The controls were selected from non-tumor patients and matched to the case with sex, age and other conditions. Our study showed that status of sublingual vein was markedly more abnormal in patients with tumor than that of control group, especially among the patients with tumors in digestive system, intracranial part, ENT and maxillofacial rigion. But no difference in the status of sublingual vein was found between the patients with malignant tumor and the cases of benign tumors.

595- gera: 62620/di/ra

[EXPLORATIONS ON TONGUE PICTURES IN PATIENTS WITH CARCINOMA]. YU GUIQING ET AL. traditional chinese medicinal research. 1990;3(3):16. (chi*). The method and cognition of exploration on tongue picture of patients with carcinoma were reported. The observations indicated that the tongue colors of patients with relapse and diffusion of cancer was mainly cyanotic (including light cyanotic color), that change of ESR was more rapid. The tongue color

and clinical significance were different from red tongue's, cyanotic tongue's and light cyanotic tongue's. It was suggested that the the tongue color and ESR could be used to appreciate therapeutic effectiveness and to discover signs of cancer relapse and cancerometastasis, and that tongue picture and the questionable symptoms would be used to make primary screening and mass survey in esophagus carcinoma combined with family history.

596- gera: 62621/di/ra

[PRELIMINARY STUDY ON IMMUNOLOGIC FUNCTION IN RADIOTHERAPEUTIC PATIENTS WITH NASOPHARYNGEAL CARCINOMA TREATED WITH YIQI YANGYIN TANG]. LI LIANHUA ET AL. traditional chinese medicinal research. 1990;3(3):17-23 (chi*).

The immunologic function of nasopharyngeal carcinoma (NPC) radiotherapeutic patients treated with Chinese,herbs of Yiqi Yangyin Tang(YQYYT) were reports in this paper. It showed that the numbers of WBC and lymphocyte and activity of lymphocyte were increased significantly compared with the control group. The level of IgA was markedly decreased. No changes of IgG and IgM were found. These results suggested that YQYYT was be able to improve immunologic function of NPC radiotherapeutic patients.

597- gera: 62628/di/ra

[STUDIES ON THE CHEMICAL CONSTITUENTS OF ANTITUMOR MEDICINAL PLANT OF CHINESE TUPELO (NYSSA SINENSIS)]. LUO YONG MING ET AL. chinese traditional and herbal drugs. 1990;21(11):7-9 (chi*).

598- gera: 62692/di/ra

[EXPERIENCE WITH CURED CASES OF BREAST CANCER]. GU LINJIANG. jiangsu journal of traditional chinese medicine. 1990;11(12):26. (chi).

599- gera: 62821/di/ra

[PHARMACOLOGICAL STUDY OF ANTINEOPLASTIC EFFECT OF YOUNG PEEL OF JUGLANS REGIA]. WANG SHAODONG ET AL. liaoning journal of traditional chinese medicine. 1990;14(10):37. (chi).

600- gera: 62854/di/ra

[THE RELATIONSHIP BETWEEN SEVEN MODES OF EMOTION AND CARCINOGENESIS]. ZHAO JINGFANG ET AL. jiangsu journal of traditional chinese medicine. 1990;11(11):42-3 (chi).

601- gera: 63000/di/ra

[ON THE EXPERIENCE OF TREATING PULMONARY CARCINOMA]. SUN JINXIANG. hubei journal of traditional chinese medicine. 1990;6:29-30 (chi).

602- gera: 63060/di/ra

[CLINICAL OBSERVATION ON ACUPUNCTURE AND MOXIBUSTION IN TREATING LEUKOCYTOPENIA DUE TO CHEMOTHERAPY]. CHEN HUILING ET AL. chinese acupuncture and moxibustion. 1990;10(6):1-4 (chi*). 238 cases of leukocytopenia due to chemotherapy for malignant tumor were treated with warming-needle moxibustion and moxibustion by moxa cones. 179 cases (75. 2%) obtained marked effect (white cells increased to over 4000 mm3 in 6 days); the total effective rate was 89.0 %. In the control group of 34 cases receiving standard medication, there were only 5 cases (14. 7%) with marked effectiveness; the total effective rate was 38. 2 %. The comparison between the two groups demonstrated a remarkable difference (P<0. 01). Elevation of white cells by acupuncture and moxibustion therapy is evidently not related to the difference in disease, and the course or the scheme of the chemotherapy, but has obvious connection with the basal hemogram. The lower the hemogram, the more difficult it is to increase the white cells. The result of this treatment showed that to increase the level of white cells, acupuncture and moxibustion therapy is a simple and effective method.

603- gera: 63076/di/ra

[CHINESE MATERIA MEDICA PREVENTION POISON AND SIDE REACTION BY ONCOMA CHEMOTHERAPY]. JING

GUANG ET AL. shaanxi traditional chinese medicine. 1990;11(11):485-86 (chi).

604- gera: 63077/di/ra

[CHINESE MATERIA MEDICA IN LATE STAGE CARCINOMA OF STOMACH]. LI BIANLIN. shaanxi traditional chinese medicine. 1990;11(11):487. (chi).

605- gera: 63078/di/ra

ITONG YOU DECOCTION FOR LATE STAGE CARCINOMA OF ESOPHAGUS AND CARCINOMA OF STOMACH]. HUANG ZHIHUA ET AL. shaanxi traditional chinese medicine. 1990;11(11):488. (chi).

606- gera: 63322/di/ra

[TREATMENT OF OPERATED LATE GASTRIC CARCINOMA WITH PRESCRIPTION OF STRENGTHENING THE PATIENT'S RESISTANCE AND DISPELLING THE INVADING EVIL IN COMBINATION WITH CHEMOTHERAPY : FOLLOW-UP STUDY OF 158*]. WANG GUAN TING ET AL. chinese journal of integrated traditional and western medicine. 1990;10(12):712-16 (chi*)

One hundred and fifty-eight cases of late gastric carcinoma (111 males and 47 females, age 30-70 years) were treated postoperatively with TCM prescriptions of strengthening the patient's resistance and dispelling the invading evil in combination with chemotherapy. The main ingredients were Radix Codonopsis pilosula, Radix Astragali seu Hedysari, Rhizomea Atractylodes, Herba Solani hyrati, Herba Oldenlandiae and Herba Salviae. The prescription was individualized by adding or substracting some herbs according to TCM syndrome diagnosis at the time of patient's visit. The decoction was given daily for a long time, three to four years or even longer. It was given alone or together with regimes of chemotherapy at random. The average survival rates at 3 and 5 years were 41.07% and 30.36% respectively. Seven patients have lived for more than 11 years. 10 years survival rate was 12.5%. The combination of Chinese medicine with chemotherapy was better than chemotherapy regime alone (single 5-Fu or CCNU + 5-Fu, MMF) . Immunological studies of the survivors revealed an enhancement of both humoral and cellular immunity especially the function of peripheral NK cells. The decoction had been given to mice bearing Ehrlich ascites tumor. The amount of ascitic fluid was reduced and its cancer cell count decreased besides a significant increase in over all survival rate of the animals. It suggested that the above prescription might have an inhibitory or even killing effect on tumor cells. T cell immunity of the treated mice was also improved as seen among patients. (acme: 902320)

607- gera: 63323/di/ra

[CLINICAL EFFECT OF CHEMOTHERAPY COMBINED WITH CHINESE HERBS AND WESTERN DRUGS ON LEUKOCYTES OF GASTRIC CANCER PATIENTS]. CHEN JIAN ZHONG. chinese journal of integrated traditional and western medicine. 1990;10(12):717-19 (chi*).

608- gera: 63324/di/ra

[THE EFFECT OF LIU WEI DI HUANG OR JIN GUI SHEN QI DECOCTION AS AN ADJUVANT TREATMENT IN SMALL CELL LUNG CANCER]. LIU XU YI ET AL. chinese journal of integrated traditional and western medicine. 1990;10(12):720-22 (chi*).

Eighty-three patients with small cell lung cancer were randomized with or without using a traditional Chinese Kidneytonifying decoction [Liuwei Dihuang Decoction or Jingui Shenqi Decoction] in chemotherapy or radiotherapy courses. 74 patients were available for analysis. The two treatment groups were well-matched in age, sex, stage and preformance status. There was a statistically significant difference in response rate and the median survival between two groups. The overall response rate (CR + PR) was 91.5% for Chinese herb group and 46.9% for control group (P<0.001). The median survival was 16 months for the traditional Chinese Kidney-tonifying decoction group, and 10months for the control group (P<0.05). Survival curve (Kaplan-meire's) of Chinese herb group was better than that of the control group. 10 patients of Chinese herb group was alive beyond more than 2 years. Until now, 4 patients in the Chinese herb group, one in

the control group are still enjoying their disease-free life for more than 7 years. Hematologic toxicities were observed much frequently in the patients of the control group (P<0.005 and 0. OI/WBC and BPC). Results of animal experiments with the same traditional medicinal decoctions as used in clinic have showed immuno- enhancement activities. These results have showed that the traditional Chinese Kidney-tonifying decoction may enhance non-specific immunology activities and may be much useful for solid cancer patients as an adjuvant treatment.

609- gera: 63326/di/ra

[OBSERVATION OF BODY TEMPERATURE CHANGE ON CANCER PATIENTS WITH YIN OR YANG DEFICIENCY AND BLOOD STASIS SYNDROME]. CAI GUANG RONG ET AL. chinese journal of integrated traditional and western medicine. 1990;10(12):726-28 (chi*).

The body temperature change of cancer patients with Yin or Yang deficiency and blood stasis syndrome varied within normal limits in a day. The researchers divided 60 cases of cancer patients into Yin or Yang deficiency and blood stasis syndrome groups. Their body temperature was measured 6 times daily with radio thermometer. The results showed: at different time during one day, temperature change of patients in Yin deficiency group fluctuated obviously. The mean temperature of patients in blood stasis group was higher than other two groups. The daily highest temperature of patients in the above two groups appeared at 6:00 pm. Temperature change of patients in Yang deficiency group was stable relatively and the highest temperature appeared at 2:00 pm. The palm temperature of patients who feel dysphoria with feverish sensation in chest, palms and sole was not higher than armpit temperature. These observations should provide new objective bases for clinical measurement time of temperature and syndrome diagnosis.

610- gera: 63773/di/ra [TREATMENT OF 48 CASES OF ESOPHAGUS OBSTRUCTION CAUSED BY CARDIAC CANCER WITH "KAI GUAN SAN"]. YAN FU-RONG ET AL. zhejiang journal of traditional chinese medicine. 1990;25(6):270 (chi).

611- gera: 63774/di/ra

[TREATING 72 CASES OF RECTAL CANCER WITH "TONG YOU XIAO JIAN TANG" COMBINED WITH EXTERNAL THERAPY]. ZHANG SHU-LIN ET AL. zhejiang journal of traditional chinese medicine. 1990;25(6):271 (chi).

612- gera: 63929/di/ra

IDATA ANALYSE BETWEEN CLINIC DIAGNOSIS AND TONGUE PRESENTATIONS OF CANCER OF THE ESOPHAGUS AND CARDIA PATIENTS]. SHI BIANZHEN. shaanxi traditional chinese medicine. 1990;11(8):340 (chi).

613- gera: 80757/di/ra

APPLICATION OF TRADITIONAL CHINESE DRUGS IN COMPREHENSIVE TREATMENT OF PRIMARY LIVER CANCER. LIU FANG. journal of traditional chinese medicine. 1990;10(1):54-60 (eng).

The present paper is a summary for treating 50 cases of Stage Il primary liver cancer by the Integrated method of traditional Chinese and Western medicine.It was found by comparative observation that the average survival time of the Spleen-Deficiency (SD) type patients was markedly longer than that of Phlegm-Dampness-Stagnancy (PDS), Qi- and Blood-Stagnancy (QBS) and Liver-Kidney-Yin-Deficiency (LKYD) types, indicating that the SD type patients might have a better prognosis, and that the Chinese herbal medicine was an alternative for treating intermediate and late carcinoma.

614- gera: 80758/di/ra

SYMPOSIUM ON THE PREVENTION AND TREATMENT OF GASTRIC CARCINOMA WITH TRADITIONAL CHINESE MEDICINE. YU GUIQING. journal of traditional chinese medicine. 1990;10(1):61-9 (eng).

615- gera: 80762/di/ra

THERAPEUTIC EFFECTS OF GINSENG AND MITOMYCIN C ON EXPERIMENTAL LIVER TUMORS. DOU MONG HAU ET AL. international journal of oriental medicine.

1990;15(1):10-4 (eng).

616- gera: 80767/di/ra

EXPERIMENTAL INVESTIGATIONS OF THE XIAO JIN PELLET PLUS AND MINUS FOR ANTI-CANCER APPLICATIONS. ZHOU AGAO ET AL. international journal of oriental medicine. 1990;15(1):36-42 (eng).

617- gera: 80924/di/ra

IGROWTH INHIBITORY EFFECTS OF MOXIBUSTION AGAINST IMPLANTED MH134 TUMOR CELLS]. X. journal of the japan society of acupuncture. 1990;40(1):89. (jap).

618- gera: 81103/di/ra

STUDIES OF MEDICAMENTOUS INHIBITORY THERAPY FOR ESOPHAGEAL PRECANCEROUS LESIONS. 3- AND 5-YEAR INHIBITORY EFFECTS OF ANTITUMOR-B,RETINAMIDE AND RIBOFLAVIN. LIN PEIZHONG ET AL. proceedings of the chinese academy of medical sciences and the peking union medical c. 1990;5(3):121-9 (eng).

619- gera: 81308/di/ra

NEW PROGRESS IN THE FOUR DIAGNOSTIC METHODS OF CANCER. YU GUIPING ET AL. journal of tcm. 1990;10(2):152-55 (eng).

620- gera: 81327/di/ra

RADIOPROTECTIVE EFFECT OF GANODERMA LUCIDUM (LEYSS. EX. FR) KARST AFTER X-RAY IRRADIATION IN MICE. HSUE YIN HSU ET AL. american journal of chinese medicine. 1990;18(1-2):61-70 (eng).

621- gera: 81512/di/ra

NEW ADVANCE OF ACUPUNCTURE AND MOXIBUSTION IN THE TREATMENT OF TUMOR AT HOME AND ABROAD. TIAN YAXIAN. chinese journal of acupuncture and moxibustion. 1990;3(2):136-42 (eng).

This paper covers the diagnosis, treatment and experimental research of tumor by acupuncture moxibustion at home and abroad. Some tumors may be diagnosed by the meridian theory. Acupuncture improve some clinical symptoms of the cancer, prolong the patient's survival time, reduce and prevent chemotherapeutic reaction and relieve the pain resulted from malignant tumor. The minimization of the tumor and disappearance by acupuncture has also been reported. The mechanism for treating cancer by acupuncture may be related to immunity and bioelectricity. The investigation on acupuncture treatment of cancer is a subject, which is waiting for further study.

622- gera: 81518/di/ra

CLINICAL OBSERVATION ON 30 CASES OF CARCINOMA OF ESOPHAGUS AND STOMACH TREATED BY ACUPUNCTURE. CUI KAIXIAN. chinese journal of acupuncture and moxibustion. 1990;3(1):7-10 (eng).

623- gera: 81545/di/ra

EFFETTI ESTRATTO DI SPIROBOLUS BUNGII SUL TUMORE TRAPIANTATO NEI TOPI. PULCRI R ET AL. orientamenti mtc. 1990;7(2):85-96 (ita).

624- gera: 81547/di/ra

L'AGOPUNTURA CON MICROONDE PER IL DEFICIT IMMUNITARIO PROVOCATO DA RADIOTERAPIA IN PAZIENTI NEOPLASTICI. LIGUORI A. orientamenti mtc. 1990;7(2):106-16 (ita).

625- gera: 81566/di/ra

L'AZIONE ANTIEMETICA DEL PUNTO "NEIGUAN" IN PAZIENTI ONCOLOGICI IN TRATTAMENTO CHEMIO E RADIOTERAPICO. PICA G ET AL. rivista italiana di agopuntura. 1990;69:53-60 (ita).

626- gera: 81808/di/el

TUMOR. ZHENG WENGAO ET AL. in chinese medicated diet, publishing house of shanghai college of tcm, shanghai. 1990;:596. (eng).

627- gera: 81970/di/ra

SQUAMOUS CELL CARCINOMA. ZHAO CHUNYIN ET AL. in clinic of tcm (2), publishing house of shanghai college of tcm, shanghai. 1990;:402-19 (eng).

628- gera: 82178/di/cg

THE USE OF ACUPRESSURE AS AN ANTI-EMETIC **DURING CHEMOTHERAPY (abstract). LEWITH GT. 2eme** congres mondial d'acupuncture et moxibustion, paris. 1990;:112. (eng).

This paper presents the results of o double-blind randomised placebo-controlled study of acupuncture at pericardium 6 (Neiguan versus a sham acupuncture point. Detailed results, as well as statistical and clinical methodology, will be presented. The study was carried out in the Department of Oncology at Southampton University.

629- gera: 82278/di/cg COMPARATIVE STUDY OF THERAPEUTIC EFFECTS BETWEEN MOXIBUSTION AND INFRARED ON MICE BEARING SUBCUTANEOUS TUMORS. HAU DOUMONG ET AL. 2eme congres mondial d'acupuncture et moxibustion, paris. 1990;:184. (eng).

630- gera: 82280/di/cg
THE EFFECTS OF ACUPUNCTURE AND ITS REINFORCING AND REDUCING MANIPULATIONS ON IMMUNOSURVEILLANCE AND T-CELLS SUBSETS IN THE PATIENTS WITH PRIMARY BRONCHOGENIC CARCINOMA AND PRIMARY CARCINOMA OF LIVER. YU YAOCAI ET AL. 2eme congres mondial d'acupuncture et moxibustion, paris. 1990;:184. (eng).

631- gera: 82377/di/cg

SQUĂMOCELLULAR CARCINOMA OF THE POSTERIOR PILLAR OF THE RIGHT TONSIL. CLINIC OBSERVATION, THERAPY AND DISCUSSION.

FRANGIPANE R. 2eme congres mondial d'acupuncture et moxibustion, paris. 1990;:246. (eng).

632- gera: 82445/di/ra

DUNDEE JW ET AL. ACUPUNCTURE PROPHYLAXIS OF CANCER CHEMOTHERAPY-INDUCED SICKNESS. BOTTOMLEY DM ET AL. complementary medical research. 1990;4(1):48-9 (eng).

Présentation de l'article de DUNDEE JW, Acupuncture prophylaxis of cancer chemotherapy-induced sickness, Journal of the Royal Society of Medicine. (ref. GERA: 83179).

633- gera: 82641/di/ra

APPLICAZIONE DELLA FARMACOLOGIA TRADIZIONALE CINESE NEL TRATTAMENTO GLOBALE DEL CANCRO DEL FEGATO. LIU FANG. rivista italiana di medicina tradizionale cinese. 1990;4:37-41 (ita).

634- gera: 82642/di/ra

SIMPOSIO SULLA PREVENZIONE E TRATTAMENTO NEL CARCINOMA GASTRICO CON LA MTC. YU GUIQING ET AL. rivista italiana di medicina tradizionale cinese. 1990;4:42-8 (ita).

635- gera: 82832/di/ra

EFFECTS OF S86019,AN ACTIVE COMPONENT FROM PURALIA LOBATA, ON CELL DIFFERENTIATION AND CELL CYCLE TRAVERSE OF HL-60 CELLS. LIU HONGYAN. chinese journal of cancer research.

1990;2(3):51-3 (eng).

The effects of S86019, an active component from Puralia lobata, on the induction of cell differentiation and cell cycle traverse of HL-60 cells were described. It was shown that cell proliferation of HL-60 cells was inhibited by S86019 in vitro. Under the action of S86019 the HL-60 cells were induced to differentiate into metamyelocytes, myelocytes and much matured cells with ba nded or segmented nucleus. Flow cytometry demonstrated that the cell population of HL-60 cells was blocked at G1 phase which resulted in the elevation of percentage of G1 cells and decrease of percentage of cells in S phase. Experimental results demonstrated that \$86019 is an active inducer of cell differentiation in HL-60

636- gera: 83204/di/ra

ACUPUNCTURE AND ACUPOINT INJECTION FOR LATE STAGE PRIMARY LIVER CANCER. CHEN YUFEN. american journal of acupuncture. 1990;18(4):355-57 (eng). This paper reports on the result of the treatment with acupuncture and acupoint injection combined with traditional and general medicine (excluding chemotherapy and radiotherapy) in 34 cases of late stage primary liver cancer. After treatment, the tumor disappeared in two patients who recovered their health and were able to work 3 years, 3 months and 4 years, 2 months respectively. Another three patients lived comfortably with their tumor 2-4 years and were able to do regular housework. Median survival after treatment of the 34 cases was 7. 84 months. Pain in all cases was

637- gera: 83212/di/ra

TREATMENT OF ALLERGIC RHINITIS BY MEDICINAL INJECTION AT FENGMEN ACUPOINT. ZHAO CHANGXIN ET AL. journal of traditional chinese medicine.

1990;10(4):264-66 (eng).

12V, injection de 0,25ml de Kenacort bilatéralement contre IM de 1ml, 1 séance. Les deux traitements ont le même effet.

638- gera: 83383/di/re

IODINE-131 UPTAKE IN A PATIENT WITH THYROID CANCER AND RHEUMATOID ARTHRITIS DURING ACUPUNCTURE TREATMENT. NOBUAKI OTSUKA ET AL.

clinical nuclear medicine. 1990;15(1):29-31 (eng). A patient with thyroid carcinoma had an abnormal accumulation of I-131 in the areas of both feet and hands on whole body scan. The sites of abnormal accumulation of I-131 were similar to those on bone scintigraphy. The radiographic examination of the lesions showed characteristic findings of rheumatoid arthritis and also the presence of small gold needles for acupuncture treatment was demonstrated. There were no findings of bone metastases. Although the mechanism of accumulation of I-131 in this patient is unknown, interpreters of I-131 whole body scintigraphs should keep this case in mind when acupuncture treatment has been done. The authors can only speculate on a common blood flow mechanism for enhanced HMDP and I-131 uptake in this arthritic patient who had been treated by

639- gera: 83395/di/re

A PILOT STUDY OF

METOCLOPRAMIDE, DEXAMETHASONE, DIPHENHYDRAMI NE AND ACUPUNCTURE IN WOMEN TREATED WITH CISPLATIN. AGLIETTI L ET AL. cancer chemother pharmacol. 1990;26:239-40 (eng).

A total of 26 women who submitted to cisplatin chemotherapy received as antiemetic treatment a combination of metoclopramide, dexamethasone and diphenhydramine. Acupuncture according to traditional Chinese medicine was also carried out. The results were compared with those obtained in a similar group of women with cancer, who were treated in the same setting with the same antiemetic combination but without additional acupuncture. Acupuncture was shown to increase complete protection from nausea and to decrease the intensity and duration of nausea and vomiting. However, the difficulties of performing acupuncture routinely in daily practice are a hindrance to its wider use.

640- gera: 83892/di/ra

ENFERMEDAD TUMORAL EN EL ANCIANO. FERNANDEZ RODRIGUEZ M. medicina tradicional china. 1990;53:39 (esp).

641- gera: 83957/di/ra

PONENCIAS DEL SIMPOSIUM SOBRE LA PREVENCION Y TRATAMIENTO DEL CARCINOMA GASTRICO CON MEDICINA TRADICIONAL CHINA. YU GUIQING ET AL revista de la medicina tradicional china. 1990;1(1):49-55 (esp).

642- gera: 83958/di/ra

APLICACION DE LA FARMACOPEA TRADICIONAL CHINA (FTC) EN EL TRATAMIENTO COMBINADO DEL CANCER

PRIMARIO DE HIGADO. LIU FANG. revista de la medicina tradicional china. 1990;1(1):60 (esp).

643- gera: 83978/di/ra

ULTIMOS AVANCES EN LA UTILIZACION DE LAS "4 DIAGNOSIS" EN EL DIAGNOSTICO DEL CANCER. YUNG GUIQING ET AL. revista de la medicina tradicional china. 1990;1(2):30 31 (esp).

644- gera: 85023/di/re

PROLONGATION OF THE ANTI-EMETIC ACTION OF P6 ACUPUNCTURE BY ACUPRESSURE IN PATIENTS HAVING CANCER CHEMOTHERAPY. DUNDEE JW ET AL. journal of the royal society of medicine. 1990;83:360-2

Previous work from our department has shown that P6 acupuncture is an effective adjuvant to conventional antiemetic therapy for patients having citotoxic drugs. However, its efficacy is limited to about 8h. The current studies show that the application of an elasticized wrist band with a stud placed over the acupuncture point, and pressed regularly every 2h, will prolong the antiemetic action for 24h. This proved more effective in hospitalized patients (20/20) than in outpatients (15/20), presumably due to the encouragement given to regularly press the stud.

645- gera: 85026/di/re

ACUPRESSURE PROLONGS THE ANTIEMETIC ACTION OF P6 ACUPUNCTURE. DUNDEE JW ET AL. british journal of clinical pharmacology. 1990;29:644-5 (eng).

L'acupuncture au 6MC a une action antiémétique qui dure 8h chez des patients soumis à une chimiothérapie. L'acupressure par l'intermédiaire d'une bande élastique effectuée par le patient 5mn toutes les 2h prolonge l'effet de

646- gera: 29139/di/ra

A VISIT TO ANTIAGING AND ANTICANCER RESEARCH INSTITUTE OF THE CSGS. LUO QING. gigong and health. 1991;1(1):37-9 (eng).

647- gera: 29162/di/ra

EFFECTS OF GYNOSTEMMA PENTAPHYLLUM MAKINO ON THE IMMUNOLOGICAL FUNCTION OF CANCER PATIENTS. HOU JUN ET AL. journal of traditional chinese medicine. 1991;11(1):47-52 (eng).

648- gera: 29163/di/ra

OBSERVATION ON LONG-TERM THERAPEUTIC EFFECT IN NASOPHARYNGEAL CARCINOMA PATIENTS WITH CYANOSIS OF THE TONGUE AFTER RADIOTHERAPY. ZHANG BEI ET AL. journal of traditional chinese medicine. 1991;11(1):53-6 (eng).

649- gera: 29272/di/ra

[EFFECTS OF ACUPUNCTURE ON HUMAN IMMUNE RESPONSE (REPORT 2). COMPARISON OF THE RESPONSES BETWEEN NORMAL VOLUNTEERS AND CANCER PATIENTS]. X. journal of the japan society of acupuncture. 1991;41(1):112. (jap).

650- gera: 29384/di/ra ACUPRESSURE AS AN ANTIEMETIC IN CANCER CHEMOTHERAPY. PRICE H ET AL. complementary medical research. 1991;5(2):93-4 (eng).

Acupressure using Sea Bands was used as an anti-emetic in patients receiving cancer chemotherapy. The study was a randomized, single blind, crossover study, comparing acupressure on the correct point (Pericardium 6) with an incorrect point on the ankle. The hypothesis to he tested was that acupressure over Pericardium 6 decreases nausea during the time patients actually receive chemotherapy. The conclusion demonstrated a highly significant difference between the correct and incorrect acupressure point. Those receiving wrist acupressure had significantly less sickness and nausea and their overall mood and condition was substantially better than those treated with the incorrect acupressure point. This was particularly noticeable in those receiving chemotherapy with a high emetic potential.

651- gera: 35649/di/ra

THE ANTITUMOR EFFECTS OF QIGONG-EMITTED EXTERNAL QI AND ITS INFLUENCE ON THE IMMUNOLOGIC FUNCTIONS OF TUMOR-BEARING MICE. LEI XUE-FENG ET AL. journal of tongji medical university. 1991;11(4):253-6 (eng).

652- gera: 36870/di/ra

SINDROMES TUMORALES PELVICOS. NGUYEN J. medicina holistica, revista de medicinas complementarias. 1991;29:5-9 (esp).

Síntesis de los protocos diagnósticos y terapéuticos en los síndromes tumorales pélvicos ginecológicos: Fibomas uterinos, Quistes de ovario, Tumores, cánceres de útero. Con resumen de los estudios clínicos disponibles sobre el tema. Tratamiento por acupuntura y fitoterápia en MTCH en forma de arbol diagnóstico- terapéutico. Justificación de los datos citados con una rigurosa documentación.

653- gera: 37309/di/ra

DIE WIRKUNG VON PANAX GINSENG AUF DAS DURCH DIATHYLNITROSAMIN AUSGELOSTE LEBERKARZINOM DER RATTE EINEGEHENDE STUDIE. LI X ET AL. journal of tongji medical university. 1991;11(2):73-80 (deu*).

The curative effects of Panax ginseng on hepatocellular carcinoma (HCC) in rats induced by diethylnitrosamine (DEN) were further studied. The size of cancerous nodes was quantitatively measured by image analysis instrument. The hepatocellular hyperplastic foci were quantitatively analysed with gamma-GT stain under microspectrophotometer. Pathological changes of hepatocytes were observed under light and electron microscope. The results of the investigation indicated that ginseng had significant inhibitory effect on HCC in rats induced by DEN and prolonged the survival time of the rats with HCC. The mechanism of inhibition of the development of HCC by ginseng was also preliminarily approached.

654- gera: 37455/nd/re

RECENT ADVANCES IN PHARMACOLOGIC STUDY OF NATURAL ANTICANCER AGENTS IN CHINA. XU B. mem inst oswaldo cruz. 1991;86(2):51-4 (eng).

In this paper a number of anticancer agents of natural origin will be presented. Hydroxycamptothecin (HCPT) was found to produce a strong inhibitory action on a variety of animal tumors. It is also effective for treatment of patients with gastric carcinoma, liver carcinoma, tumor of head and neck or leukemia. Pharmacologic studies showed that it could depress S phase of tumor cells significantly and cause formation of cellular chromatid breaks. By means of alkaline elution and nick translation methods it has been proved that HCPT induced DNA single strand breaks remarkably. Homoharringtonine (HHRT) was shown to be effective against acute leukemia. Recent experiments in tumor-bearing mice indicated that (HHRT) could diminish tumor metastasis. Using molecular hybridization technique it was demonstrated that (HHRT) decreased the content of c-myc RNA in the cytoplasm but not in the nuclei. Lycobetaine (LBT) possessed strong inhibitory effects on a number of ascites tumors. In clinical trials it was effective against ovarian and gastric carcinomas. It is able to intercalate into DNA. Oxalysine (OXL) is a new antibiotic and shown to be effective against tumor metastatis. When used in combination with 5-FU, its anticancer action could be enhanced. Other natural compounds such as indirubin, beta-elemene, irisquinone, oridonine, norcantharidin and PSP have been also found to possess antitumor action.

655- gera: 37460/nd/re

THE RESEARCH ON RADIOPROTECTIVE AGENTS IN CHINESE MATERIA MEDICA. WANG BJ. mem inst oswaldo cruz. 1991;86(2):165-7 (eng).

A series of studies has been carried out in the field of traditional medicine for searching radioprotective agents. According to the theory of traditional Chinese medicine, many prescriptions were tested with experimental animals. Some of them could raise the survival rate of dogs irradiated with lethal dose of gamma-rays by 30-40%. Some symptoms of radiation sickness could be improved. More than one thousand kinds of Chinese herbs were screened. Some of them have

pronounced radioprotective activities. A series of bioactive components were isolated from these herbs. The mechanism of radiation protection were studied. Having the capability of hemopoietic system and immune system may be the characteristics of these Chinese herbs.

656- gera: 50615/di/re

THE ROLE OF TRANSCUTANEOUS ELECTRICAL STIMULATION OF NEIGUAN ANTI-EMETIC ACUPUNCTURE POINT IN CONTROLLING SICKNESS AFTER CANCER CHEMOTHERAPY. MCMILLAN CM ET AL.

physiotherapy. 1991;77:499-502 (eng).

The already proven anti-emetic action of P6 (Neiguan) acupuncture has been used with success in patients having cancer chemotherapy. The more patient-acceptable alternative to needling, transcutaneous electrical stimulation of P6, has been equated using a simple, custom-built stimulator and large surface electrodes. This can be administered by the patient and preliminary findings show it to be a useful adjunct to both the older anti-emetics and the new 5 HT 3 antagonist, ondansetron

657- gera: 50772/di/re

ENHĂCEMENT OF THE ANTI-EMETIC ACTION OF ONDASETRON BY TRANSCUTANEOUS ELECTRICAL STIMULATION OF THE P6 ANTI-EMETIC POINT IN PATIENTS HAVING EMETIC CYTOTOXIC DRUGS.

MCMILLAN CM ET AL. british journal of cancer. 1991;64:971-2 (eng).

Etude de l'action anti-émétique du 6MC (électrostimulation de surface, 5 minutes toutes les 2 heures, 5 jours), chez des patients subissant une chimiothérapie basée sur Cisplatin associé à d'autres antibiotiques et traités par Ondansetron (Antagoniste 5HT) à visée antiémétique. Suivi sur 2 cures : une avec électrostimulation du 6MC, l'autre sans. Le 6MC potentialise l'action de Ondansetron.

658- gera: 62500/di/ra

[RELĂTION OF NEOPLASTIC THERAPY AND HUO XUE HUA YU]. YU RENGCUN ET AL. the practical journal of integrating chinese with modern medicine. 1991;4(3):189. (chi).

659- gera: 62521/di/ra

[STUDY ON THE TONGUE PICTURE OF BLOOD STASIS SYMPTOM-COMPLEX]. LI NAI MIN ET AL. chinese journal of integrated traditional and western medicine.

1991;11(1):28-30 (chi*).

The objective indices of tongue picture of blood stasis symptom-complex in 400 patients with portal hypertension, primary hepatic carcinoma, coronary heart disease, pulmonary heart disease, intermediate and advanced gastric carcinoma were observed during the period of past 6 years. Pale purplish tongue, purplish tongue, bluish purplish tongue, deep-red purplish tongue, dark tongue, yellow purplish tongue etc. were found in these patients. All these were the tongue colour of blood stasis. Ecchymosis, patechiae, streaks, the width of sublingual vein, the appearance of veins and prominences, B mode ultrasonic examination displaying the width of intralingual vein and tissue sound transmission of the tongue body, the blood stasis changes of tongue tip microcirculation, the wave form changes of tongue rheogram had an important significance for diagnosis of blood stasis. There were significant differences in these variables between the subject group and the healthy group or the subject group and the blood non-stasis group

660- gera: 62533/di/ra

[TREATING CYST WITH PRINCIPLE OF BLOOD ACTIVATING AND STASIS REDUCING]. MAO SANBAO. shanghai journal of traditional chinese medicine. 1991;2:9. (chi).

661- gera: 63128/di/ra

[RECENT DEVELOPMENT OF TREATMENT OF THE PULMONARY CANCER BY TCM]. YU ZHI QIANG. shaanxi traditional chinese medicine. 1991;12(1):42. (chi).

662- gera: 63158/di/ra

[SURVEY OF THE TREATMENT OF CARCINOMA BY COMBINATION OF TRADITIONAL CHINESE MEDICINE WITH RADIATION]. SUN HUALI ET AL. journal of traditional chinese medicine. 1991;32:44. (chi).

663- gera: 63165/di/ra

[RELIEF OF OBSTRUCTION IN ESOPHAGEAL CANCER BY ADDED NANXING BANXIA DECOCTION]. WANG QINGCAI ET AL. liaoning journal of traditional chinese medicine. 1991;18(1):27-26 (chi).

664- gera: 63206/di/ra

[STUDY ON ANTICANCER ELEMENT SELENIUM IN LIUWEI DIHUANG DECOCTION]. LIN SILAN ET AL. china journal of chinese materia medica. 1991;16(1):31-7 (chi*). The contents of selenium in Liuwei Dihuang Decoction (six traditional Chinese drugs and their decoction, five decoctions in different compatible ways, a complex decoction of all crude drugs) were determined by fluorescence spectrophotometric method. The results showed that element selenium was rich in Dihuang. The dissolution ratio of selenium in decoction of each single crude drug was about 30-40%.

665- gera: 63252/di/ra

[TO OBSERVE ANTI-NEOPLASTIC EFFECT OF COMPOUND INSECT DRUGS ON MICE WITH TUMOUR]. SHEN XIAOHENG ET AL. shanghai journal of traditional chinese medicine. 1991;1:47. (chi).

666- gera: 63256/di/ra

[TCM EXTERNAL TREATMENT FOR FISTULA IN THE ANASTOMOSIS IN THE NECK AFTER OPERATION OF CARCINOMA OF THE OESOPHAGUS]. PAN LIQUN. jiangsu journal of traditional chinese medicine. 1991;12(1):9-11 (chi).

667- gera: 63398/di/ra

[A TALK ON SYMPTOM-SIGN DIFFERENTIATION FOR TREATMENT OF COUGHING AFTER SURGICAL MANAGEMENT OF CARCINOMA OF ESOPHAGUS]. PAN LIGUN ET AL. jiangsu journal of traditional chinese medicine. 1991;12(5):7-9 (chi).

668- gera: 63499/di/ra

[STUDY ON THE TREATMENT OF CARCINOMATOUS HYDROPERITONEUM BY EXTERNAL APPLICATION OF CHINESE DRUG XIAO SHUI FANG]. LI PEIWEN ET AL. journal of traditional chinese medicine. 1991;32(7):28 (chi).

669- gera: 63560/di/ra

[EXPERIMENTAL STUDY OF ANTITUMOR EFFECT OF THE STEROID ESTER GLYCOSIDE FROM CYNANCHUM AURICULATUM]. GU LIGANG ET AL. journal of beijing college of traditional chinese medicine. 1991;14(3):32 (chi).

670- gera: 63584/di/ra

[CLINICAL OBSERVATION OF CURATIVE EFFECT OF CANCER REFLECTED BY A COMBINATION OF TONGUE COLOR AND EST]. LIU SHAOXING. liaoning journal of traditional chinese medicine. 1991;18(7):19 (chi).

671- gera: 63621/di/ra

[AN OBSERVATION ON THE LONG-TERM CURATIVE EFFECT OF COMBINED TREATMENT OF YANG YIN YI QI DECOCTION AND RADIOTHERAPY IN NASOPHARYNGEAL CARCINOMA]. LI LIANHUA ET AL. journal of traditional chinese medicine. 1991;32(5):32 (chi).

672- gera: 63670/di/ra

[OBSERVATION ON THE CURATIVE EFFECT OF "POWDER FOR ANALGESIA" IN TREATING PAIN DUE TO TUMOR: A REPORT OF 32 CASES]. WANG JING ET AL. zhejiang journal of traditional chinese medicine. 1991;26(5):201 (chi).

673- gera: 63689/di/ra

[TREATMENT OF TONGUE CANCER: A CLINICAL REPORT OF TWO CASES]. BEI RUNPU. new jounal of traditional chinese medicine. 1991;23(5):42 (chi).

674- gera: 63709/di/ra

[TREATING INTRACRANIAL TUMOR WITH QIGONG]. GUO ZHENG RONG. qigong. 1991;12(6):269 (chi).

675- gera: 64108/di/ra

ANALGESIC EFFECT OF ACUPUNCTURE ON TUMOR PAIN: 77 CASES. (abstract). SHEN RONGFU ET AL. acupuncture research. 1991;16(3-4):243 (eng). 72 cases of tumor patients at the late stage were treated with acupuncture. The total effective rate of analgesic with acupuncture treatment was 58% and the ineffective rate was 42%.

676- gera: 64109/di/ra

CLINICAL OBSERVATION ON ACUPUNCTURE AT ZUSANLI POINTS FOR TREATMENT OF CANCEROUS ABDOMINALGIA IN 69 CASES. (abstract). XU SHUYING ET AL. acupuncture research. 1991;16(3-4):244 (eng). For 4 years (1987-1990), 69 cases of cancerous abdominalgia were treated by acupuncture at bilateral Zusanli points. The effective rates for the gastric, hepatic, colonic cancers, and the intraperitioneal lymphosarcomas were 93%, 87%, 88% and 90% respectively.

677- gera: 64165/di/ra

[OBSERVATION OF SHENG XUE TANG ON IMMUNOLOGICAL FUNCTIONS OF CANCER PATIENTS WITH SPLEEN DEFICIENCY SYNDROME]. RAO XIE-QING ET AL. chinese journal of integrated traditional and western medicine. 1991;11(4):218 (chi*).

242 cases of cancer patients with spleen-deficiency syndrome have been studied. It has been found that some immune indexes such as phagocytic activities of macrophages, lymphocytic transformation rate, E-rosette forming rate, Th-cell in T cell subgroup, the NK cell cytotoxicity and combining ability, of cancer patients with spleen-deficiency syndrome were lower than those of normal donor (P < 0. 001 or 0. 002). After the patients were treated with sheng xue tang (SXT), the immune indexes above mentioned have been increased significantly. These results suggest that SXT can improve the cell-mediated immune function, therefore, it can strengthen the anticancer ability of the patient, prolong the survival period of some patients.

678- gera: 64175/di/ra

[THE ULTRASTRUCTURE CHANGES OF TONGUE COATING IN CHRONIC ATROPHIC GASTRITIS WITH DEFICIENCY COLD OR STAGNATED HEAT SYNDROME]. BI YING ET AL. chinese journal of integrated traditional and western medicine. 1991;11(3):138 (chi*).

This paper reports the electron-microscopic observations of tongue exfoliated cells in 17 cases of chronic atrophic gastritis (CAG), 14 cases of chronic superficial gastritis, 9 cases of gastric carcinoma with deficiency cold (DC) and 5 stagnated heat (SH) syndromes, and 12 normal cases. The results by electron-microscope showed that cell-organs and desmosome remains in the DC group were significantly higher than those in the SH group (P < 0.05). However, the damage degree on the tonifibrils and surface structure of cells in the SH group was more serious than those in the DC group (P < 0. 05). The observations by light and electron-microscope revealed that the changes of microstructure and ultrastructure of tongue exfoliated cells in CAG did not distinguish from gastric carcinoma. But the changes in CAG was significantly different when compared with chronic superficial gastritis (P < 0. 05). From the above, the authors consider that the changes of tongue exfoliated cells could provide some morphological basis for the early stage of diagnosis.

679- gera: 64203/di/ra

[OBSERVATION ON THE INHIBITORY EFFECT OF MOXIBUSTION AND D-PHENYLALANINE ON THE TRANSPLANTABLE SARCOMA 180 IN MICE]. YANG YOUMI ET AL. chinese acupuncture and moxibustion. 1991;11(2):37 (chi*).

In the present study, healthy adult mice were used. All of the mice after inoculation were divided at random into tumor-bearing, d-phenylalanine (D-pA) and D-pA plus moxibustion

groups. The results were as follows: (1) The inhibition rates of D-pA group was 12.7%. This indicated that the inhibitory effect on the tumor size was no significantly effected by the D-pA alone. In D-pA plus moxibustion group, the inhibitory rates of tumor weight was 35.5%. This showed that the D- pA plus moxibustion had a certain antitumor effect. (3) comparison of the tumor weight between the D-pA plus moxibustion and tumor-bearing groups had statistically significant difference. This indicated that the D-pA plus moxibustion could markedly decrease the tumor weight, therefore it had a certain inhibitory effect on sarcoma 180.

680- gera: 64204/di/ra

[THE INFLUENCE OF ACUPUNCTURE ON LYMPHOCYTES T AND THEIR SUBGROUP IN PATIENTS WITH MALIGNANT TUMOUR]. LI JUAN ET AL. chinese

acupuncture and moxibustion. 1991;11(2):39 (chi*). The author adopted the SPA floral hoop method to observe the influence of acupuncture on lymphocytes T and their subgroup, monoclonal antibody in the peripheral blood of the patients with solid malignant tumour. The observation was carried out for groups, the group of herbal medicines (20 cases), the group of herbal medicines combined with acupuncture (21 cases), and the controlled group of healthy people (25 cases). The result found that the influence of herbal medicines on lymphocytes T and their subgroup is no notable significance, while the same indices in the group of herbal medicine combined with acupuncture were remarkably changed before and after the treatment so the comparison between the two groups has notable significance. The outcome reveals that the mechanism of acupuncture in heightening the immunological function of the patients with tumour is to raise the percentage of the subgroup OKT3+ thus adjust the ratio between OKT4+ and AKT3+.

681- gera: 64237/di/ra

[ANALYSIS ON EAR-ACUPUNCTURE UTILIZED AS THE DIAGNOSTIC METHOD FOR 332 CASES OF OCCUPATION DISORDERS]. LI ZHANYUA ET AL. chinese acupuncture and moxibustion. 1991;11(4):32 (chi*).

The article presents the computerized ear-acupoint information diagnostic apparatus that was employed to make diagnosis using the electric-detection on ear-acupoints for 332 preoperative or pre-gastroscopic in patients from surgery and gynecology departments in the authors' hospital. Moreover, this diagnostic method was compared with the diagnosis made by the pathological measures. The pathology diagnostic methods diagnosed 174 cases as malignant tumour and the ear-point diagnosis was identical with the pathology in 146 cases, making up 83.9%. The article also depicts 6 ear-points to confirm the benignancy or malignancy of the tumours and illustrate them with pictures, and meanwhile elaborates the criterion of diagnosis made by ear-acupoint. This method is very simple and easy to do, thus certain clinical value in the preliminary mass screening of tumour and determination of the nature of tumours. Nevertheless, the definite mechanism of the method needs further research.

682- gera: 64310/di/ra

[TREATMENT OF 26 CASES WITH CHEMOTHERAPY INDUCED NAUSEA AND VOMITING BY MODIFIED WENDAN TANG]. ZHU HAIHONG ET AL. journal of shandong college of traditional chinese medicine. 1991;15(4):28 (chi*).

Modified wendan decoction in treating leukemia chemotherapy-induced nausea and vomiting was analysed in 26 cases by means of an autocontrol method. The results showed that the total effective rate in wendan decoction group was 96. 2%, and that in the control group 76. 0%. The former was superior to the later by comparison (P<0. 053). It was considered that chemotherapy-induced nausea and vomiting was caused by accumulation of phlegm-heat in the middle-jiao resulting from a long-term retention of phlegm-damp, and dysfunction of the spleen and stomach by fire- toxin factors. The action of wendan decoction was to restore the function of the spleen and the stomach in ascending and descending by clearing away gallbladder-heat and regulating the stomach, eliminating phlegm-heat and lower the adverse flow of qi. The decoction, therefore, not only arrest nausea and vomiting

induced by chemotherapy, but also enhance antineoplastic activity of antineoplastic and antitoxin ability of the body organism.

683- gera: 64392/di/ra

[ANALYSIS OF PICTURE OF THE TONGUE AND PATHOGENESIS OF PATIENTS WITH GASTRIC CARCINOMA]. FAN DERONG ET AL. journal of traditional chinese medicine. 1991;32(10):34 (chi).

684- gera: 64460/di/ra

[CONTROLLING CANCEROUS PAIN TO RAISE THE LIVING QUALITY]. YU GUIQING ET AL. journal of traditional chinese medicine. 1991;32(11):47 (chi).

685- gera: 64461/di/ra

[PROGRESS OF STUDIES ON MOXIBUSTION TREATING CANCER AND SIDE EFFECTS OF CHEMOTHERAPY]. JIA CHUNSHENG ET AL. journal of traditional chinese medicine. 1991;32(11):52 (chi).

686- gera: 64493/di/ra

[STUDIES ON THE ANTI-TUMOR EFFECT OF CETRARIA LAEVIGATA RASSAD POLYSACCHARIDES]. WANG GUIZHI ET AL. china journal of chinese materia medica. 1991;16(4):242 (chi*).

687- gera: 64520/di/ra

[AN INVESTIGATION ON THE RESOURCES OF MEDICINAL FUNGI IN SICHUAN]. QIN SONGYUN ET AL. china journal of chinese materia medica. 1991;16(3):130 (chi*).

This paper reports the classification, distributional traits, new distribution, specific species of medicinal fungi, as well as the status of anticancer medications edible and medicinal fungi in Sichuan. Rational suggestions have been made with regard to the cultivation, development and utilization of those important species with proven curative effect.

688- gera: 64679/di/ra

[ISOLATION AND IDENTIFICATION OF 20 (R)-GINSENOSIDE-RH2 (AN ANTI-CANCER CONSTITUENT) FROM THE FRUIT OF PANAX GINSENG MAYER CA]. ZHAO YUQING ET AL. china journal of chinese materia medica. 1991;16(11):678 (chi*).

689- gera: 64792/di/ra

[GENERAL INTRODUCTION OF THE RESEARCH ON THE IMMUNOLOGICAL MECHANISM FOR ANTI-SENILITY EFFECT OF ACUPUNCTURE]. LI JINGPEI ET AL. chinese acupuncture and moxibustion. 1991;11(6):43 (chi*). The author has summarized the outcome of study on the immunological anti-senile effect of acupuncture. The article mainly presents the change of the immunological system in the senile, and the influence of acupuncture on the immunological function, on the diseases of aged, on the infectious disease and on the tumor.

690- gera: 64811/di/ra

[CLINICAL OBSERVATIONS ON TREATMENT OF ARREST OF BONE MARROW IN CHEMOTHERAPY WITH JIANGU FUXUE TANG]. MA FENGYOU. journal of traditional chinese medicine and chinese materia medica of lijin. 1991;11: (chi).

691- gera: 64818/di/ra

[DIFFERENTIATION OF SYNDROME IN THE TREATMENT FOR ADVANCED STAGE CANCER OF THE LIVER]. CUI KOUSHI. shaanxi traditional chinese medicine. 1991;12(7):484 (chi).

692- gera: 64934/di/ra

[AN OBSERVATION OF PATHOMORPHOLOGY OF TISSUES OF RECTAL CANCER IN HUMAN BODY, INFLUENCED BY A CHINESE HERB-FA 867 SOLUTION]. JI XIANGDONG ET AL. acta medica sinica. 1991;6(3):27 (chi).

693- gera: 64943/di/ra

[A SURVEY OF RESEARCH ON PRIMARY LIVER CANCER

TREATED WITH CHINESE HERBS]. WANG XIMING. acta medica sinica. 1991;6(3):59 (chi).

694- gera: 65235/di/ra

[CONTROL OBSERVATION ON 760 CASES OF TUMOR DETECTED FROM OTOPOINTS]. LI ZHANYUN ET AL. practical journal of integrating chinese with modern medicine. 1991;4(10):615 (chi).

695- gera: 65294/di/ra

TREATMENT OF LATE STAGE OF PRIMARY LIVER CANCER BY CHINESE DRUGS: A CLINICAL OBSERVATION OF 35 CASES]. WU YUSHENG. new journal of traditional chinese medicine. 1991;23(10):21

696- gera: 65334/di/ra [OBSERVATION ON THE T LYMPHOCYTE SUBGROUP IN THE PERIPHERAL BLOOD OF CARCINOMATOSIS PATIENTS TREATED WITH SELF-CONTROL QIGONG THERAPY]. HU ZHONG-LIAN ET AL. qigong. 1991;12(10):446 (chi).

697- gera: 65403/di/ra

IFU ZHENG SHENG BAI TANG DECOCTION FOR LEUKOPENIA FROM RADIOTHERAPY AND CHEMOTHERAPY]. LI SHUSHAN. shaanxi traditional chinese medicine. 1991;12(6):241 (chi).

698- gera: 65435/di/ra

[LIFTING AND INDUCING ASTRINGENCY, PURGING AND OPENING VISCERA FOR RECTAL CANCER]. XU ZHENYE. shanghai journal of traditional chinese medicine. 1991;7:10 (chi).

699- gera: 65443/di/ra [HYPERPLASIA OF MAMMARY GLANDS AND MAMMARY CANCER]. CHEN HONGFENG. shanghai journal of traditional chinese medicine. 1991;7:31 (chi).

700- gera: 65487/di/ra

IBRIEF INTRODUCTION OF TESTED RECIPES COMMONLY USED IN PREVENTION AND TREATMENT OF SIDE-EFFECTS OCCURRING IN PATIENTS WITH CANCER IN THE COURSE OF CHEMOTHERAPY]. ZHANG DAI-JIAN. journal of traditional chinese medicine and chinese materia medica of jilin. 1991;4:31 (chi).

701- gera: 65585/di/ra

ICLINICAL OBSERVATION ON THERAPEUTIC EFFICACY OF VOMITING CAUSED BY CHEMOTHERAPY WITH 654-2 AND PHENERGAN INJECTED TO DOUBLE TSUSANLI ACUPOINT]. CHANG YIN ET AL. beijing journal of traditional chinese medicine. 1991;4:36 (chi).

702- gera: 65678/di/ra

ICLINICAL STUDY ON PREVENTION AND TREATMENT RADIOTHERAPY AND CHEMOTHERAPY IN SHENG XIE PELLET]. HUANG GUOZHI ET AL. practical journal of integrating chinese with modern medicine. 1991;4(7):405 (chi).

703- gera: 65714/di/ra

ISTUDIES ON THE CHEMICAL CONSTITUENTS OF ANTICANCER PLANT NYSSA SINENSIS OLIV]. LUO YONGMING ET AL. china journal of chinese materia medica. 1991;16(7):424 (chi).

704- gera: 65771/di/ra

[PROGRESS OF RESEARCH IN COMPOUND CHINESE HERBS IN THE TREATMENT OF EXPERIMENTAL TUMOR]. SUN ZAIDIAN ET AL. practical journal of integrating chinese with modern medicine. 1991;4(12):757 (chi).

705- gera: 65800/di/ra [CYTOKINETIC EFFECTS OF EMODIN ON HUMAN LUNG CANCER A-549 CELL]. GHEN JIA-KUN ET AL. chinese traditional and herbal drugs. 1991;22(12):543 (chi*).

706- gera: 65888/di/ra

[EXPLORATION OF DIAGNOSING MALIGNANT TUMOR COMBINED WITH F 8836 INFORMATION OF BODY'S EARS]. LI RONGXIAN ET AL. practical journal of integrating chinese with modern medicine. 1991;4(4):195

707- gera: 65889/di/ra

[CLINICAL OBSERVATION AND EVALUATED LEVEL ON 17 CASES OF ADVANCED CARCINOMA OF LUNG TREATED WITH TRADITIONAL CHINESE MEDICINE]. AN YAPING. practical journal of integrating chinese with modern medicine. 1991;4(4):198 (chi).

708- gera: 65891/di/ra

[EFFECT OF ANTI-OPPILATION OF ZHENG YIE CHENG QI TANG ON LATE CANCER]. YAN YINGUA. practical journal of integrating chinese with modern medicine. 1991;4(4):202 (chi).

709- gera: 65892/di/ra

[CLINICAL OBSERVATION ON 19 CASES OF SMALL CELL CARCINOMA OF LUNG TREATED WITH YI QI YANG YIN TANG AND CHEMOTHERAPY]. CHEN BIN ET AL. practical journal of integrating chinese with modern medicine. 1991;4(4):204 (chi).

710- gera: 65908/di/ra
[TREATMENT OF LATE PRIMARY LIVER CANCER WITH HEPATIC ARTERY CATHETER PERFUSION OF DMF DESIGN TOGETHER WITH TCM]. SHEN MINGHE ET AL journal of zhejiang college of traditional chinese medicine. 1991;15(2):31 (chi).

711- gera: 65992/di/ra

[CLINICAL OBSERVATION ON THE TREATMENT OF PRIMARY LUNG CANCER OF LATE STAGE BY FEI LIU PING EXTRACT]. PIAO BINGKUI ET AL. journal of traditional chinese medicine. 1991;32(4):21 (chi).

712- gera: 66093/di/ra

[CLINICAL OBSERVATION ON PREVENTING AND TREATING THE SIDE EFFECTS OF CYTOXAN WITH CHINESE AND WESTERN MEDICINES]. XIONG JIAMING. hubei journal of traditional chinese medicine. 1991;4:17 (chi).

713- gera: 66220/di/ra

ITREATMENT OF 69 CASES OF CARCINOMA OF ESOPHAGUS IN LATE STAGE WITH BOTH CHINESE AND WESTERN MEDICINE]. WU LIANGCHUN. journal of zhejiang college of traditional chinese medicine. 1991;15(4):29 (chi).

714- gera: 66259/di/ra

ITCM TYPING AND HEMORHEOLOGIC CHANGES IN 20 PATIENT WITH ADVANCED LUNG CANCER]. ZHANG YOUMING ET AL. tianjin journal of traditional chinese medicine. 1991;2:19 (chi).

715- gera: 66278/di/ra

[ANALYSES OF CURATIVE EFFECT OF YADANZI OIL EMULSION FOR RECURRENT AND METASTATIC-GASTRIC AND INTESTINAL CANCER ON 35 CASES]. CHENG JIANHUA ET AL. chinese traditional patent medicine. 1991;13(9):21 (chi).

716- gera: 66343/di/ra

[EFFECT OF ACUPUNCTURE AND MOXIBUSTION ON LEUKOPENIA DURING CHEMOTHERAPY]. HUANG XIMEI ET AL. henan traditional chinese medicine. 1991;11(5):32 (chi).

717- gera: 66361/di/ra

[TCM TREATMENT FOR CANCEROUS JAUNDICE]. YU QINGWEI ET AL. shanghai journal of traditional chinese medicine. 1991;5:10 (chi).

718- gera: 66393/di/ra

[EXPERIMENTAL RESEARCH OF THE EFFECT OF POLYSACCHARIDES IN SEMEN ZIZIPHIS SPINOSAE AND ZIZIPHIS SPINOSAE ON ENHANCING THE IMMUNE FUNCTION OF MICE INJURED BY RADIATION]. LANG XINGEAI ET AL. china journal of chinese materia medica. 1991;16(6):366 (chi*).

719- gera: 70040/di/re

CHAI-LING-TANG (JAPANESE NAME: SAIREI-TO) AS AN ORAL ADJUVANT. EGAWA Y ET AL. int j

immunopharmacol. 1991;13(7):1031-6 (eng). Immunomodulating and anti-tumor activities of orally administered Chai-Ling-Tang (Japanese name: sairei-to, ST) were investigated. The oral administration of ST into mice augmented the antibody response to intraperitoneally administered 2, 4, 6-trinitrophenyl-haptenated sheep red blood cells (TNP-SRBC). Orally administered ST showed also an enhancing effect on the antibody response to TNP-SRBC administered by the oral route. In addition, orally administered ST markedly activated the peritoneal macrophages to enhanced phagocytic and lysosomal enzyme activities. A significant inhibition of tumor growth was observed in a syngeneic tumor-mouse system when ST was administered orally. These results suggest that ST has an efficiency as an oral adjuvant or an oral biological response

720- gera: 70043/nd/re

EXPERIMENTAL ANTITUMOR AGENTS FROM SOLANUM INDICUM L. CHIANG HC ET AL. anticancer res.

1991;11(5):1911-7 (eng).

ß-Sitosterol (SI-0), ß-sitosterol glucoside (SI-1), dioscin (SI-2), methyl protoprosapogenin A of dioscin (SI-3), methyl protodioscin (SI-4) and protodioscin (SI-5) were isolated and characterized from the whole plant of Solanum indicum L. (Solanaceae). Except for ß-sitosterol, these compounds have not been previously isolated from Solanum indicum L. Both CHCl3 soluble (SI-IV) and insoluble (SI-V) fractions of the ethanolic extract (SI-I) showed cytotoxicity on seven cancer cell lines: Colo-205 (colon), KB (nasopharynx), HeLa (uterine cervix), HA22T (hepatoma), Hep-2 (laryngeal epidermoid), GBM8401/TSGH (glioma) and H1477 (melanoma). The purified constituents, SI-2 and SI-4 showed more potent effects by DEA and MTT assay. SI-2,3,4 and 5 also demonstrated cytotoxicity on cultured C6 glioma cells by PRE assay, ans SI-3,4 and 5 showed a tumor inhibitory effect in vivo in C6 glioma cells. In addition, SI-2 had an inhibitory effect on the DNA synthesis of C6 glioma cells at 10 µg/ml.

721- gera: 70065/nd/re

LEUKOGENIC EFFECT OF COMPLEX INDIGO POWDER. LIU CX ET AL. journal of ethnopharmacology. 1991;34(1):83-6 (eng).

Oral administration of complex indigo powder, an anti-scrofula powder, at a daily dose of 0.5 g/kg, raised the leukocyte count in rats injured by irradiation, but prophylactic administration could not prevent the leukopenia induced by irradiation. This dosage did not affect growth in rats and oral doses up to 6 g/kg did not induce any toxic reactions in

722- gera: 70126/nd/ra

ESTABLISHMENT AND PRELIMINARY APPLICATION OF SPERMIDINE RADIOIMMUNOASSAY WITH 1251-LABELLED MONOCLONAL ANTIBODY AND SOLID PHASE ANTIGEN. FAN Z ET AL. chinese medical sciences journal. 1991;6(1):24-7 (eng)

Purified anti-spermidine monoclonal antibody was labelled with radioactive iodine by the lodogen method and spermidinebovine serum albumin (SPD-BSA) conjugate was used to coat polystyrene beads as solid phase antigen. The new solid phase 125I-labelled spermidine radioimmunoassay (RIA) depends on the competition between spermidine in the sample and the solid phase antigen for the limited amount of 125Ilabelled monoclonal antibody. The sensitivity of this assay was 10 ng/ml higher than that of liquid RIA for spermidine with 14Clabelled spermidine. The coefficients of variation (CV) within and among batches were 4% and 13% respectively. The sample-batch capacity was increased from 20 (liquid RIA with 14C-labelled spermidine) to 150-200 by using this method. Because of its simplicity, the solid phase RIA kit is very

convenient for population survey. This RIA could be used to determine spermidine in saliva for the diagnosis of precancerous lesions. In a preliminary study saliva spermidine levels in different populations were measured among 130 normal subjects, 202 esophageal epithelial hyperplasia cases treated with anti-tumor B for 5 years, 207 esophageal epithelial hyperplasia cases as control, and 55 esophageal cancer patients. The levels were $1,795 \pm 1,481, 3,470 \pm 6,981, 9,753$ \pm 17,641 and 18,090 \pm 21,509 ng/ml, respectively, with the saliva spermidine levels in precancerous and cancer patients being significantly higher than that of normal subjects (P < 0. 001); the level in patients treated with anti-tumor B was significantly lower than that of controls (P < 0.001). This decreased saliva spermidine content was coincident with the 47. 3% reduction of canceration rate seen in precancerous patients after a 5-year treatment with anti-tumor B.

723- gera: 70138/nd/re

[EFFECTS OF TUMOR PROMOTING HERB WIKSTROEMIA CHAMAEDAPHNE EXTRACT ON V79 CELLS AND WB LIVER CELLS L: I. CORRELATION BETWEEN CELLULAR **GROWTH AND GAP JUNCTIONAL INTERCELLULAR** COMMUNICATION]. LIN ZH ET AL. shih yen sheng wu hsueh pao. 1991;24(4):307-15 (chi).

A Chinese herb, wikstroemia Chamaedaphen (WC) extract, recently has been shown to be a potential tumor promoting agent on uterine cervical carcinoma induced by HSV-2 or MCA in mice. To determine whether the tumor promoting effects of WC extract were mediated through inhibition of gap junctional intercellular communication (GJIC) with relation to cellular growth, experiments were conducted on Chinese hamster V79 cells and rat WB liver cells by utilization of SLDT method for GJIC detection and cell growth curve examination, 3H-TdR incorporation, mitotic index (MI) and Flow Cytometry (FCM) methods. TPA was used for comparative purpose. WC extract inhibited GJIC and stimulated cell growth in a dose (2-200 micrograms/ml) and time (0-72 hr)-dependent manner in both cell lines. Both WC extract and TPA treatments increased V79 cell growth rate. The average cell doubling-time was decreased from 36. 5 hr in control V79 cells to 28. 2 hr in WC extract (10 micrograms/ml) and 20. 9 hr in TPA (50 ng/ml) treatment by the 3rd day. Stimulating effect of both drugs on DNA synthesis of V79 cells was demonstrated. The results of FCM and MI indicated that the cell number of M-phase cells was increased after drug treatment. It is suggested that (1) tumor promoting effect of WC extract might be mediated through inhibition of GJIC: (2) inhibition of GJIC is closely correlated with increased cell growth rate and entry of cell division cycle.

724- gera: 70144/nd/re

RADIATION-PROTECTIVE AND PLATELET AGGREGATION INHIBITORY EFFECTS OF FIVE TRADITIONAL CHINESE DRUGS AND ACETYLSALICYLIC ACID FOLLOWING HIGH-DOSE GAMMA-IRRADIATION.

WANG HF ET AL. journal of ethnopharmacology. 1991;34(2-3):215-9 (eng)

High doses of 60Co radiation (4. 0-8. 0 Gy) in mice, rats and rabbits caused increases in rate of platelet aggregation during the first 5 days after irradiation. The inhibitory effects of the extracts of five Chinese drug plants and acetylsalicylic acid on rate of platelet aggregation were observed in both in vitro and in vivo tests, averaging 23-53% in vitro and 46-69% in vivo. Antiradiation tests on mice vs. 7. 5-8. 0 Gy of gammaradiation, using the plant extracts and acetylsalicylic acid as protective agents, increased survival rates by 8-50% for the plant extracts and 35% for acetylsalicylic acid.

725- gera: 82781/di/ra

EFECTOS ANTITUMORALES DEL MUERDAGO (VISCUM ALBUM). DIFERENTES ESPECIES Y FORMAS DE APLICACION. QUIREZA RAMOS O. medicina holistica. 1991;4(26):48-54 (esp).

726- gera: 82874/di/el EVALUATION OF CHINESE DRUGS IN THE TREATMENT OF NEOPLASTIC DISEASES. SUN YAN. recent advances in chinese herbal drugs, science press, beijing. 1991;:236-44 (eng).

727- gera: 83317/di/ra

DIE REGULIERUNG DES QI-MECHANISMUS BEI DER TUMORBEHANDLUNG. ZHAO SHUZHEN ET AL. chinesische medizin. 1991;6(3):66-75 (deu*).

[Treating tumours by regulating the Qi-mechanism]. First, the autor outlines how disturbances in the Qi-mechanism can cause tumours. After explaining four methods of regulating Qi he describes the clinical applications in treating fever, pains or bleedings etc.

728- gera: 83420/di/re

NONINVASIVE STIMULATION OF THE PC6 (NEIGUAN) ANTI-EMETIC ACUPUNCTURE POINT IN CANCER CHEMOTHERAPY. DUNDEE JW ET AL. journal of the royal society of medicine. 1991;84(4):210-12 (eng).

The beneficial effects of transcutaneous electrical stimulation (TCES) of the PC-6 anti-emetic point (Neiguan) as an adjuvant to standard anti-emetics was studied in over 100 patients in whom chemotherapy-induced sickness was not adequately controlled by antiemetics alone. Although the results were not quite as good as with invasive acupuncture, more than 75% of patients achieved considerable benefit from what was a nontoxic procedure. The use of large diffuse low impedance electrodes simplifies the technique. The 2 hourly application of commercially available Sea Bands prolongs the anti-emetic action. Best results were obtained from the 2 hourly self-administration of 5 minutes of TCES of PC-6 using a simple battery-operated TENS machine (15 Hz) to activate a large, easy-to-place surface electrode and increasing current until Qi is elicited.

729- gera: 83469/di/ra

CLINICAL OBSERVATION ON 130 CASES OF SUPERFICIAL TUMORS TREATED BY ACUPUNCTURE. LIANG QINGHU. chinese journal of acupuncture and moxibustion. 1991;4(2):79-83 (eng).

This article presents 130 cases of superficial tumors treated by acupuncture. Local points needling methods were mainly cutaneous needling, Yang Ci acupuncture (quintuple), Qi Ci acupuncture (triple), Leopard-spot needling, Collateral needling, Hegu acupuncture, meridian needling and radial needling according to the variety of tumor, Reducing technique was used. Stagnated blood or other contents in the tumor were squeezed. Distant points needling were also combined in the light of differentiation. Among 130 cases, 44 were cured (33. 8%). 53 marked effectiveness, and 27 effective. The total effective rate was 95. 39%.

730- gera: 83524/di/ra

LA MEDICINA TRADIZIONALE CINESE E PATOLOGIE TUMORALI DELLA DONNA. PRIME VALUTAZIONI SULLE POSSIBILITA DI APPLICAZIONE DELLA FARMACOTERAPIA CINESE NELLA PIU DIFFUSA PATOLOGIA NEOPLATICA FEMMINILE*. SOTTE L. rivista italiana di medicina tradizionale cinese. 1991;2:45-51 (ita).

731- gera: 83547/di/ra

EFFETI DEL GYNOSTEMMA PENTAPHYLLUM MAKINO SULLA FUNZIONE IMMUNOLOGICA DEL PAZIENTE NEOPLASTICO. HOU JUN ET AL. rivista italiana di medicina tradizionale cinese. 1991;3:69-71 (ita).

732- gera: 83548/di/ra

OSSERVAZIONE SULL'EFFICACIA A LUNGO TERMINE DELLA RADIOTERAPIA IN PAZIENTI CON CARCINOMA NASOFARINGEO E CIANOSI DELLA LINGUA. ZHANG BEI ET AL. rivista italiana di medicina tradizionale cinese. 1991;3:73. (ita).

733- gera: 83596/di/ra

L'IMMUNOLOGIA E I TUMORI ALLA LUCE DELLA MTC. MORELLI G. rivista italiana di agopuntura. 1991;72:43-4 (ita).

734- gera: 83607/di/ra

MAGNETIC DISK APPLIED ON NEIGUAN POINT FOR PREVENTION AND TREATMENT OF CISPLATIN-INDUCED NAUSEA AND VOMITING. LIU SHAOXIANG ET AL. journal

of traditional chinese medicine. 1991;11(3):181-3 (eng). 6MC unilatéral (à l'opposé de la perfusion). a) Soit Magnétothérapie : application de la face Nord d'un aimant maintenu 2h après la fin de la perfusion. b) Soit non-magnétothérapie : application d'un simple disque de fer. c) Soit acupression : application d'une bille metallique. 61,4% des patients n'ont aucune nausée ou vomissement avec magnétothérapie, alors qu'aucun patient ne voit la disparition des signes avec les deux autres methodes de contrôle.

735- gera: 83626/nd/re

KRANKENPFLEGE IN CHINA. BESUCH EINES KREBSZENTRUMS. MANGEL AN AUFKLARUNG. GLAUS A. krankenpfl soins infirm. 1991;84(9):8-10 (deu). [Nursing in china. Visiting a cancer center. Lack of patient information].

736- gera: 83651/di/ra

REVIEW OF TING POINTS IN THE DOG: CANCER THERAPY. SWANSON JR. veterinary acupuncture newsletter. 1991;17(1):9-10 (eng).

737- gera: 83665/di/ra

BIOLOGICAL ACTIVITIES AND THE ACTIVE COMPONENTS OF RHUBARB. ITSUO NISHIOKA. international journal of oriental medicine. 1991;16(4):193-212 (eng).

This paper introduces the biological activities, active components, results of recent scientific studies and proposals for future study areas on rhubarb. Purgative activity: until recently, the purgative activity of rhubarb was attributed to oxyanthraquinones. However, recent research has identified sennosides A-F as being responsible constituents, and experiments on mice have added confirmation. Sennoside A is metabolized by intestinal bacteria, where it is transformed into rhein anthrone, and produces a purgative action. Antibacterial activity: research in China is being carried out on the inhibitory effect of anthraguinones, notably aloe-emodin, and on Shigella, Salmonella and Vibrio bacteria. In Japan, rhein has also been found to have bactericidal action against Bacteroides Fragilis, the intestinal bacterial that sometimes causes cholecystitis. These results provide scientific rational for applications to bacillary diarrhea and gallbladder infections. Antitumor activity: rhein and emodin were found to be effective against malignant melanoma in mice, emodin against mammary tumor in mice, and rhein against Ehrich's ascitic carcinoma. Anti- inflammatory and analgesic activities: lindleyin, isolated from rhubarb, was responsible for these activities, and was found to be as effective as aspirin and phenylbutazone. Effect on nitrogen metabolism: the aqueous extract of rhubarb was effective in decreasing blood urea nitrogen (BUN) in the rat. Rhatannin, isolated from rhubarb, was the active principle, and was found to have BUN decreasing ability through increasing the production of glutamine in the liver by inhibiting the breakdown of muscle protein. Improvement of renal failure: the effect of the aqueous extract of rhubarb was examined in rats with renal failure induced by a diet of adenine. The aqueous extract showed a significant decrease of urea nitrogen and creatinine in serum, indicating an improvement in renal failure.

738- gera: 83669/di/ra

APPLICATION OF ORIENTAL HERBAL FORMULAS AND SCIENTIFIC RESEARCH (XXI): TANG-KUEI FOUR COMBINATION AND GINSENG AND TANG-KUEI COMBINATION. HONG-YEN HSU. international journal of oriental medicine. 1991;16(4):236-51 (eng).

The tang-kuei formulas have been widely used in Chinese medicine for the treatment of blood disorders of both the interior and the exterior. Ginseng and Tang-kuei Ten Combination has also found special applications for menstrual disorders, and, in recent times, for the post-surgical treatment of cancer patients. The effectiveness rate is consistently high when administration is proper in regard to the conformation of the patient being treated, the precise syndrome for which it is being used, and the specific formula which is being applied.

739- gera: 83694/di/ra

CYTOTOXIC ACTIVITIES OF TANSHINONES AGAINST

HUMAN CARCINOMA CELL LINES. WU-LUNG WU ET AL. american journal of chinese medicine. 1991;19(3-4):207-16

Fifteen tanshinone analogues isolated from the chloroform extract of Danshen roots (Salviae Miltiorrhizae Radix) by chromatographic procedures were tested for their cytotoxic activities against KB, Hela, Colo-205 and Hep-2 carcinoma cell lines. Several of them were effective at concentrations below 1 μg/ml concentrations. Tanshinone analogues with either hydroxy substitutions or olefinic feature in ring A demonstrated higher biologic activities. Analysis of structure- activity relationship indicate that the basic requirement for activity is the presence of a furano-o-naphthoguinone in the molecule. Compounds which lack an intact furan ring were found to be inactive. It is suggested that the planar phenanthrene ring of the tanshinones may be essential for interaction with DNA molecule whereas the furano-o- quinone moiety could be responsible for the production of reactive free radicals in the close vicinity of the bases to

740- gera: 83697/di/ra

ANTICANCER EFFECTS OF A CHINESE HERBAL MEDICINE, JUZEN-TAIHO-TO, IN COMBINATION WITH OR WITHOUT 5- FLUOROURACIL DERIVATIVE ON DNA-SYNTHESIZING ENZYMES IN 1,2-DIMETHYLHYDRAZINE INDUCED COLONIC CANCER*. SHINOBU SAKAMOTO ET AL. american journal of chinese medicine. 1991;19(3-4):233-41 (eng)

Juzen-taiho-to (JTT; [Shi-quan-da-bu-tang], a Japanese modified Chinese herbal prescription) in combination with an anticancer drug UFT (5-fluorouracil derivative) prevented the body weight loss and the induction of the colonic cancer in rats treated with a chemical carcinogen 1,2-dimethylhydrazine (DMH), and suppressed markedly the activity of thymidylate synthetase (TS) involved in the de novo pathway of pyrimidine synthesis in colonic cancer induced by DMH.

741- gera: 83702/di/ra

PRELIMINARY STUDY ON ANTIRADIATION EFFECT OF KUEI-PI-TANG (gui pi tang). HSUE-YIN HSU ET AL. american journal of chinese medicine. 1991;19(3-4):275-84

In order to evaluate the potential action of Kuei-Pi-Tang as an antiradiation agent, colony forming units of bone marrow cells in the spleen (CFUs) were used. Different sequences of X-ray irradiation with or without Kuei-Pi-Tang administration in the groups of ICR strain mice were intraperitoneally injected 10mg/20g or 20mg/20g, once a day, for consecutive seven days before or after 4Gy X-ray irradiation. After the different treatments, whole blood was collected from the tail endings to observe the fluctuation of leukocytes, erythrocytes and thrombocytes. The administration of 20mg/20g was more effective than that of 10mg/20g. Lower radiosensitivity was observed with the treatment of 20mg/20g of Kuei-Pi-Tang than that of 10mg/20g. The injection of Kuei-Pi-Tang accelerated the recovery of blood cell counts of leukocytes, erythrocytes and thrombocytes in mice irradiated with 4Gy, especially for leukocytes under the treatments with 20mg/20g of Kuei-Pi-Tang administered after irradiation.

742- gera: 84106/di/ra

TRATAMIENTO DEL DOLOR SEGUN EL DIAGNOSTICO **DIFERENCIAL EN 169 CASOS DE CANCER HEPATICO.** LIU LUMING ET AL. revista de la medicina tradicional **china.** 1991;1(4):49-53 (esp)

Se analizan los efectos terapéuticos de la MTC y de la "terapia analgésica en cuatro fases" de los autores en 169 casos de dolor debido a cáncer hepático. Los resultados fueron que la mayoría de los pacientes con cáncer hepático avanzado tenían dolores ligeros y sólo un pequeño número de pacientes (14,2%) presentaban un dolor severo o marcado. El 46,1% de los pacientes se aliviaron con la primera fase de la terapia analgésica, el 93,5% de los pacientes se aliviaron con la segunda o tercera fase de la terapia analgésica, sólo el 6,5% de los pacientes con dolor de grado III requirieron la cuarta fase de la terapia. Solamente con el tratamiento de la MTC el porcentaje de remisión del dolor de grado I y del de grado II fue del 100 y 76,9%, respectivamente. La "terapia analgésica en cuatro fases" producía menos efectos colaterales y menor

adicción a los narcóticos.

743- gera: 84139/di/ra

DIALECTIC CLASSIFICATION OF SYNDROME DIAGNOSIS IN TRADITIONAL CHINESE MEDICINE USED AS NEW CRITERION FOR EVALUATING PROGNOSIS OF PATIENTS WITH CERVICAL CANCER. YU SHI-YING ET AL. journal of tongji medical university. 1991;11(2):123-5 (eng). 1254 patients with cervical cancer were treated by radiotherapy from Jan 1979 to Dec 1984. All the patients were followed up at least for more than 3 years, of them 180 for over 5 years. According to various symptoms, picture of the tongue and pulse condition, the disease was classified into 4 types, namely: 1) deficiency of liver-yin and kidney-yin, 2) deficiency of splenic qi, 3) internal retention of damp-heat, and 4) stagnation of qi and blood or stagnation of liver qi. The survival rate of the various types was quite different. The patients of type 4 had the worst prognosis. The prognosis of patients with type 1 was significantly better than that of patients with type 4. The difference was of statistical significance

744- gera: 84393/di/ra

THE ANTITUMOR EFFECTS OF QIGONG-EMITTED **EXTERNAL QI AND ITS INFLUENCE ON THE** IMMUNOLOGIC FUNCTIONS OF TUMOR-BEARING MICE. LEI XUE-FENG ET AL. journal of tongji medical university. 1991;11(4):253-6 (eng).

745- gera: 84657/di/ra

[EFFECT OF KANG SHUAI SHEN FANG ON IMMUNE FUNCTIONS OF CO Y RAY IRRADIATED MICE]. XU RONG-HUI ET AL. chinese journal of integrated traditional and western medicine. 1991;11(11):671 (chi*).

746- gera: 35590/di/ra

OBSERVATION EXPERIMENTALE SUR LE TRAITEMENT DES TUMEURS MALIGNES, A L'AIDE DU QI GONG. HOU SHENG. lettre de l'institut europeen de qi gong. 1992;1:7. (fra).

747- gera: 35839/di/ra

A GRAND ROUND AT ORIENTAL HOSPITAL. KE XUE FAN. abstract and review of clinical traditional chinese medicine. 1992;3:57-61 (eng).

748- gera: 35886/di/ra

ACUPUNCTURE ET CHIMIOTHERAPIE. KESPI JM. revue francaise d'acupuncture. 1992;70:65. (fra*). Cette observation illustre l'aide que peut apporter l'acupuncture à la tolérance des chimiothérapies.

749- gera: 35889/di/ra

IMMUNOPHARMACOLOGY OF LENTINAN, A POLYSACCHARIDE ISOLATED FROM LENTINUS EDODES : ITS APPLICATION AS A HOST DEFENSE POTENTIATOR. GORO CHIHARA. international journal of oriental medicine. 1992;17(2):57-77 (eng).

750- gera: 36121/di/ra

IEFFECTS OF ACUPUNCTURE ON HUMAN IMMUNE RESPONSE (REPORT 3) -COMPARISON OF RESPONSE BETWEEN NORMAL VOLUNTEERS AND CANCER PATIENTS-]. X. journal of the japan society of acupuncture. 1992;42(1):54. (jap).

751- gera: 36122/di/ra

THE EFFECT OF ACUPUNCTURE FOR POSTOPERATIVE URINARY DISTURBANCES OF RECTAL CANCER]. X. journal of the japan society of acupuncture. 1992;42(1):55. (jap).

752- gera: 36152/di/ra [THE EFFECT OF LOW FREQUENCY ELECTRICAL ACUPUNCTURE (LFEA) FOR POSTOPERATIVE URINARY DISTURBANCE OF RECTAL CANCER]. X. journal of the japan society of acupuncture. 1992;42(1):85. (jap).

753- gera: 36375/di/ra

COMPARISON OF THE BI-DIGITAL O-RING TEST

DIAGNOSIS OF LUNG CANCER WITH STANDARD CHEST X-RAY AND CT SCAN (ABSTRACT). HIROAKI NAKAJIMA ET AL. acupuncture and electrotherapeutics research. 1992;17(4):332. (eng).

754- gera: 36380/di/ra

THE ANTI-TUMOR EFFECT OF A SMALL POLYPEPTIDE FROM CORIOLUS VERSICOLOR (SPCV). MEI PO YANG M E TAL. american journal of chinese medicine. 1992;20(3-4):221-32 (eng).

A new small polypeptide was isolated from the crude extraction of polysaccharide peptide of "coriolus versicolor" (cow-1) by HPLC and CIEF. It has a smaller molecular weight (10k) compared with that of PSP (100k) and was named small peptide of "coriolus versicolor, SPCV. It was found that SPCV possesses potent cytotoxic effect on human tumor cell lines of HL-60, LS174-T, SMMU-7721, and SCG-7901. The IC50 of SPCV on HL-60 WAS 30 UG/ml. The inhibition rates of leukemia cells and SCG-7901 were significantly higher in SPCV treated group than that in PSP and PSK groups. SPCV also has immunopotentiating effect as it increased WBC and IgG LEVELS. Pretreatment of SPCV for two weeks decreased the incidence of tumor mass in nude mice inoculated with tumor cells.

755- gera: 36411/di/ra

AN OBSERVATION ON THE EFFECT OF MOXIBUSTION ON THE IMMUNOLOGICAL FUNCTIONS IN 69 CASES OF LUNG CANCER. OUYANG QUN ET AL. international journal of clinical acupuncture. 1992;3(4):369-73 (eng). 69 cas de cancer bronchique sont randomisés en deux groupes: traitement classique + moxibustion au 8VC, ou traitement classique sans moxibustion. Moxibustion : moxa au sel (remplir l'ombilic juqu'à 2 mm au dessus de la peau), appliquer 15 à 20 cônes de 0,2 g, les enlever quand le patient ressent une brûlure. La séance dure 30 mn. 30 séances constituent une série, espacer 2 séries de 3 à 5 jours, 10 séries, on observe une amélioration significative des symptômes, une élévation significative des CD4 et CD11, mais non une modification de la numération leucocytaire

756- gera: 36449/di/ra

CONTROL OF CANCER PAIN TO ENSURE THE BEST POSSIBLE QUALITY OF LIFE. YU GUIQING. journal of traditional chinese medicine. 1992;12(4):243-55 (eng).

757- gera: 36452/di/ra

OBSERVATIONS ON THE LONG-TERM EFFECTS OF "YI QI YANG YIN DECOCTION" COMBINED WITH RADIOTHERAPY IN THE TREATMENT OF NASOPHARYNGEAL CARCINOMA. LI LIANHUA ET AL. journal of traditional chinese medicine. 1992;12(4):263-6 (eng).

758- gera: 36618/di/cg

NEW TECHNOLOGY OF ACUPUNCTURE DIAGNOSTICS FOR CHILDREN INJURED BY SMALL RADIATION DOSES. TCHEPA ML. wfas international symposium on the trend of research in acupuncture, roma. 1992;:170 (eng).

759- gera: 36647/di/cg

EFFECT OF SALT-PARTITION MOXIBUSTION AT SHENQUE ON SPONTANEOUS LUNG METASTASIS FROM UTERINE CERVIX CANCER UI4 IN MICE. CAO QIAOLI ET AL. wfas international symposium on the trend of research in acupuncture, roma. 1992;:191 (eng).

760- gera: 36648/di/cg

EFFECTS OF MOXIBUSTION ON CELLULAR IMMUNOCOMPETENCE OF MICE. (Abstract). DOU-MONG HAU. wfas international symposium on the trend of research in acupuncture, roma. 1992;:191 (eng). Etude de 4 types de moxibustion : 1) Bâtonnet de MOXA, 2) Bâton d'encens, 3) MOXA au gingembre, 4) MOXA à l'ail sur l'immunité cellulaire de souris irradiées (nombre de leucocytes et poids de la rate, transformation lymphoblastique). MOXA au gingembre et MOXA à l'ail ont un effet supérieur.

761- gera: 36779/di/ra

TREATMENT OF POSTOPERATIVE ADVANCED GASTRIC **CANCER WITH CHEMOTHERAPY AND ANTICANCER** HERBS. GUAN-TING WANG ET AL. international journal of oriental medicine. 1992;17(4):202-5 (eng).

Fifty-six patients with postoperative advanced gastric cancer were divided into 2 groups, 1 of which was treated with combined chemotherapy and anticancer herbs which "support the righteous", and the other group which only received the anticancer herbs. Long-term follow-up revealed marked curative effects, with 3- and 5-five year survival rates significantly improved.

762- gera: 36886/it/ra

ESTUDIO DE LOS TUMORES CANCEROSOS EN LAS RATAS TRATADOS POR WAI QIGONG. FACULTAD DE TIANJI. medicina holistica, revista de medicinas complementarias. 1992;31:27. (esp).

Los autores de este estudio pertenecen al Servicio de oncología experimental- Facultad de Tianji- Instituto de Bei Yang Qi Gong- Universidad de Tianji. Lo han desarrolllado bajo un control condicional estricto con el fin de demostrar si el Qi proyectado en Qi Gong tiene efectos anticancerosos o no y cual es su acción sobre las diferentes clases de tumores en la rata. Los resultados son los siguientes: I-Los efectos de inhibición del Wai Qi producido y proyectado por los maestros de Qi Gong sobre los tumores de la mama en la rata han sido demostrados, pero el mecanismo no está claro. Il- El poder de la acción del Wai Qi sobre los tumores de tipo radiante en la rata no es el mismo.

763- gera: 36888/di/ra

SHII-TA -KE. DE LA VILLA PILAR. medicina holistica, revista de medicinas complementarias. 1992;31:73-5 (esp). Ei Shil-Ta-Ke, Lentinus Edodes, es un champiñon comestible, extendido en los países asiáticos (China, Corea, Japón...). Recientemente, investigadores japoneses y americanos han podido demostrar la acción antivírica, antitumoral e hipolipidémica existente en el extracto de Shil-Ta-Ke.

764- gera: 37272/nd/re

[EFFECT OF COIX SEED ON THE CHANGES IN PERIPHERAL LYMPHOCYTE SUBSETS]. KANEDA T. rinsho byori. 1992;40(2):179-81 (jap*).

Coix seed has been used in patients with verruca vulgaris and verruca planae juveniles, which have been considered to be induced by viral infection. Moreover, coixenolide, component in the seeds of coix, was reported to show anti-tumor activity. Possibly coix seed may have some influence on the cytotoxic activity of peripheral lymphocytes but there has been no data on this. Then we investigated the changes in number of cytotoxic lymphoid cells in seven volunteers before, during (four weeks) and after taking six coix seed tablets. Lymphocyte subsets were analyzed with monoclonal antibodies using a flow cytometer. The level of CD3+CD56+ (MHC-non restricted cytotoxic T cells) markedly increased at four weeks (before 1. $9 \pm 0.5\%$ vs four weeks 4. $2 \pm 0.7\%$, p < 0.01). The level of CD16+CD57- (the mature, most active natural killer cells) increased at three weeks (before 4.5±0.8% vs three weeks 5. 2± 0. 8%, p < 0. 05). The level of CD3-CD56+ (natural killer cells) and the level of CD16+CD57+ (the variable active natural killer cells) decreased at one week and returned to normal level thereafter (before 13. 7 ± 2. 1% vs one week 11. 2 \pm 1. 5%, p < 0. 05; before 8. 8 \pm 1. 5% vs one week 6. 9 \pm 1. 3%, p < 0. 05, respectively). These results indicate that coix seed modulate the peripheral blood lymphocyte subsets and may be effective to virus disease through the enhancement of cytotoxic activity.

765- gera: 37302/nd/re

THE ANTIMUTAGENIC AND ANTICARCINOGENIC EFFECTS OF TEA, GARLIC AND OTHER NATURAL FOODS IN CHINA: A REVIEW. CHEN J. biomed environ sci. 1992;5(1):1-17 (eng).

766- gera: 37327/nd/re STUDIES ON CHEMICAL PROTECTORS AGAINST RADIATION. XXXV. EFFECTS OF RADIOPROTECTIVE CHINESE TRADITIONAL MEDICINES ON RADIATION-INDUCED LIPID PEROXIDATION IN VIVO AND IN VITRO.

WANG CM ET AL. chem pharm bull. 1992;40(2):493-8 (eng). The fluctuation of lipid peroxidation (LP) in 9 tissues was investigated in mice for 7 d after whole-body X-irradiation with a lethal dose of bone marrow death. LP increased significantly in bone marrow, thymus, spleen and liver following irradiation, and slightly in brain and testis, but not in blood plasma, submaxillary gland or kidney. The effects of 7 radioprotective Chinese traditional medicines (CTMs) and cysteamine (MEA) on the radiation-induced LP in 4 tissues were studied by i. p. injection before or after irradiation and their LP content in tissues was measured 2 d after irradiation. Most CTMs showed significant inhibition of radiation-induced LP in bone marrow and liver, especially when injected prior to irradiation. Some CTMs also showed such inhibition in spleen. MEA only inhibited the increase of LP in liver when injected before irradiation, but enhanced the increase of LP in spleen. None of these radioprotectors including MEA was recognized to inhibit radiation-induced LP in thymus. The in vitro experiments were carried out using mouse liver microsomal suspensions (MS). The MS were prepared from normal (non-irradiated) mice. Each of the 8 radioprotectors was added to MS before or after irradiation and then post-irradiation-incubated at 37 degrees C. All markedly inhibited radiation-induced LP if added before irradiation, but were slightly less effective if added after.

767- gera: 37335/nd/re

AKTUELLE STRATEGIEN IN DER BEHANDLUNG VON TUMORSCHMERZEN. GROND S ET AL. med klin. 1992;87(4):198-206 (deu).

768- gera: 37369/nd/re

CURRENT STATUS OF RESEARCH ON NEW ANTICANCER DRUGS IN CHINA. SUN Y. gan to kagaku ryoho. 1992;19(8):1126-33 (eng).

769- gera: 37372/nd/re

TYPHONIUM DIVARICATUM (RODENT TUBER): A PROMISING LOCAL PLANT IN THE FIGHT AGAINST CANCER. NEOH CK. med j malaysia. 1992;47(1):86-8 (eng).

770- gera: 37376/nd/re

ANTITUMOR ACTIVITY OF POLYSACCHARIDE FROM A CHINESE MEDICINAL HERB, ACANTHOPANAX GIRALDII HARMS. WANG JZ ET AL. cancer lett. 1992;65(1):79-84

The results of experiments with Acanthopanax giraldii polysaccharide (AGP) demonstrated that it inhibited the growth of solid Sarcoma 180 and prolonged the survival time significantly. In tumor-bearing mice, AGP enhanced the phagocytosis and chemiluminescence of macrophages. By the immunofluorescent method, binding of the third component of complement (C3) cleavage product to macrophages and proportion of C3 positive cells were increased. In crossed immunoelectrophoresis, human serum C3 was converted by AGP and appeared as the 3rd peak. The height of the 3rd peak was directly proportional to doses of AGP. The residual CH50 units of human serum decreased dose- dependently. These results suggest that the antitumor activity of AGP is related to the enhancement of immune

771- gera: 37410/nd/re

CHINESE MEDICINAL HERBS MODULATE MUTAGENESIS, DNA BINDING AND METABOLISM OF AFLATOXIN B1.

WONG BY ET AL. **mutat res.** 1992;279(3):209-16 (eng). Oldenlandia diffusa (OD) and Scutellaria barbata (SB) have been used in traditional Chinese medicine for treating liver, lung and rectal tumors while Astragalus membranaceus (AM) and Ligustrum lucidum (LL) are often used as an adjunct in cancer therapy. In this study, we determined the effects of aqueous extracts of these four herbs on aflatoxin B1 (AFB1)induced mutagenesis using Salmonella typhimurium TA100 as the bacterial tester strain and rat liver 9000 x g supernatant as the activation system. The effects of these herbs on [3H]AFB1 binding to calf-thymus DNA were assessed. Organosoluble and water-soluble metabolites of AFB1 were extracted and analyzed by high-performance liquid chromatography (HPLC). Mutagenesis assays revealed that all of these herbs produced a concentration- dependent inhibition of histidine-independent revertant (His+) colonies induced by AFB1. At a concentration

of 1. 5 mg/plate, SB and OD in combination exhibited an additive effect. The trend of inhibition of these four herbs on AFB1- induced mutagenesis was: SB > LL > AM. LL, OD and SB significantly inhibited AFB1 binding to DNA, reduced AFB1-DNA adduct formation, and also significantly decreased the formation of organosoluble metabolites of AFB1. Our data suggest that these Chinese medicinal herbs possess cancer chemopreventive properties.

772- gera: 37413/nd/re
DNA DAMAGE INDUCED BY HYPOCRELLIN - A PHOTOSENSITIZATION. CAO EH ET AL. int j radiat biol. 1992;61(2):213-9 (eng).

Hypocrellin-A (HC-A) isolated from Hypocrellia bambusae Sacc., is a new and effective photosensitizer. Illumination of sarcoma 180 cells with visible light in the presence of HC-A leads to a decrease in cell viability and 3H-TdR incorporation, causes DNA strand breakage, and results in the selective destruction of guanine moieties in DNA. HC-A photosensitization causes an increase in the theta 260/theta 280 ratio in the circular dichroism spectra of DNA in vitro. Of the four usual 2'-deoxynucleotides illuminated in the presence of HC-A only 2'-deoxyguanylic acid was destroyed.

773- gera: 37421/nd/re

PENTA-ACETYL GENIPOSIDE : ISOLATION, **IDENTIFICATION AND PRIMARY EFFECT ON C6 GLIOMA** CELLS IN VITRO. WANG CJ ET AL. anticancer res. 1992;12(3):911-5 (eng).

A new compound, penta-acetyl geniposide [(Ac)5-GP], was obtained from modified extract of Gardenia Fructus (San-jeechee in Chinese). Spectral studies including ultraviolet (UV), mass (MS), nuclear magnetic resonance (NMR), infrared (IR) and elemental analysis (EA) have suggested the chemical structure of the compound as 1-(beta-D-2',3',4',6'- tetraacetylglucopyranosyloxy)-1,4a,5,7a-tetrahydro-7-(acetomethyl)-c yclopentapyran-4-carboxylic acid methyl ester. The antitumor bioactivity of (Ac)5-GP in vitro was studied. It exhibited the activities of reduced plating efficiency and inhibition of DNA synthesis in cultured C-6 glioma cells, but had little effect on RNA and protein synthesis. These results implied that the acetylated iridoid glycoside of Gardenia Fructus is biologically active as an antitumor agent against C-6 glioma cells in culture.

774- gera: 37474/nd/re

EFFECTS OF MEDICINAL PLANTS ON HEMOPOIETIC CELLS. IKEHARA S ET AL. adv exp med biol. 1992;319:319-

It has been found that Juzentaihoto (TJ-48), one of the traditional Japanese kampo (herbal) medicines, improves the general condition of cancer patients receiving chemotherapy and radiation therapy. We analyze how TJ-48 elicits such effect, and show that oral administration of TJ-48 accelerates recovery from hemopoietic injury induced by radiation and the anti-cancer drug mitomycin C. The effects are found to be due to its stimulation of spleen colony-forming units. Based on the present findings, we propose that the administration of TJ-48 should be of benefit to patients receiving chemotherapy, radiation therapy or bone marrow transplantation.

775- gera: 37527/nd/re

MITOGENIC AND TUMOR NECROSIS FACTOR PRODUCING ACTIVITIES OF PSEUDOSTELLARIA HETEROPHYLLA. WONG CK ET AL. int j immunopharmacol. 1992;14(8):1315-20 (eng).

776- gera: 37543/nd/re

[PHARMACOLOGICAL STUDY ON PANAX GINSENG C.A.MEYER XV. EFFECTS OF 70 % METHANOLIC EXTRACT FROM RED AND WHITE GINSENG ON THE ANTITUMOR ACTIVITY OF MITOMYCIN C]. TONG CN ET AL. yakugaku zasshi. 1992;112(11):856-65 (jap).

777- gera: 37544/nd/re [PHARMACOLOGICAL STUDY ON PANAX GINSENG C.A.MEYER XIV. EFFECT OF 70 % METHANOLIC EXTRACT FROM RED GINSENG ON THE CYTOCIDAL **EFFECT OF MITOMYCIN C AGAINST RAT ASCITES**

HEPATOMA AH 130]. MATSUDA H ET AL. yakugaku zasshi. 1992;112(11):846-55 (jap*).

778- gera: 37630/nd/re

[IN VITRO AND IN VIVO EFFECTS OF GINSENOSIDE RH2 ON THE PROLIFERATION OF SEROUS CYSTADENOCARCINOMA OF THE HUMAN OVARY*]. TODE T ET AL. nippon sanka fujinka gakkai zasshi. 1992;44(5):589-94 (jap).

779- gera: 37636/nd/re

ANTITUMOR AGENTS, 135. STRUCTURE AND STEREOCHEMISTRY OF POLACANDRIN, A NEW CYTOTOXIC TRITERPENE FROM POLANISIA DODECANDRA. SHI Q ET AL. j nat prod. 1992;55(10):1488-97 (eng).

780- gera: 37639/nd/re

INFLUENCE OF THE 70 % METHANOLIC EXTRACT FROM RED GINSENG ON THE LYSOSOME OF TUMOR CELLS AND ON THE CYTOCIDAL EFFECT OF MITOMYCIN C. KUBO M ET AL. planta med. 1992;58(5):424-8 (eng).

781- gera: 38928/di/ra

IEFFECT OF ORAL SOLUTION OF SIX DRUGS INCLUDING REHMANNIA IN REDUCING TOXIC AND SIDE REACTION CAUSED BY CHEMOTHERAPY]. SUN LIN ET AL. journal of zhejiang college of traditional chinese medicine. 1992;16(1):29 (chi).

782- gera: 38961/di/ra

[AN ANALYSIS ON INFORMATION RATIO OF TONGUE APPEARANCE OF 993 CASES WITH CANCER]. CHEN ZHIFENG ET AL. china journal of traditional chinese medicine and pharmacy. 1992;7(1):24 (chi*).

The statistics of 993 cases of cancer, 426 cases of non-cancer and 8001 cases of normal person had been analysed with shade guide of tongue diagnosis and the method of contingency table counting information. These results showed when to diagnose the cancer, the four information's of age, tongue proper, tongue coating and tongue form were obvious, (\$?) = 86 %. And it was regressed and checked with 10 % proportion combining with greater likelihood method, its correct rate was 84.52 %, false positive rate was 5.15 %, false negative rate was 37.62 %.

783- gera: 39024/di/ra

[CARCINOMA OF LIVER TREATED WITH TOPICAL PLASTER]. LI HUIGANG ET AL. journal of traditional chinese medicine. 1992;33(1):37 (chi).

784- gera: 39047/di/ra

ICLINICAL OBSERVATION ON MODERATE AND SEVERE METAPLASIA AND NON-TYPICAL HYPERPLASIA OF INTESTINAL GLANDS IN 60 PATIENTS WITH CHRONIC GASTRITIS]. PENG PEICHU ET AL. shanghai journal of traditional chinese medicine. 1992;1:1 (chi).

785- gera: 39114/di/ra

JAPPROACH AND ITS TREATMENT SYSTEM OF FANTENG QIGONG PREVENTION AND CURE CANCER THE REPORTS EXTRACTS OF MASTER LU XUEZHI IN N°1 **QIGONG WORLD MEETING IN AMERICAN FANTENG** QIGONG AND CANCER]. LIU JIAN XIAN. qigong and sport. 1992;1:21 (chi).

786- gera: 39121/di/ra

JINFLUENCE OF REINFORCING QI AND NOURISHING YIN DRUGS ON CFU-L OF LEUKEMIA MICE AND **CHEMOTHERAPY DRUGS SENSITION]. XU RUIRONG ET** AL. journal of shandong college of traditional chinese medicine. 1992;16(1):49 (chi*).

By measuring rate of CFU-L colony in L7212 leukemia and adding proper dosage of chinese drugs on the basis of extraorganismal combining drug sensitive test of chemotherapy medicine, it is found that the decoction of reinforcing Qi and nourishing Yin can decrease the number of CFU-L and increase the drug sensitive rate of chemotherapy. The results show that the decoction can inhibit leukemia cells

and enhance the antileukemia action of chemotherapy, the decoction of heat-clearing and detoxifying also has action on inhibiting leukemic cells.

787- gera: 39161/di/ra

[HUOXUE HUAYUJI (ACTIVATING BLOOD AND DISSOLVING STASIS) AND ONCOMA THERAPY]. YU RENCUN. beijing journal of traditional chinese medicine. 1992;1:21 (chi).

788- gera: 39187/di/ra

[CARCINOGENIC TREATED WITH QING YIN TANG MODIFIED, A REPORT OF 68 CASES]. WANG GUO-PING. shanxi journal of traditional chinese medicine. 1992;8(1)):25 (chi).

789- gera: 39198/di/ra [A FLOW CYTOMETRIC ANALYSIS OF THE GARLIC OIL EFFECT ON DNA CONTENT OF CANCER CELL CYCLE]. XIE JIN-YU ET AL. chinese journal of integrated traditional and western medicine. 1992;12(2):92 (chi*).

Flow cytometry (FCM) is a new technique developed in the recent decade. This technique may measure DNA content of 5000 cells per second and trace the dynamic changes in cell proliferation cycle and offer a hint for designing clinical treatment protocol, monitor prognosis and elucidate the mechanisms of antitumor drugs. The authors previous studies showed significant effect of garlic oil on prolongation of life expectancy and inhibition of tumor growth in mice. Using FCM the authors analysed the effect of garlic oil on cell cycle in S180 tumor cells, 2-6 hrs single administration or multiple administration the cell number in S phase rapidly decreased, in G1 phase increased. This suggests garlic oil may blockade cells to progress from G1 phase to S phase and result in accumulation of cells in G1 phase and directly inhibit the synthesis of DhTA and the cell cycle. Theoretical basis for clinical application was offered and some aspects of antitumor mechanism of garlic oil were elucidated.

790- gera: 39215/di/ra

[EFFECTS OF GINSENG VOLATILE OIL ON CYTOCHEMICAL COMPONENTS OF SGC-823 GASTRIC CARCINOMA IN CELL CULTURE]. WANG MANXIA ET AL. china journal of chinese materia medica. 1992;17(2):110

791- gera: 39242/di/ra

[COMPARATIVE CLINICAL OBSERVATION ON THE CHRONOLOGICAL ADMINISTRATION FOR THE PREVENTION AND TREATMENT OF LEUCOCYTOPENIA INDUCED BY CHEMOTHERAPY]. LI YONGHAO. journal of traditional chinese medicine. 1992;33(2):27 (chi).

792- gera: 39292/di/ra

ISTUDY ON ANTINEOPLASTIC COMPONENTS OF ZEBRINA PENDULA SCHNIZL]. FAN XIAOQI ET AL. chinese traditional patent medicine. 1992;14(2):34 (chi).

793- gera: 39331/di/ra

[EFFECT OF TRADITIONAL CHINESE MEDICINE AND PHARMACY ON INCREASING SENSITIVITY AND REDUCING TOXICITY IN TUMOR PATIENTS UNDERGOING RADIO-CHEMICAL THERAPY]. ZHANG DAI-ZHAO ET AL. chinese journal of integrated traditional and western medicine. 1992;12(3):135 (chi).

[Analyse en Anglais dans Abstract and Review of Clinical TCM n°1/1993. (Ref. GERA 19625].

794- gera: 39334/di/ra

[CLINICAL OBSERVATION OF HIGH DOSE CINOBUFOCINI IN ATTENUATION AND TREATMENT OF INFECTION AND **GRANULOCYTOPENIA DURING COMBINED** CHEMOTHERAPY OF MALIGNANT BLOOD DISEASES]. YUE BEI-BEI ET AL. chinese journal of integrated traditional and western medicine. 1992;12(3):145 (chi*). The use of high dose Cinobufocini in attenuation and treatment of infection and granulocytopenia during combined chemotherapy was observed in patients with malignant blood diseases. The study was designed in such a way that each

patient served as self control. The patients, 18 males and 12 females, aged 16-66 (average 34), 62 experiments in 20 patients with acute leukemia, 8 with malignant lymphoma and 2 with multiple myeloma were observed. In patients with the treatment of high dose Cinobufocini, infection was significantly decreased and the number of granulocytes was not markedly changed before and after the treatment. The observation demonstrated that high dose Cinobufocini can significantly reduce the risk of infection and degree and duration of granulocytopenia associated with chemotherapy of patients with malignant blood diseases. The use of high dose Cinobufocini is simple and convenient and with very little side

795- gera: 39336/di/ra

[STUDIES ON THE BASIS OF PATHOLOGY OF SYNDROME-DIFFERENTIATION TYPES OF DEFICIENCY OF VITALITY AND EXCESS IN SUPERFICIALITY IN PATIENTS WITH GASTRIC CANCER]. CUI TONG-JIAN ET AL. chinese journal of integrated traditional and western medicine. 1992;12(3):151 (chi*).

Analysing the relations between TCM syndrome differentiation type and pathology in 312 patients with gastric cancer, the authors put forward the syndrome differentiation type of deficiency of vitality and excess in superficiality. The studies showed that the four syndrome types of deficiency of vitality such as Spleen-Stomach deficiency, Qi-Xue deficiency, Yin deficiency and inner heat, Spleen-Kidney Yang deficiency and the three syndrome types of excess in superficiality such as Liver-Stomach disorder, blood stasis and stagnation of Qi, Phlegm-dampness and stagnation of toxic. The same changes in pathologic characteristic of both were from early to late stage, the infiltration getting deeper, the tumor getting larger and the metastasis of lymph nodes around the stomach from little to much. Their difference was that in the deficiency of vitality syndrome-type, the chief manifestation was in nest or spread infiltration type which became serious by degrees, whereas in excess in superficiality type, the reaction of lymphoidocytes around the cancer was decreasing. The studies also showed that in most syndrome types of Spleen-Kidney Yang deficiency and Phlegm-dampness and stagnation of toxic, the tumor occurred in wide-range and the degree of tissue differentiation was quite low. The authors suggested that there might be morphopathologic basis in TCM syndrome differentiation types and the conclusion has practical value in guiding clinics.

796- gera: 39337/di/ra

IPROBE INTO INTERNAL RELATION BETWEEN CLASSIFICATION OF THE DIFFERENTIATION OF SYNDROME OF TRADITIONAL CHINESE MEDICINE AND **SERUM COPPER AND ZINC IN LUNG CANCER** PATIENTS]. MI YI-YENG ET AL. chinese journal of integrated traditional and western medicine. 1992;12(3):154 (chi*).

This article probed into the internal relations and significance between differentiation of syndrome of traditional Chinese medicine (TCM) and trace elements--copper and zinc in lung cancer patients. The serum copper and zinc of 95 patients with lung cancer and 82 healthy persons were measured. According to differentiation of syndrome of TCM types of 95 lung cancer patients were divided, and the relations with their levels of serum copper, zinc and the ratio of copper/zinc compared respectively. The authors found that there were some inner links among the differentiation syndromes and levels of serum copper, zinc and its ratio. The result showed that the level of Cu/Zn ratio could reflect increase and decrease of body resistance and pathogenic factors the level of Cu/Zn ratio was more significant than that of copper and zinc. The authors suggested that the ratio of Cu/Zn could be used as the criteria of differentiation of syndrome of TCM. It is clinically significant to combine the level of copper, zinc and its ratio with differentiation of syndrome of TCM to evaluate the severity and prognosis of the patients and to direct the treatment of them with TCM.

797- gera: 39339/di/ra

ISTUDY OF ANTITUMOR EFFECT OF TRIPTERYGIUM WILFORDII]. XU JING-YA ET AL. chinese journal of

integrated traditional and western medicine.

1992;12(3):161 (chi*).

A new component of antitumor action TG has been isolated from the ethyl acetate extract of Tripterygium wilfordii (besides Triptolide, Tripdiolide and Triptonide). TG was shown in this study to have obvious antitumor effects. The average life span of H22, S180, EAC and breast carcinoma-bearing mice treated with TG ip x 2 days were 100% more than those of the control mice (P < 0.01) TG was able to inhibit tumor growth of S37 bearing mice at the dose of 150 mg/kg per day, ig x 3, its inhibitory rate was 42% (P < 0. 01). TG could also inhibit squamous epithelial lung carcinoma induced by 3 methylcholanthrene. The inhibitory rate was 65. 13% (P less than 0. 05). TG had remarkable killing effect on human HL60 and Daudi cells and two direction effects on function M phi of mouse abdominal cavity in vitro.

798- gera: 39384/di/ra

[TCM METHOD OF YIN-YANG BALANCE FOR CANCERS]. XU ZHENGYE. shanghai journal of traditional chinese medicine. 1992;3:10 (chi).

799- gera: 39387/di/ra

JEXPERIENCE OF TREATING POST-OPERATIVE MAMMARY CANCER BY MEANS OF CHINESE MATERIA MEDICA]. LIU MINGSHENG ET AL. shanghai journal of traditional chinese medicine. 1992;3:21 (chi).

800- gera: 39492/di/ra

[REPORT OF 6 CASES OF CARCINOMA OF THE UTERINE CERVIX TREATED WITH POWDER OF RHIZOMA ARISAEMATIS AND PINELLIAE]. QIU ZUPING. jiangsu journal of traditional chinese medicine. 1992;13(3):11 (chi).

801- gera: 39512/di/ra

[EXPLANATION ON ANTITUMOR MECHANISM WITH QIGONG]. GU JUE-FEN. qigong. 1992;13(3):101 (chi).

802- gera: 39642/di/ra

[A CLINICAL RESEARCH ON PRECANCEROUS LESION OF ESOPHAGUS TREATED WITH COMPOUND DANGSHEN PILL]. HOU JUN ET AL. china journal of traditional chinese medicine and pharmacy. 1992;7(2):11 (chi).

252 cases of heavy hyperplasia of epithelial cells of oesophagus diagnosed by cast-off cytology of oesophagus determined with net drawing had been divided into treatment group and control group at high attack region of oesophagus cancer in Hebei province. Compound Dangshen pill was given to the treatment group for 2 years. These results showed that the improvement rate of cytology for the treatment group was 71.7 %, the canceration rate was 2.8%; while the control group was 50.0 %. 10.0 % respectively (p<0.01). It showed that this drug has a certain effect on blacking procancerous lesion of oesophagus.

803- gera: 39653/di/ra

[CLINICAL OBSERVATION ON LEUKOCYTOPENIA CAUSED BY RADIOTHERAPY AND CHEMOTHERAPY TREATED WITH JIAOGULAN]. LIU SHAOXIANG ET AL. china journal of traditional chinese medicine and pharmacy. 1992;7(2):35 (chi).

804- gera: 39737/di/ra [AN APPROACH ON IMMUNOLOGIC PARAMETERS USED IN ANTITUMOR STUDY OF TRADITIONAL CHINESE MEDICINE]. DOU JUN ET AL. chinese journal of integrated traditional and western medicine. 1992;12(4):239 (chi).

805- gera: 39756/di/ra

[THE EFFECTS OF ACUPUNCTURE'S REINFORCING-REDUCING MANIPULATION ON NK AND LAK CELL **ACTIVITIES AND T CELL SUBGROUPS IN PATIENTS WITH** MALIGNANT TUMOUR]. SUN HUA ET AL. chinese acupuncture and moxibustion. 1992;12(2):39 (chi*). In this paper, we investigated that the effects of acupuncture's reinforcing-reducing manipulations on NK and LAK cell activities and the percentages of T cell subgroups in patients with primary bronchogenic carcinoma (PBC) and primary

carcinoma of liver (PCL) by 3HTdr release assay and SPA-Ig assay. The result showed that both reinforcing and reducing played the same roles to increase the lower NK and LAK activities and percentages of OKT3 and OKT4 cells in patients, but chinese herb treatment controls had no such effects. Reinforcing made the percentage of OKT8 cells decrease to normal level, while reducing had no effects on normal OKT3 percentage. In raising NK activities and the percentage of OKT4 cells, reinforcing is better than reducing.

806- gera: 39804/di/ra

[CLINICAL SIGNIFICANCE AND MEDICINAL FORMULA OF PROMOTING BLOOD CIRCULATION AND REMOVING BLOOD STASIS FOR CANCERS]. QI YUANFU ET AL. acta chinese medicine and pharmacology. 1992;2:11 (chi).

807- gera: 39944/di/ra [120 CASES OF SKIN TUMOR TREATED WITH **APPLICATION AND LASER].** ZHANG ZHIWEI ET AL. liaoning journal of traditional chinese medicine. 1992;19(5):43 (chi).

808- gera: 42749/di/ra

IBRIEF INTRODUCTION TO PROF. LIU SHICHANG'S EXPERIENCE IN THE TREATMENT OF LIVER CANCERI. ZHONQ JIAXI ET AL. new journal of traditional chinese medicine. 1992;24(2):15 (chi).

809- gera: 42788/di/ra

[EXPERIMENTAL RESEARCH ON EFFECT OF RHODIOLA ROOTS SU ON ANTI-CANCER]. WANG XIUQING ET AL. journal of traditional chinese medicine and chinese materia medica of jilin. 1992;3:40 (chi).

810- gera: 42848/di/ra

[THREE 6 YEAR SURVIVALS WITH DIGESTIVE TRACT CANCER TREATED WITH CHINESE MATERIA MEDICA]. TANG XINMING. shanghai journal of traditional chinese medicine. 1992;7:34 (chi).

811- gera: 42983/di/ra

ICLINICAL STUDY ON 69 CASES OF AGRANULOCYTOSIS INDUCED BY CHEMOTHERAPY OF ACUTE LEUKEMIA]. TANG YOUJUN ET AL. journal of shandong college of traditional chinese medicine. 1992;16(3):34 (chi*). 69 cases of agranulocytosis induced by chemotherapy of acute leukemia were classified into five TCM types: noxious heat attacking exterior, excessively noxious heat, deficiency of both Qi and Yin, intense heat in both Qi and blood systems, heatblockage of pericardium, After taking Chinese drugs, obvious effective rate is 76.81 %. The authors consider that the pathogenesis of the diseases are coexistence of the superficiality excess and origin deficiency, syndrome both deficiency and excess, a change from excess to deficiency or in reverse.

812- gera: 43090/di/ra

[OBSERVATION ON THE LONG-TERM EFFECTS OF TCM TREATMENT IN CERVICAL CARCINOMA, REPORT OF 90 CASES FOLLOW-UP]. ZHANG YAN-LANG ET AL. shanxi journal of traditional chinese medicine. 1992;8(3):11 (chi).

813- gera: 43161/di/ra

[EXPERIENCE WITH THERAPY OF COMPLICATIONS FOLLOWING SURGERY FOR CARCINOMA OF ESOPHAGUS]. PAN LIQUN ET AL. jiangsu journal of traditional chinese medicine. 1992;13(6):6 (chi).

814- gera: 43170/di/ra

[AN INTRODUCTION TO PRECARCINOMATOUS LESIONS OF THE STOMACH TREATED BY TCM IN RECENT TEN YEARS]. ZHU ZHIBO. jiangsu journal of traditional chinese medicine. 1992;13(6):40 (chi).

815- gera: 43191/di/ra

[CLINICAL REPORT ON ADVANCED OVARIAN CANCER TREATED MAINLY BY HERBS]. MIAO HOURUN ET AL tianjin journal of traditional chinese medicine. 1992;3: (chi). 816- gera: 43222/di/ra

[A CLINICAL STUDY ON CANCER PAIN TREATED WITH "ANALGESIC POWDER FOR CANCER"].]. YANG GENGLU ET AL. journal of traditional chinese medicine. 1992;33(7):30 (chi).

817- gera: 43435/di/ra

[EFFECT OF BARBARY WOLFBERRY (LYCIUM BARBARUM) ON PROTECTION OF CHROMOSMAL DAMAGE INDUCED BY MITOMYCIN C]. WANG MU-DI ET AL. chinese traditional and herbal drugs. 1992;23(5):251

Using sister chromatid exchange (SCE) as a marker, the relationship between MMC, SCE and Chinese medicine Lycium barbarum in the elderly was studied. Results showed that there is a positive correlation between MMC concentration and SCE frequencies, and that after oral Lycium barbarum, SCE decreases significantly (P<0.001) in the elderly; spontaneous SCE to a similar level as youngsteers and MMC induced SCE declines significantly (P<0.001, MMC = 0.0125 μ g/ml ; or P <0.01, MMC + 0.025 μ g/ml). This results indicated that Lycium barbarum seems to be able to protect chromosmal damages either spontaneously of induced by MMC

818- gera: 43463/di/ra [STUDY ON THE GRANULE OF SHENCAO FUZHENG KANGAI]. ZHAO GUAN-YIN ET AL. chinese journal of integrated traditional and western medicine.

1992;12(5):292 (chi*).

The clinical effect of the granule of Shencao Fuzheng Kangai had been proved and the animal experiment was carried out. The results showed that: (1) No toxic response was found in acute toxicity test. (2) The granule could prevent WBC from decreasing severely in chemotherapy experiment (P<0.01). (3) It was indicated that the granule could improve the phagocytic function of macrophage in carbon clearance experiment (P < 0. 01). (4) It was meant that the granule could inhibit the growing of some solid carcinoma in inoculation experiments.

819- gera: 43516/di/ra

IGENERAL CONDITION ABOUT THE TREATMENT OF CARCINOUS ACHE BY TRADITIONAL CHINESE MEDICINE]. TAN YONGDONG. hubei journal of traditional chinese medicine. 1992;3:38 (chi).

820- gera: 43527/di/ra

[CURATIVE EFFECT OBSERVATION AND PRELIMINARY ANALYSIS OF 219 CASES OF LATE CANCER TREATED WITH COMPOUND CHANPI CAPSULE]. WANG SIWANG ET AL. china journal of traditional chinese medicine and pharmacy. 1992;7(3):30 (chi).

821- gera: 43548/di/ra

[PRESENT STATUS AND PROSPECTS OF TCM DIAGNOSIS AND TREATMENT OF TUMORS]. LI PEIWEN. journal of beijing college of traditional chinese medicine. 1992;15(3):2 (chi*)

This paper, at a clinical angle of TCM treatment of tumors, introduces the prevention, tongue diagnosis, characteristics of TCM treatment, and dealing with the complication, according to the author's experience and the literature emerged in recent years. The author thinks of that although the TCM treatment shows many strong points, it has quite a few problems waiting to be solved.

822- gera: 43553/di/ra

[A BRIEF REVIEW OF THE PREVENTION AND TREATMENT OF MALIGNANT TUMORS BY TCM IN THE PAST FIVE YEARS]. LI MINMIN. journal of beijing college of traditional chinese medicine. 1992;15(3):24 (chi).

823- gera: 43554/di/ra

[CLINICAL OBSERVATION OF 24 CASES OF LATE PRIMARY LIVER CANCER TREATED BY TCM THERAPY FO PROMOTING BLOOD FLOW TO REMOVE STASIS]. WANG XIAO ET AL. journal of beijing college of traditional chinese medicine. 1992;15(3):31 (chi*).

24 Cases of late primary liver cancer were treated by TCM

therapy of promoting blood flow to remove stasis. The results showed that after the treatment, the median survival period was 5 months, the rate of surviving over 1 year was 25 %, and the rates of improvement and tumor shrinkage were 60.96 % and 26.67 %, respectively.

824- gera: 43577/di/ra

[CLINICAL AND EFFECTIVE OBSERVATION ON INTERMEDIATE AND LATE PRIMARY CARCINOMA OF THE LIVER TREATED BY INTEGRATING CHINESE WITH WESTERN MEDICINE ON 19 CASES]. PENG DA-WEI ET AL. practical journal of integrating chinese with modern medicine. 1992;5(7):406 (chi).

825- gera: 43590/di/ra

[APPLICATION OF IMMUNOHISTOCHEMISTRY AND IMAGE PATTERN ANALYSIS IN PATHOLOGIC RESEARCH OF CENTRAL NERVOUS TUMOR]. YANG SU-MIN ET AL. practical journal of integrating chinese with modern medicine. 1992;5(6):346 (chi).

826- gera: 43613/di/ra

[RECENT DEVELOPMENT OF CHINESE MATERIA MEDICA FOR CANCER OF ESOPHAGUS]. YU ZHIQIANG. shaanxi traditional chinese medicine. 1992;13(8):378 (chi).

827- gera: 43632/di/ra

[THERAPEUTIC OBSERVATION ON TREATMENT OF CANCER OF THE STOMACH IN EARLIER STAGE WITH "REN SHEN XIANG CHA PIAN"]. ZHAO SHU-ZHEN ET AL. zhejiang journal of traditional chinese medicine. 1992;27(8):348 (chi).

828- gera: 43657/di/ra

[MY EXPERIENCE ON TUMORS TREATED WITH XIAOJINDANG (MINOR GOLDEN PILLS) WITH ADDITIVES]. LIU YULIN. journal of traditional chinese medicine. 1992;33(8):21 (chi).

829- gera: 43658/di/ra

[PROBING INTO THE TREATMENT OF ADVANCED STAGE OF STOMACH CARCINOMA MAINLY BY SPLEEN-STRENGTHENING METHOD]. QIU JIAXIN ET AL. journal of traditional chinese medicine. 1992;33(8):23 (chi).

830- gera: 43672/di/ra

[A CLINICAL RESEARCH ON TOXIC AND SIDE - EFFECT OF CHEMOTHERAPEUTIC DRUGS CONFRONTING WITH LIU WEI DI HUANG ORAL SOLUTION]. XU JIPING ET AL. china journal of traditional chinese medicine and pharmacy. 1992;7(4):13 (chi*).

The toxic and side-effect of chemotherapeutic drugs for treating various cancers, which is confronted with Liu Wei Di Huang oral solution had been observed in clinic. Mean while Shi Quan Da Bu oral solution group and pure chemotherapeutic group were set up as control group and ten objective indexes were used for observing effect. These results showed that Liu Wei Di Huang oral solution had good preservative actions on manufacturing blood function, immune function, and the functions of the heart, liver and kidney as well as effect on improving clinical symptoms. Its total effective rate was 84.4 % which was apparently superior to the Shi Quan Da Bu oral solution group and pure chemotherapeutic group (p<0.05, p<0.01). Meantime, the active mechanism of Liu Wei Di Huang oral solution had been analysed.

831- gera: 43828/di/ra

[CYCLIC AMP CAN ACT AS A ELEMENT FOR PREDICTING RELAPSE OF CARCINOMA OF STOMACH]. LUO SHU-LIN. practical journal of integrating chinese with modern medicine. 1992;5(8):487 (chi).

832- gera: 43895/di/ra

[CLINICAL OBSERVATION ON 54 CASES OF CARCINOMATOUS PAIN TREATED WITH "XIN HUANG PIAN"]. LUO XUE-XIN. zhejiang journal of traditional chinese medicine. 1992;27(9):399 (chi).

833- gera: 43930/di/ra

[DIETETIC TREATMENT OF MALIGNANT TUMOR]. ZHANG MEIZHU. shandong journal of traditional chinese medicine. 1992;5:6 (chi).

834- gera: 43935/di/ra

[50 CASES OF CANCEROUS PAIN TREATED BY XIAO' AITONG AND RECOVERY DECOCTION]. ZHAO XIMING ET AL. shandong journal of traditional chinese medicine. 1992;5:20 (chi).

835- gera: 43944/di/ra

[CLINICAL OBSERVATION ON PRIMARY LIVER CARCINOMA TREATED BY COMBINING QINGKAILING INJECTION WITH DIFFERENTIAL DIAGNOSIS OF SYNDROMES: REPORT OF 74 CASES]. DONG HAITAO. journal of traditional chinese medicine. 1992;33(9):27 (chi).

836- gera: 44001/di/ra

[CLINICAL ANALYSIS ON 8 CASES OF CERVICAL LYMPHOSARCOMA AND NASOPHARYNGEAL CARCINOMA]. YI JUQING ET AL. hubei journal of traditional chinese medicine. 1992;4:26 (chi).

837- gera: 44075/di/ra

[PRELIMINARY RESEARCHES ON RELATIONSHIP BETWEEN TCM TYPING OF NASOPHARYNGEAL CARCINOMA (NPC) AND DETECTION OF EBV VCA-IGA ANTIBODY]. LI LIANHUA ET AL. traditional chinese medicinal research. 1992;5(3):18 (chi*).

This preliminary researches suggested that the positive rate and GMT of EBV VCA-IgA antibody of the normal control group were 13.1 % and 1 : 11 ; the group of pretreatment NPC patients were 94.9 % and 1:218 (P<0.0001). The group of Rexie Fanfei typing (RXFFT) were 80.7 % and 1:92 ; the group of Ganyu Tanning typing (GYTNT) were 96.4 % and 1:263 ; the group of Xueyu Zuluo typing (XYZLT) were 100 % and 1:199. The RXFFT's GMT of the EBV VCA-IgA was lower than the GYTNT and XYZLT (P<0.05-0.0001). The RXFFT was most the stage I and II ; the GYTNT and XYZLT were most the stage III and IV (P<0.01). The positive rate and GMT of VCA-IgA were not related to the primary tumor (P>0.05), but it was related to the neck lymph nodes metastasis(P<0.05).

838- gera: 44106/di/ra

[STUDY OF ZHEN QI DECOCTION AND CHEMIOTHERAPY ON TREATING III STAGE MULTIPLE MYELOMA AND ON INFLUENCE OF ITS T CELL SUBGROUPS]. ZHANG XIN-QI ET AL. practical journal of integrating chinese with modern medicine. 1992;5(10):604 (chi).

839- gera: 44114/di/ra

[TREATING 45 CASES OF INTERMEDIATE AND LATE MALIGNANT TUMOR OF DIGESTIVE TRACT WITH "XIAO LIU YIN"]. CHANG QING. zhejiang journal of traditional chinese medicine. 1992;27(11):487 (chi).

840- gera: 44122/di/ra

[THE CURRENT SITUATION AND PROSPECT ABOUT THE APPLICATION OF CHINESE HERB IN CANCEROUS PAIN]. BAO SU-ZHEN. zhejiang journal of traditional chinese medicine. 1992;27(11):518 (chi).

841- gera: 44147/di/ra

[CLINICAL OBSERVATION AND EXPERIMENTAL STUDY OF BLOOD-ACTIVATING, STASIS-REDUCING THERAPY FOR II AND III STAGE PRIMARY LUNG CANCER]. ZHOU RONGYAO ET AL. shanghai journal of traditional chinese medicine. 1992;9:5 (chi).

842- gera: 44173/di/ra

[COMBINED TCM WITH WESTERN MEDICINE IN TREATMENT OF MULTIPLE MYELOMA, CLINICAL REPORT OF 15 CASES]. XU RUI-YING ET AL. shanxi journal of traditional chinese medicine. 1992;8(5):5 (chi).

843- gera: 44273/di/ra

[RETROSPECT AND PROSPECT ON COMBINED TRADITIONAL AND WESTERN THERAPY IN TREATING MALIGNANT TUMOURS]. YU GUI-QING. chinese journal of

integrated traditional and western medicine. 1992;12(10):583 (chi).

844- gera: 44274/di/ra

[OBSERVATION OF COMPREHENSIVE "FOUR-STEP ANALGESIC LADDER" THERAPY IN TREATING CANCER-RELATED PAIN - ANALYSIS OF 486 CASES]. LIU LU-MING ET AL. chinese journal of integrated traditional and western medicine. 1992;12(10):584 (chi*).

This analysis indicated that patients with cancer-related pain account for 71.0 % in author's material. After the TCM treatment, the effective rate were 91.06 % in hepatocarcinoma related pain ; 86.1 % in colon-rectal cancer-related pain ; 68.2 % in malignant lymphoma-related pain ; 100 % in irradiation-related pain of oesophageal cancer, lung cancer, post-operative breast cancer. Results of "four-step analgesic ladder" showed that 52.1 % of pain could be relieved by Step I (TCM therapy); if Step II (indomethacin) or III (phenylbutazone) was added, the rate of pain relief reached as high as 96.5 % ; and only 3.5 % need to be treated by Step IV (opioids). With less side-effects and addiction of opioids and other narcotics, the "four-step analgesic ladder" therapy seems to be more suitable for cancer pain relief in China. 2

845- gera: 44275/di/ra

[CLINICAL AND EXPERIMENTAL STUDY ON SHEN-QI INJECTION WITH CHEMOTHERAPY IN THE TREATMENT OF MALIGNANT TUMOR OF DIGESTIVE TRACT]. LI NAI-QING ET AL. chinese journal of integrated traditional and western medicine. 1992;12(10):588 (chi*).

Shen-Qi (Ginseng-Astragalus) injection was used with chemotherapy in the treatment of 176 cases of malignant tumor of the digestive tract. Results showed that Shen-Qi injection could reduce the toxic effects produced by chemical agents and increase the patient's body weight, as compared with that treated by chemotherapy alone (P<0.001). It could protect the body's hematopoietic function. In Shen-Qi injection with chemotherapy group; the WBC count changed insignificantly but in chemotherapy group the WBC count reduced markedly, in which the rate of chemotherapy failure was 26.5 % the difference between these two groups appeared to be significant (P<0.01). Shen-Qi injection could increase the cellular immunologic function of the body, including phagocytic index and percentage of phagocytes, T lymphocyte transformation rate (cpm) as well as esterase stain. Further more, Shen-Qi injection could promote blood circulation to remove blood stasis and reduce the whole blood specific viscosity (P<0.05). In the animal experiment, the total number of bone marrow cells and karyocytes of combined treatment group was found to be higher (P<0.001) and the average weigh of thymus was heavier (P<0.05) than that in chemotherapy group. Shen-Qi injection could also prolong the survival time and increase the tumor inhibiting rate of experimental mice.

846- gera: 44279/di/ra

[CLINICAL STUDY ON TREATMENT OF ESOPHAGEAL PRECANCEROUS LESION WITH CANG DOU PILL]. HOU JUN ET AL. chinese journal of integrated traditional and western medicine. 1992;12(10):604 (chi*).

In this report, 648 cases of marked epithelium hyperplasia diagnosed with oesophageal exfoliative cytology were studied clinically in the high incidence areas (Cixian and Shexian) of oesophageal cancer. All these cases were randomly divided into the treated group and the control group. For two years, the former group had been given Cang Dou Pill, and the latter the placebo. The results re-examined by the cyto-smears showed that the incidence of the oesophageal cancer in therapeutic and control group were 1.5 % and 4.2% respectively. A significant difference existed between the two groups (P<0.005). And the reverse rate of marked hyperplasia in the treated and control group were 79.5 % and 50.2 % respectively. There was significant difference between the two groups (P<0.01). These results showed that Cang Dou Pill, to some extent, has anti-cancer activity.

847- gera: 44280/di/ra

[IMMUNOLOGICAL AND HEMATOPOIETIC EFFECT OF CODONOPSIS PILOSULA ON CANCER PATIENTS DURING

RADIOTHERAPY]. ZENG XIAO-LAN ET AL. chinese journal of integrated traditional and western medicine.

1992;12(10):607 (chi*).

Codonopsis pilosula was used as an adjuvant in 76 cancer patient during radiotherapy and its protective effect on hematopoietic and immunologic function was studied. Results :(1) No influence on Hb and WBC of the patients with radiotherapy. (2) It could reduce the immunosuppressive effect of radiotherapy on delayed hypersensitive reaction, the lymphocyte response to PHA and IL-2. (3). No difference between treated and control groups in most humoral immune indices such as IgG, IgA and C3 but had slight increase in IgM in treated patients, while significant decrease in control.

848- gera: 44281/di/ra

[COMBINED THERAPY OF BRAIN METASTASIS IN LUNG CANCER]. WANG ZHI-QUAN ET AL. chinese journal of integrated traditional and western medicine.

1992;12(10):609 (chi*).

68 cases of brain metastasis in lung cancer were treated from June 1987 to dec. 1990. They were randomly divided into 2 groups. The first group was solely treated by radiotherapy and the second one, by radiotherapy adding with the intravenous injection of the 10 % Brucea javanica emulsion; The results showed that the living quality and the prolonged median survival of the patients in the second group (15 months) were much better than those in the first group (10 months). The 10 % Brucea javanica emulsion has synergetic with radiotherapy in treating brain metastasis in lung

849- gera: 44283/di/ra

[EFFECT OF PREVENTIVE AND THERAPEUTICAL FUNCTION OF JIAN-PI YI-QI LI-SHUI TANG CISPLATINIC NEPHROTOXICITY OF RATS]. CHENG JIAN-HUA. chinese journal of integrated traditional and western medicine. 1992;12(10):614 (chi*).

The effect of preventive and therapeutical function of Chinese herbs compound prescription Jian-Pi Yi-qi Li-Shui decoction (JPYQLSD) on cistoplatinic (DDP) and nephrotoxicity of rat. It was carried out that the prescription JPYQLSD had notable result in reducing content of serum urea nitrogen, glucosaminidase (beta2)-microglobulin of the rats (P<0.05). JPYQLSD also could alleviate inhibition on activity of adenosine triphosphatase (ATP-ase). Pathological examination revealed the protective effect of the JPYQLSD on kidneys of rats. It suggested that JPYQLSD has a good effect on preventive and therapeutical function of Cisplatinic (DDP) nephrotoxicity. The mechanism of duct was Improved. In the studies on quality standards. TLC method was used in the identification of three medicinal ingredients and TLC- ultraviolet spectrophotometry was used in the con tent determination of the chemical constituent tanshione II A in Salvia

850- gera: 44284/di/ra

[ANTI-TUMOUR STUDY OF COMBINED THERAPY OF YI KANG LING WITH CHEMOTHERAPEUTIC AGENTS]. ZHANG YA-HUA ET AL. chinese journal of integrated traditional and western medicine. 1992;12(10):617 (chi*) Result of animal experiment proved that Yi Kang Ling, a TCM compound preparation could markedly inhibit the growth of implanted tumour in mice. The inhibiting effect to the tumour of combined therapy of Yi Kang Ling and the chemotherapeutic agent s-C better than that using singly. The Yi Kang Ling could alleviate toxicity of chemotherapy which caused the weight loss of mice. It could markedly increase the immune organs' weight, raise the phagocytosis of abdominal macrophage and promote the formation of serum hemolysin inhibited by CTX. The experimental result revealed that the combined therapy of Yi Kang Ling and the chemotherapeutical agents could enhance anti-tumour effect and lower the toxicity of chemotherapy. Toxicological experiment showed that the Yi Kang Ling did not have any toxic effect against organism.

851- gera: 44285/di/ra

[EXPERIMENTAL STUDY ON TEA IN INHIBITING MUTATIONAL SPECIFICITY OF 6 ANTINEOPLASTIC DRUGS]. ZHAO ZE-ZHEN ET AL. chinese journal of integrated traditional and western medicine. 1992;12(10):620 (chi*).

According to the principles of SOS response, the authors tested the mutational specificity of tea and its inhibitory effects to the mutational specificity of 6 antineoplastic drugs by using the method of mutational and anti-mutational synchronous test. The results revealed that the tea had no mutational toxicity but anti-mutation effect. It also had the inhibitory effect on mutational toxicity of 6 antineoplastic drugs, including Mitomycin C, Bleomycin, Fluorouracil, Cis diaminodichoroplatinum, Arabinosylcytosin and Mustargen. These results have provided referential basis for further study on anti-cancer effect and clinical use of tea.

852- gera: 44287/di/ra

I"PROMOTE BLOOD CIRCULATION TO REMOVE STASIS" THERAPY IN TREATING NEOPLASM AND ITS PROGRESS]. LI PING-PING. chinese journal of integrated traditional and western medicine. 1992;12(10):634 (chi).

853- gera: 44288/di/ra

[PROGRESS ON INTEGRATED TRADITIONAL AND WESTERN MEDICINE STUDY OF NASOPHARYNGEAL CANCER]. XIA JIN-PING. chinese journal of integrated traditional and western medicine. 1992;12(10):639 (chi).

854- gera: 44372/di/ra

[A PROBE INTO TREATMENT OF EARLY CERVICAL CARCINOMA WITH CHINESE HERBS]. YU YINAN. liaoning journal of traditional chinese medicine. 1992;19(10):10 (chi).

855- gera: 44419/di/ra

[MIXTURE OF ASTRAGALUS AND LEECH IN THE TREATMENT OF INTERMEDIATE AND LATE ESOPHAGEAL CARCINOMA]. SHEN ZHAOKE. fujian journal of traditional chinese medicine. 1992;23(5):29 (chi).

856- gera: 44506/di/ra

JAN INTRODUCTION TO THE SUPPORTING TREATMENT WITH TCM IN RADIOTHERAPY OF CANCER OF NASOPHARYNX]. ZANG CHAOPING. journal of traditional chinese medicine. 1992;33(11):54 (chi).

857- gera: 44511/di/ra

[CLINICAL OBSERVATION ON ANTICANCER EFFECT OF LIAOSHE DAN]. LI SHUNQING ET AL. beijing journal of traditional chinese medicine. 1992;6:22 (chi).

858- gera: 44585/di/ra

[EXPERIMENTAL STUDY ON THE ANTINEOPLASTIC EFFECTS OF "FU ZHENG KANG AI TANG"]. ZHOU A-GAO ET AL. zhejiang journal of traditional chinese medicine. 1992;27(12):564 (chi).

859- gera: 44608/di/ra

ISTUDY ON INFANTILE METASTATIC DIARRHEA BY BLOCKING CHANG QIANG HOLLOW WITH SMALL DOSE OF 654-2 ON 248 CASES]. AN YONG ET AL. practical journal of integrating chinese with modern medicine. . 1992;5(12):719 (chi).

860- gera: 44611/di/ra

TREATING BONE MARROW INJURY DUE TO RADIOTHERAPY FOR CARCINOMA BY INTEGRATING CHINESE WITH MODERN MEDICINE]. SONG GENG-REN ET AL. practical journal of integrating chinese with modern medicine. 1992;5(12):731 (chi).

861- gera: 44669/di/ra

[SELF-APPOINTED "XIAO LIU WAN" FOR TUMOR IN BRAIN STEM (REPORT OF 13 CASES)]. ZHOU CHANG-AN ET AL. shanxi journal of traditional chinese medicine. 1992;8(6):28 (chi).

862- gera: 44816/di/ra

JOBSERVATION EFFECT OF MOXIBUSTION WITH MOXA CONE ON THE IMMUNE FUNCTION OF PATIENTS WITH LUNG CANCER]. OUYANG QUN ET AL. acupuncture research. 1992; 17(4):241 (chi). Voir article en Anglais réf. GERA [36411].

863- gera: 44817/di/ra

[CLINICAL OBSERVATION ON STUBBORN PULMONARY TUBERCULOSIS TREATED BY GARLIC-PARTITION MOXIBUSTION]. YAN HUA ET AL. acupuncture research. 1992;17(4):243 (chi).

864- gera: 44950/di/ra

[RECENT STUDY ON CHINESE MATERIA MEDICA FOR AFFECTION BEFORE GASTRIC CANCER]. ZHU SHENGLIANG ET AL. shanghai journal of traditional chinese medicine. 1992;12:42 (chi).

865- gera: 44971/di/ra [RESEARCH ON LIU WEI REHMANNIA ORAL LIQUID AGAINST SIDE-EFFECT OF DRUGS OF ANTI-TUMOR CHEMOTHERAPY]. XU JIN-PING ET AL. chinese journal of integrated traditional and western medicine.

1992;12(12):734 (chi*).

Using tumor-bearing mice as experimental animals, the survival rate, hematopoietic, heart, liver, kidney and immunological functions as indexes, Liu Wei Rehmannia Oral Liquid against the side-effect of drugs of anti-tumor chemotherapy (ADM, CTX, DDP, VCR and 5FU) were observed. The results showed that the survival rate in the treated group was significantly higher than that in control, the survival days were highly different (P<0.01); the hemopoietic functions (HB, WBC, PL) in the treated group were higher also (P<0.05 and P<0.01); in the functions of heart, liver and kidney the treated group could protect the above-mentioned three organs (P<0.01); in immune functions, the oral liquid could protect the NK and T-, B-Lymphocyte transformation, being inhibited by drugs of chemotherapy. In comparing with control group NK and T lymphocyte transformation were all significantly different (P<0.01 and P<0.05), while only 3 chemotherapy drugs were markedly different in B lymphocyte transformation (P<0.05 and P<0.01): The discussion indicated that Liu Wei Rehmannia Oral Liquid is effective in protecting the functions of hematopoiesis, immunity, heart, liver and kidney during chemotherapy, which provides an objective data for the clinical application.

866- gera: 48988/nd/ra

[EFFECT OF TCM BLOOD-ACTIVATING AND STASIS-ELIMINATING RESIPE ON HEMORRHEOLOGY IN PRIMARY LIVER CARCINOMA-A REPORT OF 65 CASES]. LI ZUOQING. guang xi journal of traditional chinese medicine. 1992;15(5):4-6 (chi).

Thirty-nine cases were prescribed with the recipe consisting of roasted Squama Manitis, Carapax Trionycis, Rhizoma Zedoariae, Radix Notoginseng, Radix Paeoniae Rubra, Eupolyphaga seu Stelepphaga, Herba Agrimoniae, Radix Salviae Miltiororhizae ; decocted all the ingredients with water for oral administration. The 26 cases of the control group were treated with adriamycin, fluorouracil. Results: The effective rates in the tested group and control groups were respectively as follows : markedly effective 24, 2 cases ; effective, 10, 4 cases; failed 5, 20 cases. All the hemorrheological indices were markedly lowered after the treatment in the tested group (P<0.001-0.05). For the control group, except the weight of the wet thrombus in vitro revealing marked changes after treatment (P < 0.05), all the other indices showed no significant difference (P>0.05).

867- gera: 49060/di/ra

RELAZIONE TRA PSICHE E CANCRO (1°). DE TATA E. east-west. 1992;12(3):12-3 (ita).

868- gera: 57395/nd/re

[ANALYSIS OF THE EFFECT OF NEEDLING HOLOGRAPHIC POINTS OF THE SECOND PHALANGEAL BONE FOR PAIN IN TERMINAL CANCER PATIENTS]. LOU ZHENGHUI ET AL. journal of guangdong medicine. 1992;13(2):94-5 (chi*).

The most tender points on the radial side of the 2nd phalangeal bone of both hands were punctured in 33 cases (67 visits). According to the holographic principle of selecting acupoints, the points on the radial side of the 2nd phalangeal bone represent, from the distal to proximal end, the head,

neck, thorax, abdomen, pelvic cavity and lower extremity. Points in the left hand are punctured when pains occur in the left side of the body and vice versa; and points on the distal end are punctured when pains occur in the upper part of the body and vice versa. The needles are inserted vertically or at an angle of 30° to a depth of 1.5 - 2.0 cm and retained for 30 minutes during which manipulation is done once every 5 minutes. As a control group, a series of 40 cases (115 visits) were treated with oral or i.m.analgesics. Results showed that in the treated group and control group pain was eliminated respectively in 27 and 7 cases/visits, markedly ameliorated in 17 and 11 cases/visits respectively, and alleviated in 18 and 67 cases/visits respectively. The treatment was ineffective in 5 and 30 cases/visits respectively. The total effective rate was 92.3% and 73.7%, the markedly effective rate was 65.5% and 15.5% respectively in the treated and control group. The statistical difference was significant.

869- gera: 70141/nd/re

GOMĬSIN A INHIBITS TUMOR PROMOTION BY 12-0-TETRADECANOYLPHORBOL-13-ACETATE IN TWO STAGE CARCINOGENESIS IN MOUSE SKIN. YASUKAWA K

ET AL. **oncology**. 1992;49(1):68-71 (eng). Gomisin A, isolated from the fruits of Schisandra chinensis, is one of the dibenzocyclooctadiene lignans. Application of 12-Otetradecanoylphorbol-13-acetate (TPA, 1 microgram/ear), a tumor-promoting agent, to the ears of mice induces inflammation. Among seven dibenzocyclooctadiene lignans assayed, gomisin A, gomisin J, and wuweizisu C inhibited the inflammatory activity induced by TPA in mice. The ED50 of these compounds for TPA-induced inflammation was 1. 4- 4. 4 mumol. Gomisin A, with an ED50 of 1. 4 mumol, showed the strongest inhibitory effect. Furthermore, at 5 mumol/mouse, it markedly suppressed the promotion effect of TPA (2. 5 micrograms/mouse) on skin tumor formation in mice following initiation with 7,12-dimethylbenz[a]anthracene (50 micrograms/mouse). It is assumed that the inhibition of tumor promotion by gomisin A is due to its anti-inflammatory activity.

870- gera: 70146/nd/re

CHINESE MEDICINAL HERBS MODULATE MUTAGENESIS, DNA BINDING AND METABOLISM OF BENZOAPYRENE 7, 8-DIHYDRODIOL AND BENZOA [PYRENE 7, 8-DIHYDRODIIOL-9, 10-EPOXIDE]. WONG BY ET AL. cancer lett. 1992;62(2):123-31 (eng).

Oldenlandia diffusa(OD) and Scutellaria barbata (SB) have been used in traditional Chinese medicine for treating liver, lung and rectal tumors. In this study, the effects of aqueous extracts of these two herbs on benzo[a]pyrene 7,8- dihydrodiol. (BaP 7,8-DHD) and benzo[a]pyrene 7,8-dihydrodiol-9,10epoxide (BPDE)-induced mutagenesis using Salmonella typhimurium TA100 as the bacterial tester strain and rat liver 9000 x g supernatant (S9) as the metabolic activation system were assessed. We also determined the effects of these two herbs on BaP 7,8-DHD and BPDE binding to calf thymus DNA. Organosoluble metabolites of BaP 7,8-DHD and water-soluble conjugates of BaP 7,8-DHD and BPDE were analyzed by highperformance liquid chromatography (HPLC) and alumina column liquid chromatography. Mutagenesis assays revealed that these two herbs produced a significant concentrationdependent inhibition of histidine-independent (His+) revertants induced by BaP 7,8-DHD and BPDE. OD and SB also inhibited BPDE-induced mutagenesis in a concentration-dependent manner in the absence of S9. SB had a greater inhibitory effect than OD. SB significantly inhibited BaP 7,8-DHD and BPDE binding to DNA while OD significantly enhanced DNA binding of both compounds. OD and SB inhibited the formation of organosoluble metabolites of BaP 7,8-DHD and decreased the formation of water-soluble conjugates of BaP 7,8-DHD and BPDE. However, the fraction of the total radioactivity in the water-soluble conjugates present as sulfate and glutathione was increased by OD and SB. Glucuronide fraction was decreased. The results of this study affirm our previous work suggesting that these two Chinese medicinal herbs possess antimutagenic properties and further suggest that they act as blocking agents through a scavenging mechanism.

871- gera: 70176/nd/re

[THE RADIOPROTECTIVE EFFECTS OF

METHYLPREDNISOLONE AND SHO-SAIKOTO ON MOUSE LUNG]. KURE F. nippon igaku hoshasen gakkai zasshi. 1992;52(1):96-103 (iap*).

The radioprotective effects of methylprednisolone and Sho-Saikoto (a herbal medicine) on radiation damage to lung tissue were evaluated in four main groups of female Slc-ICR mice, one control group and three groups irradiated with single doses (6 Gy, 12 Gy, 18 Gy) of 60Co gamma rays. Subgroups were established with administration of methylprednisolone and Sho-Saikoto, alone and together. Direct quantitative measurements of collagen accumulation in lung (lung fibrosis) were made by analysis of digitally processed microscopic images of Azan-Mallory stained sections 24 weeks after irradiation. Administration of methylprednisolone suppressed the expected development of fibrotic lung tissue in each of the irradiated groups. In a further study, peplomycin, a lung fibrosis enhancing agent, was administered to all four groups in addition to methylprednisolone and Sho-Saikoto, alone and together. Methylprednisolone was demonstrated to be effective only in 12 Gy group. Overall, Sho-Saikoto showed a lesser degree of effect in the prevention of the fibrosis than methylprednisolone, but the administration of both was demonstrated to be

872- gera: 70199/nd/re

FURTHER STUDY ON THE EFFECTS OF MOTHERWORT (LEONURUS SIBIRICUS L) ON PRENEOPLASTIC AND NEOPLASTIC MAMMARY GLAND GROWTH IN MULTIPAROUS GR/A MICE. NAGASAWA J ET AL. anticancer res. 1992;12(1):141-3 (eng).

To evaluate further the chemopreventive role of motherwort (Leonurus sibiricus L; MW) in lesions of the mammary gland and uterus of GR/A mice, the effects on these lesions of the adsorbed (MW1) and unadsorbed (MW2) fractions of MW separated by ion- exchange resins were studied. The incidence of palpable mammary tumours was suppressed and their growth was retarded by both MW1 and MW2, between whose effects no apparent difference was seen. However, neither of them showed effects on pregnancy-dependent mammary tumours (PDMT), mammary hyperplastic alveolar nodules (HAN) or uterine adenomyosis, whereas MW promoted PDMT and inhibited HAN and adenomyosis. All these findings indicate the importance of the synergistic action of several components, specified and unspecified, for the full manifestation of the effects of Chinese medicine.

873- gera: 84325/di/ra

APLICACION DEL DISCO MAGNETICO EN EL PUNTO NEIGUAN (PC6) PARA LA PREVENCION Y TRATAMIENTO DE LAS NAUSEAS Y VOMITOS INDUCIDOS CON CISPLATINO. LIU SHAOXIANG ET AL. revista de la medicina tradicional china. 1992;2(2):12-3 (esp).

874- gera: 84392/di/ra

EFFECTS OF CORDYCEPS SINENSIS ON NATURAL KILLER ACTIVITY AND COLONY FORMATION OF B16 MELANOMA. XU REN-HE ET AL. chinese medical journal. 1992;105(2):97-101 (eng).

This paper reports the study on the effects of the ethanol extract of Cordyceps sinensis (CS-II), a potent herbal tonic, on murine and human in vitro natural killer cell (NK) activities and on murine in vivo NK activity (by 125I clearance assay), and on colony formation of B16 melanoma in mouse lungs. The results revealed that: 1. the in vivo and in vitro NK activities of mouse were both significantly augmented by intraperitoneal (ip) injection of CS-II. Besides, the inhibition of mouse NK activity by cyclophosphamide (Cy) was prevented following the administration of CS-II; 2. the in vitro NK activity of human peripheral blood mononuclear cells (PBMs) was elevated by preincubation of PBMs with CS-II; and 3. the colony formation of B16 melanoma in mouse lungs was reduced significantly by ip pretreatment of the mice with CS- II. This study indicates that CS-II may be used as an immunopotentiating agent in treating cancer and immunodeficient

875- gera: 84639/di/tt

HOW TO DISCOVER CANCER THROUGH SELF-EXAMINATION. PAN MINGJI. fujian science and technology publishing house, fuzhou. 1992;:325P (eng). 876- gera: 2718/di/cg

INHIBITORY EFFECTS OF MOXIBUSTION ON GROWTH AND LYMPH NODE METASTASIS OF MH134 TUMOR CELLS (abstract). SHINOHARA S ET AL. third world conference on acupuncture, kyoto. 1993;:177. (eng). Etude chez 90 souris après implantation de cellules cancéreuses MH134 au niveau de la patte droite. 4 types de moxibustion sont étudiés. 1) 2 semaines avant l'implantation, 2) une semaine avant, 3) le jour même et 4) une semaine après. Séances quotidiennes de 1 cône (0,65 ou 2 mg) au niveau de 3 points au niveau du dos ou de l'abdomen. Les groupes moxibustion sont comparés à 3 groupes de contrôle 1) sans traitement, 2) lentinan I.P., 3) mitomycine I.P.. Le traitement par petit cône de 0,65 mg débuté 1 semaine avant implantation inhibe le développement de la tumeur. L'effet observé est similaire à celui observé dans les groupes avec traitement médical. De même, les metastases ganglionnaires sont fortement diminuées.

877- gera: 2720/di/cg

RESEARCH OF IMMUNE REGULATION OF MOXIBUSTION ON CANCER-BEARING MICE (abstract). ZHAI D ET AL. third world conference on acupuncture, kyoto. 1993::180.

Il a été rapporté que la moxibustion au 4VC prolonge la survie de souris après inoculation de cellules cancéreuses HAC. La moxibustion (2 cônes de 1,5 mg, 10 séances), entraîne une élévation des ß-endorphines plasmatiques et une diminution au niveau de l'hypophyse et de la surrénale. Il s'agit sans doûte d'un des mécanismes d'action de la

878- gera: 3834/di/cg

EVALUATION OF INDICATIONS FOR ACUPUNCTURAL AND MOXA THERAPY IN THE TREATMENT OF MALIGNANT TUMORS. TAMAGAWA T ET AL. third world conference on acupuncture. 1993;:137. (eng).

879- gera: 8327/di/cg A CLINIC STUDY OF THE MALIGNANT TUMOR DIAGNOSIS BY CHANGES OF AURICLE. MING-ZHUANG L. third world conference on acupuncture. 1993;:378. (eng).

880- gera: 10004/di/cg

EFFECT OF ELECTRICAL ACUPUNCTURE FOR POSTOPERATIVE URINARY DISTURBANCE OF ANO-RECTAL CANCER. TSUJIMOTO T ET AL. third world conference on acupuncture. 1993;:480. (eng).

881- gera: 14633/di/ra

CONTROLLO DEL DOLORE DA CANCRO PER ASSICURARE LA MIGLIORE QUALITA DELLA VITA. GUIQING Y. rivista italiana di medicina tradizionale cinese. 1993;54(6):70-6 (ita).

882- gera: 14649/di/ra

OSSERVAZIONI DEGLI EFFETTI A LUNGO TERMINE DEL **DECOTTO DI YI QI YANG YIN ABBINATO ALLA** RADIOTERAPIA NEL TRATTAMENTO DEL CARCINOMA NASOFARINGEO. LIANHUA L ET AL. rivista italiana di medicina tradizionale cinese. 1993;54(6):82-4 (ita).

883- gera: 15127/di/ra

ELEVACION DE LA CALIDAD DE VIDA DEL PACIENTE CANCEROSO MEDIANTE EL CONTROL DEL DOLOR CON MTC (II). GUIQING Y. revista de la medicina tradicional china. 1993;3(4):49-53 (esp).

884- gera: 17473/di/ra

ELEVACION DE LA CALIDAD DE VIDA DEL PACIENTE CANCEROSO MEDIANTE EL CONTROL DEL DOLOR CON MTC. PEIWEN L. revista de la medicina tradicional china. 1993;3(3):51-3 (esp).

885- gera: 19625/di/ra

RADIATION AND CHEMOTHERAPY. 30 YEAR **EXPERIENCES OF TCM IN ENHACEMENT OF SENSITIVITY** AND REDUCTION OF TOXICITY. DAI ZHAO Z. abstract and review of clinical traditional chinese medicine. 1993;1:1-10

Abstract from Chinese Journal of Integrated Traditional and Western Medicine, 1992 . 12(3) p. 135].

886- gera: 19626/di/ra

COMPLEX DIAGNOSIS OF THE SIDE-EFFECTS OF RADIATION THERAPY. GAO SHI RONG ET AL. abstract and review of clinical tcm. 1993;1:10-6 (eng). [Abstract from New journal of TCM 1992 n°24(7), p.49]

887- gera: 19627/di/ra

COMMON SIDE-EFFECTS OF RADIATION THERAPY. JING FANG Z. abstract and review of clinical tcm. 1993;1:16-20 (eng).

[Abstract from Jiangsu Journal of TCM, 1992,13(6), p.253].

888- gera: 19628/di/ra
CHEMOTHERAPY LEUCOPENIA 365 CASES ACUPUNCTURE TREATMENT. CHEN ET AL. abstract and review of clinical tcm. 1993;1:20-1 (eng) Abstract from Chinese Journal of Integrated Traditional and

Western Medicine, 1991, 11(6), p.350].

889- gera: 19629/di/ra

FU ZHENG JIAN PI TANG IN PREVENTING THE SIDE-EFFECTS OF CHEMOTHERAPY USED IN 534 CASES OF MALIGNANT TUMOR. PAN ET AL. abstract and review of clinical tcm. 1993;1:21-4 (eng).

[Abstract from Chinese journal of Integrated Traditional and Chinese Medicine. 1991, 11(4), p.233].

890- gera: 19630/di/ra

JIN YIN HUA LU IN THE TREATMENT OF ORAL DRYNESS RELATED TO RADIATION AND CHEMOTHERAPY. PU LU YAN, abstract and review of clinical tcm, 1993;1:24-5 (eng). [Abstract from Jiangsu Journal of TCM, 1992, 13(6), p.255].

891- gera: 19631/di/ra

EXPERIMENTAL OBSERVATION THE METHOD OF BENEFITING QI AND EXPELLING ECCHYMOSIS IN TREATING ACUTE RADIATION REACTION. WANG HET AL. abstract and review of clinical tcm. 1993;1:25-6 (eng). [Abstract from Chinese Journal of Integrated Traditional and Western Medicine, 1984, 4(6), p.359].

892- gera: 20089/di/ra

A PILOT STUDY TO EVALUATE THE EFFECT OF ACUPUNCTURE ON NOCTURIA IN THE ELDERLY. ELLIS N. complementary therapies in medicine. 1993;1(3):164-7 (eng).

893- gera: 36929/di/ra

GENESIS DE LA ENFERMEDAD TUMORAL. EL IMPACTO EMOCIONAL. ESCUELA NEIJING. medicina tradicional china. 1993;86:18-22 (esp).

894- gera: 37034/di/el

EFECTOS DE LA MOXIBUSTION SOBRE LA INMUNOCAPACIDAD CELULAR DE LOS RATONES GAMMA-IRRADIADOS. DOU-MONG HAU ET AL. in estimular las defensas de otra form. 1993;:79-87 (esp).

895- gera: 37763/nd/re

CONTROLLING EMESIS AFTER CHEMOTHERAPY. KNAPMAN J. nurs stand. 1993;?????:38-9 (eng).

896- gera: 37906/di/ra

JEXPERIMENTAL STUDY ON ANTI-INFLAMMATION AND ANTI-ONCOTIC EFFECT OF CHINESE MATERIA MEDICA FOR ENT DISEASES]. QIAN XUEYE ET AL. shanghai journal of traditional chinese medicine. 1993;5:45 (chi).

897- gera: 38158/di/ra

[PRIMARY OBSERVATION ON DANGGUI BUXUE TANG ON ABATING AREST OF BONE MARROW DUE TO CHEMOTHERAPY]. LIU ZHEN-XUE. practical journal of integrating chinese with modern medicine. 1993;6(3):166 (chi).

898- gera: 38320/di/ra

[PAIN OF CANCER TREATED BY INTERNAL AND EXTERNAL THERAPY]. CHANG QING. journal of zhejiang college of traditional chinese medicine. 1993;16(6):7 (chi).

899- gera: 38524/di/ra

[PREVENTION AND TREATMENT OF ESOPHAGEAL CANCER WITH TCM]. CHEN MEIFANG. shanghai journal of traditional chinese medicine. 1993;3:41 (chi).

900- gera: 38590/di/ra

[MY HUSBAND'S TUMOR BECAME SMALLER AND HAS DISAPPEARED]. WANG HAI FENG. qigong and physical training. 1993;2:59 (chi).

901- gera: 38632/di/ra

[PROBE INTO THE MECHANISM OF QIGONG TREATING CANCERS]. ZHANG QI-XIAN ET AL. qigong. 1993;14(5):201

902- gera: 38656/di/ra [TREATING MAMMARY CANCER WITH INTEGRATED TCM AND WM]. WU ZHONGJIU ET AL. journal of zhejiang college of traditional chinese medicine. 1993;17(2):33

903- gera: 38732/di/ra

[CLINICAL ANALYSIS ON 90 CASES OF PITUITARY TUMOUR]. ZHANG QIUJUAN ET AL. shanghai journal of traditional chinese medicine. 1993;9:4 (chi).

904- gera: 38881/di/ra

ZUSANLI AND IMMUNITY, BODY DEFENSE AND CANCER : A REVIEW. CUI YUMMENG. international journal of clinical acupuncture. 1993;18(104):59-62 (eng).

905- gera: 45107/di/ra

A COMPARATIVE CLINICAL STUDY ON PREVENTION AND TREATMENT WITH SELECTED CHRONOMEDICATION OF LEUKOPENIA INDUCED BY CHEMOTHERAPY. . LI YONGHAO ET AL. journal of traditional chinese medicine. 1993;13(4):257-61 (eng). During the period of therapy, leukopenia induced by chemotherapy was less severe and was cured more rapidly in the selected chronomedication group (CMG) than in the routine medication group (RMG). The incidence of leukopenia was markedly lower in CMG (12. 9%) than in RMG (48. 4%), and the rate of uneventful completion of chemotherapy was also higher in CMG (96. 8%) than in RMG. These results suggest that selected chronomedication may be beneficial to the successful completion of chemotherapy in patients with malignant tumor.

906- gera: 45148/nd/re

[ANTI-XEROSTOMIC PASTE USED FOR NASOPHARYNGEAL CANCER UNDERGOING RADIOTHERAPY]. WANG FY . chung hua hu li tsa chih. 1993;28(12):733-4 (chi).

907- gera: 45166/nd/re

JA REPORT OF 40 CASES OF ESOPHAGEAL CARCINOMA SURVIVING FOR MORE THAN 5 YEARS AFTER TREATMENT WITH DRUGS]. WANG RL . chung hua chung

liu tsa chih. 1993;15(4):300-2 (chi*). From August 1974 to January 1987, 650 cases of moderately and advanced esophageal carcinoma were treated with a combination of chemotherapy and Rabdosia rubescens or Rabdosia rubescens and/or tradition chinese medicinal prescription. After treatment, 40 patients survived for over 5 years (5-year survival rate 6. 15%): 32 for over 6 years, 23 for more than 10 years, 5 for more than 15 years and 20 die of tumors (16 cases) or other diseases (4 cases). There were 20 patients who are still living and some of them have been living for more than 18 years. Analyzing the data, it is believed that the age, the state of activity, the length of illness, the effectiveness of primary treatment, the multi-course extensive therapy, long-term maintenance treatment, etc, are all important factors affecting the results of drug treatment.

908- gera: 45467/di/ra

[ENHANCING EFFECT OF JIAN PI JIN DAN ON IMMUNE FUNCTIONS OF NORMAL AND CYCLOPHOSPHAMIDE INDUCED IMMUNOSUPPRESSED MICE]. FAN YP . chinese journal of integrated traditional and western medicine. 1993;13(4):223-5, 1 (chi*).

By means of normal and cyclophosphamide (CY) injected NIH mice, the effect of Jian Pi Jin Dan on immuno- modulation was studied which could treat the "Gan" disease effectively in TCM. Results: Markedly improved the level of serum lysozyme, enhance the phagocytosis of abdominal macrophage. The proliferation of spleen T, B cells, the production of interleukin-1 (IL-1) by macrophage and of interleukin-2 (IL-2) by T cells in normal and CY injected mice were also enhanced. Furthermore, it was able to restore the weight, spleen and thymus index of CY injected mice. This prescription can not only reinforce Spleen, but also regulate Liver, complying to the children's physiological and pathological characteristics.

909- gera: 45585/nd/re

HIGHLIGHTS OF THE CANCER CHEMOPREVENTION STUDIES IN CHINA. . HAN J . prev med. 1993;22(5):712-22

New retinoids have been synthesized and screened in the search for chemopreventive agents of cancer. N-4-(Carboxyphenyl) retinamide showed a significant inhibitiory effect on carcinogenesis of cancers in the buccal pouch of hamsters and in the forestomach of mice. Clinical studies have demonstrated that N-4-(carboxyphenyl) retinamide is effective against oral leukoplakia, vulvar leukoplakia, and dysplasia of the uterine cervix and stomach. Field studies among a population at high risk for esophageal cancer in Linxian County, Henan Province, revealed that N-4-(ethoxycarbophenyl) retinamide decreased the incidence of this cancer. Qidong County is a high-risk area for hepatoma in China. This has been correlated to the low levels of selenium in the blood of the residents as well as in grain grown in the area. S. Y. Yu, W. G. Li, Y. J. Zhu, et al. (Biol. Trace Element Res. 1985; 7:22-26) reported that the administration of selenium inhibited the incidence of hepatoma induced by aflatoxin B in rats and in ducks. Experimental studies demonstrated that green tea extract inhibited 12-Otetradecanoylphorbol-3-ace tate-induced epidermal ornithine decarboxylase activity and counteracted 12-Otetradecanoylphorbol-3-acetate-induced ear edema in mice. It is interesting that green tea extract inhibited the transformation of Balb/c 3T3 cells induced by methylcholanthrene and 12- Otetradenanoylphorbol-3-acetate. Garlic has been used for thousands of years in Chinese cooking and folk medicine. Epidemiological studies show that the dietary intake of garlic is inversely related to gastric cancer incidence in Shandong

910- gera: 45691/nd/re

INHIBITORY EFFECTS BY ORAL ADMINISTRATION OF GINSENOSIDE RH2 ON THE GROWTH OF HUMAN **OVARIAN CANCER CELLS IN NUDE MICE..** TODE TET AL. j cancer res clin oncol. 1993;120(1-2):24-6 (eng). Recently two new compounds, ginsenosides Rh1 and Rh2, have been isolated from an ethanol extract of the processed root of Panax ginseng CA Meyer, and Rh2 (but not Rh1) has been found to cause growth inhibition of cultured B16 melanoma cells. We have also demonstrated that Rh2 caused inhibition of cultured human ovarian cancer cell (HRA) proliferation. The effect of oral administration of Rh2 on tumor growth and survival of nude mice bearing HRA cells was examined. Nude mice were inoculated subcutaneously in the right flank with 10(6) HRA cells. After 7 days of tumor inoculation 2 mg/kg cis-diamminedichloroplatinum(II) (cisplatin) was administered intraperitoneally once a week for 5 weeks. In Rh2-treated groups. Rh2 was dissolved in absolute ethanol, adjusted with distilled water to 1, 15, and 120 microM, and 0. 4 ml of each concentration was administered orally by canula every day for 90 days, from the next day of tumor inoculation. The tumor volume, hematocrit and body weight were measured every week. On days 56 and 63 after tumor inoculation, the tumor volumes in all groups treated with Rh2 were significantly less than those in an ethanol- treated control group and also in cisplatin treated group. After 70 days, the

tumor growth in nude mice treated with 15 microM and 120 microM Rh2 was significantly inhibited compared to that in a cisplatin treated group as well as a control group. Consequently, the survival of nude mice treated with 15 microM and 120 microM Rh2 was also significantly prolonged, compared to that of cisplatin treated mice. No toxic effects were observed in any of the mice.

911- gera: 45757/nd/re

TRAITEMENT DE LA DOULEUR CHRONIQUE CANCEREUSE SEQUELLAIRE. APPORT DE L'ACUPUNCTURE, DE L'AURICULOTHERAPIE ET DE LA MESOTHERAPIE. BRULE-FERMAND S. soins. 1993;39-40: (fra).

912- gera: 45804/nd/re

ANTI-GROWTH EFFECTS WITH COMPONENTS OF SHO-SAIKO-TO (TJ-9) ON CULTURED HUMAN HEPATOMA CELLS.. OKITA K ET AL. eur j cancer prev. 1993;2(2):169-

The present study was undertaken to investigate the effects and the mechanism of the components of Sho-saiko-to (baicalein, baicalin, saikosaponin-a, saikosaponin-c, ginsenoside Rb1, ginsenoside Rg1) on cultured human hepatoma cells (HuH-7). Cell cycle analysis was carried out with flow cytometry and the bromodeoxyuridine (BrdU)labelling method. The results showed that baicalein, baicalin and saikosaponin-a inhibited cell proliferation dosedependently but independently of the cell cycle. Furthermore, it was found that saikosaponin-a possesses a strong cell-killing effect. On the other hand, saikosaponin-c, ginsenoside Rb1 and ginsenoside Rg1 had no effect on cell

913- gera: 45861/nd/re

EFFECTS OF KAMPO (JAPANESE HERBAL) MEDICINE "SHO-SAIKO-TO" ON DNA-SYNTHESIZING ÉNZYME **ACTIVITY IN 1, 2-DIMETHYLHYDRAZINE-INDUCED** COLONIC CARCINOMAS IN RATS. SAKAMOTO S ET AL. planta medica. 1993;59(2):152-4 (eng).

Sho-Saiko-To (SST) is a modified Japanese traditional Chinese herbal medicine containing seven medical plants: Bupleuri radix, Pinelliae tuber, Suxtallariae radix, Zizyphi fructus, Ginseng radix, Glycyrrhizae radix, and Zingiberis recens rhizoma. This preparation has been used in the treatment of some inflammatory diseases of the respiratory system and chronic hepatitis. In the present study, the effects of SST were investigated on the activities of DNA-synthesizing enzymes in 1,2-dimethylhydrazine (DMH)-induced colonic carcinomas in rats. Six-week administration of SST prevented nearly 100% of the body weight loss and the final number of the colonic carcinomas compared to those in the rats treated with DMH alone, and suppressed the enhanced activities of thymidylate synthetase (TS) and thymidine kinase (TK) which were involved in the de novo and salvage pathways of pyrimidine synthesis, respectively, in DMH-induced colonic carcinomas. These results indicate that SST may show directly and/or indirectly inhibitory effects on the

914- gera: 46225/di/ra

ITREATMENT OF LATE GASTRIC CANCER WITH CHINESE DRUGS AND CHEMOTHERAPY BY SELECTIVE ARTERIAL CATHETER - WITH A REPORT OF 86 CASES]. ZHANG ZHIQIAO ET AL. journal of zhejiang college of traditional chinese medicine. 1993;17(3):28 (chi*).

915- gera: 46350/di/ra

["SUPPORTING HEALTHY ENERGY AND REMOVING BLOOD STASIS" IN TREATMENT OF ACUTE LIVER DAMAGE CAUSED BY CHEMOTHERAPY OF TUMORS, ANALYSIS OF 30 CASES]. ZHOU JU-YING ET AL. shanxi journal of traditional chinese medicine. 1993;9(3):18 (chi).

916- gera: 46415/di/ra

THREE-STEP PERIODIC THERAPY WITH CHINESE DRUGS FOR PREVENTION AND TREATMENT OF TOXIC SIDE EFFECT DUE TO CHEMOTHERAPY]. YOU JIANGLIANG. jiangsu journal of traditional chinese medicine. 1993;14(5):7 (chi).

917- gera: 46430/di/ra

[EXPERIMENTAL AND CLINICAL STUDIES ON CARCINOMA OF COLON TREATED BY CHANGLIUPING]. GUO YONG ET AL. journal of traditional chinese medicine. 1993;34(8):481 (chi*).

918- gera: 46496/di/ra

[EXPERIMENTAL STUDIES ON THE ACTION OF ANTIRADIATION OF MEMBRANOUS MILKVETCH (ASTRAGALUS MEMBRANACEUS)]. QUAN HONG-XUN ET AL. chinese traditional and herbal drugs. 1993;24(8):423

919- gera: 46585/di/ra

[CHINESE MATERIAL MEDICA COMBINED WITH CISPLATIN AND LIPIODOL THROUGH TRANSCATHETER ARTERIAL EMBOLIZATION IN TREATING PRIMARY HEPATOMA]. YU ZHI-JIAN ET AL. chinese journal of integrated traditional and western medicine. 1993;13(6):327 (chi*).

920- gera: 46586/di/ra

[CLINICAL EFFECTS OF PERFUSING PROMOTING BLOOD CIRCULATION DRUG THROUGH HEPATIC ARTERY ON LATE STAGE OF HEPATOCARCINOMA]. PENG ZHENG-SHUN ET AL. chinese journal of integrated traditional and western medicine. 1993;13(6):330 (chi*).

921- gera: 46718/di/ra

[EXPERIENTAL STUDY ON TREATING TRANSPLANTATION TUMOR IN MICE WITH SANSI MIXTURE]. PANG DEXIANG ET AL. journal of zhejiang college of traditional chinese medicine. 1993;17(4):34

922- gera: 46725/di/ra
[SYMPTOM-SIGN DIFFERENTIATION AND TREATMENT OF TOXIC SIDE EFFECT FOROM CHEMOTHERAPY OF 159 CASES OF ACUTE LEUKEMIA]. XU RUIRONG ET AL. shanghai journal of traditional chinese medicine. 1993;7:7 (chi).

923- gera: 46737/di/ra

[EXPERIMENTAL STUDY ON EFFECT OF YIN-NURSING PRESCRIPTION FOR BLOCKING PRE-CANCEROUS AFFECTION OF LIVER IN RATS]. ZOU KUICHANG ET AL. shanghai journal of traditional chinese medicine. 1993;7:45 (chi).

924- gera: 46811/di/ra

[TOXICITY OF LARGE DOSE OF CISPLATIN ON KIDNEY PREVENTED BY DECOCTION OF RADIX ASTRAGALI SEU HEDYSARI AND PORIS]. CHENG JIANHUA ET AL. journal of traditional chinese medicine. 1993;34(6):349 (chi*).

925- gera: 46819/di/ra

PROGRESS IN MODERN STUDIES ON BLOOD STASIS IN TUMOR AND ITS TREATING PRINCIPLE OF ACTIVATING BLOOD AND ELIMINATING STASIS]. QI YUANFU ET AL. journal of traditional chinese medicine. 1993;34(6):370

926- gera: 46828/di/ra

[CLINICAL INVESTIGATION ON THE EFFECTIVENESS OF A ANALGESIA PRESCRIPTION IN THE CASES WITH CARCINOMA]. LIU ZHENGYU. jiangxi journal of traditional chinese medicine. 1993;24(3):35 (chi).

927- gera: 46872/di/ra

[EFFECT OF LEUKOPENIA DUE TO CHEMOTHERAPY BY INTEGRATING CHINESE WITH MODERN MEDICINE]. YANG XU-CAI ET AL. practical journal of integrating chinese with modern medicine. 1993;6(6):334 (chi).

928- gera: 46903/di/ra [EFFECT OF RUANGAN POWDER ON LIVER CANCER DUE TO AFLATOXIN BRAIN MICE]. HUANG LI-MING ET AL. practical journal of integrating chinese with modern medicine. 1993;6(7):0 (chi).

929- gera: 46906/di/ra

[ANALYSIS ON 123 CASES OF NASOPHARYNGEL CARCINOMA WITH RADIOTHERAPY AND DIFFERENTIATION OF SYMPTOMS AND SINGS IN TCM]. ZHU QUAN-DE ET AL. practical journal of integrating chinese with modern medicine. 1993;6(7):0 (chi).

930- gera: 46911/di/ra

IDR QIAN BOWEN'S EXPERIENCE ON THE APPLICATION OF FRUCTUS AURANII AND RHIZOMA ATRACTYLODIS MACROCEPHALAE IN THE TREATMENT OF CARCINOMA OF STOMACH]. QI YUANFU. journal of traditional chinese medicine. 1993;34(5):267 (chi).

931- gera: 46914/di/ra

IMITIGATION OF CANCEROUS PAIN WITH PASTE OF VENENUM BUFONIS]. LIU JIAXIANG ET AL. journal of traditional chinese medicine. 1993;34(5):281 (chi).

932- gera: 46969/di/ra

[TREATMENT OF RADIATION ULCER BY CHINESE MEDICINE]. XU BAIPING. new journal of traditional chinese medicine. 1993;25(8):39 (chi).

933- gera: 46982/di/ra

[TREATMENT OF BRAIN TUMOR BY TCM: AN CLINICAL OBSERVATION OF 118 CASES]. WANG MINGYI ET AL. new journal of traditional chinese medicine. 1993;25(5):41

934- gera: 47028/di/ra

THE EFFECT OF DECOCTION FOR NOURISHING YIN AND REMOVING TOXIC SUBSTANCES ON PREVENTION AND **CURE OF RADIO-OROPHARYNGEAL REACTION]. ZHAO** FUZHI ET AL. shandong journal of traditional chinese medicine. 1993;5:19 (chi).

935- gera: 47166/di/ra

[DIFFERENTIAL TREATMENT FOR ESOPHAGEAL CARCINOMA]. WANG YUZHANG. beijing journal of traditional chinese medicine. 1993;5:61 (chi).

936- gera: 47188/di/ra

[CLINICAL OBSERVATION ON COMBINED EFFECT OF "SHEN-HE ORAL SOLUTE" AND CHEMOTHERAPY FOR ADVANCED MALIGNANT NEOPLASM OF HE ALIENTARY TRACT]. LI BING-YING ET AL. shanxi journal of traditional chinese medicine. 1993;9(5):11 (chi).

937- gera: 47221/di/ra

TREATING 25 CASES OF SENILE ESOPHAGEAL CANCER BY POD PLUS BANXIA XIEXINTANG]. ZHANG XIAOLI ET AL. liaoning journal of traditional chinese medicine. 1993;20(8):30 (chi).

938- gera: 47241/di/ra

TREATMENT OF PAIN DUE TO CANCER WITH 921 ANALGESIC PLASTER]. QIU ZUPING ET AL. jiangsu journal of traditional chinese medicine. 1993;14(7):8 (chi).

939- gera: 47254/di/ra

[CLINICAL OBSERVATION ON CHINESE HERBAL MEDICINE FOR CONVALESCENCE IN ADDITION TO CHEMOTHERAPY IN MANAGEMENT OF POSTOPERATIVE PROGRESSIVE STAGE IN CARCINOMA OF STOMACH]. XU DIAN-YUAN ET AL. shanxi journal of traditional chinese medicine. 1993;9(4):14 (chi).

940- gera: 47312/di/ra

[PROGRESS OF TCM HERBS ON TREATING LIVER CANCER PAIN]. ZHENG YULING. traditional chinese medicinal research. 1993;6(3):39 (chi).

941- gera: 47393/di/ra

TREATMENT ON CEREBRAL GLIOMA WITH CHINESE MEDICINAL HERBS AND WESTERN MEDICINE]. PU ZU-YI ET AL. practical journal of integrating chinese with modern medicine. 1993;6(8):491 (chi).

942- gera: 47448/di/ra

[APPLICATION OF CHINESE MATERIA MEDICA BEFORE AND AFTER SURGICAL OPERATION OF CARCINOMA OF RECTUM]. HAN GANG ET AL. journal of traditional chinese medicine. 1993;34(11):682 (chi).

943- gera: 47479/di/ra

[OBSERVATION ON EFFECT OF SELF-PRESCRIBED LIVER DISEASE RECIPE FOR PRIMARY LIVER CANCER]. XU YIYU ET AL. shanghai journal of traditional chinese medicine. 1993;12:3 (chi)

944- gera: 47481/di/ra [EXPERIENCE IN CLINICAL USE OF CHINESE MATERIA MEDICA FOR OVARY CANCER]. SHEN LIJUN ET AL. shanghai journal of traditional chinese medicine. 1993;12:7 (chi).

945- gera: 47482/di/ra

[ADVANCE ABOUT CLINICAL STUDY OF GASTRIC CANCER]. QIAN XINLAN. shanghai journal of traditional chinese medicine. 1993;12:10 (chi).

946- gera: 47505/di/ra

[CLINICAL AND EXPERIENTAL INVESTIGATION OF LIUWEI DIHUANG DECOCTION IN PATIENTS WITH LUNG CANCER OF KIDNEY DEFICIENCY TYPE]. ZOU LIYAN ET AL. journal of beijing college of traditional chinese medicine. 1993;16(6):43 (chi).

947- gera: 47655/di/ra

[THE EFFECT OF ZYNC GLYCYRRHIZATE ON TOXICITY AND ANTICANCER ACTIVITY OF CYSPLATIN IN MICE]. XU ZL ET AL. acta pharmaceutica sinica. 1993;28(8):571 (chi*).

948- gera: 47703/di/ra

["MIXT THREE AND FOUY" COMBINATION OPERATION AND CHEMTHERAPY FOR 34 CASES OF ADVANCED GASTRICT CANCER]. WU ZHONG JIU ET AL. zhejiang journal of traditional chinese medicine. 1993;28(8):354

949- gera: 47909/di/ra

[CLINICAL AND EXPERIMENTAL STUDIES ON THE ANTI-TOXIC AND SIDE-EFFECTS ACTIONS OF SISHENG **DECOCTION IN RADIO-THERAPY]. LING CHANGQUAN ET** AL. journal of traditional chinese medicine.

1993;34(12):733 (chi*).

Cases of nasopharyngeal carcinoma receiving radiotherapy were treated by Sisheng Decoction which yielded marked antagonistic actions against the decrease of WBC and platelets. Thus, 97. 4 % of the cases were able to successfully receive the whole course of radiotherapy. Animal experiment showed that the action of the decoction contents of ßendorphine in the blood.

950- gera: 48032/di/ra

[CLINICAL OBSERVATION ON CARCINOMETIC FEVER BY INTERGRATING CHINESE WITH MODERN MEDICINE]. GAO JU ZHEN. the practical journal of integrating chinese with modern medicine. 1993;6(9):527 (chi).

951- gera: 48049/di/ra

[THERAPEUTIC OBSERVATION ON PRE-CANCEROUS AFFECTION OF STOMACH TREATED WITH TCM AND CHINESE MATERIA MEDICA]. CHEN PANHUA ET AL. shanghai journal of traditional chinese medicine. 1993;11:8 (chi).

952- gera: 48056/di/ra

[USE OF REMOVING STAGNATION AND PROMOTING DIGESTION DRUGS IN TREATING LIVER CANCER]. LIN JUNHUA. shanghai journal of traditional chinese medicine. 1993;11:29 (chi).

953- gera: 48209/di/ra

[EXPERIENCE OF WU YIDE IN PREVENTING THE TOXIC AND SIDE EFFECTIONS OF RADIOTHERAPY AND

CHEMETHERAPY ON ONCOMA]. SHI HENGJUN ET AL. liaoning journal of traditional chinese medicine. 1993;20(11):11 (chi).

954- gera: 48269/di/ra

[SYNTHETICALLY TREATING 17 CASES OF PRIMARY CARCINOMA OF LIVER]. WANG XIAOXIAN. hubei journal of traditional chinese medicine. 1993;15(6):22 (chi).

955- gera: 48388/di/ra

[TREATING 20 CASES OF LATE GASTRIC CANCER BY THE COMBINATION OF CHINESE HERBS WITH UFTM SCHEME]. WANG XIAO. jiangxi journal of traditional chinese medicine. 1993;24(6):37 (chi).

956- gera: 48578/di/ra

[CLINICAL OBSERVATION ON CHINESE HERBAL MEDICINE FOR CONVALESCENCE IN ADDITION TO CHEMOTHERAPY IN MANAGEMENT OF POSTOPERATIVE PROGRESSIVE STAGE IN CARCINOMA OF STOMACH]. XU DIAN-YUAN ET AL. shanxi journal of traditional chinese medicine. 1993;9(4:14 (chi).

957- gera: 48789/di/ra

PRELIMINARY STUDY ON THE ANTI-RADIATION EFFECT OF JEN-SHENG-YANG-YUNG-TANG. HSUE-YIN HSU ET AL. american journal of chinese medicine. 1993;21(2):187-95 (eng).

Six to seven week old male mice of ICR strain were exposed to different doses of x-rays to determine if Jen-Sheng-Yang-Yung-Tang could be a modifier in the elimination of radiation damage. Colony forming units of bone marrow cells in the spleen (CFUs) were measured before and after x-ray irradiation with intraperitoneal injection of 10 mg/20 g or 20 mg/20 g body weight of Jen-Sheng-Yang-Yung-Tang, once a day for seven consecutive days. The recovery of CFUs and hemocytes counts by 4 Gy irradiation with Jen-Sheng-Yang-Yung-Tang administration was faster for a concentration of 20 mg/20 g than lo mg/20 g. The measurement of lo-day CFUs showed an increase of radiotolerance in the treatment of 20 mg/20 g administration before x-ray irradiation. The injection of Jen-Sheng-Yang-Yung-Tang accelerated the recovery of hemocyte counts in mice irradiated with 4 Gy x-ray; the effect was especially profound for leukocytes with 20 mg/20 g Jen-Sheng-Yang-Yung-Tang administration after irradiation.

958- gera: 48818/di/ra

EFFECT OF JEN-SHENG-YANG-YUNG-TANG ON CELLULAR IMMUNOCOMPETENCE OF GAMMA-IRRADIATED MICE. HSUE-YIN ET AL. american journal of chinese medicine. 1993;21(3-4):269-77 (eng).

This study was conducted to determine the therapeutic effects of Jen-Sheng-Yang-Yung- Tang on mice irradiated by gamma-ray. A total of 160 male VCR strain mice, 6-7 weeks of age, were chosen to receive different treatment of radiation and Jen-Sheng-Yang-Yung-Tang. After the treatments, six to eight mice from cach group were sacrificed on days 1, 5, 12, 19, 26 and 33. The body and splenic weights of mice by different treatments were measured and the splenic cells were separated under aseptic conditions, thereafter. The changes of cellular immunocompetence in mice following treatments were measured by 3H-thymidine incorporation in each experimental mouse. The results revealed that 4 Gy of gamma-ray irradiation inhibited the increases of body and splenic weights and exerted an obvious inhibitory effect on the blastogenic responses of the splenic lymphoid cells after being stimulated by mitogens such as PHA. Con A, PWM and LPS. Jen-Sheng-Yang-Yung-Tang administration seemed to help the recovery of cellular immunocompetence in the gamma ray irradiated mice. Among these treatments, Jen-Sheng-Yang-Yung-Tang administered with the concentration of 20 mg/20 g body weight after irradiation enhanced the recovery of radiation damages and had the highest efficacy of any other kinds of treatments.

959- gera: 49007/di/ra

TREATMENT WITH CONE MOXIBUSTION OF CHEMOTHERAPEUTIC LEUCOCYTOPENIA IN 114 CASES. HUANG XIMEI. journal of traditional chinese medicine. 1993;13(4):266-7 (eng).

960- gera: 50195/di/re

ACUPUNCTURE TREATMENT OF XEROSTOMIA CAUSED BY IRRADIATION TREATMENT OF THE HEAD AND NECK REGION: CASE REPORTS. BLOM M ET AL. journal of oral rehabilitation. 1993;20:491-4 (eng).

Salivary flow rates were monitored in two patients, treated with acupuncture for post-radiotherapy xerostomia. The flow rates improved after acupuncture and the effect persisted during the 2-years observation period.

961- gera: 54199/nd/re

ANTITUMOR ACTIVE POLYSACCHARIDES FROM THE CHINESE MUSHROOM SONGSHAN LINGZHI, THE FRUITING BODY OF GANODERMA TSUGAE. WANG G ET

AL. biosci biotechnol biochem. 1993;57(6):894-900 (eng). A systematic method of extraction, fractionation, and purification of polysaccharides from Songshan Lingzhi (Ganoderma tsugae) with antitumor activity was established. Seven glycans with strong antitumor activities were obtained from 14 water-soluble, and 15 water-insoluble fractions: Flo-a, FA-1, FII-1, FIII-2, and FIII-2-a, -b, and -c. Flo-a and FA-1 were protein-containing glucogalactans associated with mannose and fucose. FII-1 was a (1-->3)-beta-D- glucan having a lower protein content. The water-insoluble fractions FIII-2-a, -b, and c were extracted with alkali, and were found to be proteincontaining (1-->3)-beta-D-glucans showing the strongest activity. Chemical properties and structure of each antitumor polysaccharide were compared with three fungi of the Ganoderma family, Kofukitake (G. applanatum), Mannentake (G. lucidum), and Songshan Lingzhi (G. tsugae).

962- gera: 57400/nd/re

[CANCER PAIN MANAGEMENT]. CHARLTON JE. cahiers d'anesthesiologie. 1993;41(6):621-4 (fra*).

963- gera: 84897/di/ra

RELAZIONE TRA PSICHE E CANCRO (2° e fine). DE TATA E. east-west. 1993;1:9-10 (ita).

964- gera: 3100/di/ra

ACUPUNCTURE ET CHIMIOTHERAPIE. REMPP C. asclepios. 1994;4:19-21 (fra).

La chimiothérapie cancéreuse est souvent mal suivie parceque mal tolérée digestivement. La prévention des nausées et vomissements par acupuncture optimise donc ces traitements

et améliore le confort du patient.

965- gera: 3280/di/ra

[ACUPUNCTURE IN THE TREATMENT OF HEMATOPOIETIC DYSFUNCTION DUE TO RADIO-CHEMOTHERAPY]. YU MEIJUAN ET AL. chinese acupuncture and moxibustion. 1994;14(5):4 (chi*). In the present investigation, the author compared the therapeutic effect of acupuncture with that of medication treating patients with hematopoietic dysfunction resulting from radio-chemotherapy. In the acupuncture group, Quchi (LI 11), Hegu (LI4), Neiguan (PC6), Zusanli (ST36), Sanyinjiao (SP6), Dazhui (GV14) were prescribed and manipulated with even needling technique and Zusanli (ST 36) and Sanyinjiao (SP6) were connected with an electric acupuncture apparatus. The patients in the medication group were administered with conventional clinical medicines for the disease. The course of Treatment was the same for both groups. The results showed that acupuncture noticeably elevated the decreased leucocyte count (P<0.001) and its effect was superior to that in the control medication group (P<0.01); the lowered hemochromic and platelet count were evidently raised in their average value with acupuncture treatment (P<0.05 and P<0.01) and the effect was superior or similar to that in the control medication group. Clinical symptoms wart better improved in the acupuncture group than in the control group.

966- gera: 3289/di/ra

EFFECT OF ACUPUNCTURE ON IMMUNE FUNCTION OF PATIENTS TREATED WITH RADIOTHERAPY AND CHEMOTHERAPY. ZHAO RONG ET AL. world journal of acupuncture-moxibustion. 1994;4(2):24-8 (eng). In comparison with the normal people group, values of blood

CD2+ and CD4+ in patients with malignant tumors treated with radiotherapy and chemotherapy were significantly lower and the ratio of CD4+ and CD8+ decrease obviously (all P<0.001); CD8+ had no apparent change (P>0.05). Following acupunctural treatment, values of CD2+, CD4+ and the ratio of CD4+ to CD8+ increased obviously (all P<0. 001); while those of the medicinal control group ad no significant change after treatment (P>0. 05). Values of IgG, IgA and IgM in patients' serum presented an abnormal decreasing or increasing tendency, and C3 in minority of patients were raised. Results indicated that there was a biphasic regulatory effect of acupuneture on the disturbance of humoral immunity and could correct the deviation of C3 level; and its effect was better than or similar to that of the medicine control group. It demonstrates that acupuncture can enhance and regulate the immune function of patients treated with radiotherapy and chemotherapy and thus reduce side effects of these two therapies.

967- gera: 13331/di/ra

EFFECTS OF DIFFERENT DOSAGE OF MOXA CONE ON DRUG RESISTANCE IN S-180R CELLS. TINGJUN Z ET AL. world journal of acupuncture-moxibustion. 1994;4(3):51-3

Drug resistance is a very important problem for cancer chemotherapy. The major type of drug resistance is due to the overexpression of P-glycoproteins (P-170) in cancer cells. P 170 could pump the drug out of the cells, so the drug could not be accumulated enough to kill the cells. We had developed the adriamycin resistant cell line S-180R in BABL/c mice. The cells overexpress P 170 stably. Different dosages of moxa cone were used on Guanyuan (CV 4) point of the mice. Stimulation of drug accumulation was found after administration of moxibustion for 30 min and a dose response manner was shown below 400 mg of moxa cone, but a little decrease of the stimulation was obtained when using 600 mg of moxa cone. These results confirmed positive effects of moxibustion on overcoming the drug resistance through stimulation of drug accumulation in the cancer cells.

968- gera: 13332/di/ra

EXPERIMENTAL AND CLINICAL STUDIES ON THE REGULATION OF ACUPUNCTURE ON IMMUNOLOGICAL FUNCTION. TAHMAZOV RAFIG FAIG OGLY. world journal of acupuncture-moxibustion. 1994;4(3):54-6 (eng). The regulation of acupuncture on the immunological function has been studied in laboratory and clinic. The results showed that stimulating the biological active point (or acupoint) with electroacupuncture could inhibit the growth of tumor in experimental rats and prolongate the lifespan of rats bearing tumor; and that electro-acupuncture had a good effect on the immunoregulating subpopulations of lymphocyte of patients with cancer.

969- gera: 15378/di/ra

ELEVACION DE LA CALIDAD DE VIDA DEL PACIENTE CANCEROSO MEDIANTE EL CONTROL DEL DOLOR CON MTC (yIII). LIANGCUN W ET AL. revista de la medicina tradicional china. 1994;4(2):52-4 (esp).

970- gera: 16493/di/ra

STUDIO CLINICO COMPARATO SULLA PREVENZIONE ED IL TRATTAMENTO CON CRONOTERAPIA SELEZIONATA **DELLA LEUCOPENIA PROVOCATA DALLA** CHEMIOTERAPIA. YONGHAO L ET AL. rivista italiana di medicina tradizionale cinese. 1994;58(4):49-51 (ita). Résumé à entrer.

971- gera: 16586/di/ra

TRATTAMENTO CON I CONI DI MOXA DELLA LEUCOCITOPENIA NELLA CHEMIOTERAPIA IN 114 CASI. XIMEI H ET AL. rivista italiana di medicina tradizionale cinese. 1994;58(4):56-7 (ita).

972- gera: 17053/di/ra THE TREATMENT OF 114 CASES OF CHEMOTHERAPEUTIC LEUCOPENIA BY CONE MOXIBUSTION. XIMEI H ET AL. journal of chinese medicine. 1994;44:22. (eng).

First published in the Journal of Traditional Chinese Medicine, Beijing.

973- gera: 19233/di/ra

[ANALYSIS ON PICTURES OF THE TONGUES IN 236 CASES OF CANCER]. WENJUN X ET AL. fujian journal of tcm. 1994;25(3):14 (chi).

974- gera: 45077/nd/re

GOMISIN A, A LIGNAN COMPONENT OF SCHIZANDORA FRUITS, INHIBITS DEVELOPMENT OF PRENEOPLASTIC LESIONS IN RAT LIVER BY 3'-METHYL-4-**DIMETHYLAMINO-AZOBENZENE.** NOMURA M ET AL. cancer lett. 1994;76(1):11-8 (eng).

The effects of gomisin A, a lignan component of Schizandra fruits, on development of preneoplastic lesions in the liver after a short-term (3 weeks) feeding of 3'-methyl-4-dimethyl-aminoazobenzene (3'-MeDAB) to male Donryu rats were investigated, and compared with the effects of phenobarbital. Gomisin A inhibited both increases of the level of glutathione-S-transferase placental form (GST-P) and the number and size of GST-P positive foci in the liver increased after treatment with 3'-MeDAB. Moreover, although the population of diploid nuclei was increased and that of tetraploid nuclei was decreased by pretreatment with 3'-MeDAB, gomisin A returned this to near the normal ploidy pattern. But phenobarbital increased the level of GST-P and the number and size of GST-P positive foci with little affect on the ploidy population changed by 3'-MeDAB. Thus, the effect of gomisin A on hepatocarcinogenesis was inhibitory in contrast with that of phenobarbital. This study suggests that gomisin A is a candidate for a chemopreventive drug inhibiting the promotion process in hepatocarcinogenesis.

975- gera: 45198/di/ra

[OBSERVATION ON 17 PATIENTS OF RADIO-ULCER WITH COMBINED TRADITIONAL CHINESE MEDICINE AND WESTERN MEDICINE THERAPY]. ZHU BF . chinese journal of integrated traditional and western medicine. 1994;14(2):89-91, 6 (chi*).

34 radioulcer patients were divided randomly into two groups, the TCM-WM group (17 cases) and the WM group (17 cases). The TCM-WM group was treated mainly with oral administration and external treatment of TCM plus wetcompressing with antibiotics, gradual elimination of necrotic tissue and symptomatic treatment. The latter group was treated with Western medicine therapy only including painkiller, antibiotics, debridement and dressing change. The results showed that the total effective rate of TCM-WM group was 94. 1%, significantly higher than that (52. 9%) of WM group (P < 0. 01). Meanwhile the mean pain-ceasing time, wound-cleaning time and effective time of the TCM-WM group were 62. 18, 80. 16 and 107. 55 days respectively, significantly shorter than those (97. 29, 116. 86 and 169. 83 days) of WM group (P < 0. 010-005). This study suggested that the TCM-WM therapy could reduce pain quickly, clean wound well, promote granulation growth and epithelium regeneration so as to accelerate ulcer healing.

976- gera: 45263/nd/re

[ANTI-TUMOR PROMOTING ACTIVITIES OF KAMPO PRESCRIPTIONS. II. INHIBITORY EFFECTS OF SOUSEIRYU-TO ON TWO-STAGE CARCINOGENESIS OF MOUSE SKIN TUMORS AND MOUSE PULMONARY TUMORS]. KONOSHIMA T ET AL. yakugaku zasshi. 1994;114(4):248-56 (jap*).

To search for possible anti-tumor promoters, we carried out a primary screening of fourteen kampo prescriptions utilizing their possible inhibitory effects on the Epstein-Barr virus early antigen (EBV-EA) activation which is induced by 12-O tetradecanoylphorbol-13-acetate (TPA). In these prescriptions, shouseiryu-to exhibited the most significant inhibitory effect on the EBV-EA activation. Furthermore, two-stage carcinogenesis of mouse skin tumors induced by 7,12-

dimethylbenz[a]anthracene (DMBA) and TPA, and mouse pulmonary tumors induced by 4-nitroquinoline-N-oxide (4NQO) and glycerol were strongly inhibited to shouseiryu-to.

977- gera: 47781/di/ra

[CLINICAL OBSERVATION ON 73 CASES OF CARCINOMATOUS PAIN TREATED BY AITONG NING **DECOCTION].** DENG ZEMING. hunan journal of traditional chinese medicine. 1994;10(5):4 (chi).

978- gera: 47820/di/ra

[REVIEW ON STUDIES OF PRECANCEROUS LESION OF ESOPHAGUS BLOCKED BY CHINESE HERBALS]. CHEN ZHIFENG. journal of traditional chinese medicine. 1994;35(11):690 (chi).

979- gera: 48095/nd/re

ITHE IN VITRO POTENTIATION OF LAK CELL CYTOTOXICITY IN CANCER AND AIDS PATIENTS INDUCED BY F3. A FRACTIONATED EXTRACT OF ASTRAGALUS MEMBRANACEUS]. CHU DT ET AL. chung hua chung liu tsa chih. 1994;16(3):167-71 (chi*). The in vitro induction of LAK cell activity was studied in cancer and AIDS patients. F3, an immuno-regulatory component of Astragalus membranaceus was shown capable of potentiating

the LAK cell inducing activity of rIL-2. The killing activity against Hs294T melanoma cell line of LAK cells induced by 50 U/ml rlL-2 in the presence of F3 (55 µmg/ml) reached 64% which was comparable to that (60%) induced by 500 µmg/ml of rIL-2 alone. With F3 plus rIL-2, the effector to target cell ratio could be reduced to one-half in order to obtain an equivalent level of cytotoxicity when rIL-2 was used alone. In some patients, whose peripheral blood lymphocytes were relatively inert to rlL-2, F3 could make them responsive to rlL-2. These results imply that F3 may be useful to potentiate LAK cell activity, reduce the amount of rIL-2 and thus minimize the later's toxic side effects when used in vivo.

980- gera: 48099/di/ra

ICURRENT STATUS AND PROSPECTS ON TCM COMBINED WITH CHEMOTHERAPY IN TREATING LEUKEMIA]. SHI XIAO-PING ET AL. chinese journal of integrated traditional and western medicine. 1994;14(7):446 (chi).

981- gera: 48111/di/ra [STUDIES OF GUBEN QUYU NO I COMBINED WITH CHEMOTHERAPY IN TREATING CANCER]. YU REN-CUN ET AL. chinese journal of integrated traditional and western medicine. 1994;14(7):392 (chi*).

Cancer patients with Qi-Deficiency and Blood Stasis (QDBS) syndrome were studied, and stress was put on the observation of the Guben Quyu No. I, which was used in combining with chemotherapy for synergistic effect and attenuation of toxicity. The results: QDBS syndrome often existed in cancer patients, and chemotherapy exacerbate the occurrence rate of QDBS syndrome. QDBS syndrome is somehow related to immunodeficiency and blood hypercoagulability, the method of Yiqi Huoxue (YQHX) which used to be combined with chemotherapy could not only reduce the toxic-side effects of chemotherapy, but also improve the cellular immune function and hemorheology. Since the cellular immuno-deficiency and blood hypercoagulability were associated with recurrence and metastasis of cancer. It is considered that the Guben Quyu No I possibly is to reduce the occurring of the above-mentioned consequences.

982- gera: 48671/di/ra

STUDI SPERIMENTALI E CLINICI SUL JPYS NELLA RIDUZIONE DEGLI EFFETTI COLLATERALI DELLA CHEMIOTERAPIA NELLA FASE TERMINALE DEL CARCINOMA GASTRICO. YU GUIQING ET AL. rivista italiana di medicina tradizionale cinese. 1994;55(1):76-80

Questo articolo riporta un progetto di ricerca iniziato da più di 16 anni dal reparto di oncologia dell'ospedale Guan An Men. Il tonicojian pi yi shen (JPYS), che nutre la milza e il rene, è stato usato insieme alla chemioterapia nel trattamento del carcinoma gastrico in fase terminale, allo scopo di promuovere il completamento del ciclo chemioterapico, migliorando le condizioni generali, la reazione dell'apparato digerente, proteggendo l'emopoiesi e rinforzando il sistema immunitario chemioterapia. È stata eseguita un'operazione radicale in 365 casi, di cui 230 erano del gruppo a terapia combinata e 135

del gruppo di controllo. Nei rimanenti 13 casi è stato eseguito un intervento conservativo che comprende anastomosi ed esplorazione. 1 . Stadio della patologia : 441 casi erano al III stadio, mentre 228 erano al IV stadio. Lo stadio è stato determinato sui criteri dell' Associazione Nazionale Cinese del Carcinoma Gastrico e del TNM standard usato in Cina e a livello internazionale

983- gera: 48887/nd/re

INHIBITION BY GOMISIN A, A LIGNAN COMPOUND, OF HEPATOCARCINOGENESIS BY 3'-METHYL-4-**DIMETHYLAMINOAZOBENZENE IN RATS.** OHTAKI Y ET AL. biol pharm bull. 1994;17(6):808-14 (eng).

The effects of gomisin A, a lignan compound of Schizandra fruits, on hepatocarcinogenesis induced by 3'-methyl-4dimethylaminoazobenzene (3'-MeDAB) in rats were investigated. Gomisin A inhibited both increases of the number and size of glutathione S-transferase placental form (GST-P)positive foci, a marker enzyme of preneoplasm, and the population of diploid nuclei, as a proliferative state of hepatocytes, in the liver from rats simultaneously treated with 3'- MeDAB. Gomisin A increased GST activity in the liver, by raising the level of GST 1 and 2 isozymes. 3'-MeDAB increased GST activity and GST-P expression. This high level of GST-P induced by 3'-MeDAB was suppressed by additional treatment with gomisin A. In an experiment on simultaneous treatment, gomisin A increased the biliary excretion of 3'-MeDAB-related aminoazo dyes and decreased the content in the liver of rats fed with 0. 06%-3'-MeDAB containing diet. In an experiment on pretreatment with 3'-MeDAB, even though no aminoazo dye was detectable in the liver or bile 2-weeks after cessation of 3'-MeDAB-feeding, gomisin A showed a tendency to reduce the preneoplastic changes of increases in GST-P positive foci and diploid nuclei in the liver. These results suggest that gomisin A inhibits the hepatocarcinogenesis induced by 3'-MeDAB by enhancing the excretion of the carcinogen from the liver and by reversing the normal cytokinesis.

984- gera: 48904/di/ra

THE APPLICATION OF TRADITIONAL CHINESE MEDICINE TO THE MANAGEMENT OF HEPATIC CANCEROUS PAIN. . WANG GUIMIAN ET AL. journal of traditional chinese medicine. 1994;14(2):132-8 (eng).

The authors summarized the application of traditional Chinese medicine to the management of hepatic cancerous pain in Beijing and Shanghai, and in Jiangsu and Zhejiang Provinces. The therapeutic principle was to invigorate blood circulation and reduce stasis and to soothe the liver and regulate Qi, so as to dredge the channels and collaterals. The results were satisfactory.

985- gera: 49290/di/ra

[EFFECT OF TCM AND CHINESE MATERIA MEDICA ON POST-OPERATIVE GASTRIC CANCER]. FAN ZHONGZE ET AL. shanghai journal of traditional chinese medicine. 1994;5:16 (chi).

986- gera: 49357/di/ra

ISURVEY OF EXPERIMENTAL AND CLINICAL STUDY ON CHINESE MATERIA MEDICA OF SPLEEN-STRENGHTENING AND QI-BENEFITING PROPERTY FOR MIDDLE AND LATER STAGE PRIMARY LIVER CANCER]. WANG TING ET AL. shanghai journal of traditional chinese medicine. 1994;8:40 (chi).

987- gera: 49377/di/ra

IDIAGNOSTIC VALUE OF LIVER CANCER IN TCM COMPUTER DIAGNOSTIC SYSTEM - ANALYSIS OF 138 CASES]. LIN JUNHUA ET AL. shanghai journal of traditional chinese medicine. 1994;10:17 (chi).

988- gera: 49388/di/ra

[CLINICAL ANALYSIS OF PIAN ZI HUANG TREATMENT FOR 42 CASES OF INTERMEDIATE AND ADVANCED HEPATIC CANCER]. XU YIYU ET AL. shanghai journal of traditional chinese medicine. 1994;12:4 (chi).

989- gera: 49389/di/ra

[TCM EMERGENCY TREATMENT FOR CANCEROUS PAIN]. XU ZHENYI ET AL. shanghai journal of traditional chinese medicine. 1994;12:6 (chi).

990- gera: 49401/di/ra

[TONGUE PICTURE ANALYSIS IN 232 CASES OF CANCER]. CUI LIXIAN ET AL. shandong journal of traditional chinese medicine. 1994;3:106 (chi).

991- gera: 49411/di/ra

[THE ANALGESIC EFFECT OF PREPARATION OF PILLB DRIEDUG ON SEVERE CARCINOMATOUS PAIN]. LIANG SHAOYAN SUN ZHI. shandong journal of traditional chinese medicine. 1994;4:159 (chi).

992- gera: 49447/di/ra

[RECENT SUITATION OF TUMOR ASSISTENTLY TREATED BY CHINESE MATERIA MEDICA]. WANG HUILING. shaanxi journal of traditional chinese medicine. 1994;15(4):187 (chi).

993- gera: 49524/di/ra

[RESEARCH ON ACUPUNCTURE APPLIED AT DIFFERENT TIME FOR RELIEVING THE DAMAGE OF BLOOD CELLS CAUSED BY CHEMICAL DRUGS]. DU XU-DIAN ET AL. chinese acupuncture and moxibustion. 1994;14(3):1 (chi*). Through observation on acupuncture at Zusanli (ST 36), Pishu (UB 20), Dazhui (GV 14), and Sanyinjiao (SP 6) for 42 cases of malignant tumor, we came to a conclusion that acupuncture could relieve the damage of blood cells caused by chemical drugs, and this effect was closely related to the time of treatment, namely, acupuncture 5 days was applied for first, then, chemical drugs were administered , which was better than acupuncture and chemical treatment given at the same time in the result of alleviating the leucocyte and platelet reduction

994- gera: 49580/di/ra

[RECENT PROGRESS IN THE STUDIES ON BIOTHERAPEUTIC EFFECT OF ANTICANCEROUS REMEDIES]. XING XUEMEI ET AL. journal of traditional chinese medicine. 1994;35(3):177 (chi).

995- gera: 49657/di/ra

[OBSERVATION OF THE THERAPEUTIC EFFECT OF WARM ELECTROACUPUNCTURE ON SKIN CARCINOMA AND ITS MECHANISMS]. XIA YU-QING ET AL. chinese acupuncture and moxibustion. 1994;14(2):5 (chi*). Of the 100 carcinoma patients treated, 46 belonged to stagnation of liver-qi and blood dryness type, 31 to the type of water retention die to hypofunction of the spleen, and the other 23 to the type sores due to pathogenic wind invasion. Acupuncture was applied mainly on the affected loci, and additional points were selected according to the type of the disease. For thole Belonging to liver-qi stagnation and blood dryness type, Taichong (LR3) and Yanglingquan (GB34) were punctured with filiform needles. For thole belonging to water retention due to hypofunction of the spleen, Zusanli (ST36) and Fenglong (ST40) were added. Aid for those belonging to sores due to wind invasion type, Fengfu (GV16) and Xuehai (SP10) were added. The treatment was applied every other day. After 20-30 treatments, 56 cases (56.0%) were completely relieveds 26 cases (26.0%) partially relieved, 10 cases (10.0%) inproved, 5 cases (5.0%) failed and the other 3 (3.0%) cases exacerbated with a total effective rate of 92.0%.

996- gera: 49668/di/ra

[TOXICITY STUDY OF SCORPION VENOM COMPONENTII ON HUMAN LARYNGOCARCINOMA CELLS].]. DONG WEIHUA ET AL. china journal of traditional chinese medicine and pharmacy. 1994;9(4):9 (chi*).

By means of various methods, such as cytoxic test, killing test of tumor cell, colony forming test and growth inhibition test, the toxicity of scorpion venom component II (SVC II) of Buthus martensii karsch on HEp-2 cells of human laryngocarcinoma was detected. The results showed that, taking mitomycin (MMC) as the positive contrast, in the limits of applied dose (4-20µg/ml) SVC II could inhibit the growth and mitochysis of HEp-2 cells, the toxicity on human tumor cells showed positive

correlation with the medicinal dose and action time. The inhibition effect of large dose of SVC II was slightly stronger than that of MMC, which suggested that SVC II be the cytotoxin possessing antitumor activity in SVC and might become a new kind of anticarcinogen originated from Chinese Materia Medica.

997- gera: 49683/di/ra

[REGULATION FUNCTION OF ACUPUNCTURE ON IMMUNITY OF THE PATIENTS TREATED BY RADIO- & CHEMICO- THERAPY]. ZHAO RONG ET AL. chinese acupuncture and moxibustion. 1994;14(3):38 (chi*). Acupuncture was applied at Quchi (LI11), Hegu (LI 4), and Zusanli (ST 36) to the with malignant tumors treated by radio- and chemico-therapy for observing its regulation function amounts of IgG, IgA, and IgM in serum, and C3. The results showed that acupuncture can strengthen and regulate the immunity of the patients by radiation and chemical drugs, and lessen their side-effects.

998- gera: 49687/di/ra

[CLINICAL STUDY ON RADIOPROCTITIS AND RADIOCYSTITIS BY ACUPUNCTURE]. YANG JINHONG ET AL. chinese acupuncture and moxibustion. 1994;14(4):9 (chi*).

The short-term curative rate of radioproctitis was higher and the course of treatment was shorter in the acupuncture group than those in the medicine control group. The difference was significant (P<0. 05 and 0. 01 respectively). There was no significant difference in the curative rate of radiocystitis between the two groups, but the course of treatment in the acupuncture group was remarkably shorter than that in the control group (P<0. 01). The result indicates that acupuncture is effective for radioproctitis and radiocystitis.

999- gera: 49735/di/ra

[RELATIONSHIP BETWEEN T CELL SUBSETS AND TCM TYPE IN OVARIAN TUMOR PATIENTS]. QI CONG ET AL. chinese journal of integrated traditional and western medicine. 1994;14(6):334 (chi*).

In order to study the difference in TCM types as well as between Deficiency and Excess type in immunity in the patients with ovarian tumors, the profile of peripheral blood T lymphocyte subsets in 73 cases of ovarian tumors was determined by using flow cytometry and monoclonal antibody technique. The results showed that the total T cells (OKT3) of peripheral blood were almost normal in 73 tumor cases. And 50 of them were malignant tumors in which T helper cell were progressively decreased and T suppressor cell gradually increased in accordance with the order of Qi-Deficiency, Yin-Deficiency, Qi-Yin Deficiency types. The T4/T8 ratio showed significant difference (P < 0.01) compared with the control group and the initial ovarian tumor group. These results indicated that the change in the T lymphocyte subset in tumor was correlated with TCM type and this serves as both clinically sensitive indexes of different TCM type and reflection of the patient's immunologic status.

1000- gera: 49736/di/ra

[CLINICAL STUDY ON PREVENTION AND TREATMENT TO CHEMOTHERAPY CAUSED NEPHROTOXICITY WITH JIAN-PI YI-QI LI-SHUI DECOCTION]. CHENG JIAN-HUA ET AL. chinese journal of integrated traditional and western medicine. 1994;14(6):331 (chi*).

95 cases of cancer patients were treated with large dose of Cisplatinum. They were randomly divided into treated group with Chinese medicinal herbs (49 cases) and control group with hydration treatment (46 cases). Multiple indexes were selected to observe effect on renal function. The result showed that the level of blood urea nitrogen (BUN), creatnine (Cr), beta 2 microglobulin (beta 2-MG), urea N-acetyl-beta-glucosaminidase (NAG) of treated group lowered. After treatment the difference of BUN, Cr between the two groups was significant (P < 0.05). It suggested that Jian-Pi Yi-Qi Li-Shui Decoction (JPYQLSD) was superior to hydration group in preventing the large dose of Cisplatinum induced nephrotoxicity. It was also used to treat 44 cases-times of chemotherapy caused renal failure. The total effect rate is 93. 18%. The difference of the level of BUN, Cr between before

and after treatment was very significant (P < 0.01). It is proved that JPYQLSD has good effect in treating chemotherapy caused renal failure.

1001- gera: 49814/di/ra

COMBINED TRADITIONAL CHINESE MEDICINE AND WESTERN MEDICINE. RELIEVING EFFECTS OF CHINESE HERBS, EAR-ACUPUNCTURE AND EPIDURAL MORPHINE ON POSTOPERATIVE PAIN IN LIVER CANCER. LI QI-SONG ET AL. chinese medical journal. 1994;107(4):289-94 (eng)

In the evaluation of Chinese herbs (A), ear-acupuncture (B) and epidural morphine (C) to relieve postoperative pain and abdominal distension, sixteen male patients with primary liver cancer were observed. This study was conducted by means of orthogonal experiment and double blind, randomized design. The patients received various treatments according to the display of the orthogonal table L16(2)15 which corresponds to 2(3) factorial experiment design. C+ (morphine 2 mg) was given before the peritoneum was sutured. A+ (orally administered) and B+ were given 24 hours after operation. 50-100 mg of pethidine was given when the pain intensity VAS (0-100) exceeded 50-70. The observation parameters included plasma leucine enkephalin (LEK), postoperative total dosage of narcotics administered for 5 days, VAS for pain and pain reliever, abdominal distension, urinary retention, constipation, etc. The results were as follows: a. Patients who had received A (A+B+C+, A+B+C-, A+B-C-, A+B-C+); C (C+A+B+, C+A+B-, C+A-B+, C+A-B-), or B (B+A+C+, B+A+C-, B+A-C+, B+A-C-) produced better analgesic effects than those who had received placebo. The A, B, and C reduced narcotics 650, 450 and 550 mg respectively when compared with placebo. The effects of A and C were of statistical significance (P < 0.05), while AB, BC, and AC interactions were not found; b. A and B minimized abdominal distension and urinary retention, while C prolonged them. As compared with the placebo, A and B accelerated restoration of bowel peristalsis (P < 0. 05, ANOVA).

1002- gera: 49823/nd/ra

RECENT PROGRESS IN THE STUDY OF ANTICANCER DRUGS ORIGINATING FROM PLANTS AND TRADITIONAL MEDICINES IN CHINA. . HAN R . chinese medical sciences journal. 1994;9(1):61-9 (eng).

Drugs of plant origin have received much attention due to their enormous potential for the prevention and treatment of cancer. Recent progress in the study of anticancer drugs originating from plants and traditional medicines in China is reviewed in this paper, with particular emphasis on taxol, daidzein, acetyl boswellic acid, curcumin and ginsenosid Rh2.

1003- gera: 49846/di/ra

[THE EXPERIMENTAL STUDY OF PREVENTION AND TREATMENT OF THE SIDE-EFFECTS OF CHEMOTHERAPY WITH ACUPUNCTURE (COMPARISON AMONG THE EFFECT OF ACUPUNCTURE AT DIFFERENT ACUPOINT)]. YANG JINHONG ET AL. acupuncture research. 1994;19(1):75-8 (chi*).

After an intraperitoneal injection of cyclophosphamide in rats, there was pathologic changes in hemopoietic, immune and visceral function. Acupuncture respectively at Zusanli, Dazhui and Shenshu points could decrease the above mentioned harms in the rats, the effect of acupuncture on hemopoietic function: Dazhui more than or equal to Zusanli, Zusanli more than Shenshu; the effect of acupuncture on immune function: Zusanli more than Dazhui, Dazhui more than or equal to Shenshu; the effect of acupuncture on the function of the liver and the kidney: Shenshu more than or equal to Zusanli, Zusanli more than Dazhui. The effect of acupuncture at all three points, i. e. Zusanli. Dazhui and Shenshu was more than that at any single point due to their coordination. There was no obvious effect when acupuncture at non-

1004- gera: 49849/di/ra

[REGULATION ON BETA-END IN TUMOR-BEARING MICE BY MOXIBUSTION ON GUANYUAN POINT]. ZHAI DAODANG ET AL. acupuncture research. 1994;19(1):63-5, 58 (chi*).

The experimental results demonstrated that moxibustion on Guanyuan point could promote the hyperplasia of the pituitary

and the adrenal gland which showed atrophy in control group. Also, the moxibustion treatment stimulated the secretion of beta-END from the pituitary and the adrenal gland, increased the level of serum beta-END significantly and kept the high level for quite a long time, that was advantageous for beta-END to carry out the immunomodulation. The data further suggested that moxibustion treatment do not cause the instant release but probably constant release of the

1005- gera: 49867/nd/re

INHIBITION OF EARLY 3-METHYL-4-DIMETHYLAMINOAZOBENZENE-IND UCED HEPATOCARCINOGENESIS BY GOMISIN A IN RATS. . NOMURA M ET AL. anticancer res. 1994;14(5A):1967-71 (eng).

The effects of gomisin A, a lignan component of Schizandra fruits, on hepatocarcinogenesis caused by 3'-methyl-4dimethylaminoazobenzene (3'-MeDAB) in male Donryu rats were investigated. Gomisin A significantly inhibited the appearance of foci stained for glutathione S-transferase placental form (GST-P) in the liver of rats given feed with 0. 06% 3'-MeDAB. Gomisin A (30 mg/kg/daily, po) decreased the concentration of 3'-MeDAB-related azo dyes in the liver, and increased their excretion in the bile. The ratio of diploid to tetraploid nuclei increased during ingestion of 3'-MeDAB, but gomisin A delayed the increase. After the withdrawal of 3'-MeDAB, carcinogen-related azo dyes were not detected in the liver or bile, but the proportion of diploid nuclei remained high, although it decreased with a 0. 03% gomisin A diet. The results suggested that the effects of gomisin A are related to improved liver function and reversal of abnormal

1006- gera: 49885/nd/re

[PROPHYLACTIC EFFECTS OF ZHULING AND BCG ON POSTOPERATIVE RECURRENCE OF BLADDER CANCER]. YANG DA ET AL. chung hua wai ko tsa chih. 1994;32(7):433-4 (chi).

The prophylactic effects of Chinese herbal medicine Zhuling (Grifola umbellata pilat) and BCG on bladder cancer after TURBT and partial cystectomy were evaluated. 146 patients with bladder cancer were divided into 3 groups, Zhuling, BCG, and control group. Follow-up for 48-124 months (average 70. 8 months) showed that the tumor recurrence rate was 33. 3%, 34. 3% and 65. 1%, respectively. Compared to the control group, the recurrence rate of Zhuling group and BCG group was significantly decreased (P < 0. 01). The effect of Zhuling was similar to that intravesical BCG. Zhuling was cheaper and convenient in usage, and no side effects.

1007- gera: 49946/di/ra

BU JI (HOZAI) FOR TREATMENT OF POSTOPERATIVE GASTRIC CANCER PATIENTS. . HORIE Y ET AL. american journal of chinese medicine. 1994;22(3-4):309-19 (eng). We proposed that postgastrectomy cancer patients with organ deficit were xu zheng, or of deficient constitution, and administered bu ji or supplementary regimen to them. With alleviation of the symptoms, our diagnosis seemed correct from the traditional medicine perspective. Interleukin 2 reactivity, natural killer activity, nutritional index and bone mineral indices also improved. Such results suggest that our diagnosis was also correct according to Western medical theory. In addition, nutrition seemed to have positive relationship with NK activity and bone mineral content. Therefore, administration of bu ji seemed useful to improve the quality of life of postoperative cancer patients.

1008- gera: 49972/di/ra

[STUDY OF EFFECTS OF CHINESE HERBAL PRESCRIPTION COMBINED WITH COPPER, IRON ON MALIGNANCY OF CANCER CELLS]. CHI YONG-CHUN ET AL. chinese journal of integrated traditional and western medicine. 1994;14(9):546 (chi*).

BALB/c mice bearing ascitic liver cancer were used, and Chinese herbal prescriptions combined with Cu and Fe (CHCF) was given by gavage continuously for 10 days, and some cell biological parameters were measured; furthermore, the ascitic cancer cells (control and treated group) were removed, and retransplanted to another mice and observed. The results showed that in CHCF treated group, DNA content

of the cancer cells was decreased, and the proliferation index (PI) was reduced (control: 83. 4 ± 2 . 6, CHCF group: 78. 8 ± 1 . 5; or control: 67. 2 ± 1. 3, CHCF group: 64. 2 ± 1. 6, P < 0. 05). The number of the cancer cells in G1 phase increased obviously, but, those of S + G2M phases decreased considerably (P < 0. 05~0. 01); on the DNA histogram, the diploid peak became higher and bigger, but multiploid peaks became smaller. Furthermore, retransplanted experiments showed that in 2/10 animals, the tumor did not grow, the growth inhibition rate was 71. 7%~88. 3%; and the survival period of retransplanted animals was prolonged significantly (from 26. 1 ± 11 . 8 days to 38. 1 ± 9 . 6 days, or to 39. 6 ± 7 . 2 days, P < 0. 01); the increase in life span was 46%~52% respectively. These results suggested that CHCF could decrease the malignancy of liver cancer

1009- gera: 49975/di/ra
[EFFECT OF ACUPUNCTURE ON INTERLEUKIN-2 LEVEL AND NK CELL IMMUNOACTIVITY OF PERIPHERAL **BLOOD OF MALIGNANT TUMOR PATIENTS].** WU BIN ET AL. chinese journal of integrated traditional and western medicine. 1994;14(9):537 (chi*).

This paper deals with the observation of acupuncture therapy affecting interleukin-2 (IL-2 level and natural killer (NK) cell immunoactivity in the peripheral blood of patients with malignant tumors. In this clinical-laboratory test research, randomized double blind method was used. The patients were divided into an acupuncture treated group (n = 25) and a control group (n = 20). The former group was treated using points, ST36, LI11, RN6 and locations of symptomatic points bilaterally. They received one treatment of 30 minutes daily for 10 days. The results showed that the IL-2 level and NK cell activity were lower than normal in patients with malignant tumor, but there was an increase in the acupuncture group after 10 days of treatment. Significance was found to be remarkable (P < 0.01). The difference between the two groups was also significant (P < 0. 01). This increase might be related to the mechanism of acupuncture that adjusting the body's immune function. Thus, acupuncture therapy could enhance the cellular immune function of patients with malignant tumors and providing a beneficial effect in anti-cancer treatment.

1010- gera: 53681/nd/re

INHIBITION BY GUAN-MU-TONG (CAULIS ARISTOLOCHIAE MANSHURIENSIS) OF THE GROWTH OF SPONTANEOUS MAMMARY TUMORS IN SHN VIRGIN MICE. . WU G ET AL. anticancer drugs. 1994;5(6):641-4

Multiparous SHN mice with spontaneous mammary tumors (5-10 mm in size) were given water extract of Guan-mu-tong (Gmt; Caulis aristolochiae manshuriensis) (0.5%) ad libitum as drinking water for 10 days. This treatment retarded significantly the growth of mammary tumors compared with the controls. By contrast, normal mammary gland growth, histology of adrenals and ovaries, and body weight were affected little by the Gmt treatment. Gmt appears to be the first agent inhibiting the growth of spontaneous mouse mammary tumors of palpable size by per os treatment.

1011- gera: 53690/nd/re

IMMUNOMODULATORY AND ANTI-TUMOUR POLYSACCHARIDES FROM MEDICINAL PLANTS. . WONG CK ET AL. j int med res. 1994;22(6):299-312 (eng).

1012- gera: 53730/di/ra

[EFFECTS OF PAEONIA-GLYCYRRHIZA DECOCTION ON CHANGES INDUCED BY CISPLATIN IN RATS]. XU JI-DE ET AL. chinese journal of integrated traditional and western medicine. 1994;14(11):673 (chi*).

In order to study the effects of Paeonia-Glycyrrhiza decoction (PGD) on the changes induced by cisplatin in rats, platinumwire bipolar electrodes were inserted into the serosal membrane of the small intestine and migrating myoelectric complex (MMC) was used as index. After intravenous injection of cisplatin at doses of 4 mg/kg, the duration of the MMC cycles was significantly shorter than that of normal MMC cycles (P < 0.05) while the duration of phase III was remarkably prolonged comparing with that of normal phase III (P < 0. 01) with latent period of 53. 2 _ 20. 4 minutes. Taking

PGD orally, cisplatin no longer induced the changes of MMC. The results suggest that PGD has marked adjusting effects on the changes of MMC induced by cisplatin. This might be one of the causes of PGD in relieving

1013- gera: 53734/di/ra [CLINICAL AND EXPERIMENTAL STUDY IN TREATING GASTRIC CANCER WITH REPLENISHING QI AND INVIGORATING SPLEEN ORAL LIQUID COMBINED WITH CHEMOTHERAPY]. WANG GUI-MIAN ET AL. chinese journal of integrated traditional and western medicine. 1994;14(11):661 (chi*).

61 cases of the gastric cancers have been treated with Replenishing Qi and Invigorating Spleen (RQIS) combined with chemotherapy. The patients were divided into treated group and control group randomly. The results showed that : rate of the adverse effects, e. g. nausea, vomiting, anorexia, diarrhea etc. were higher in the chemotherapy used patients, combined treated groups were lower significantly (P < 0. 01-0. 001). Rate of chemotherapy completion was 95% in the treated group, 78% in control group, the difference was significant (P < 0. 01). WBC and blood platelet were reduced in the treatment group and chemotherapy group, they were 30% and 45% respectively (P < 0. 01). Superoxide dismutase was increased obviously (P < 0. 01). It revealed that RQIS could scavenge the free radical potently. 60 cases of gastric cancers have been treated over 1 year, the survival rates of 1 year, 3 years, 5 years were 98. 36%, 82. 69%, 60. 00% respectively after following up. Among them, survival rate of III stage patients was 57. 14%. Animal experimental study showed that the inhibition rates of lung metastasis were 92. 2% and 83. 7% in mice B16 of RQIS groups. The difference was significant than that of control group. They could elevate the tolerance to chemotherapy in mice.

1014- gera: 53765/nd/re

[EXPERIMENTAL STUDY ON THE PHARMACOLOGIC EFFECTS OF ZENG SHENG PIN PIAN]. WANG DC ET AL. chunghua chung liu tsa chih. 1994;16(6):419-23 (chi*). Zeng Sheng Pin Pian (ZSPP) is a mixture of medicinal herbs which has been shown to be effective in the secondary prevention of esophageal cancer in a high-risk area among a population with severe esophageal dysplasia. This study in mice aimed at elucidating the possible mechanism of the cancer-preventing activity of ZSPP. The results indicate that ZSPP is a good biologic response modifier (BRM) as shown by its enhancing effects on lymphocyte blastogenesis, IL-2 secretion, NK cell activity, delayed-type hypersensitivity reaction to DNCB, hemolysin response to SRBC and the phagocytic function of the reticulo-endothelial system. While ZSPP did not inhibit the growth of S-180 in mice, it exhibited significant inhibitory effect on ornithine decarboxylase (ODC) activity induced by the application of croton oil to the skin. Taken together, the immune enhancing activity and the antitumor-promoting activity of ZSPP could explain, at least in part, its efficacy in the prevention of esophageal cancer among high-risk people with precursor dysplastic lesions.

1015- gera: 53800/di/ra

[EFFECTS OF RADIX ASTRAGALI ON HEMOPOIESIS IN IRRADIATED MICE]. QUAN HONGXUN ET AL. china journal of chinese materia medica. 1994;19(12):741 (chi*).

1016- gera: 53867/nd/ra
EFFECTS OF ZAIZHANG-I, A TRADITIONAL CHINESE HERBAL MEDICINE, ON HEMATOPOIETIC RECOVERY FROM RADIATION INJURY IN MICE. YANG MW ET AL. journal of tongji medical university. 1994;14(4):224-6 (eng). Effects of Zaizhang-I (ZZ-I) on the recovery of hemopoietic systems from radiation injury were investigated. Mice irradiated with 6. 0 Gy-rays, were injected i. p. once daily for 7 consecutive days with either ZZ-I or saline (0. 01 ml/g body wt.). The experiments showed that ZZ-I significantly promoted the recovery of not only peripheral WBC, BMC, CFU-S and CFU-GM but also the abnormal femur micro-vessel system such as blood vessels and sinus ectasia, hyperemia and hemorrhage etc. These results suggest that ZZ-I could accelerate hemopoietic recovery from radiation injury in mice by stimulating hemopoietic stem cells and improving hemopoietic

inductive microenvironment (HIM).

1017- gera: 53968/di/ra

[POSTOPERATIVE RESIDUALS AND RELAPSING OF PRIMARY LIVER CARCINOMA TREATED BY CHINESE DRUGS AND CHINESE DRUGS PLUS CHEMOTHERAPYI. LIN JUNHUA ET AL. journal of traditional chinese medicine. 1994;35(4):220 (chi*).

One hundred and ten cases of postoperative residuals, relapsing and metastasis in primary liver carcinoma were treated by traditional drugs and traditional drug plus chemotherapy. The drugs were of strengthening spleen, regulating Qi, dispersing Liver, relieving stagnation, dissipating dampness, mediating the stomach and spleen, invigorating Qi and replenishing blood. Results revealed that the 1-year survival rate in 110 cases was 70,78 ± 8 · 53 %, 3-year survival rate was 33, 82 \pm 9. 25%, 5-year survival rate was 16 \pm 7. 43% (by list of life-span method). Among them. 4 cases have survived for over 10 years, indicating that the treating principles of supporting the body resistance and strengthening the spleen is significant in prolonging the survival rate of primary liver carcinoma after operation.

1018- gera: 54013/di/ra

[REPORT OF 212 CASES OF RADIO-THYROIDOSIS TREATED BY TCM]. LIN LAN. journal of traditional chinese medicine. 1994;35(7):411 (chi*).

For radio-thyroidisis, traditional Chinese medicine not only yields rather satisfactory effect, improves symptoms and signs, and lab parameters, but also strengthens body immunity. It also alleviates or eliminates adverse reactions when using western medicaments alone.

1019- gera: 54016/di/ra

ITREATMENT OF PRECANCEROUS LESION IN CHRONIC GASTRITIS BY DIFFERENTIATION OF SYNDROMES, ANALYSIS OF 45 CASES]. CHEN YU ET AL. journal of traditional chinese medicine. 1994;35(7):418 (chi).

1020- gera: 54037/di/ra

[RESEARCH ON PREVENTION AND TREATMENT OF ADVERSE REACTIONS IN RADIO AND CHEMOTHERAPY IN CANCER PATIENTS BY TCM]. ZHANG DAIZHAO ET AL. journal of traditional chinese medicine. 1994;35(8):498

1021- gera: 54049/di/ra [WAY OF THINKING AND MEASURES APPLIED IN TCM TREATMENT OF PRECANCEROUS LESION IN CHRONIC ATROPHIC GASTRITIS]. LI JUNXIANG. journal of traditional chinese medicine. 1994;35(9):555 (chi).

1022- gera: 54070/di/ra

[A CURED CASE OF METASTASIS OF ADENO-CARCINOMA OF COLON]. CHEN XIANGZHONG. journal of traditional chinese medicine. 1994;35(12):720 (chi).

1023- gera: 54075/di/ra [BLOCKING THERAPY FOR PERSISTENT POSITIVE LOW SERUM ALPHA-FETAL PROTEIN]. LIN ZONGGUANG. journal of traditional chinese medicine. 1994;35(12):730

Primary liver carcinoma is closely related to persistent low serum AFP. Patients from such community are highly vulnerable to liver carcinoma, sometimes called precancerous lesion of the liver. By applying blocking therapy based on TCM diagnosis, 42 cases were treated with 92. 86 % (39 cases) AFP turned negative, 4. 76 % (2 cases) stable. Only 1 case evolved into cancer. This offersa basis for developing new approach to tackle the problem.

1024- gera: 55701/di/ra

TRATAMIENTO DE 114 CASOS DE LEUCOPENIA POSTQUIMIOTERAPEUTICA MEDIANTE MOXIBUSTION. HUANG XIMEI. revista de la medicina tradicional china. 1994;4(3):12-3 (esp).

1025- gera: 55709/di/ra

APLICACION DE LA MTC EN EL TRATAMIENTO DEL

DOLOR HEPATICO DE ORIGEN TUMORAL. WANG GUIMIAN ET AL. revista de la medicina tradicional china. 1994;4(3):42-7 (esp).

Los autores resumen la aplicacion de la MTC en el tratamiento del dolor hepatico de origen tumoral en Pekin, Shanghai, Jiangsu y Zhejiang. El principio terapeutico fue activar la circulacion de la sangre y resolver la estasis y suavizar el higado y regular el Qi para drenar los Canales. Los resultados fueron satisfactorios.

1026- gera: 84558/di/ra

[THE ADVANCE AT TREATMENT OF CARCINOMA OF STOMACH BY TCM AND COMBINATION OF WESTERN MEDICINE]. CHENGLIN L ET AL. journal of shandong college of tcm. 1994;18(3):210 (chi).

1027- gera: 84560/di/ra
[THE PRESENT SITUATION OF TREATMENT OF THE LIVER CANCER WITH TCM AND COMBINED WITH WESTERN MEDICINE IN CHINA]. XIMING W. journal of shandong college of tcm. 1994;18(4):218 (chi).

1028- gera: 84824/di/ra

[CLINICAL OBSERVATION ON DIFFERENTIAL TREATMENT OF GASTRIC PROPHASE CARCINOMA]. ZILI Z. beijing journal of tcm. 1994;3:16 (chi).

1029- gera: 84874/di/ra [TCM TREATMENT FOR GASTRIC PRECANCEROSIS]. RONGLAI Z. beijing journal of tcm. 1994;6:11 (chi).

1030- gera: 85009/di/ra

[REPORT ON 108 CASES OF GASTROINTESTINAL REFECTION CAUSED BY CHEMOTHERAPY TREATED WITH ELECTRIC NEEDLE IN TSUSANLI ACUPOINT]. XIMEI H ET AL. henan traditional chinese medicine. 1994;14(2):113 (chi).

1031- gera: 85128/di/ra
CLINICAL OBSERVATION ON ACUPUNCTURE AT **ZUSANLI POINTS FOR TREATMENT OF GASTRIC** CANCER PAIN IN 42 CASES (abstract). XU SHUYING ET AL. acupuncture research. 1994;3-4:131-2 (eng).

1032- gera: 85138/di/ra

OBSERVATION OF 50 CASES OF CANCER PAIN RELIEVED BY ACUPUNCTURE (abstract). XIAO JIANHUA ET AL. acupuncture research. 1994;3-4:139-40 (eng).

1033- gera: 85139/di/ra

THREE-STEPS THERAPY FOR MALIGNANT PAIN CAUSED BY CANCER (abstract). ZHAO BAILIANG ET AL. acupuncture research. 1994;3-4:140-1 (eng).

1034- gera: 85200/di/ra

IDECOCTION OF CLEMATIDIS AND OCHRA HAEMATITUM FOR CARCINOMA OF ESOPHAGUS : CLINICAL STUDY ON 108 CASES]. ZHANG WENJIE. henan traditional chinese medicine. 1994;14(6):352 (chi).

1035- gera: 85293/di/ra [RECENT DEVELOPMENTS ON TREATING BRONCHOGENIC CARCINOMA WITH TCM]. YANG QINJIAN ET AL. hubei journal of tcm. 1994;16(5):52 (chi).

1036- gera: 85309/di/ra

[CLINICAL OBSERVATION ON 56 CASES OF LATE CARCINOMA OF BLADDER WITH ZHENG DIFFERENTIATION TREATMENT AND CHEMOTHERAPY]. JIANG YILAN. hunan journal of tcm. 1994;10(3):3 (chi).

1037- gera: 85318/di/ra

[CLINICAL OBSERVATION ON 52 CASES OF LATE STOMACH CANCER TREATED BY JIANPI XIAOAI DRINK]. JIANG YILAN. hunan journal of tcm. 1994;10(4):3 (chi).

1038- gera: 85380/di/ra

[XU DIHUA'S EXPERIENCE IN TREATING LATE GASTRIC CANCER WITH CHINESE DRUGS]. SHEN CHUNDI. jiangsu journal of tcm. 1994;15(7):6 (chi).

1039- gera: 85433/di/ra

[A REPORT ON TREATMENT OF CARCINOMA OF PAROTID GLAND]. LIU SHANGCHUN. jiangsu journal of

tcm. 1994;15(12):11 (chi).

1040- gera: 90201/di/ra [A BRIEF INTRODUCTION OF FAMOUS VETERAN PHYSICIAN LIANG JIANBO'S EXPERIENCE ON THE TREATMENT OF TUMOR OF DIGESTIVE SYSTEM]. LIANG HONGZHENG. new journal of tcm. 1994;26(8):10 (chi).

1041- gera: 90217/di/ra [CLINICAL OBSERVATION ON THE TREATMENT OF NASOPHARYNGEAL CARCINOMA OF IATE STAGE WITH TRADITIONAL CHINESE MEDICINE: A REPORT OF 24 CASES]. QIU BAOSHAN. new journal of tcm. 1994;26(9):10

1042- gera: 91053/di/ra

[TONG DAO POWDER TREATS CARCINOMA OF ESOPHAGUS BY BIAN ZHENG LUN ZHI]. WANG ZU-HAO. practical journal of integrating chinese with modern medicine. 1994;7(6):320 (chi*)

Carcinoma is an another kind of serious diseases besides cardio-vascular disease which are threatening the life of human beings and causing people to death wit h the development of medical technologies, the earlier diagnosis of carcinoma of oesophagus, provides a chance for effective treatment while the effects of surgical, radiate and chemical therapies are limited by the type degree and reactivates of the carcinoma, and by individual difference and tolerance moreover, the therapiesalso do some damage to human body. The cancer cell is the variation of the normal human cell through the interaction between carcinogenic factors we have been using the tong dao San, a compound Chinese. to treat the carcinoma of oesophagus and found it effective for the dysphasia. According to the basic theories of traditional Chinese medicine and basing on the effect of biphasic adjustment of the Chinese drugs which can steng-then the body resistance, resistance, regulate yin and yang, resolving phlegm and mass and detoxicating, our therapies were used to get to vigorous qi and blood balance yin and yang and to activate the immune system then to inhibit cancer cel.1 growth and its spreading The effects are helpful to smoothly fulfil the course of radiate and chemical therapies, to reduce the side effects and to promote the patients recovered from weakness.

1043- gera: 91084/di/ra

ISTUDY ON ADVANCED STAGE CARCINOMA OF ESOPHAGUS BY INTEGRATING CHINESE WITH MODERN MEDICINE]. LIU MING-YI ET AL. practical journal of integrating chinese with modern medicine. 1994;7(8):450

1044- gera: 91108/di/ra

THE THREE CASES OF THE CURING TEST OF THE CHINESE HERBS IN CHEMOTHERAPY PERIOD]. FANG CHAI LONG ET AL. practical journal of integrating chinese with modern medicine. 1994;7(9):551 (chi).

1045- gera: 91197/di/ra

ITHE STUDING DEVELOPMENT OF ACTIVATE BLOOD FLOW AND REMOVE BLOOD STASIS BY NEOPLASIC TRADITIONAL CHINESE MEDICINE]. WANG YU-LAI ET AL. practical journal of integrating chinese with modern medicine. 1994;7(11):641 (chi).

1046- gera: 91199/di/ra

ITHE THERTY REPORTS OF THE CURING WAY OF OBSTINATE REFRACTORY CARCINOSIS PAIN IS REMITTENCED BY CURING THE SECOND PALMAR METACRPAL BONE]. FAN SHI-HUAI. practical journal of integrating chinese with modern medicine. 1994;7(11):643

1047- gera: 20975/di/ra

[ACTUAL STATE OF CHILDREN'S THYROID CANCER IN

TCHERNOBYL AND DIAGNOSIS AND TREATMENT AT THE SPOT]. X. journal of the japan society of acupuncture. 1995;45(1):6. (jap).

1048- gera: 21412/di/ra

IEXPERIENCES OF ACUPUNCTURE AND MOXIBUSTION TREATMENTS FOR LEG EDEMA AFTER RADICAL OPERATIVE HYSTERECTOMY AND RADIOTHERAPY]. X. journal of the japan society of acupuncture. 1995;45(1):44.

1049- gera: 22757/di/ra

[CLINICAL INVESTIGATION ON ACUPUNCTURE TREATMENT OF PAIN INDUCED BY CANCER OF STOMACH]. WEN D. journal of tcm. 1995;36(5):277 (chi*). By observation of 48 cases of pain due to gastric carcinoma, it was shown that acupuncturing (including filiform needling and acupoint injection) with patient's mind concentrating at the tender site. The results were rather satisfactory. After a therapeutic course of one month, the long-term analgesic rate of both treating groups was similar to that of the western drug group (all around 81 %) while the markedly effective rate was superior to the later group. Treatment in all groups upgraded the living qualities of the patients. Acupuncturing and acupoint ejection inhibited the side and toxic effect of chemotherapy, improved the indexes of high viscosity in hemorheology, elevated the powered activity of Cu, Zn, SOD. Based on the above results, the author claims that, the analgesic effect of acupuncturing in gastric carcinoma has a bearing on the elevation of PLEK, improvement of cellular immunity and upgrading of living quality.

1050- gera: 23918/di/ra

[DR. LU JIDUAN'S EXPERIENCE OF TREATING LIVER CARCINOMA]. CHIZHI Z. journal of tcm. 1995;36(9):531 (chi).

1051- gera: 23953/di/ra

IOBSERVATION ON THERAPEUTIC EFFECTS OF ACUPOINT BLOCK IN 100 CASES WITH LEUKOPENIA AFTER CHEMOTHERAPY]. XIA Z ET AL. chinese acupuncture and moxibustion. 1995;15(6):3 (chi).

1052- gera: 25479/di/ra

[CLINICAL OBSERVATION ON 52 CASES OF LEUKOPENIA CAUSED BY CHEMOTHERAPY TREATED WITH SHENGBAIBAO]. XINGREN N. traditional chinese medicinal research. 1995;8(3):39 (chi).

1053- gera: 25557/di/ra

[INFLUENCE OF ACUPUNCTURE ON SOME IMMUNE INDEXES IN ANIMAL WITH CANCER]. HONGWEIL ET AL. traditional chinese medicinal research. 1995;38(4):50 (chi).

1054- gera: 26754/di/ra

THE CLINICAL AND EXPERIMENTAL RESEARCH OF SHIWEI JIANMI SHUAN ON CERVICAL CARCINOMA BLOCK]. GUANGRONG L ET AL. china journal of traditional chinese medicine and pharmacy. 1995;10(4):12 (chi*).

457 cases with severe cervical erosion were treated with Shiwei Jianmi Shuan. 377 cases were cured, the cure rate was 82.49%; six cases failed to respond to the treatment, the inefficacy rate was 1.31%. The total efficiency rate is 98. 68%. 31 cases of atypical cervical hyperplasia were treated. Among them, 8 patients suffered from carcinoma in situ. All patients were cured. Cervical dysplasias were changed to chronic cervicitis, which was confirmed by pathological examination. The DNA contents and the nuclear area of the cells with atypical cervical hyperplasia were measured before and after treatment. The results showed that the rate of DNA synthesis of cervical cells, the number of S-phase cells and the nuclear area of the cells were reduced. The transition of cells with atypical cervical hyperplasia from G1 phase to S- phase were inhibited. The results were same as that of the experiment in which U14 cervical carcinoma was detected by the flow cytometry. The general observation of antitumor effect disclosed that Shiwei Jianmi Shuan could raise the life prolonged rate of mice, and had no difference with positive

control group. The research of the suppository by the method of tissue and culture confirmed that the suppository could directly kill the cancer cells with no choice, which was similar to the Mitomycin (the anti-cancer drug). The results of chemical research into the antineoplastic effect of the suppository showed that it could directly decompose the DNA and RNA of cancer cells, and decompose chromosome in the middle phase of mitosis. The bacteriological tests verified that the suppository had a strong inhibiting effect on the six common bacteria of the vagina.

1055- gera: 27425/di/ra

RECENT PROGRESS IN THE STUDY OF ANTICANCER DRUGS ORIGINATING FROM PLANTS AND TRADITIONAL MEDICINE IN CHINA. HAN RUI. chinese medical journal. 1995;108(10):729-31 (eng).

1056- gera: 27547/di/ra

THERAPEUTIC EFFECTS OF THE COMBINED CHINESE AND WESTERN MEDICINE ON METASTATIC CARCINOMA IN THE SUPRACLAVICULAR LYMPH NODES - AN ANALYSIS OF 285 CASES. HUIJUAN C ET AL. journal of traditional chinese medicine. 1995;15(2):87-9 (eng). Between 1985 and 1989, 285 cases of metastatic carcinoma in the supraclavicular lymph nodes were treated by the following five methods: Chinese medication, radiotherapy plus Chinese medication, chemotherapy plus Chinese medication, combined Chinese and Western medicine and expectant treatment. Analysis shows that radiotherapy plus Chinese medication has the best curative effect with an effective rate of 75.5%. The effective rates were 74. 2% for the combined treatment, 55. 5% for the chemotherapy plus medication, 12.5% for the Chinese medication, and none for expectant treatment.

1057- gera: 27800/di/ra

AN EXPLORATION ON PREVENTION OF TUMORS BY TRADITIONAL CHINESE MEDICINE. JIAXIN Q. journal of traditional chinese medicine. 1995;15(2):127-31 (eng).

1058- gera: 37095/di/ra

TAKING THE PATH OF COMBINING TRADITIONAL CHINESE MEDICINE WITH WESTERN MEDICINE IN CANCER RESEARCH AND CONTROL. YU RENCUN. chinese medical journal. 1995;108(10):732-3 (eng).

1059- gera: 50204/di/ra

[STUDY IN SYNERGY OF "HE CHE DA ZAO CAPSULE" ON CHEMOTHERAPEUTIC DRUGS IN TUMOR]. JIPING X ET AL. china journal of traditional chinese medicine and pharmacy. 1995;10(6):17 (chi*).

The synergy of "He Che Da Zao capsule" on Chemotherapeutic drugs in treating 187 cases of primary lung cancer and malignant lymphoma was assessed in this article. The result showed that the total relieving rate of 51 cases of primary lung cancer treated with "He Che Da zao capsule" (54. 9%) was obviously superior to that of the control group of 23 cases treated with "Shi Quan Da Bu capsule" (39. 1%). The total relieving rate of 52 cases of malignant lymphoma (86. 54%) was also obviously superior to that of 20 cases treated with "Shi Quan Da Bu capsule" (65%) and to that of 21 cases of simple-chemotherapeutic group (61%). At the same time, the "He Che Da Zao capsule" might relieve toxic and side effect of Chemotherapeutic drugs, and protect hematopoietic and immune function.

1060- gera: 50646/di/ra

[CLINICAL RESEARCH OF ANALGESIC EFFECT OF "AO TONG NING"]. GUANGZHEN L ET AL. china journal of traditional chinese medicine and pharmacy. 1995;10(6):25 (chi*).

222 cases of headache toothache, sore, throat, trauma and cancer were treated with "Ao Tong Ning" that had the function of purifying fireeil and removing toxic material, promoting blood stasis and preventing pain. The cure rate was 66. 7 %, and the total effective rate was 97. 7%. They were all superior to that of the western medicine group (p<0.005), particularly in the curative effect of headache, toothache and sore throat, their curative rate was 88. 7 %, 88. 5 %, 88. 9 % respectively. The total effective rate was 100%. On the other hand, this medicine

took analgesic action more quickly than the western medicine group (p<0.005).

1061- gera: 53831/nd/re

IMPROVEMENT OF CISPLATIN TOXICITY AND LETHALITY BY JUZEN-TAIHO-TO IN MICE. . SUGIYAMA K ET AL. biol pharm bull. 1995;18(1):53-8 (eng).

The effects of oral treatment with 1-, 5-, 10- and 20-fold the usual daily dose of Juzen-taiho-to on the nephrotoxicity, immunosuppression, hepatic toxicity and gastrointestinal toxicity caused by i. p. administration of 3. 0 mg/kg cisplatin (CDDP) 9 times (on days 3, 4, 5, 6, 7, 8, 10, 11, and 12) were examined in ddY mice inoculated with sarcoma 180 (S- 180) cells on day 1. The increase in blood urea nitrogen, serum creatinine, serum glutamic-oxaloacetic transaminase, serum glutamic-pyruvic transaminases and relative stomach weight and decrease in white blood cell count, platelet count, relative spleen and thymus weight, food intake and body weight caused by CDDP were inhibited to nearly the control levels without reducing the antitumor activity of CDDP against S-180 by the oral treatment with either 10-fold (1. 7 g/kg) or 20-fold (3. 4 g/kg) the usual daily dose of Juzen-taiho-to 12 times (on days 3, 4, 5, 6, 7, 8, 10, 11, 12, 13, 14, and 15). All the mice receiving 4. 5, 6. 0, 7. 5, 9. 0, and 12. 0 mg/kg CDDP died by day 12, while treatment with 3. 4 g/kg Juzen-taiho-to efficiently prolonged the survival time. These findings indicate that Juzen-taiho-to may provide protection against most clinical toxicity caused by CDDP, and Juzen-taiho-to may allow us to administer a much higher dose of CDDP in clinical therapy.

1062- gera: 54104/di/ra

[POINT INJECTION FOR LEUKOPENIA CAUSED BY RADIOTHERAPY]. SONG WENGE ET AL. shanghai journal of acupuncture and moxibustion. 1995;14(1):13 (chi).

1063- gera: 54303/di/ra [INFLUENCE OF RADIOTHERAPY AND CHEMOTHERAPY ON THE FUNCTION OF MALIGNANT TUMOR PATIENTS AND REGULATION FUNCTION OF ACUPUNCTURE]. YANG JINHONG ET AL. acupuncture research. 1995;20(1):1-4

The observation on the indexes of cortisol, estradiol, estriol and testosterone showed that secretory function of malignant tumor patients had different extent of pathologic changes, after radiotherapy and chemotherapy, making the change strengthened. Acupuncture can regularize this disorder of incretory function of patients treated with radiotherapy and chemotherapy to some extent.

1064- gera: 54329/di/ra

[ANTITUMOR EFFECT IN VITRO AND IMMUNO-RESPONSE IN VIVO OF FRUCTUS MUME]. SHEN HONGMEI ET AL. china journal of chinese materia medica. 1995;20(6):365-8

The antitumor action of extracts from Fructus Mume and the main triterpenoid component ursolic acid on HIMeg and HL- 60 cells in vitro was tested. The immuno-response in rats was also studied. The result showed that Fructus Mume had inhibiting effect on proliferation of HIMeg and HL-60 cells.

1065- gera: 54379/nd/re

PROTECTIVE EFFECT OF JUZEN-TAIHO-TO AGAINST CARBOPLATIN-INDUCED TOXIC SIDE EFFECTS IN MICE. . SUGIYAMA K ET AL. biol pharm bull. 1995;18(4):544-8 (eng).

The effect of an oral treatment with the Kampo formulation Juzen-taiho-to on the toxicity caused by the intraperitoneal administration of 15 mg/kg carboplatin (CBDCA) 9 times (on days 3, 4, 5, 6, 7, 8, 10, 11 and 12) was examined in ddY mice, which were subcutaneously inoculated with sarcoma 180 (S-180) cells on day 1. White blood cell counts, platelet counts, bone marrow cell counts, relative spleen and thymus weight, food intake and body weight decreased significantly, to about 29%, 13%, 14%, 59%, 36%, 42% and 72% of the control levels, respectively, and serum glutamic- oxaloacetatic transaminase, serum glutamic-pyruvic transaminase and relative stomach weight increased significantly, to about 4, 6 and 3 times the control levels, respectively, by the treatment with CBDCA. However, the blood urea nitrogen and serum

creatinine were only slightly increased compared to the control value. Co-treatment with 1. 7 g/kg of a lyophilized water extract of Juzen-taiho-to once a day 12 times (on days 3, 4, 5, 6, 7, 8, 10, 11, 12, 13, 14 and 15) prevented both the decreases and increases caused by CBDCA to near the control levels without reducing the antitumor activity of CBDCA against S-180. The inhibitory effect of Juzen-taiho-to against CBDCA-induced myelosuppression was similar to that against 3. 0 mg/kg cisplatin (CDDP) 9 times, while CBDCA-induced myelosuppression was more serious in comparison with CDDP. Therefore, these findings indicate that Juzen-taiho-to could be an effective drug for protecting against the side effects induced by CBDCA in the clinic as well as by CDDP.

1066- gera: 54400/di/ra

[EFFECT OF XIAOPILING GRANULES ON MUSCULAR HISTOCHEMISTRY OF GASTRIC PRECANCEROUS CHANGES IN RATS]. ZHANG X ET AL. china journal of chinese materia medica. 1995;20(1):47-9, 63 (chi*). The effect of Xiaopiling Granules on muscular histochemistry of gastric precancerous changes in rats was observed quantitatively. The activity of SDH and M-ATPase as well as the content of muscular glycogen in model groups were found significantly lower than those of the normal groups (p < 0. 01), and in this decrease Xiaopiling Granules had markedly played a preventive and therapeutic role.

1067- gera: 54433/di/ra [EXPERIMENTAL STUDY ON EFFECT OF KANG AI-BAO II TO CANCER CELLS WITH CELL CT ANALYSIS IN MICE]. XIE JIN-YU ET AL. chinese journal of integrated traditional and western medicine. 1995;15(5):293-5 (chi*) The result of the experiment indicated that Kang Ai-bao II ([symbol: see text] II) had a destructive effect on DNA and RNA of cancer cells. Our study provided the basis for the clinical practice. The effect of Kang Ai-bao II on U14 cancer cell in C57 BL mice was investigated with confocal laser scanning microscopy.

1068- gera: 54437/di/ra

[PRELIMINARY STUDY ON RELATIONSHIP BETWEEN SYNDROME DIFFERENTIATION OF ESOPHAGEAL **CANCER AND CHANGES OF EXFOLIATED CELLS OF** TONGUE COATING]. YANG ZHEN-JIANG ET AL. chinese journal of integrated traditional and western medicine. 1995;15(5):277-80 (chi*).

Exfoliated cells of tongue coating of 63 esophageal cancer (EC) cases have been investigated by applying exfoliate cytologic examination, which showed that abnormal cornified cells were commonly seen while they were less in the patients of EC than those in the healthy group, and their difference was significant (P < 0.05), It showed an increase mainly in the number of pro-cornified cells in the patient of the Qi-Yang Deficiency group, an increase mainly in completely cornified cells in the Yin Deficiency and an increase in both pro-cornified cells and completely cornified cells in Phlegn-Dampness and blood Stasis patients. The difference among four groups was significant (P < 0.05). The changes of exfoliated cells of tongue coating provided an objective index for the early diagnosis of EC.

1069- gera: 54645/di/ra

TREATMENT OF CANCEROUS ABDOMINAL PAIN BY ACUPUNCTURE ON ZUSANLI (ST 36). A REPORT OF 92 CASES. . XU MANYING ET AL. journal of traditional chinese medicine. 1995;15(3):189-91 (eng).

1070- gera: 54650/di/ra

CONTROLLING CANCEROUS PAIN WITH ANALGESIC POWDER FOR CANCERS. . YANG GENGLU ET AL. journal of traditional chinese medicine. 1995;15(3):174-7 (eng). Analgesic powder for cancers, composed of more than 20 Chinese drugs, was applied externally to 91 patients with various kinds of cancers for management of cancerous pain. The results showed that it was remarkably effective in 42 cases, fairly effective in 22, effective in 22, and ineffective in 5, the total effective rate being 94. 51%. Animal experiments indicated that the pain threshold was evidently higher in mice treated with this powder on the site of femoral artery of the

hind limbs than that of the controls without application of this powder.

1071- gera: 54743/nd/ra

ROLE OF MERCURY (HG) IN RESISTANT INFECTIONS & EFFECTIVE TREATMENT OF CHLAMYDIA TRACHOMATIS AND HERPES FAMILY VIRAL INFECTIONS (AND POTENTIAL TREATMENT FOR CANCER) BY REMOVING LOCALIZED HG DEPOSITS WI OMURA Y ET AL

acupuncture and electrotherapeutics research. 1995;20(3-4):195-229 (eng).

The authors found that antibiotics used to treat various infections often were ineffective in the presence of abnormal localized deposits of heavy metals like Hg and Pb, which were often observed to co-exist with Chlamydia trachomatis, Herpes Simplex Types I & II, Cytomegalovirus(CMV), and other microorganisms. Our earlier research revealed that despite rigorous treatment with antibiotics together with various drug uptake enhancement techniques, subjects who had been treated for Chlamydia trachomatis infections, seemingly successfully with disappearance of their symptoms, were often experiencing recurrences within several months after completion of their treatment despite taking precautions against reinfection. Careful examination of the entire body of these symptom-free patients with the Bi-Digital O-Ring Test revealed that the Chlamydia trachomatis had retreated to 3 approximately 5 hiding places with localized increase in uric acid levels: 1) sublingual caruncle, 2) a small round area in the right and/or left axillae, 3) the genitals (Corona Glandis area of the Glans Penis at the Fossa Navicularis of the urethra in the male, and near the orifice of the urethra in the female), 4) Insulin-like Growth Factor positive horizontal lines, particularly above and below the knees, 5) the maxillary, ethmoid and frontal sinuses and the horizontal lines at the base of the nostrils (particularly small areas where Insulin-like Growth Factors exist). We found that all these areas contain Insulin-like Growth Factors I & II which are reduced in the presence of infection. Even when drug uptake of antibiotics was selectively increased in these 3 approximately 5 areas by various drug uptake enhancement methods developed by the 1st author, still the infection persisted. In the spring of 1995, use of Chinese parsley for successful elimination of Hg deposits existing in various organs of the first author as the result of the decay of radioactive Thallium 201 injected for cardiac SPECT, was accidentally discovered after eating Vietnamese soup, which happened to contain Chinese parsley, also called cilantro. We also found Chinese parsley accelerates the excretion of Hg, Pb, and A1 from the body though the urine. Our subjects were given a course of antibiotics (Doxycycline for Chlamydia trachomatis infection) or anti-viral agents (EPA with DHA for Herpes Family Viruses) together with Chinese parsley. Since these vegetable/herbs were eaten, the amount of effective substance absorbed varied and some people did not like the taste of these relatively large amounts of either cooked or raw parsley or its juice, but together with effective antibiotics delivered by drug uptake enhancement methods to the infected areas, the substances worked synergistically, rapidly reducing the generalized symptoms and infection. The microorganisms retreated to the 3 approximately 5 areas listed above where, with continued treatment, they were significantly reduced, but not completely eliminated. Because of these problems, a pharmaceutical company was asked to produce a Chinese parsley table containing a controlled amount in a highly absorbable form. When 11 subjects were treated with Doxycycline for Chlamydia trachomatis infection, or anti-viral agents (EPA with DHA) for Herpes Family Viruses, drug uptake enhancement methods to selectively increase delivery of the drugs to the affected areas, and Chinese parsley tablets to remove the heavy metal deposits, the last traces of the infections and clinical symptoms disappeared completely Therefore we hypothesized that the infectious micro-organisms mentioned above, somehow utilize the Hg or Pb to protect themselves from what would otherwise be effective antibiotics, and/or that heavy metal deposits in some way make antibiotics ineffective. Since the micro-organisms retreat to areas in which Insulin-like Growth Factors I & II normally exist, they may be utilizing them for their own growth and multiplication.

1072- gera: 55736/di/ra

CANCER DE MAMA CON METASTASIS PULMONAR. TRATAMIENTO CON MTC. CHEN ZI FU. el pulso de la vida. 1995;5:5-8 (esp).

1073- gera: 56938/di/ra

IEFFECTS OF SHENMAI INJECTION ON IMMUNE FUNCTION IN STOMACH CANCER PATIENTS AFTER CHEMOTHERAPY]. LIN SHENG-YOU ET AL. chinese journal of integrated traditional and western medicine. 1995;15(8):451-3 (chi*).

1074- gera: 56940/di/ra

ICLINICAL STUDY ON EARLY USE OF CHINESE MEDICINAL HERBS AND CHEMOTHERAPY AFTER OPERATION OF GASTRIC CANCER]. YU QING-SHENG ET AL. chinese journal of integrated traditional and western medicine. 1995;15(8):459-61 (chi*).

1075- gera: 56945/di/ra

[EFFECT OF JINSHUIBAO CAPSULE ON THE IMMUNOLOGICAL FUNCTION OF 36 PATIENTS WITH ADVANCED CANCER]. ZHOU DAI-HAN ET AL. chinese journal of integrated traditional and western medicine. 1995;15(8):476-8 (chi*).

1076- gera: 57257/di/ra

ACUPOINT DIAGNOSTICS AND CHINESE HERBAL SUPPORT FOR BREAST CANCER PATIENTS. VAN BENSHOTEN MM. american journal of acupuncture. 1995;23(1):63-72 (eng).

Biophoton measurements of acupuncture points in patients with a diagnosis of breast cancer reveal the need for comprehensive support of the immune system, mitigation of side effects related to chemotherapy and radiation treatments, inhibition of tumor growth, and initiation of DNA detoxification and repair. Based on our limited clinical observations, petrochemical and pesticide induced damage of the immune system and DNA appear to be at the root of this modern epidemic. Comparing in vitro tests of anti-tumor Chinese herbs with in vivo clinical prescriptions confirms the complex challenge of supporting breast cancer patients so that the best possible clinical outcome can be achieved with the minimum of side effects.

1077- gera: 79029/di/ra

ITREATING MALIGNANT MOLE WITH METHODS OF DETOXICATING AND REMOVING BLOOD STASIS]. GUO HONG-YAN. zhejiang journal of tcm. 1995;30(11):486 (chi).

1078- gera: 84764/di/ra

51 CASES OF GASTRIC CANCER TREATED BY THE TURBIDITY DESCENDING ANS STASIS RESOLVING METHOD. LI JIANXIN ET AL. journal of tcm. 1995;15(4):243-

1079- gera: 84768/di/ra

THE TREATMENT OF PAIN IN BONE METASTASIS OF CANCER WITH THE ANALGESIC DECOCTION OF CANCER AND THE ACUPOINT THERAPEUTIC APPARATUS. GUO RENXU ET AL. journal of tcm. 1995;15(4):262-4 (eng*).

The pain in 286 cases of bone metastasis of cancer was treated with an analgesic decoction of herbal drugs in combination with the Acupoint Therapeutic Apparatus that generated low frequency electric impulses into the acupoints. This series of patients comprised 104 cases of medium pain and 182 Cases of severe pain, which was practically or completely relieved in 17 or 29 minutes respectively after the treatment; the total effective rate was 74.2% for 212 cases, and the duration of analgesic effect lasted 2.7 hours to 5.2 hours, averaging 3.6 hours. The cases that needed considerable dosages of analgesic tablets or sedatives markedly reduced their requests of such drugs. Determination of bone marrow stem cells indicated that the herbal treatment produced effects of promoting and protecting the stem cell. The rate of lymphocyte transformation was 45-76% before the treatment and rose to 57-96 % after the treatment, demonstrating an increase of 15.2%, which was statistically significant (P< 0.001). The analgesic effect of the decoction

was not correlated to the age and sex of the patients or the variety of cancer, except that it was not effective for uterine carcinoma. The main side effects included nausea, vomiting, somnolence, and numbness of the tong.

1080- gera: 84771/di/ra

38 CASES OF HYSTEROMYOMA TREATED WITH TUMOR-RESOLVING DECOCTION. SUN LIZHEN. journal of tcm. 1995;15(4):273-6 (eng).

1081- gera: 84784/di/ra

[A CASE OF ACUPUNCTURE THERAPY FOR IMPOTENCE CAUSED BY SURGERY FOR RECTAL CANCER]. TSUJIMOTO T ET AL. journal of the japan society of acupuncture. 1995;45(3):208-13 (jap*).

We studied the effect of acupuncture on a case of neurogenic impotence caused by surgery for ano-rectal cancer. Acupuncture needles (length : 60mm, diameter : 0.3mm) were inserted into bilateral Zhongliao (BL33) and were stimulated electrically or rotated manually for 10 minutes. The effectiveness of acupuncture was evaluated by IMP DIARY, which was consisted of the rate of increase on Erectometer, and the changes of the subjective symptoms. We also investigated the effects of acupuncture stimulation on microcirculation of the glans penis. After the treatment, IMP DIARY showed improvement of nocturnal penile tumescence, morning erection and erection by masturbation. The microcirculation at the glans penis was increased significantly immediately after acupuncture therapy. From these results, acupuncture treatment to the BL33 points for neurogenic impotence after surgery for ano-rectal cancer was

1082- gera: 84906/di/ra

OBSERVACIONES CLINICAS SOBRE 20 CASOS DE PACIENTES CON TUMORES GASTROINTESTINALES MALIGNOS. CUYO TRATAMIENTO HA SIDO ENRIQUESIDO CON EJERCICIOS DE QI GONG. PEN ZHENGSHUN ET AL. medicina holistica. 1995;41:82-3 (esp).

1083- gera: 84955/di/ra

[EFFECT OF TCM IN COMBINED WESTERN MEDICINE AND TCM TREATMENT FOR PRIMARY HEPATIC CARCINOMA]. JUNYU W ET AL. beijing journal of tcm. 1995;1:16 (chi).

1084- gera: 84963/di/ra

[CARCINOUS PAIN TREATED BY SANSHENGSANJIAWEI APPLICATION: A REPORT OF 30 CASES]. QINGQIANG C. beijing journal of tcm. 1995;1:38 (chi).

1085- gera: 86723/di/ra

[PROGRESS ON APPLICATION OF EAR ACUPUNCTURE TO DIAGNOSIS OF TUMOUR]. BA YUANMING ET AL. hubei journal of tcm. 1995;17(2):couvertu (chi).

1086- gera: 88247/di/ra [THE TREATMENT OF CARCINOUS PAIN]. QI YUANFU. shandong journal of tcm. 1995;14(2):55 (chi).

1087- gera: 88320/di/ra

THE ADHESIVE PLASTER MADE BY BORNEOL AND TOAD VENOM TREATING FOR 40 CASES OF CANCEROUS PAIN]. JANG YAN ET AL. shandong journal of tcm. 1995;14(10):451 (chi).

1088- gera: 88341/di/ra

[22 CASES OF THORACIC HYDROPS FROM MALIGNANT TUMOR TREATED BY TCM COMBINED WITH WESTERN MEDICINE]. LIU SHANJING ET AL. shandong journal of tcm. 1995; 14(12):559 (chi).

1089- gera: 88368/di/ra

[EXPERIMENTAL STUDY OF CHAIHU POLYSACHRIDE FOR ANTI-RADIATION]. LUO CHUANHUAN ET AL. chinese traditional and herbal drugs. 1995;26(12):645 (chi).

1090- gera: 88640/di/ra

TREATMENT OF ANASTOMOTIC LEAKAGE AFETR OPERATION FOR CARCINOMA OF ESOPHAGUS]. PAN LIQUN. jiangsu journal of tcm. 1995;16(3):18 (chi).

1091- gera: 88727/di/ra

TREATMENT OF 38 CASES OF ESOPHAGUS CANCER WITH APHAGIA BY USING "TIANXIA KAIDAO DECOCTION"]. ZHU CHANGGUO ET AL. jiangsu journal of tcm. 1995;16(10):9 (chi).

1092- gera: 90295/di/ra

TREATMENT OF RADIATION ENTERITIS BY RETENTION-ENEMA OF FANGCHANGLING DECOCTION]. WANG CHAO ET AL. new journal of tcm. 1995;27(3):20 (chi).

1093- gera: 90325/di/ra [SYNDROME DIFFERENTIATION AND TREATMENT OF **RADIATION ENCEPHALOMYELOPATHY: A REPORT OF 9** CASES]. WANG SHIZHEN. new journal of tcm. 1995;27(5):23 (chi).

1094- gera: 90376/di/ra

[CLINICAL OBSERVATION ON THE TREATMENT OF LUNG CANCER BY SHAN LONG LU FENG WAN: A REPORT OF 120 CASES]. LIU ZHENYI ET AL. new journal of tcm. 1995;27(8):38 (chi).

1095- gera: 90483/di/ra

[CLINICAL OBSERVATION ON THE TREATMENT OF PROPHASE PATHOLOGIC CHANGE OF STOMACH CARCINOMA BY MANWEI ZHUANFU TANG: A REPORT OF 62 CASES]. LIAN QIMING. new journal of tcm. 1995;27(10):43 (chi).

1096- gera: 90500/di/ra

[TREATMENT OF RADIODERMATITIS BY EXTERNAL WASHING THE HU ZHANG TANG: A REPORT OF 90 CASES]. DU ZHIQIANG. new journal of tcm. 1995;27(11):41

1097- gera: 91302/di/ra [THE EFFECTIVE OBSERVATION THAT NAUSEA **VOMITING IS LEADED BY ONCOMA CHEMOTHERAPY IS** CONTROLED BY SHU-FU-NING]. LI JING ET AL. practical journal of integrating chinese with modern medicine. 1995;8(6):340 (chi).

1098- gera: 44968/di/ra

RELIEVING CANCEROUS PAIN AND IMPROVING THE SURVIVAL QUALITY WITH FEI AI CHONG JI. JIANG LIFAN ET AL. journal of tcm. 1996;16(2):98-100 (eng).

1099- gera: 54742/nd/re

HERBAL MEDICINE 'SHO-SAIKO-TO' INDUCES TUMOUR **NECROSIS FACTOR-ALPHA AND GRANULOCYTE COLONY- STIMULATING FACTOR IN VITRO IN** PERIPHERAL BLOOD MONONUCLEAR CELLS OF PATIENTS WITH HEPATOCELLULAR CARCINOMA. YAMASHIKI M ET AL. j gastroenterol hepatol. 1996;11(2):137-42 (eng).

'Sho-saiko-to' (TJ-9) is a Japanese herbal medicine that is commonly administered to patients with chronic viral liver disease in order to improve their overall physical condition and to prevent the development of liver cancer, The present in vitro study demonstrated that, by adding TJ-9 to cell cultures, there were dose-dependent increases in production levels of tumour necrosis factor-alpha (TNF-alpha) and granulocyte colony stimulating factor (G-CSF) in peripheral mononuclear cells of patients with hepatocellular carcinoma accompanied by liver cirrhosis. Increases in the production of TNF-alpha and G-CSF in control cell cultures exposed to different herbal medicines were low, and this indicates the specificity of the response increases in production of these cytokines to TJ-9. TNF-alpha and G-CSF are known to play important roles in the biological defence mechanism. Administration of TJ-9 may, therefore, be beneficial for patients afflicted with intractable liver diseases because it could mildly induce these cytokines.

1100- gera: 54925/nd/re

ISTUDIES ON THE BIOACTIVE CONSTITUENTS OF AURANTII FRUCTUS IMMATURUS]. SATOH Y ET AL. yakugaku zasshi. 1996;116(3):244-50 (jap).

An ethanol extract of "Kijitsu" (Aurantii Fructus Immaturus, Citrus aurantium L.) collected in China was assessed for the antitumor activity using murine leukemia P388 in vivo, and the extract was found to be active by the antitumor bioassay in vivo and in vitro. The extract was separated into a petroleum ether-soluble fraction and an ethyl acetate-soluble fraction. Fractionation was carried out using an index of cell-growth inhibitory activity against mouse leukemia L1210 cells to isolate antitumor active substances or compounds. The active compounds were purified employing silica gel column chromatography and HPLC. The antitumor effect of the isolated active compounds was studied. Five compounds, auraptene, marmin, tangeretin, nobiretin and 5-[(6',7'dihydroxy-3',7'-dimethyl-2-octenyl)oxy]psoralen were isolated from Citrus aurantium L. Though they are all known compounds, 5-(6',7'-dihydroxy-3',7-dimethyl-2-octenyl)oxy-psoralen from this plants was first isolated. These compounds showed a cell-growth inhibitory effect against L1210 and

1101- gera: 55145/nd/re

TONKINELIN: A NOVEL ANNONACEOUS ACETOGENIN FROM UVARIA TONKINENSIS. . CHEN Y ET AL. planta med. 1996;62(6):512-4 (eng).

Further studies on the root bark of Uvaria tonkinensis Finet et Gagnep. (Annonacease) led to the isolation of a new Annonaceous acetogenin, tonkinelin (1). The structure of 1 was elucidated on the basis of spectral data and chemical evidence. This compound represents an unusual type of C37 Annonaceous acetogenin, having neither tetrahydrofuran (THF) nor epoxide rings and possessing only a vicinal diol in the hydrocarbon chain. Preliminary pharmacological tests showed that tonkinelin (1) inhibits human leukemia (HL-60) and human colon adenocarcinoma (HCT-8) cell lines in

1102- gera: 55166/di/ra [OBSERVATION ON THERAPEUTIC EFFECTS OF ACUPUNCTURE TREATMENT IN 44 CASES WITH **GASTROINTESTINAL REACTION INDUCED BY** RADIOTHERAPY AND CHEMOTHERAPY]. CHEN GUIPING ET AL. chinese acupuncture and moxibustion. 1996;16(7):9

1103- gera: 55185/di/ra

[CLINICAL AND EXPERIMENTAL STUDIES ON STOMACH CARCINOMA TREATED WITH YANGWEI KANGLIU (ANTITUMOR AND STOMACH NOURISHING) GRANULES]. LU WENPING ET AL. journal of tcm. 1996;37(6):350 (chi).

1104- gera: 55198/di/ra [CLINICAL OBSERVATION AND EXPERIMENTAL STUDY ON THE EFFECT OF ELECTROPUNCTURING ZUSANLI (ST36) ON GASTROINTESTINAL FUNCTIONS IN PATIENTS WITH CANCER RECEIVING CHEMOTHERAPY]. HUANG XIMEI. shanghai journal of acupuncture and moxibustion. 1996;15(3):11 (chi).

1105- gera: 55239/nd/re

RECOVERY OF THE HEMATOPOIETIC SYSTEM BY SI-JUN-ZI-TANG IN WHOLE BODY IRRADIATED MICE. . HSU HY ET AL. j ethnopharmacol. 1996;54(2-3):69-75 (eng). The herbal formulation Si-Jun-Zi-Tang reduced the decrease of leukocytes, erythrocytes, thrombocytes and hematocrit in irradiated mice. In general, its protection was more effective in leukocytes and thrombocytes than other hematocytes. Protection of bone marrow stem cells by Si-Jun-Zi-Tang was markedly enhanced by increased radiotolerance under the dose ranging from 0 to 5 Gy. This increased radiotolerance led to a prolonged shoulder in the survival curve but did not influence the D0 value. Si-Jun-Zi-Tang exerted a beneficial effect on clinical syndromes such as anemia. From the results in this study, we concluded preliminarily that the most effective concentration with least toxicity was about 20 mg/20 g body weight. At this dose, levels of leukocytes as well as thrombocytes were enhanced significantly after chi- irradiation. Elevation of erythrocytes and hematocrits could also be found but was not significant.

1106- gera: 55328/di/ra

[CLINICAL REPORT ON PRIMARY LUNG CARCINOMA TREATED WITH KANGLAITE INJECTION]. LI DAPENG. journal of tcm. 1996;37(7):411 (chi).

Through 242 cases grouped randomly for observation, it was shown that Kanglaite yielded good results on the amelioration of cancer lesion, improvement of symptoms and body weight, survival quality, immunity and blood picture, the rate of remission being 20,61%; that of the chemotherapy group being 21,23% (P < 0.05).

1107- gera: 55436/di/ra

[CLINICAL OBSERVATION ON TREATMENT OF FEVER INDUCED BY CHEMOTHERAPY IN LEUKEMIA BASED ON DIFFERENTIATION OF SYNDROMES]. HAN QING ET AL. journal of tcm. 1996;37(8):479 (chi).

1108- gera: 55449/di/ra [CLINICAL AND EXPERIMENTAL STUDIES ON MICRO-RESIDUAL LEUKEMIA TREATED WITH FUZHENG YI'AI (RESISTANCE-SUPPORTING TUMOR-INHIBITING) **INFUSION COORDINATED WITH RADIOTHERAPY]. WANG** CHENGBAI ET AL. journal of tcm. 1996;37(9):535 (chi*). Fuzheng Yiai Infusion is an effective remey for micro-residual leukemia (MRL). It yields marked mitigation on the general condition of the patient and prevents complications by substantially improves the patient immunity, elevates the rate of total remission and living quality, prolongs the survival period. Studies on the indices including DNA index, rate of DNA non-uneuploid, ph' chromosome, and BCR/ABL gene, showed that the recipe can inhibit or eliminate the actions of malignant clone. In vitro cultivation of cells proved that the recipe yields stimulating action on the proliferation of normal marrow cells, yet yields no stimulating action on leukemic cells. Animal experiments reveal this recipe markedly prolongs the survival period of MRL animal models.

1109- gera: 55628/di/ra

51 CASI DI NEOPLASIA GASTRICA TRATTATI CON IL METODO DELLA "DISCESA DEL TORBIDO E RISOLUZIONE DELLA STASI". JIANXIN L ET AL. rivista italiana di medicina tradizionale cinese. 1996;66(4):38-42 (ita).

Résumé à entrer.

1110- gera: 55632/di/ra

TRATTAMENTO DEL DOLORE NELLE METASTASI OSSEE CON IL DECOTTO ANALGESICO E L'APPARATO TERAPEUTICO PER AGOPUNTURA. RENXU G ET AL. rivista italiana di medicina tradizionale cinese. 1996;66(4):50-1 (ita). Résumé à entrer.

1111- gera: 55665/di/ra

ICOMMENTARY ON CLINICAL STUDY OF PRECANCEROSIS OF CARCINOMA OF STOMACH TREATED BY TCM]. LAO SHAOXIAN ET AL. journal of tcm. 1996;37(11):690 (chi).

1112- gera: 55765/di/ra

ALIMENTACION Y RECUPERACION DE PACIENTES AFECTOS DE CANCER HEPATICO. WANG YONG KUA. el pulso de la vida. 1996;9:11-2 (esp).

1113- gera: 55905/nd/re
NATURIN: A POTENT BIO-IMMUNOMODIFIER IN EXPERIMENTAL STUDIES AND CLINICAL TRIALS. . SHEN RN ET AL. in vivo. 1996;10(2):201-9 (eng).

A number of traditional Chinese medicinal herbs have become extremely interesting in the search for potential BRMs in the international medical community, especially in the United States and Japan. Naturin, a new Chinese medical herb produced by XingYa Pharmaceutical Co., Ltd., has enhanced immune response, inhibited tumor metastases and retroviral infection in animal models as well as in clinical studies. The results demonstrated that the inhibition of Natural Killer (NK) and Lymphokine-activated Killer (LAK) cell activity and lymphocyte proliferation was compromised by tumor metastases and retrovirus infection (Murine AIDS), even immunosuppression induced by surgical amputation can be

restored by Naturin. It is also shown that Naturin can protect the mice from lethal total body irradiation. These studies indicated that Naturin possesses immunomodulatory effects in vivo for a broad range of stresses. The results of the clinical studies on Naturin have demonstrated: (a) significantly improved symptoms of patients, including MDS, acute and chronic leukemia, aplastic anemia, lung cancer, and association with the increased number and percentage of CD4 (Helper T-cell) which have been reduced in some patients, (b) Lymphocyte proliferation and NK cell activity which were suppressed in cancer patients can be significantly restored by Naturin treatment, (c) the addition of Naturin treatment to patients receiving radiotherapy and chemotherapy augments immune response and reduces radiation and chemotherapy injury, and (d) no cytotoxic side effects were found in patients given Naturin treatment for up to eight months.

1114- gera: 56346/di/ra

ACUPUNCTURE IN KILLING CANCER-ASSOCIATED PAIN. DING DU-MING. international journal of clinical acupuncture. 1996;7(3):323-4 (eng).

1115- gera: 56673/di/ra

[CLINICAL OBSERVATION OF ACUPUNCTURE IN TREATMENT OF LEUKOPENIA PATIENTS WITH RADIOTHERAPY AND CHEMOTHERAPY]. LIANG YAZHEN ET AL. shanghai journal of acupuncture and moxibustion. 1996;15(6):11 (chi).

1116- gera: 56791/di/ra

IBASIC PRINCIPLE AND DRUG THERAPY OF HEPATIC CANCER TREATED WITH TCM]. YANG TONGLI. china journal of tcm and pharmacy. 1996;11(6):42 (chi).

1117- gera: 56792/di/ra

[APPLICATION TCM THERAPEUTIC METHODS FOR CARCINOMATOUS PAIN]. YANG JIANHUA ET AL. china journal of tcm and pharmacy. 1996;11(6):46 (chi).

1118- gera: 56843/di/ra

A REPORT OF 4 CASES OF LIVER CARCINOMIA TREATED BY TOPICAL ADHESIVE METHOD. LI HUIGANG ET AL. journal of tcm. 1996;16(4):243-6 (eng).

1119- gera: 56844/di/ra

CHANGES OF VISUAL FINDINGS, ELECTRIC FEATURES AND STAINING OF AURICLES IN MALIGNANT TUMOR PATIENTS. ZHU DAN ET AL. journal of tcm. 1996;16(4):247-51 (eng).

1120- gera: 56848/di/ra

AN OBSERVATION ON COMBINED USE OF CHEMOTHERAPY AND TCM TO RELIEVE CANCER PAIN. LIN CHUANRONG ET AL. journal of tcm. 1996;16(4):267-9

1121- gera: 56858/di/ra

HOW TO GIVE TREATMENT BASED ON SYNDROME **DIFFERENTIATION FOR CANCEROUS FEVER. CHANG** QING. journal of tcm. 1996;16(4):312-3 (eng).

1122- gera: 57008/di/ra

[A CLINICAL APPLICATION OF RULE OF SUPPLEMENTING QI AND NOURISHING YIN TO LIVER CANCER]. MA LINGYUN. journal of shandong college of tcm. 1996;20(3):178 (chi).

1123- gera: 57029/di/ra

THE EFFECT OF ATTENUATION AND SYNERGY OF FEI LUI PING XIAO JIAN ON PATIENT WITH CANCER OF LUNG WITH CHEMOTHERAPY]. LIU YULONG. journal of shandong college of tcm. 1996;20(5):310 (chi).

1124- gera: 57120/di/ra

[THE EFFECTS OF POINT-INJECTION OF ASTRAGALUS LIQUOR BY MEANS OF MIDNIGHT-NOON EBB-FLOW ON THE IMMUNOLOGIC FUNCTION OF MICE WITH TUMOR].]. MIAO LIJUN ET AL. traditional chinese medicinal research. 1996;9(1):19 (chi).

1125- gera: 57121/di/ra

ITHE RELATIONSHIP BETWEEN DIAGNOSIS OF TCM AND SERUM ACIDE SOLUBLE PROTEIN IN PATIENTS WITH MALIGNANT TUMOR OF DIGESTIVE TRACT]. ZHAO JUBIN ET AL. traditional chinese medicinal research. 1996;9(1):22 (chi).

1126- gera: 57314/di/ra

PROTECTIVE EFFECTS OF GYNOSTEMMA PENTAPHYLLUM IN GAMMA-IRRADIATED MICE. . CHEN WC ET AL. american journal of chinese medicine. 1996;24(1):83-92 (eng).

1127- gera: 57319/di/ra

EFFECT OF SHI-KA-RON ON CYTOKINE PRODUCTION OF LYMPHOCYTES IN MICE TREATED WITH CYCLOPHOSPHAMIDE. . JIN R ET AL. american journal of chinese medicine. 1996;24(1):37-44 (eng).

1128- gera: 57391/nd/re SUPPORTIVE CARE PROGRAMS IN CANCER AT THE NATIONAL CANCER CENTER IN TOKYO. EGUCHI K ET AL. supportive care in cancer. 1996;4(4):266-9 (eng). Until recently, supportive care for cancer patients in Japan was not well organized. Few oncologists paid attention to the improvement of daily life of patients with advanced or terminal cancer. Oncological staffs such as doctors, nurses, psychologists, and pharmacists at hospitals in Japan did not really cooperate efficiently. Recently, however, we have begun to develop and to expand activities for supportive care of cancer patients using new concepts of treatment. At the National Cancer Center in Japan an effort is being made to expand activities in PCU, the application of Chinese acupuncture for pain relief, and the development of a virtual reality technique. A system to connect cancer centers has been established and is now being expanded to facilitate a new database on up-to-date cancer information. We have already started holding multi-institutional medical teleconferences, telepathology and teleradiology on a weekly basis, covering nine cancer centers throughout Japan.

1129- gera: 57702/di/ra

ALIMENTACION Y RECUPERACION DE PACIENTES AFECTOS DE CANCER HEPATICO. WANG YONG KUA. pulso de la vida. 1996;9:11-2 (esp).

1130- gera: 57759/di/ra

CONTROLLO DEL DOLORE NEOPLASTICO CON LA **POLVERE ANALGESICA PER LE MALATTIE** CANCEROGENE. YANG GENGLU ET AL. rivista italiana medicina tradizionale cinese. 1996;65(3):38-40 (ita).

1131- gera: 58331/di/ra

EFFECTS OF GLYCYRRHIZAE AND GLYCYRRHIZIC ACID ON RADIATION INJURY IN MICE. LIN HSIN I ET AL. american journal of chinese medicine. 1996;24(3-4):279-88

The effects of Glycyrrhizae (GL) and Glycyrrhizic acid (GA) on promoting the recovery of mice from radiation injury were investigated. Two hundred ICR strain male mice, 6-8 weeks old, were randomly divided into four groups. Group A was the normal control. Group B, the experimental control, was treated with 4 Gy y-ray irradiation. Groups C and D, the experimental groups, were treated with 500 mg/kg of GL (oral administration) and 5 mg/kg body weight of GA (i. p.), respectively, for ten days after y-ray irradiation. Eight mice in each group were sacrificed on days 5, 12, 26 and 33 post irradiation to measure the weights of spleen, thymus and testes, and the biosynthetic rates of DNA in these organs. The results revealed that 4 Gy y-ray irradiation evidently inhibited the weights of spleen, thymus and testes. and their DNA biosynthetic rates. GL and GA enhanced the recovery of these organs in mice from the injury of y-ray irradiation.

1132- gera: 58456/nd/re

COMPLEMENTARY THERAPIES: A PATIENT'S CHOICE. THWAITE J. complement ther nurs midwifery. 1996;2(3):68-70 (eng).

Judith Thwaite discusses the role of complementary therapy in her treatment for non-Hodgkins lymphoma. She was diagnosed with non-Hodgkins lymphoma in 1988 and since that time she has tried a number of therapies. A visit to the Bristol Cancer Help Centre changed her outlook on life and the Centre's policy of patient empowerment encouraged her to fulfil an ambition to write. She also visits the Royal Homoeopathic Hospital, London, regularly for massage, shiatsu, acupuncture, and reflexology and relates how these have helped her cope with the disease as well as her sessions of chemotherapy. Throughout her illness she has remained positive and optimistic, determined to use whatever methods that are available to help her.

1133- gera: 66776/di/ra

[50 CASES OF SKIN CARCINOMA TREATED WITH HERBAL MEDICINEWHITE ARSENIC STREAK]. TIAN SUQIN ET AL. liaoning journal of traditional chinese medicine. 1996;23(8):352 (chi).

1134- gera: 72653/di/ra [(A STUDY ON TREATMENT OF LUNG CANCER BY COMBINED THERAPY OF TRADITIONAL CHINESE MEDICINE AND CHEMOTHERAPY).]. LI JI-HAN. chinese journal of integrated and western medicine. 1996;16(3):136

From May 1992 to May 1995, 102 patients with lung cancer were divided randomly into two groups: group A, 48 patients, treated with combined therapy of TCM and chemotherapy, group B, 54 patients treated with chemotherapy alone. The protocol of chemotherapy used in the two groups was similar. The Chinese medicines were given according mainly to the Syndrome Differentiation. Four types were found in the group A: the Lung and Spleen Qi Deficiency type, the Lung Heat and Phlegm-Dampness type, the Lung-Yin and Stomach-Yin Deficiency type and the Qi stagnation and blood stasis type. The total effective rate according to the WHO standard was as follows: that of group A and group B was 52.1% and 35.1%; the 1 year survival rate of them was 69.4% and 66.7%, the 2 year survival rate was 56.2% and 15.8% and the median survival time were 13 months and 9 months, respectively. These results suggest that the elevation of median survival time and 2 year survival rate of group A might be closely related with the therapeutic effect of TCM, but the combined therapy of TCM and chemotherapy did not improve the therapeutic efficacy significantly.

1135- gera: 72654/di/ra

[(EFFECT OF ACUPUNCTURE ON IMMUNOMODULATION IN PATIENTS WITH MALIGNANT TUMOR).]. WU BIN ET AL. chinese journal of integrated and western medicine. 1996;16(3):139 (chi*).

In order to investigate the role of acupuncture in the regulation of cellular immune function, the changes of T lymphocyte subsets (CD3+, CD4+, CD8+), soluble interleukin-2 receptor (SIL-2 R) and, ß-endorphin ß-EP) in the peripheral blood of patients with malignant tumors before and after acupuncture were observed with double blind method. Forty patients were divided randomly into two groups, 20 for each. One group treated with acupuncture and the other one for control. Results showed that acupuncture has the effect of enhancing the cellular immunity of patient with malignant tumor. Acupuncture treatment could increase the percentage of T lymphocyte subsets CD3+, CD4+ and the CD4+/CD8+ ratio (P<0.01) and the level of ß-EP, as well as decrease the level of SIL-2 R (P <0.01). The correlation analysis of the three criteria showed there was a positive correlation between ß-EP and T lymphocyte subsets and a negative correlation between S-EP and SIL-2 R. there was also a negative correlation between T lymphocyte subsets and SIL-2 R. Based on these results, a discussion on the acupuncture immunomodulation network was conducted in this article in order to explore the possible mechanism of acupuncture on immunomodulation.

1136- gera: 80336/di/ra [A BRIEF HISTORY OF STUDIES ON ANTI-TUMOR REMEDIES IN CHINA]. ZHIQI S ET AL. chinese journal of medical history. 1996;26(1):33 (chi*).

This paper gives a general introduction to the studies on the

formulation and invention of anti-tumor remedies from 1950s~1980s. Beginning from 50s, antitumor antibiotics were investigated. New Alkylicompoun and antibiotics were found in the 60s, while more new natural compounds were found in the 70s. Researches were proceeded in the 80s based on the former achievements. Through the process of about 30 years, nearly 80 new species were produced, many anti-tumor pharmaceutical corporations established, and a contingent of high level research workers was formed. However, there still exist a rather large gap between the urgent clinical needs for clinical chemotherapeutics and the actual status. Based on some 30 years of experience in China, the following points were summarized i. e. shifting from merely imitation to invention, developing the spirit of massive cooperation, investigating the thesaurus of TCM, developing China's plant resources, and traditional Chinese preventive idea, so that the stress point for research be laid on the invention of preventive anti-tumor remedies.

1137- gera: 84726/di/ra

[INFLUENCE OF HUOXUE HUAYU (BLOOD-ACTIVATION STASIS-REMOVAL) DECOCTION ON BLOOD PICTURE AND HEMORHEOLOGY IN PATIENTS OF NASOPHARYNGEAL CARCINOMA RECEIVING RADIOTHERAPY]. PEILI H ET AL. journal of tcm. 1996;37(2):104 (chi*).

70 cases were randomly divided into treated group and controlled group treated with Huoxue Huayu and non HuQxue . Haoyu drugs respectively! Both groups were observed for their purplish tongue during radiotherapy and hemorrheology before and after radiother.ipy. Results showed that when compared with the controlled group. the rate of purplish tongue was much lower. with much delay of its occurrence in the treated group. However. it made no difference between the 2 groups in hemorrheology.

1138- gera: 84799/di/ra

TRAITEMENT DU GROS BRAS DOULOUREUX POST-**CHIRURGICAL OBSERVE DANS LES SUITES** D'INTERVENTION DU CANCER DU SEIN. BRAHIMI A. meridiens. 1996;106:155-62 (fra*).

Le lymphoedème douloureux observé dans les suites d'intervention chirurgicale du Cancer du sein ne trouve pas de solution thérapeutique efficace en Occident alors qu'il est traîté avec succès en Chine. La Médecine Traditionnelle Chinoise propose un protocole de traitement faisant appel à la méthode des Aiguilles de Feu et à celle de la puncture suivie de saignée. Les résultats sont très intéressants et nous encouragent à utiliser cette technique dans nos

1139- gera: 85617/di/ra

[EXPERIMENTAL STUDY ON EFFECTS OF ELECTROACUPUNCTURE ON GASTROINTESTINAL FUNCTIONS IN RATS AFTER CHEMOTHERAPY]. LI YING ET AL. chinese acupuncture and moxibustion. 1996;16(3):31 (chi*).

In the experiment, the protective effects of electroacupuncture on gastrointestinal functions were investigated in rats after chemotherapy from gastrointestinal pathology and other respects. Results indicated that in rats after chemotherapy electroacupuncture could avoid that gastric mucosa thinned out and mural cells decreased, prevented necrosis of the intestinal mucosa epithelium and scaling of superficial glands, inhibited focal hyperplasia of intra-mucosal fibrous tissue. Electroacupuncture also could inhibit excitability of gastric mucosa and reduced the sensitivity of stimulation of chemotherapeutic agents. Therefore, it plays the role of protecting the gastrointestine.

1140- gera: 85655/di/ra

[OBSERVATION ON PRIMARY LIVER CARCINOMA TREATED WITH QINGLONG (GREEN DRAGON) BOLUS]. CHEN CHANGHUAI ET AL. journal of tcm. 1996;37(3):165

Two hundred cases were treated, with 90 cases treated by chemotherapy as control for comparison. In the treatment group, 17 cases (8.5%) were totally or partially ameliorated, 161 cases (80. 5%) stable. There was significant amelioration in clinical symptoms and survival quality in the treatment group as compared with that of the control group.

1141- gera: 85740/di/ra

[OBSERVATION ON THE EFFECT OF TREATMENT OF ADVANCED STAGE OF CANCER OF COLON BY INTEGRATED CHINESE AND WESTERN MEDICINE: REPORT OF 260 CASES]. PAN MINGLI ET AL. journal of tcm. 1996;37(4):218 (chi*).

Conventional therapy was given to 260 cases of advanced stage of cancer of colon during the period of 1975-1988. Radical operation, palliative resection or changing bowel passage were selected according to the condition of the lesions. Post-operative chemotherapy with integrated Chinese and western medicine were given, or with radiotherapy in some of the cases. Results showed that the 5-years survival rates of II. III. IV. stages were 80,5%, 56,12%, 21,73% respectively, the mean 5-years survival rate being 52,78%. 45 cases with liver metastasis were also treated with integrated medicine with a 5-years survival rate of 22,2%. The above figures of therapeutic effect and survival rates were all superior to that in cases treated by western medicine alone as reported by domestic exponent units.

1142- gera: 85800/di/ra

IIMMUNOHISTOCHEMICAL STUDY ON GASTRIC PRECANCEROUS LESIONS IN RATS INFLUENCED BY XIAOPILING GRANULES]. ZHANG XUCHEN ET AL. journal of beijing university of tcm. 1996;19(2):54 (chi*).

1143- gera: 85887/di/ra

IEFFECTS OF ACUPUNCTURE AND MOXIBUSTION AT 'ZUSANLI" POINT (ST36) ON SUPEROXIDE DISMUTASE IN MICE RECIEVING CYCLOPHOSPHAMIDE]. SUN XINONG ET AL. chinese acupuncture and moxibustion. 1996;16(6):49 (chi).

1144- gera: 85895/di/ra

JEXPERIENCE ON TREATMENT OF SENILE LUNG CANCER]. ZHAO TIANYONG. journal of tcm. 1996;37(5):287 (chi).

1145- gera: 85904/di/ra

[INTRODUCTION TO PRIMARY LIVER CARCINOMA TREATED BY TCM]. LI ZUOQING. journal of tcm. 1996;37(5):308 (chi).

1146- gera: 86963/nd/re ACUPUNCTURE TREATMENT OF PATIENTS WITH RADIATION-INDUCED XEROSTOMIA. BLOM M ET AL. eur i cancer b oral oncol. 1996;32B(3):182-90 (eng).

Xerostomia is a common and usually irreversible side effects in patients receiving radiation therapy (> 50 Gy) for head and neck cancer. Of 38 patients with radiation-induced xerostomia, 20 in the experimental group were treated with classical acupuncture and 18 patients in the control group received superficial acupuncture as placebo. Within both groups the patients showed significantly increased salivary flow rates after the acupuncture treatment. In the experimental group 68% and in the control group 50% of the patients had increased salivary flow rates at the end of the observation period. Among those patients who had had all their salivary glands irradiated, 50% in both groups showed increased salivary flow rates (> 20%) by the end of the observation period of 1 year. The study indicates that among the patients who had increased salivary flow rates already after the first 12 acupuncture sessions, the majority had high probability of continual improvement after the completion of acupuncture treatment. The improved salivary flow rates usually persisted during the observation year. The changes observed in the control group were somewhat smaller and appeared after a longer latency phase. Significant differences for salivary flow rates could be observed only within each group, and there were no statistically significant differences between the groups. There were no differences in the improvement of salivary flow rates between those patients who were irradiated within a year before the acupuncture treatment and those who had received radiation therapy several years earlier. The results indicate that acupuncture might be a useful method for the treatment of radiation-induced xerostomia, and that superficial acupuncture should preferably

not be used as placebo acupuncture.

1147- gera: 91601/di/ra [CLINICAL VALUE OF CA15-3 LEVELS IN PLASMA ON PATIENTS WITH BREAST CANCER]. DONG YONG-HONG ET AL. practical journal of integrating chinese with modern medicine. 1996;9(2):67 (chi*).

1148- gera: 103863/di/ra

EFFECT OF ACUPUNCTURE ON IMMUNOMODULATION IN PATIENTS WITH MALIGNANT TUMORS. WU BIN, ZHOU RONG-XING, CHEN MING-JIN, ET AL. chinese journal of integrated traditional and western medicine (english edition). 1996;2(4):266 (eng*).

In order to investigate the role of acupuncture in the regulation of cellular immune function,

1149- gera: 25031/di/re

CROSS SECTIONAL STUDY OF USE OF ALTERNATIVE MEDICINES IN CHINESE CANCER PATIENTS. MING LIU J ET AL. japan journal of clinical oncology. 1997;27(1):37-41 (eng).

The aim of this study was to ascertain the prevalence of alternative medicine consumption in Chinese cancer patients on active conventional treatment. A cross sectional survey of 100 consecutive advanced cancer patients admitted to a cancer clinical trial referral unit were personally interviewed by their assigned oncology research nurse using a specially designed questionnaire. The results showed that 64% of our patients used indigenous Chinese medication. In all age groups except the over-70s (P = 0. 043), > 50% took such medication, more female (76%) than male (57. 6%) patients (P = 0. 323). Patients of all educational levels (P = 0. 062) and religious backgrounds (P = 0.08) consumed alternative medicines. Duration of alternative medication consumption was less than three months in 50% of patients, with costs between US\$40 and 2000/month for 70% of patients. Reasons cited for alternative medication consumption was hope that it might be of some benefit to their well being or disease control, and maybe even result in a miracle cure. Sources of advice on medication were mostly from strangers (by word of mouth), family, friends, the media, and infrequently from qualified professional Chinese doctors. Reasons for discontinuing such treatment were mostly given as lack of positive effect. In conclusion, Chinese cancer patients, willingly, rampantly and non-selectively seek out and consume alternative medications, with almost total ignorance of the medication consumed, oblivious to any potential side effects, and with little subjective

1150- gera: 55509/di/ra

[OBSERVATION ON THERAPEUTIC EFFECTS OF MOXIBUSTION ON DECREASE OF LEUKOCYTES AFTER CHEMOTHERAPY]. WANG XIAO. chinese acupuncture and moxibustion. 1997;17(1):13 (chi*).

49 cases of decrease of leukocytes after chemotherapy treated with moxibustion, 34 cases treated with leucogen and batyl alcohol, and 25 cases treated with Sheng Bai An Tablet were observed and compared clinically. Results showed that among the 49 cases in the group of moxibustion, 29 cases were markedly effective, 11 cases were effective, the total effective rate being 82%. In the group of leucogen and batyl alcohol, 8 cases were markedly effective and 9 cases were effective, the total effective rate being 50%. In the group of Sheng Bai An Tablet, 5 cases were markedly effective and 9 cases were effective, the total effective rate being 56%. There was significant difference (P < 0.01) as the therapeutic effects were compared.

1151- gera: 55511/di/ra

[CLINICAL STUDY ON ACUPUNCTURE CONTROLLING GASTROINTESTINAL RESPONSE INDUCED BY CHEMOTHERAPY]. WANG SHOUZHANG ET AL. chinese acupuncture and moxibustion. 1997;17(1):17 (chi).

1152- gera: 55934/nd/re

THE ANTI-TUMOR EFFECT OF GANODERMA LUCIDUM IS MEDIATED BY CYTOKINES RELEASED FROM **ACTIVATED MACROPHAGES AND T LYMPHOCYTES..**

WANG SY ET AL. int j cancer. 1997;70(6):699-705 (eng). The present study was to ascertain the immunomodulating and anti-tumor effects of Ganoderma (G.) lucidum. Polysaccharides (PS) from fresh fruiting bodies of G. lucidum (PS-G) were isolated and used to potentiate cytokine production by human monocytes-macrophages and T lymphocytes. Our results had shown that the levels of interleukin (IL)-1 beta, tumor necrosis factor (TNF)- alpha, and IL-6 in macrophage cultures treated with PS-G (100 micro/ml) were 5. 1-, 9. 8- and 29-fold higher, respectively, than those of untreated controls. In addition, the release of interferon (IFN)gamma from T lymphocytes was also greatly promoted in the presence of PS-G (25-100 |gs/ml). Furthermore, these cytokine-containing mononuclear cell-conditioned media (PSG-MNC-CM) were found to suppress the proliferation and clonogenicity of both the HL-60 and the U937 leukemic cell lines. DNA labeling and gel electrophoresis showed that treatment with PSG-MNC-CM markedly induced leukemic-cell apoptosis. Flow-cytometric analysis revealed that few (2. 3 ± 0. 8%) apoptotic cells were seen in the control cultures, while PSG-MNC-CM treatment resulted in a significant increase in the apoptotic population both in the HL-60 (38. 3 ± 4. 5%) and in the U937 (44. 5 ± 3. 8%) cells. In addition, 40 to 45% of the treated leukemic cells were triggered to differentiate into mature monocytic cells expressing CD14 and CD68 surface antigens. However, PS-G alone had no such effects even at a higher dose of 400 \gs/ml. Since untreated macrophages and T lymphocytes produced little or no cytokine, and normal MNC-CM did not suppress leukemic cell growth, it was suggestive that the anti-tumor activity of PSG-MNC-CM was derived from the elevated levels of cytokines. Antibody-neutralization studies further revealed that the anti-tumor cytokines in the PSG-MNC-CM were mainly of TNF- alpha and IFN- gamma, and these 2 cytokines acted synergistically on the inhibition of leukemic-cell growth.

1153- gera: 56438/di/ra

MAGNETOTHERAPY OF NEIGUAN IN PREVENTING VOMITING INDUCED BY CISPLATIN. LIU SHAO-XIANG ET AL. international journal of clinical acupuncture. 1997;8(1):39-41 (eng).

1154- gera: 56571/di/ra

[RESEARCH ON THE EFFECT OF DIFFERENT THERAPEUTIC PHASE OF MOXIBUSTION ON CHEMOTHERAPEUTIC RAT BY CTX (abstract).]. SHANG MINGHUA ET AL. acupuncture research. 1997;22(3):172-3

CTA can cause lipo-hyperoxic damage by reducing the activity of antioxydase of Rat. CAT in liver, SOD activity in brain, T-AOC in liver and blood are higher in control group than experimental group | (P<0.01), but MDA in blood and brain are lower in control group than experimental group (P<0.01). It is said moxibustion has good result in anti-oxidising, whose efficacy is closely related with therapeutic phase. In our research, the prophylactic and early-curative effect is better than that of later treatment. So we can conclude that we'd better use moxibustion in chemotherapeutic treatment as soon L at Fusible.

1155- gera: 56590/di/ra

[OBSERVATION ON 17 CASES OF CANCERS OF THE ESOPHAGUS TREATED USING ACU-MOXIBUSTION COMBINED WITH HERBS]. WANG YING. acupuncture research. 1997;22(3):191 (chi*).

1156- gera: 56592/di/ra

THE MOXIBUSTION CONTROLLING THE REACTION OF STOMACH AND INTESTINE CAUSED BY CHEMOTHERAPY (abstract). ZHANG SHUJUN.

acupuncture research. 1997;22(3):193 (eng).

The chemotherapy could cause serious reaction of stomach and intestine. The patient's vomiting could be obviously alleviated by moxibustion on Zhongwan, Neiguan, Suzanli, Qihai points. The moxibustion on above points could alleviate the symptoms, abate the poisonous reaction of chemotherapy, increase the diet, relax stomach, stop the vomiting, activate the function of spleen, benefit Qi and provide the advantage of the further treatment of the patients suffered from

1157- gera: 56614/di/ra

[CLINICAL STUDY ON TREATMENT TO CHEMOTHERAPY CAUSED LEUKOPENIA WITH GEJIANGJIU]. YAO

JUNQING. acupuncture research. 1997;22(3):209 (chi*). 83 cases of cancer patients who were caused leucopenia with chemotherapy were divided into moxibustion chest group, moxibustion back group and medicine group. The result showed that in moxibustion chest group, the total effect rate according to the time in which leukocyte increased and the effective rate to toxic-side effects were 87. 5 % and 79. 54 % respectively, in moxibustion back group they were 90.3 % and 77. 22 % respectively, while in medicine group, they were 40. 0 % and 56.8%. It is proved that Gejiangjiu has good effect in treating chemotherapy caused leucopenia

1158- gera: 56616/di/ra
[CLINICAL OBSERVATION ON MOXIBUSTION AND **CUTTING TREATMENT OF RHINOPHARYNGEAL** CARCINOMA AND MOXIBUSTION SENSATION]. CHEN MIAOHE. acupuncture research. 1997;22(3):211 (chi).

1159- gera: 56729/di/ra

IMMUNOREGULATORY ACTION OF ACUPUNCTURE AND MOXIBUSTION IN PATIENTS WITH CANCER OF LUNGI. CHEN LIANGLIANG ET AL. chinese acupuncture and moxibustion. 1997;17(4):197 (chi).

1160- gera: 56953/di/ra

[CLINICAL OBSERVATION ON THE SYNERGISTIC ACTION OF FUZHENG ZHENGXIAO RECIPE ON RADIOTHERAPY IN LUNG CANCER]. HAO YINGXU ET AL. journal of tcm. 1997;38(2):84 (chi).

1161- gera: 57442/di/re

PAPEL DE LA ACUPUNTURA EN EL TRATAMIENTO DEL DOLOR CRONICO MALIGNO. PUCHE G ET AL. medicina biologica, 1997;2:56-61 (esp.).

The aim of this study was to evaluate the analgesic potency of Acupuncture in patients with incurable cancer, and to demonstrate its additive analgesic effect to conventional drugs. 44 terminal patients under analgesic treatment were treated with Acupuncture. The treatment consisted of 3 Acupuncture sessions weekly during 4 weeks. An analogical I visual scale was employed for the pain evaluation. With the help of this study, it seems have been founded reasonable indications to recognise a consistent and significant analgesic effect Acupuncture for controlling i patients with advanced cancer th chronic pain not controlled by analgesic drugs.

1162- gera: 57802/di/ra

CLINICAL EFFECTIVENESS OF ELECTRO-ACUPUNCTURE THERAPY INTREATING MAXILLOFACIAL TUMOURS. XIN YULING. world journal of acupuncturemoxibustion. 1997;7(4):41-5 (eng).

Electrochemical therapy, ECT, has been used to treat 122 cases of various kinds of tumour, among them, 81 cases were malignant tumours (32 cases facial, 18 cases subaural, 16 cases labial, 15 cases tongue), and the other 41 cases were bening tumours (cavermous hemangioma at facial region 23 cases and in oral cavity 18 cases). Pathological examination of malignant tumours revealed that there were 63 cases of squamous epithelial cancers and 18 cases of adenocarcinoma. Cavermous hemangioma is benign tumour and congenital. Special designed and made platinum needles were inserted into the tumours and the needles were connected to an instrument protucing a direct current for treatment. Voltage used was usually 8 volts with current 60 - 80 mA. The quantity electricity applied was 100 coulombs per 1 cm in diameter of the tumour. The effectiveness of treating 81 cases malignant tumours was: CR 42 cases (51.8%), PR 31 cases (38.3%), NC 5 cases (6.2%) and PD 3 cases (3.7%). CR + PR was 73 cases (90.1 %). The effectiveness of treating 41 cases of benign hemangioma was: CR 38 cases (92.7 %) and PR 3 cases (7.3 %) . One, three and five year survival rates of malignant tumour patients were 95 %, 65.4 % and 37 %, respectively. While all the 41 patients with hemangioma survived over five years after treatment.

1163- gera: 58409/nd/re

USE OF ALTERNATIVE THERAPIES FOR CHILDREN WITH CANCER. FRIEDMAN T ET AL. pediatrics. 1997;100(6):E1

Objective. To compare the use of alternative therapy (AT) in families of children with cancer with its use in those with routine pediatric conditions. Background and Rationale. AT refers to healing practices such as therapeutic massage, acupuncture, and use of medicinal herbs that have become increasingly popular with the general public, but are not widely accepted by the medical profession. Although studies have investigated the use of AT in the families of both healthy children and children with cancer, no comparison of the incidence of its use between these two populations has been published. We hypothesized that AT was used more frequently among the families of children with cancer. Methods. Using a prevalence survey design, we interviewed 81 parents of children with cancer attending a pediatric hematology/oncology clinic and 80 parents of children attending a continuity care clinic for routine check-ups and acute care. We explored the types of AT being used, the reasons for its use, and the frequency with which it was discussed with the patient's physician. Results. 1) Overall, 65% of the cancer group were using AT, compared with 51% of the control group. This was not statistically significant. 2) Prayer, exercise, and spiritual healing were three AT practices most often used by the cancer group, and prayer, massage, and spiritual healing by the control group. 3) Discussion of AT with the physician varied according to group, with 53% of the cancer patients discussing its use; income level, with 59% of parents in the higher income group discussing its use; and ethnicity, with 47% of whites discussing its use. Conclusion. Use of AT is not limited to the families of children with life-challenging illnesses, but is commonly used by those of children with routine pediatric problems. Pediatricians need to be aware that their patients may not tell them about AT practices they are using in addition to prescribed treatment.

1164- gera: 67346/di/ra
TREATING THE UNDESIRABLE EFFECTS OF RADIATION AND CHEMOTHERAPY WITH CHINESE MEDICINE. ROSENBERG Z. journal of chinese medicine. 1997;55:29-30 (eng).

1165- gera: 67751/di/ra

[EFFECT OF ACUPOINT IRRADIATION WITH Q-WAVE] MILLIMETER MICROWAVE ON PERIPHERAL WHITE **BLOOD CELLS IN POST-OPERATIONAL TREATMENT** WITH CHEMOTHERAPY IN STOMACH AND COLORECTAL CANCER PATIENTS]. WU JIAN-GUANG ET AL. chinese journal of integrated traditional and western medicine. 1997;17(5):286 (chi*).

Objective: To explore the biological effect of Q-wave millimeter microwave (QWMM). Methods: The QWMM was used to irradiate the acupoints Xuehai (Sp 10) and Geshu (B 17) in treating post-operational and chemotherapy treated stomach cancer and colorectal cancer patients. The effect of irradiation on chemotherapy affected peripheral white blood cells was observed. 62 cases (stomach cancer 42, colorectal cancer 20) in total were divided into two groups group A, 21 cases (stomach cancer I5, colorectal cancer 6) the irradiation began 10 days after operation, and on the 16th day the chemotherapy combined with irradiation started. Group B had 41 cases (stomach cancer 27, colorectal cancer 14), in which the irradiation began immediately after the occurrence of chemotherapy induced peripheral WBC reduction, which persisted for at least 12 days. Results: The effective rate for the group A and B was 85. 7% (18/21) and 73. 2% (30/41) respectively. The total effective rate of the two groups was 77. 4% (48/62). The effective rate of group A was significantly higher than that of group B, P<0. 01. Conclusion: GWMM irradiation at acupoints could promote the hematopoietic function of bone marrow, and the irradiation performed 1 week before chemotherapy yielded even better protection on

1166- gera: 68314/di/ra

[CLINICAL STUDY ON ACUTE RADIO-ORAL-PHARYNGITIS TREATED WITH LIYANLING]. ZHANG PEI ET AL. journal of traditional chinese medicine.

1997;38(10):611 (chi).

1167- gera: 74280/di/ra

[EXPERIENCE ON EMBRYONAL NEPHROMA TREATED BY TCM]. ZHU ZHUSHENG ET AL. journal of tcm. 1997;38(7):397 (chi).

1168- gera: 74288/di/ra

[COMPARATIVE OBSERVATION ON CHANGES BETWEEN PETECHIA OF NAIL MATRIX AND SUBLINGUAL **COLLATERAL BRANCHES (LUOMAI) IN MALIGNANT** TUMOR]. JIN SHIYING ET AL. journal of tcm. 1997;38(7):426 (chi*).

Matrix peteciae of the nail a distal semilunar purplish zone 2 mm width with retarded reaction to pressing, is mostly seen in lung cancer metastatic cancer in the lungs liver cancer general metastasis of carcinoma and obstructive lung diseases such as corpulmonale, bronchial asthma, chronic bronchitis. In TCM diagnosis all cases belong to blood stasis syndrome the animal model of which revealed three- grade vesselarches. From the first grade, blood vessels run straight out and the blood stream flows like waterfall uneasy to become static. Network with crossing capillaries stemmed out from the second grade in which the blood flows slowly. Its arch was just located at the distal semilunarnail materix tending to form petechiae due to circulatory disturbancein blood stasis type. By synchronous observation on sublingual collateral's, both can be seen as signs for the diagnosis of blood stasis syndrome.

1169- gera: 74399/di/ra

JANALYSIS ON CAUSES OF DEATH OF LIVER CARCINOMA TREATED BY TRADITIONAL REMEDIES, REPORT OF 45 CASES]. YANG ZONGYAN ET AL. journal of tcm. 1997;38(4):231 (chi).

1170- gera: 74454/di/ra

[THREE METHODS OF TREATMENT BY STASIS IN SENILE TREMORI, ZHAO GUOHUA. journal of tcm. 1997;38(5):294

1171- gera: 74460/di/ra

ISURVEY OF STUDY ON INTERVENTAL THERAPY WITH CHINESE MATERIA MEDICA FOR MALIGNANT TUMORI. CHENG JIANHUA. journal of tcm. 1997;38(5):307 (chi).

1172- gera: 74515/di/ra

[DIAGNOSIS AND TREATMENT OF PRECANCEROUS LESION OF ATROPHIC GASTRITIS]. QIAO QIAO. journal of zhejiang college of tcm. 1997;21(6):7 (chi).

1173- gera: 75100/di/ra

[CLINICAL REPORT OF 61 CASES OF PROPHASE OF PATHOLOGIC CHANGE OF CARCINOMA OF STOMACH TREATED WITH CHINESE HERBS]. FENG WUJIN ET AL. china journal of traditional chinese medicine and pharmacy. 1997;12(6):26 (chi).

1174- gera: 87014/di/ra

[A BRIEF HISTORY OF CHEMOTHERAPY FOR MALIGNANT TUMORS]. LI JINGXIAN. chinese journal of medical history. 1997;27(2):68 (chi*).

This paper gives a main development of chemotherapy for malignant tumor from the 1940s~1980s. Beginning from the 40s, nitrogen mustard and sex hormones were used clinically. Several anti-tumor remedies, including methotrexate were found in the 50s. The majority of anti-tumor drugs were discovered in the 60s, meantime, combined regimens were applied in this period. During the 70s, chemotherapeutic program which was rather mature, was established. Problems such as reverse drug resistance, selectively killing tumor cell. differentiation-inducing agent and taking chemical preventive measures were studied through experimental and clinical methods after the 80s.

1175- gera: 87084/di/ra
PAIN OF GASTRIC CARCINOMA TREATED BY ACUPUNCTURE. DANG WEN. international journal of acupuncture. 1997;8(3):241-48 (eng).

1176- gera: 87216/nd/re NONPHARMACOLOGIC MANAGEMENT OF

CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING... KING CR . oncol nurs forum. 1997;24(7 SUP:41-8 (eng). PURPOSE/OBJECTIVES: To review the nonpharmacologic interventions indicated to prevent or control chemotherapyinduced nausea and vomiting. DATA SOURCES: Journal articles. DATA SYNTHESIS: Despite improvements in antiemetic drug therapy, as many as 60% of patients with cancer who are treated with antineoplastic agents experience nausea and vomiting. Anticipatory nausea and vomiting are thought to be caused by the behavioral process of classical conditioning. Most nonpharmacologic interventions that are used to prevent or control nausea and vomiting in patients with cancer are classified as behavioral interventions. Behavioral interventions involve the acquisition of adaptive behavioral skills to interrupt the conditioning cycle. CONCLUSIONS:

Nonpharmacologic interventions appear to be effective in reducing anticipatory and post-treatment nausea and vomiting. IMPLICATIONS FOR NURSING PRACTICE: These behavioral interventions can be effective in reducing anticipatory and post-treatment nausea and vomiting. Oncology nurses must learn these nonpharmacologic techniques and teach their patients to use them in combination with their prescribed antiemetic therapy.

1177- gera: 160676/di/ra

ECR X. chinese acupuncture and moxibustion. 1997;17(6):327-8 (chi).

1178- gera: 57838/di/ra

THE EFFECTS OF CHINESE DRUGS FOR SUPPORTING HEALTHY ENERGY AND REMOVING BLOOD STASIS ON POSTOPERATIVE METASTASIS OF GASTRIC CARCINOMA AND ORNITHINE DECARBOXYLASE. BU PING. journal of traditional chinese medicine. 1998;18(1):3-6 (eng).

32 postoperative cases of gastric carcinoma were treated by traditional Chinese medicine (TCM) drugs for supporting healthy energy and removing blood stasis, and their therapeutic results were compared with those in the control group treated by western medicine. After 6 months of treatment, in the TCM group, the rate of metastatic recurrence was significantly reduced, and the level of ornithine decarboxylase was also markedly lowered. Therefore, it is considered that the action of anti-metastatic recurrence of TCM drugs in postoperative cases of gastric carcinoma is probably related to the lowered activity of ornithine decarboxylase.

1179- gera: 57846/di/ra

CLINICAL STUDY ON ACUPUNCTURE TREATMENT OF STOMACH CARCINOMA PAIN. DANG WEN ET AL. journal of traditional chinese medicine. 1998;18(1):31-8 (eng). Clinical observation on 48 cases of stomach carcinoma pain indicated that acupuncture including filiform needle group and point-injection group had better therapeutic effects in treatment of stomach carcinoma pain when patient's mind was concentrated at the site of disease. After treatment for 2 months, the long-term effective rates of analgesia in both the filiform needle group and the point-injection group were similar to that in the western medicine group, all being about 81% While the long-term markedly effective rates in the two groups were superior to that in the western medicine group. Life quality of the patients in all the groups were improved. The toxic action and side effects caused by chemotherapy were prevented, the high viscous state showed by indexes of blood rheology was improved, and the lowered Cu-Zu-SOD activity in erythrocytes in patients of stomach carcinoma was increased in the filiform needle group and the point-injection group. Based on the results of clinical study, we consider that acupuncture analgesic effect on stomach carcinoma is related to the increase of PLEK, improvement of cellular immune function and the elevation of life

1180- gera: 57868/di/ra

RESPONSE OF HEALTHY INDIVIDUALS TO NINJIN-YOEI-ENHANCEMENT OF NATURAL KILLER CELL ACTIVITY. KAMEI T ET AL. american journal of chinese medicine.

1998;26(1):91-5 (eng).

After administering 15 g/day of Ninjin-Yoei-To (NYT) for one week to healthy people whose NK activity had already been increased by physiological response, a further increase in NK activity was observed after two days. This increased level of NK activity continued during the administration of NYT for a one-week period. The maintaining and reinforcing effect on the immune surveillance system by NYT may be useful for prevention of carcinogenesis.

1181- gera: 57977/nd/re

CANCER CHEMOPREVENTIVE AND THERAPEUTIC ACTIVITIES OF RED GINSENG. XIAOGUANG C ET AL. journal of ethnopharmacology. 1998;60(1):71-8 (eng). Red ginseng extract A and B are the active components of Panax ginseng, a classical traditional Chinese medicine. Among Chinese herbs, red ginseng has been considered as one of the tonics. Many studies indicated that red ginseng could enhance immune function of the human body. The effects of red ginseng extracts on transplantable tumors, proliferation of lymphocyte, two-stage model and rat liver lipid peroxidation were studied. In a two-stage model, red ginseng extracts demonstrated a significant cancer chemoprevention. At 50-400 mg/kg, they could inhibit DMBA/Croton oil-induced skin papilloma in mice, decrease the incidence of papilloma, prolong the latent period of tumor occurrence and reduce tumor number per mouse in a dose-dependent manner. Red ginseng extract B could effectively inhibit the Fe2+/cysteineinduced lipid peroxidation of rat liver microsome, suggesting that red ginseng extract B has a stronger antioxidative effect than that of extract A. The results indicated that red ginseng extracts (approximately 400 mg/kg) could significantly inhibit the growth of transplantable mouse sarcoma S180 and melanoma B16. Red ginseng extracts A (0.5 mg/ml) and B (0.1 and 0.25 mg/ml) might effectively promote the transformation of T lymphocyte, but there was no influence on lymphocyte proliferation stimulated by concanavalin A. This suggests that red ginseng extracts have potent tumor therapeutic activity and improve the cell immune system.

1182- gera: 58058/di/ra

[THE EFFECT OF MILLIMETER WAVE POINT-RADIATION ON TUMOR BY CHANNEL TRANSMISSION]. WU YAOCHI ET AL. shanghai journal of acupuncture and moxibustion. 1998;17(2):15-6 (chi*).

Millimeter wave was conducted into acupoints by a high power and density radiation head and its energy was exerted on tumor through channel transmission. Millimeter wave plus acupuncture was given to 61 cases. A comparison was made with the simple acupuncture group. The results showed that the effects in regulating NK-a, L AK-a and IL-2 alleviating cancer pain, relieving symptoms and promoting leukocytopoiesis were more marked in the treatment group than in the control group.

1183- gera: 58346/di/ra

CORDYCEPS SINENSIS INCREASES THE EXPRESSION OF MAJOR HISTOCOMPATIBILITY COMPLEX CLASS II ANTIGENS ON HUMAN HEPATOMA CELL LINE

HA22T/VGH CELLS. CHIU JEN-HWEY ET AL. american journal of chinese medicine. 1998;26(2):159-70 (eng). Previous studies suggest that down-regulation of the major histocompatibility complex (MHC) antigens on the cell surface of certain tumors results in an escape of immune surveillance. Cordyceps sinensis is well known for its modulatory effect on host immune system. To investigate the modulatory effect of Cordyceps sinensis on MHC class II antigen expression on hepatoma cells, immunostaining with monoclonal antibody (MAb) L243, against the HLA DR region of MHC class II antigens on human hepatoma cell line HA22T/VGH was analyzed by using flow cytofluorimetry. The degree of fluorescence intensity on L243 (+) cells was expressed as relative mean fluorescence intensity (RMFI). The extract of Cordyceps sinensis (VGH-CS-ME-82, 40 µg/ml) was found to increase the MHC class II antigen expression on HA22T/VGH cells with the percentage of L243 (+) cells 40.2 + or - 2.5 and RMFI 6.6 + or - 0.4; whereas cells without treatment disclosed the percentage of L243 (+) cells 17.2 + or - 1.4 and RMFI 5.4 + or - 0.3, respectively (P<0.05). There was a dose-related

increase in the degree of fluorescence intensity in terms of RMFI on VGH-CS-ME-82 induced cells. The RMFI in cells treated with IFN-y 0, 0.2 and 5 ng/ml were 5.4 + or - 0.3, 8.2 + or - 0.4, and 24.9 + or - 1.5, respectively; whereas the RMFI in cells co-incubated with VGH-CS-ME-82 (40 µg/ml) and IFN-y0, 0.2 ng/ml and 5 ng/ml were 6.7 + or - 0.2 (P<0.05), 9.2 + or - 0.9 (p<0.1) and 29.5+ or - 1.2 (p<0.005), respectively. We conclude that VGH- CS-ME-82, either alone or with IFN-y induction, increases the MHC class II antigen expression on hepatoma cell line HA22T/VGH, which will shed light into the present immunotherapy, and make the host immune surveillance more effective against tumor cells with downregulated MHC class II antigen expression.

1184- gera: 58358/di/re

DOCTORS' ATTITUDES TO ACUPUNCTURE-- A NORWEGIAN STUDY. NORHEIM AJ ET AL. soc sci med. 1998;47(4):519-23 (eng).

1466 Norwegian working doctors under 71 y of age were surveyed in February 1994 on their attitudes to acupuncture and experience as acupuncture patients. 1135 doctors responded (response rate: 77%). More than 8% had undergone acupuncture treatment and 38% of these reported benefit from the treatment. Over 53% would realistically consider acupuncture if they got problems or diseases where acupuncture treatment could be an alternative. More than 38% recommend acupuncture treatment to their migraine patients. More than four out of five doctors would not try to interfere with a patient's wish to try acupuncture treatment for cancer. 81% said that acupuncture is, or should be integrated in the national health care system. More general practitioners held this view than other doctors (p < 0.001). Positive attitudes were strongest among doctors who either had already undergone acupuncture treatment or intended to do so. If this development continues, acupuncture could be an integrated part of the national Norwegian health care system in the

1185- gera: 58371/nd/re

ALTERNATIVE CARE. PATIENT CHOICES FOR ADJUNCT THERAPIES WITHIN A CANCER CENTER. COSS RA ET AL.

cancer pract. 1998;6(3):176-181 (eng).

Prompted by an increased interest in and awareness of alternative medicine, the Sutter Cancer Center in Sacramento, California, sponsored a telephone survey of its cancer patients. The primary purpose of this 1994 survey was: 1) to determine patient perceptions and attitudes regarding alternative care providers, and 2) to determine whether the Sutter Cancer Center should provide support for these types of therapies to its patients. DESCRIPTION OF STUDY: The Center conducted a 95-item telephone survey of its patients with cancer, using an independent professional research firm. A random sample of 503 adult patients completed the 15-minute telephone survey between January 27 and March 8, 1994. The sample included more women than men (62%, 38% respectively), and patients ranged in age from 18 to 88 years. All respondents had been treated for cancer at the Center within the past 2 years. Survey questions included areas such as cancer diagnosis, awareness of alternative therapies, attitude toward alternative therapies, and perception of oncologists' attitude toward alternative therapies. The analysis of the survey results contained two phases: descriptive analysis and comparative analysis. The descriptive aspect is included in this report. RESULTS: Of the 503 respondents, 82 (16%) had considered utilizing alternative therapy for cancer after a diagnosis was made. Most respondents were moderately familiar with alternative therapy, such as nutrition therapy (59%), herbal therapy (63%), and acupuncture (62%). Only 6% of respondents actually saw a provider of alternative therapies; providers were most frequently nutritionists, counselors, herbalists, and massage therapists. The user patient profile clearly indicates that usage is highest in patients with a diagnosis of at least 1 year. Seventy-five percent reported that they would prefer to receive a referral from their doctors, while 20% would prefer to use a telephone referral line. Two thirds of patients felt that alternative care providers should be encouraged by the medical profession, and 85% indicated that alternative care should be offered at the cancer center as part of oncology treatment. CLINICAL IMPLICATIONS: The results of this survey clearly reflect the

patients' desires to integrate mainstream medicine with some forms of alternative/complementary medicine. Consequently, the Sutter Cancer Center has established a multidisciplinary group of healthcare professionals, including oncologists, nurses, social workers, and alternative practitioners, to evaluate the clinical, psychosocial, and financial impact of integrating wellness/complementary medicine into the existing treatment model at this facility. Providing alternative therapy within a cancer center ensures the availability of both the most advanced conventional treatment and care as well as accurate information and guidance with regard to alternative therapies. This service allows the patient and the cancer care team to focus not only on the patient's physical symptoms, but also on his or her overall quality of life.

1186- gera: 58378/nd/re

THE USE OF COMPLEMENTARY THERAPIES BY BREAST CANCER PATIENTS ATTENDING CONVENTIONAL TREATMENT. CROCETTI E ET AL. eur j cancer.

1998;34(3):324-8 (eng).

The aim of this study was to measure the proportion and characteristics of complementary therapy (CT) users among female breast cancer patients receiving conventional treatment. 473 women who had received surgical intervention for breast cancer in the year of diagnosis were sent a questionnaire for completion, and 242 responded. CT had been used by 16.5% after cancer diagnosis, only 8.7% before. The most commonly used CTs were homeopathy, manual healing method, herbalism and acupuncture. The main reason for using CTs was physical distress. Only a minority was searching for psychological support. 24 users were satisfied with these treatments, and two-thirds would suggest them. Users were significantly younger, more educated, and previous users of CTs than non-users. Adjusting each variable for the effect of the others, only previous use had an independent effect on increasing the probability of being users after

1187- gera: 58384/nd/re

[A NEW STUDY OF PATIENTS WITH CANCER IN UMEA ALTERNATIVE MEDICINE IS NO ALTERNATIVE].

HARDELL L ET AL. lakartidningen. 1998;95(18):2092-95 (swe*).

A questionnaire study comprising 854 cancer patients in the Umea health care region and covering the 10-year period, 1987-96, showed only a few cancer patients to use alternative medicine treatment for their disease. As compared with 19.4 per cent of 144 residents selected from the population register who answered the questionnaire in 1987, 16.8 per cent of the cancer patients reported using alternative treatments in 1987, 14.4 per cent in 1990, and 16.4 per cent in 1996. The commonest forms of alternative medicine used were chiropractic and acupuncture, and the majority of treatments were for pain in the muscles or musculoskeletal system.

1188- gera: 58530/di/ra

COMPLEMENTARY MEDICINE TREATMENT OF CANCER: A SURVEY OF PROVISION. WHITE P. complementary therapies in medicine. 1998;6(1):10-3 (eng).

Background and purpose: There has been a gradual change in the management of cancer patients, with a more holistic approach being adopted. There has also been an increase in the use of complementary therapies within oncology departments in England and Wales. This paper identifies the number of departments offering individual therapies in the management of cancer patients and the types of therapies being offered. It also identifies whether these therapies are practised by inhouse therapists or by external complementary practitioners. Material and methods: Therapeutic radiography managers of the 55 oncology departments in England and Wales were sent a simple, postal questionnaire. The questionnaire was used to identify the complementary therapies being provided by the departments and the different types of practitioners. A pilot study was used to test for ambiguity of questions and the validity of responses. Results: A 100% return rate of the questionnaire identified that 38 oncology departments were offering at least one complementary therapy in the management of cancer patients. Of the 20 therapies identified, six were most commonly used, namely aromatherapy, relaxation therapy, massage,

reflexology, visualisation and acupuncture. The vast majority of therapies were practised by employees of the hospitals in which they were practised, although some therapies wer provided by external complementary practitioners. Conclusions: Complementary therapies have an increasing role in the management of cancer patients, with several therapies being offered. These therapies may raise ethical concerns within the field of oncology, especially with regard to control over their safety and practice.

CRITICAL REVIEW OF 5 NONPHARMACOLOGIC

1189- gera: 58755/nd/re

STRATEGIES FOR MANAGING CANCER PAIN. SELLICK SM ET AL. cancer prev control. 1998;2(1):714 (eng). PURPOSE: Health care professionals at 2 Ontario cancer centres were surveyed to determine their familiarity with, perceptions of and interest in learning more about nonpharmacologic strategies for the management of cancer pain. Evidencebased education sessions were subsequently developed for the 5 strategies in which participants were most interested. This article presents the results of critical literature reviews concerning the effectiveness of the 5 strategies: acupuncture, massage therapy, hypnosis, therapeutic touch and biofeedback. METHODS: The databases MEDLINE (1966 to June 1997), CINAHL (1982 to June 1997) and PsycholNFO Lit (1980 to June 1997) were searched systematically for randomized controlled trials (RCTs) of the 5 nonpharmacologic strategies. The authors' personal files and reference lists of relevant papers and main texts were also searched. The quality of the trials was reviewed according to established criteria. RESULTS: The search yielded 1 RCT of acupuncture, 1 of massage therapy and 6 of hypnosis. The studies of hypnosis suggested that there is much support for its use in the management of cancer pain. The evidence was either lacking or less clear for the other therapies examined.

1190- gera: 58764/di/re

HEALTH-RELATED QUALITY OF LIFE VARIES WITH PERSONALITY TYPES: A COMPARISON AMONG CANCER PATIENTS, NONCANCER PATIENTS AND HEALTHY INDIVIDUALS IN A JAPANESE POPULATION. YAMAOKA K ET AL. qual life res. 1998;7(6):535-44 (eng).

CONCLUSION: Because patients use a wide variety of

nonpharmacologic strategies regardless of their effectiveness, clinicians need to be familiar with available research and able

to discuss those strategies for which the evidence is strong,

weak or nonexistent. More research on the effectiveness of

nonpharmacologic strategies for pain management is needed.

In an attempt to examine differential effects of personality on healthrelated quality of life (HRQoL) without regard to disease type, we used the HRQoL20, a general questionnaire (Japanese original scale) we developed (comprising 20 questions related to physiological, psychological or social HRQoL) and the Eysenck Personality Questionnaire (EPQ), which measures personality traits of extraversion (E) neuroticism (N) and psychoticism (P). The subjects (399 males and 429 females), stomach cancer patients, noncancer patients (who had received acupuncture or moxibustion treatment) and healthy controls, were classified into three personality types. The results indicated that the HRQoL score of the tolerable/tolerant type (high E, low N and high P scorers) was greater than the intolerable/intolerant type (low E, high N and low P scorers) and also the unclassified type (neither of above scorers). The HRQoL correlated positively with the E and P scales and negatively with the N scale, in the case of all subjects, with the exception of N in male cancer patients and E in male noncancer patients. The results supported the hypothesis that the HRQoL varies with personality variables, in that each patient, in different treatment settings, strives for the situation that is congruent with his/her personality to attain a better HRQoL.

1191- gera: 59136/nd/re

PERCUTANEOUS ELECTRICAL NERVE STIMULATION (PENS): A COMPLEMENTARY THERAPY FOR THE MANAGEMENT OF PAIN SECONDARY TO BONY METASTASIS. AHMED HE ET AL. clinical journal of pain. 1998;14(4):3203 (eng).

OBJECTIVE: To evaluate the use of a novel

nonpharmacologic analgesic therapy known as percutaneous electrical nerve stimulation (PENS) in the management of opioidresistant cancer pain. DESIGN: PENS therapy was administered to three cancer patients on three or more occasion using acupuncturelike needle probes that were stimulated for 30 minutes at frequencies of 4100 Hz. RESULTS: Two of the three patients achieved good to excellent pain relief that lasted 2472 hours after each treatment session. CONCLUSION: PENS therapy is a useful supplement to opioid analgesics for the management of pain secondary to bony metastasis in terminal cancer patients.

1192- gera: 66506/di/ra

[INFLÜENCE OF WEIYANXIAO ON PRECANCEROUS **LESION OF HUMAN STOMACH CANCER AND CONTENTS** OF TISSUE AGNOR]. HU LING ET AL. journal of traditional chinese medicine. 1998;39(6):345 (chi).

1193- gera: 66519/di/ra

[PRESENT STATE AND GROWTH IN RESEARCH ON GASTRIC PRECANCEROUS LESIONS]. XIANG BAIKANG. journal of zhejiang college of traditional chinese medicine. 1998;22(2):1 (chi).

1194- gera: 66520/di/ra

[ESTABLISHMENT OF THE MODEL OF THE GASTRIC PRECANCEROUS LESIONS IN RATS]. YAN MAOXIANG ET AL. journal of zhejiang college of traditional chinese medicine. 1998;22(2):3 (chi).

1195- gera: 66542/di/ra

[TREATING 33 CASES OF CEREBRAL GLIOMA WITH MODIFIED XIAOLIU DECOCTION]. LI WENHAI ET AL. journal of shandong university of traditional chinese medicine. 1998;22(4):283 (chi).

1196- gera: 66593/di/ra

[CLINICAL STUDY ON PREVENTING AND TREATING CHEMOTHERAPY INDUCED NAUSEA AND VOMITING **USING SUPPLEMENTED INULA-OCHRAE DECOCTION].** WANG YAFEI ET AL. chinese journal of integrated traditional and western medicine. 1998;18(5):273 (chi*). Objective: To observe supplemented Inula-Ochrae Decoction (SIOD) in preventing and treating nausea and vomiting induced by chemotherapy for patients with malignant tumour. Methods: Seventy-two patients were divided into two groups, the patients in test group took SIOD and in control group using ondensetron, and the efficacy of SIOD in preventing and treating chemotherapy induced nausea and vomiting were studied prospectively with self-intersection approach. Results: The effective rate of treating vomiting due to chemotherapy with DDP and without DDP in the test group was 92. 7 % and 93. 5 % respectively, and was higher than that in the control group 87. 8 % and 87.1%, the difference was insignificant statistically (P > 0.05). Conclusions: The prescription SIOD could prevent and treat effectively chemotherapy induced nausea and vomiting without any toxic and side effects, and is inexpensive with high

1197- gera: 66595/di/ra

JAUGMENTED EFFECT OF COMPOSITE RADIX SALVIAE MILTIORRHIZAE INJECTION ON RADIOSENSITIVITY OF LEUKEMIA CELLS]. TAN HUO ET AL. chinese journal of integrated traditional and western medicine.

1998;18(5):279 (chi*).

Objective: To explore the effect of Composite Radix Salviae Miltiorrhizae injection (CSMI) on radiosensitivity of leukemia cells. Methods: Semisolid agar culture and flow cytometry assay were performed for studying the change in radiosensitivity of HL 60 cell line and fresh human leukemia cells after exposing to CSMI. Results: The Do(the inverse of the slope of the survival curve) and SF2(survival fraction at 2 Gy) of HL60 cell line were de creased from 1.53, 0.34 to 0.93, 0.12, respectively and apopotosis rates after radiation were raised significant! by CSMI. Furthermore, the concentration of CSMI and the time of mixed culture with CSMI before irradiation had positive relation to the effects mentioned above. Compared with control group, CSMI could increase the radiation tion-induced apoptosis of fresh leukemia cells (5.89 ± 2. 91% vs 12.05 ± 3. 06%). Conclusion: CSMI could obviously enhance the radiosensitivity of

1198- gera: 66602/di/ra

[RECENT PROGRESS IN ANTI-CANCER BIOACTIVITY RESEARCH OF SOPHORA FLAVESCENS AND ITS ALKALOIDS]. XU XIANGRU ET AL. chinese journal of integrated traditional and western medicine. 1998;18(5):314 (chi).

1199- gera: 66771/di/ra

ITHE EFFECT OF SUPPLEMENTING QI AND NOURRISHING YIN METHOD ON ANTILIPID PEROXIDATION DAMAGE OF THE MICE AFTER RADIATING WITH LEWIS CANCER OF LUNG HEZ TUMOR]. WANG ZHEREN ET AL. liaoning journal of traditional chinese medicine. 1998;25(6):286 (chi).

1200- gera: 67134/di/ra
TCM TREATMENT OF CHEMOTHERAPY-INDUCED FEVER IN LEUKEMIA PATIENTS. HAN QING ET AL. journal of traditional chinese medicine. 1998;18(2):91-3 (eng).

1201- gera: 67211/di/ra

IEFFECT OF ELECTROACUPUNCTURE ON BRAINSTEM EVOKED POTENTIALS OF CONGENITAL DULL-WITTED PATIENTS]. FENG HULAN ET AL. acupuncture research. 1998;23(2):101 (chi*).

Results: 1) The average survival days (>38 days)of test group were significantly longer than that of control group (14.5). The average survival rates of 20 to 70 days were also significantly different. 2) Tumor body: The tumor of test group became necrosis after treatment. It was absorbed and was replaced by scar at last. The tumor of control group enlarged continually until the rats died. 3) Mechanism: The DC electrical needling could make tumor tissue electrolysis. During the treatment, the seriously changed pH was the key role that killed tumor cells. The pH value around positive pole decreased to 2 while that around negative pole increased to 12. The tumor cells degenerated to necrosis gradually due to the changes of internal environment. These results demonstrate that DC electrical needling is both effective and safe for experimental malignant tumor therapy. Its mechanisms need to be further researched.

1202- gera: 67215/di/ra

[THE ČLINICAL STUDY ON THE TREATMENT OF LEUKOPENIA BY MOXIBUSTION]. LU MEI. acupuncture research. 1998;23(2):115 (chi*).

In this paper author adopted the moxibustion to treat thirty malignant patients who were accepting chemotherapy, and the result showed that this therapy could stimulate the hematopoietic function of the marrow, increase the amount of leucocyte. There was a marked difference between moxibustion and non-moxibustion groups. It also could improve sleep and alleviate the reaction of stomach and intestine, and pain.

1203- gera: 67216/di/ra

[INFLUENCE OF ACUPUNCTURE ANALGESIA ON NK CYTOTOXICITY OF TUMOR-BEARED RATS INDUCED BY ELECTRO- MOXIBUSTION]. FANG JIANQIAO ET AL. acupuncture research. 1998;23(2):117 (chi*).

To investigate the correlation between acupuncture analgesia and immunomodulation by acupuncture, the splenic natural killer cell cytotoxicity in normal and tumor beared rats was detected, results of which were compared among electromoxibustion treatment (EM), EM plus D-phenylalanine and Dphenylalanine treatment in acupuncture analgesia responding rats and non-responding rats. The results showed that the NK cytotoxicity was much lower in W256 tumor- beared rats than that in normal group, which was significantly upgraded by electro-moxibustion treatment. There existed individual differences in analgesic effect in rats (acupuncture analgesia responders and non-responders) by the 2 Hz electrostimulation at Zusanli (ST 36). Electro-moxibustion at Guanyuan (CV 4) greatly improved the tumor-beared rat's NK cell activity in AA responders, but failed to regulate that in AA non-responding rats. The NK cytotoxicity was remarkablely

improved near to normal level in AA responders and dgnificantly upgraded in AA non-responders when treated by EM and 250 mg/kg D-phenylalanine intraperitoneal injection. 250 mg/kg D-phenylalanine itself did not modulate the NK cell activity. The work indicates that modulation of NK cell activity by moxibustion is related to the rat's individual differences in acupuncture analgesic effect. Acupuncture analgesia does affect the regulation of NK cytotoxicity by moxibustion.

1204- gera: 67223/di/ra

THE CURATIVE EFFECT OF DIRECT CURRENT ELECTRICAL NEEDLE ON EXPERIMENTAL MALIGNANT TUMOR]. LI ZHAOHUI ET AL. acupuncture research. 1998;23(2):149 (chi*).

The curative effect of direct current (DC) electrical needle on malignant tumor was observed. Forty-eight Wistar rats inoculated with Walker-256 tumor line under right axillary skin were divided into two groups. There were 23 rats in test group and 25 in control group. After a week, the diameter of tumor reached lcm. The rats (23) in test group were treated by DC electrical needle with 5~7V, 10~20mA and I00C. while the rats (25) in control group were not taken any treatment.

1205- gera: 67239/di/ra

IEFFECT OF ACUPOINT-INJUCTION OF AUTOBLOOD AND CHIROPRACTIC ON CELLULAR IMMUNITY IN PATIENTS OF MALIGNANT TUMOR]. QIAN BAOYAN ET AL. chinese acupuncture and moxibustion. 1998;18(11):648 (chi*).

Effect of acupoint-injection of autoblood and chiropractic on cellular immunity in the patient of malignant tumor during radiochemical therapy, and treatment of immunopotentiator was used as control. Results showed that the two methods could increase total T-lymphocyte; afterte after treatment CD3 and ERFC (rosette forming cell) raised significantly (P<0.05), and CD4/CD8 ratio improved significantly (P<0.01) as compared with the control group; and lymphocyte transformation rate enhanced significantly (P<0.01) in the chiropractic group. It is indicated that acupoint-injection of autoblood and chiropractic can increase and reuulate cellular immune function.

1206- gera: 67258/di/ra

[CLINICAL STUDY ON ANALGESIC EFFECT OF ACUPUNCTURE ON CARCINOMATOUAS PAIN]. DAN YU ET AL. chinese acupuncture and moxibustion. 1998;18(1):17 (chi).

1207- gera: 67312/di/ra

ACUPUNCTURE IN RELIEVING OBSTRUCTION OF ESOPHAGUS DUE TO CARCINOMA. PENG HUI-TING. international journal of clinical acupuncture. 1998;9(2):171-

Of the multiple treatments for patients with advanced esophageal carcinoma, acupuncture is always a way to relieve the full obstruction due to carcinoma, with rather satisfactory results. This paper is a report on 32 cases of carcinoma from 1989-1992

1208- gera: 67359/di/ra

JINFLUENCE OF ACUPUNCTURE AND MOXIBUSTION ON THE DAMAGE OF HYPERLIPOXIDE MICE WITH CTX CHEMOTHERAPY]. SHANG MINGHUA ET AL. shanghai journal of acupuncture and moxibustion. 1998;17(1):40

Cyclophosphamide (CTX) can do harm to the antioxidie system of the body, which causes the damage of hyperlipoxide. In our research of SOD (in serum and liver) and MDA (in liver), the results show there are significant differences between the experimental and control groups (the SOD of former is lower, but MDA is higher). From the experiment, it is found that acupuncture can protect the antioxidice system of the body, improve the activity of SOD, decrease the accumulation of metabolism of lipin, lower the side-effect of CTX. But the effects are coordinated with the points. (Zusanli is better than Dazui, Mingmen) stimulated degree (five minutes stimulation is better than ten) and the chosen method (Acupuncture is better than moxibustion).

1209- gera: 67640/di/ra

[CLINICAL STUDY OF CPD4-PDT FOR THE PREVENTION OF POSTOPERATIVE RECURRENCE IN INFILTRATIVE BLADDER CANCER]. LIU SHUSHUO ET AL. chinese journal of integrated traditional and western medicine. 1998;18(1):15 (chi*).

Objectiv: To assess the efficacy of chlorophyll derivative (CPD4)-Photodynamic therapy (PDT) in preventing postoperative recurrence of the infiltrative cancer of the urinary bladder. Methods:Thirty-two patients were treated with CPD4 PDT postoperationally to prevent the recurrence of cancer, all of which being followed up. Results: The recurrence rate was 42 . 1 % in T2 tumors and 69 . 2 % in T3 tumors (P < 0 . 05), and the survival period without tumor has been 19.8 ± 14.8 months in T2 tumors, and 22.67± 19.72 months in T3 tumors (P > 0.05) There was very significant difference in recurrent rate between grade I and grade II, III patients (0 and 66.7 %, P < 0.001) . Conclusion: CPD4-PDT is a safe and effective measure to prevent the recurrence in infiltrative bladder cancer after operation.

1210- gera: 67643/di/ra [CLINICAL STUDY ON TREATMENT OF MODERATE AND ADVANCED STAGE CANCERS BY BAILONG TABLETS COMBINED WITH CHEMOTHERAPY]. ZHANG XINQI ET AL. chinese journal of integrated traditional and western medicine. 1998;18(1):24 (chi*)

Objective: To assess the effects and mechanism of Bailong Tablet combined chemotherapy treatment. Methods: The test group, 41 cancer patients of moderate and advanced stage treated by chemotherapy plus Bailong tablet, and the control group, 22 cancer patients treated by chemotherapy alone. Observe the chemotherapy complete rates (CCR) and the immunological function of the cell in the two groups. Results: The CCR in the test group (92.6%) were higher than that of the control group (77.2%, P < 0.05). However, the toxic sideeffect caused by chemotherapy in the test group were lower than that in the control group (P < 0.05). . CD3 and the ratio of CD4/ CD8 were obviously raised in the test group. The results indicates that the Bailong Tablets had the effects of regulating the immunological function of the T- cell. Conclusions: Bailong tablet could enhance the efficacy and reduce the toxic side-effect of chemotherapy. Modulation of the cell immunological function is possibly its mechanism.

1211- gera: 67646/di/ra

[EFFECT OF TRICHOSANTHIN ON CELL CYCLE AND APOPTOSIS OF MURINE MELANOMA CELLS]. BI LIQI ET AL. chinese journal of integrated traditional and western medicine. 1998;18(1):35 (chi*).

Objective:To study the inhibitory effect of purified trichosanthin component on the proliferation of malignant melanoma. Methods: The effect of purified trichosanthin component on the DNA synthesis, cell cycle and cell apoptosis of murine melanoma cells were detected by flowcytometry when cultured in vitro. Results: The significant G0/ G1 phase arrest was revealed by the increase of cells in G0/G1 phase and decrease of cells in S phase. The obvious apoptosis of melanoma cells was induced by purified trichosanthin component. G0/G1 phase arrest was highly correlated with apoptosis (r = 0.8705). Conclusions: The purified trichosanthin component can markedly inhibit melanoma cells by the suppression of DNA synthesis in S phase and cell mitosis as well as induction of cell apoptosis.

1212- gera: 67836/di/ra

[CLINICAL RESEARCH ON ATTENUATIONG CHEMOTHERAPEUTIC TOXICITY BY ACUPOINT STIMULATION THERAPY]. LIU AN ET AL. shanghai journal of acupuncture and moxibustion. 1998;17(6):8 (chi*). Acupoint stimulation therapy was used to attenuate the

chemotherapeutic toxicity. Among 80 cases, 40 cases were in treatment group and 40 cases in control group. An observation was made of clinical effect of acupoint stimulation therapy on chemotherapeutic toxicity and its safe effect on the body. Consequently, the total effective rate was 81%, which was not significantly different as compared with that in control group (drug group).

1213- gera: 67925/di/ra

ACUPUNTURA, ANTIGENO, ALOPATIA EN LOS TUMORES DEL ESTOMAGO. CAPISTRAN ALVARADO S ET AL. medicina tradicional. 1998;134:23-9 (esp).

1214- gera: 68116/di/ra

SE PUEDE CURAR EL CANCER PRACTICANDO EL QI GONG. WONG KIEW KIT. el pulso de la vida. 1998;16:34-6

1215- gera: 68200/di/ra
EAR ACUPUNCTURE TO CONTROL GASTROINTESTINAL **REACTIONS OF CHEMOTHERAPY: A REPORT ON 86** PATIENTS. DONG CONG-HUI. international journal of clinical acupuncture. 1998;9(4):369-70 (eng). Gastrointestinal (G-I) reactions, one of the main reactions encountered in intraarterial chemotherapy for malignant

tumors, manifest themselves as discomfort in the epigastrium, anorexia, nausea, vomiting, diarrhea or constipation. They may seriously jeopardise the patient's recovery or even the results of the treatment. Symptomatic management is commonly given with unsatisfactory responses. In recent years, we have used ear-acupuncture to combat these problems and obtained good results. We wish to share the results with our colleagues at home and abroad.

1216- gera: 68449/di/ra

CLINICAL STUDY ON ACUPUNCTURE TREATMENT OF SIDE REACTIONS OF RADIOTHERAPY AND **CHEMOTHERAPY FOR MALIGNANT TUMOR.** LI HUA ET AL. world journal of acupuncture-moxibustion. 1998;8(2):8-12 (eng).

Forty-two cancer patients were randomly divided into acupuncture plus radiotherapychemotherapy (acupuncture) group and radiotherapy-chemotherapy (control) group. The indexes observed were the counts of leukocytes and thrombocytes, and the activities of both natural killer (NK) cells and interleukin (IL) - 2. The findings showed that the counts of both leukocytes and thrombocytes in acupuncture group had no significant changes while those of control group lowered considerably, displaying a significant difference between the two groups (P< 0.01). The activities of NK cells and IL - 2 of acupuncture group raised apparently while that of NK cells and IL - 2 in control group lowered markedly. There was a significant difference between the two groups (P < 0. 01). In acupuncture group, radiotherapy and chemotherapy induced symptoms of the digestive system and nervous system were strikingly less than those of the control group, suggesting that acupuncture can pronouncedly ameliorate radiotherapy and chemotherapy induced symptoms of arrest of bone marrow. immunosuppression, digestive system And nervous system.

1217- gera: 69183/di/ra

FIVE-YEAR FOLLOW-UP STUDY OF COMPLEMENTARY THERAPIES IN CANCER PATIENTS. ABSTRACT. RISBERG T ET AL. focus on alternative and complementary therapies. 1998;3(1):4 (eng).

1218- gera: 72528/di/ra

ACUPUNTURA, ANTIGENO, ALOPATIA EN LOS TUMORES DEL ESTOMAGE. CAPISTRAN S. medicina tradicional. 1998;134:23-9 (esp).

1219- gera: 73155/di/ra

EFFECT OF AURICULOACUPUNCTURE ON LIFE QUALITY OF PATIENTS WITH MALIGNANT TUMORS. ABSTRACT. ZENG QIANG ET AL. acupuncture and electrotherapeutics research. 1998;23(3-4):292 (eng).

The prognosis of malignant tumor includes the patient's life quality and life expectancy after the diagnosis of the tumor. How to improve the patients' life quality is one of the important issues to be addressed in clinical practice. Since 1995, we have carried out a randomized controlled study and examined the effects of auriculoacupuncture accompanied by conventional medication on the life quality of patients with malignant tumors. Sixty cases were selected from Hubei hospital of Traditional Chinese Medicine. All cases were diagnosed and confirmed by the Oncology Department of the hospital. These patients were randomly assigned to a group treated by auriculoacupuncture accompanied by conventional

medication (n=30) and a control group treated by conventional medication only (n=30). Acupuncture points selected were shenmen, adrenal, endocrine, sympathetic, spleen, kidney, and the ear points corresponding to the tumor organ. Two points of the helix were selected as the sham acupuncture points. Stainless steel needles were applied for 30 minutes. The life quality of each patient was assessed before and after the treatment. This assessment was consisted of twelve factors: the patients" psychosis, appetite, sleep, countenance, fatigue, pain, side effects of conventional medication, understanding and cooperation of colleagues and family members, self recognition of cancer, daily life, and the attitude toward the treatment. Each factor was graded from 1 to 5, from the worst to the best, respectively. The grades from all twelve factors were summed up to a total score of the individual patient in the two groups. When compared with the patients in the control group, the patients treated with auriculoacupuncture and conventional medication had significantly higher scores for psychosis, appetite, sleep, pain, and side effects of conventional medication (P<0.05: the patient's psychosis, appetite, pain or P<0.01: sleep and side effects of conventional medication) after treatment than before treatment, whereas in the control group these scores did not vary much before and after treatment. The result indicates that auriculoacupuncture accompanied by conventional medication can effectively improve the life quality of patients with malignant tumors.

1220- gera: 73272/di/ra

LOS EFECTOS DE DROGAS CHINAS PARA REFORZAR EL YUAN QI Y ELIMINAR EL ESTASIS SANGUINEO EN EL POSTOPERATORIO DEL CARCINOMA GASTRICO CON METASTASIS Y LA DECARBOXILASA DE ORNITINA. BU

PING. el pulso de la vida. 1998;15:3-6 (esp). Traduction espagnole de: Journal of Traditional Chinese Medicine. 1998, 18(1), 3-6. Se trato a 32 casos de carcinoma gastrico en el postoperatorio con drogas de medicine tradicional china (MTCH) que tenian un efecto tonificante sobre el Yuan Qi y eliminador del estasis sanguineo y se comparo sus efectos terapéuticos con los del grupo de control tratado con farmacos occidentales. Después de 6 meses de tratamiento, en el grupo de MTCH el porcentaje de reaparicion de metastasis habia disminuido significativamente y el nivel de decarboxilasa de ornitina se habia reducido igualmente de forma notable. Por esa razon se supone que el efecto de las drogas de MTCH pare combatir la reaparicion de metastasis en el postoperatorio del carcinoma gastrico es probablemente relacionado con la actividad disminuida de decarboxilasa de

1221- gera: 73461/di/ra

[OBSERVATION ON THERAPEUTIC EFFECTS OF ACUPUNCTURE AND MOXIBUSTION ON RADIATIVE WATERY DIARRHEA]. ZHANG HUIZHEN ET AL. chinese acupuncture and moxibustion. 1998;18(9):531 (chi).

1222- gera: 74301/di/ra

[CARCINOGENOUS PAIN TREATED BY TRANSCUTANEOUS LOCAL PLASTER OF BOSHENG AINING]. YANG MING ET AL. journal of tcm. 1998;39(9):549 (chi).

1223- gera: 74497/di/ra

[REGULATORY EFFECT OF WEI ER KANG ON ONCOGENE]. CHEN ZHIYUN ET AL. journal of zhejiang college of tcm. 1998;22(3):1 (chi*).

The expression of PNCA, EGFR, rasP21, Pl6 were examined immunohistochemmically in rats with gastric mucosa dysplasia. The results showed the overexpression of PCNA, EGFR, rasP21 and hypoexpression of P16 participated in pathogenic process of gastric mucosa dysplasia of rats, preventive treatment with Wei Er Kang could prohibit from the overexpression of PCNA, EGFR, rasp21 and increase the expression of P16 in rats with gastric mucosa dysplasia.

1224- gera: 75611/di/ra

[EXPERIENCE OF LU DUMING IN THE TREATMENT OF RECURRENCE AND TRANSFER OF MAMMARY CANCER BY STRENGTHENING THE BODY RESISTANCE MAINLY]. QUE HUAFA ET AL. **liaoning journal of tcm.** 1998;25(7):297 (chi*).

With inquiring into the pathogenic factors and pathogenesis, differentiation and treatment of common syndromes, health preservation and rehabilitation on recrudescent and metastasis of breast cancer, this thesis has produced Lu Deming's Experience of prevention and treatment, both has stressed the theory of "to promote the health energy to expel evil factors", the co-ordination of differentiation of syndromes and disease, strengthening the body resistance and eliminating pathogenic factors, the portion and the entirety.

1225- gera: 75784/di/ra

[CLINICAL AND EXPERIMENTAL STUDY ON FUZHENG BAOZHEN DECOCTION ENHANCING EFFECT OF RADIO-AND CHEMOTHERAPY FOR MALIGNANT TUMORS]. LI JING ET AL. chinese journal of integrated traditional and western medicine. 1998;18(9):523 (chi*).

Objective: To study on Fuzheng Baozhen Decoction (FZBZD) enhancing effect of radio and chemotherapy for malignant tumors. Methods: One hundred and Seventeen cases of malignant tumors treated with chemotherapy or/ and radiotherapy, 55 cases treated together with FZBZD (group A), comparing with 30 cases treated with radio and chemotherapy plus Zhenqi Fuzbeng Granules (group B) and 32 cases radioand chemotherapy alone (group C). Mechanism of FZBZD enhancing effect of chemotherapy on transplanted human lung adenocarcinoma (SPC-A 1) and sarcoma (S180) bearing mice was conducted. Results: Effective rates (CR + PR) of group A, B, C were 63. 6 %, 43. 3 %, 37. 5 % respectively, that of group A was the best (P < 0.05). The survival quality of life was improved best in-group A (P<0.05). After being treated, the level of the peripheral blood (WBC, Hb, PLT) of group A was the highest (P < 0.05); CD3, CD4, NK activity, interleukin-2 were also improved significantly in group A (P<0.01). Animal experiment showed that FZBZD could improve chemotherapy effect of inhibitory action on tumor growth (P<0.01), increase cAMP/cGMP ratio (P<0.01) by adding cAMP level in cancer tissue, and enhance of Go/G1 phase cells and decrease S phase cells. Conclusions: FZBZD inhibited tumor growth and enhanced the effect of radio and chemotherapy by improving immune and hematopoietic function, cAMP/cGMP ratio anti stagnating tumor cells in G0/G1 phase.

1226- gera: 26378/nd/re

THE SIGNIFICANCE OF PAIN AMONG CHINESE PATIENTS WITH CANCER IN HONG KONG. CHUNG JW ET AL. acta anaesthesiol sin. 1999;37(1):9-14 (eng).

BACKGROUND: The purposes of the survey were to review the significance of pain and its associate factors among Chinese cancer patients in Hong Kong. METHODS: It was a retrospective, cross-sectional survey. One hundred Chinese cancer patients were recruited by convenience from hospices and oncology units in Hong Kong. Data of patients' demographic profile, pain relief measures and pain status were collected by interview. RESULTS: It was found that the presence of current pain among the subjects was 77.0% which was similar to that reported in the United States and United Kingdom. It indicates that the cancer patients in Hong Kong share the same extent of problem as those in the West. This highlights the needs for managing pain as a priority. Unlike the data showed in the West, the pain intensity in the 77% clustered at the lower end of the NRS. Thus, more than threequarters of the subjects had pain but the majority of them had mild pain. This result is contradictory with the findings in the western countries. It is possible that this discrepancy is caused by a number of factors related to culture, family network support, perceptual processes in abstractions and properties of the tools employed in the assessment of pain intensity. Seventy-six percent of the patients had regular analgesics for their pain. Among them, apart from analgesics, seventeen received massage, three resorted to psychological counseling and four used other pain relief method, e.g. acupuncture. There was also a significant difference as to the types of cancer and the current pain intensity (n = 81, X2 = 15.01, P = 0.04). The differences were demonstrated in liver vs. lung cancers, and liver vs. colorectal cancers (Tukey-HSD test, P < 0.05). Those with lung cancer experienced more pain than those with liver cancer. Similarly, those with liver cancer had

more severe pain than those with colorectal cancer. However, there was no association between the presence of metastasis and pain on admission, current pain intensity and pain for the past week. CONCLUSIONS: This survey on the significance of pain demonstrates the extent of the problem in Chinese cancer patients in Hong Kong. It highlights the priority of need in cancer pain management.

1227- gera: 58878/di/ra

[TREATMENT OF 38 CASES OF RADIATION LUNG DAMAGE DURING LATE PHASE]. WANG JUXIANG ET AL. jiangsu journal of tcm. 1999;20(4):17 (chi).

1228- gera: 58886/di/ra

[RECENT CONDITIONS OF CLINICAL RESEARCHES ON TOXIC SIDE-EFFECTS OF RADIOTHERAPY AND CHEMOTHERAPY WITH TRADITIONAL CHINESE MEDICINE]. LI BO ET AL. jiangsu journal of tcm. 1999;20(4):46 (chi).

1229- gera: 58949/di/ra

[DISCUSSION ON TUMOR FROM ANCIENT TIMES TO NOWADAYS]. HE REN. journal of zhejiang college of tcm. 1999:23(1):23 (chi).

1230- gera: 58951/di/ra

[RECENT DEVELOPMENTS AND LOOKING AHEAD IN ALLEVIATING PAIN OF TUMOR WITH ACUPUNCTURE AND MOXIBUSTION]. ZHOU QINGHUI. journal of zhejiang college of tcm. 1999;23(1):57 (chi).

1231- gera: 59019/di/re

ALTERNATIVE THERAPIES FOR ADVANCED PROSTATE CANCER. WHAT SHOULD I TELL MY PATIENTS?. MOYAD MA. urologic clinics of north america. 1999;26(2):413-7 (eng).

Alternative medicine use in the general population has continued to dramatically increase in this decade. The research supporting the use of acupuncture treatment in other areas of medicine is compelling. In addition, herbal therapies, such as PCSPES and St. John's Wort, may play important roles in this disease. Clinicians dealing with advanced prostate cancer need to be introduced to some of these newer treatments so they can be discussed objectively with

1232- gera: 59021/di/re

THE USE OF NONPHARMACOLOGIC TECHNIQUES TO PREVENT POSTOPERATIVE NAUSEA AND VOMITING: A METAANALYSIS. LEE A ET AL. anesth analg.

1999;88(6):1362-9 (eng).

We assessed the efficacy of nonpharmacologic techniques to prevent postoperative nausea and vomiting (PONV) by systematic review. These studies included acupuncture, electroacupuncture, transcutaneous electrical nerve stimulation, acupoint stimulation, and acupressure. Of the 24 randomized trials retrieved by a search of articles indexed on the MEDLINE and EMBASE databases (19801997), 19 were eligible for metaanalysis. The primary outcomes were the incidence of nausea, vomiting, or both 06 h (early efficacy) or 048 h (late efficacy) after surgery. The pooled relative risk (RR) and numbers needed to treat (NNT) were calculated. In children, no benefit was found. Some results in adults were significant. Nonpharmacologic techniques were similar to antiemetics in preventing early vomiting (RR = 0.89 [95% confidence interval 0.471.67]; NNT = 63 [10infinity]) and late vomiting (RR = 0.80 [0.351.81]; NNT = 25 [5infinity]) in adults. Nonpharmacologic techniques were better than placebo at preventing early nausea (RR = 0.34 [0.200.58]; NNT = 4 [36]) and early vomiting in adults (RR = 0.47 [0.340.64]; NNT = 5 [48]). Nonpharmacologic techniques were similar to placebo in preventing late vomiting in adults (RR = 0.81 [0.461.42]; NNT = 14 [6infinity]). Using nonpharmacologic techniques, 20%25% of adults will not have early PONV compared with placebo. It may be an alternative to receiving no treatment or firstline antiemetics. IMPLICATIONS: This systematic review showed that nonpharmacologic techniques were equivalent to commonly used antiemetic drugs in preventing vomiting after surgery. Nonpharmacologic techniques were more effective than placebo in preventing nausea and vomiting within 6 h of

surgery in adults, but there was no benefit in children.

1233- gera: 59030/di/re

HEALTH CARE PROFESSIONALS' FAMILIARITY WITH NONPHARMACOLOGICAL STRATEGIES FOR MANAGING CANCER PAIN. ZAZA C ET AL. psycho-oncology. 1999;8(2):99-111 (eng).

Many studies have confirmed unnecessary suffering among cancer patients, due to the inadequate use of analgesic medication and other effective interventions. While pharmacological treatments are appropriately the central component of cancer pain management, the underutilization of effective nonpharmacological strategies (NPS) may contribute to the problem of pain and suffering among cancer patients. The purpose of this study was to determine health care professionals' familiarity with, and perceptions regarding, NPS for managing cancer pain, and to assess their interest in learning more about NPS as adjuncts to pharmacological analgesics. Two hundred and fourteen health care professionals were surveyed at two cancer treatment centres in Ontario, Canada. The selfreport questionnaire included questions regarding 11 psychological strategies (e.g. imagery) and eight other NPS (e.g. acupuncture). The response rate was 67% (141/214). Subjects were found to be the least familiar with autogenic training, operant conditioning, and cognitive therapy. Other than radiation and surgery, subjects most commonly reported recommending support groups (67%), imagery (54%), music or art therapy (49%) and meditation (43%) for managing cancer pain. Participants were most interested in learning more about acupuncture, massage therapy, therapeutic touch, hypnosis, and biofeedback. Participants were somewhat familiar with most of the 19 NPS presented; however, they use or recommend few NPS for managing cancer pain. Health professionals' interest in NPS has important implications for the supportive care of cancer patients.

1234- gera: 59031/di/re

TRADITIONAL CHINESE MEDICINE, ACUPUNCTURE, AND OTHER ALTERNATIVE MEDICINES FOR PROSTATE CANCER: AN INTRODUCTION AND THE NEED FOR MORE RESEARCH. MOYAD MA ET AL. seminars in urologic oncology. 1999;17(2):103-10 (eng).

There are several other alternative medicines apart from vitamins and minerals that the clinician should be aware of because they have grown in popularity in other fields of medicine. In time, these therapies should impact the arena of urologic oncology. Traditional Chinese Medicine, which includes acupuncture, is an area that has received some attention. The theory behind it can be quite daunting because it is so different from the theory behind Western Medical Science. In addition, exactly how acupuncture can be applied to a patient and its potential use in prostate cancer need to be addressed. Other herbal therapies for the patient experiencing symptoms related to a localized cancer diagnosis also need to be evaluated. St John's Wort for depression and Kava for anxiety are two examples of herbal alternatives that some prostate patients are inquiring about. Finally, Ginkgo biloba has received a great deal of attention in the media for erectile dysfunction, but there is a dearth of evidence in this area and the information that already exists can be misleading until further studies are conducted. Also, it is imperative that additional studies be performed in all of the above subjects as they relate to prostate cancer, but a general survey on alternative medicine use in urologic diseases is needed first before an adequate review of the most popular therapies can be published.

1235- gera: 59105/di/re

ACUPUNCTURE TREATMENT OF VASOMOTOR SYMPTOMS IN MEN WITH PROSTATIC CARCINOMA: A PILOT STUDY. HAMMAR M ET AL. journal of urology. 1999;161(3):853-6 (eng).

PURPOSE: Most men who undergo castration therapy for prostatic carcinoma will have vasomotor symptoms that usually persist for years. Vasomotor symptoms are elicited from the thermoregulatory center, possibly due to a decrease in hypothalamic opioid activity induced by low sex steroid concentrations. Acupuncture treatment in women, which

stimulates hypothalamic opioid activity, alleviates vasomotor symptoms. We report on men treated with acupuncture for relief of vasomotor symptoms after castration therapy. MATERIALS AND METHODS: We asked 7 men with vasomotor symptoms due to castration therapy to receive acupuncture treatment 30 minutes twice weekly for 2 weeks and once a week for 10 weeks. Effects on flushes were recorded in logbooks. RESULTS: Of the 7 men 6 completed at least 10 weeks of acupuncture therapy and all had a substantial decrease in the number of hot flushes (average 70% after 10 weeks). At 3 months after the last treatment the number of flushes was 50% lower than before therapy. Therapy was discontinued after 10 weeks because of a femoral neck fracture in 1 man and after 3 weeks due to severe back pain in 1. CONCLUSIONS: Acupuncture may be a therapeutic alternative in men with hot flushes after

1236- gera: 59154/di/ra

[OBSERVATION ON THERAPEUTIC EFFECT OF POINT-INJECTION OF RECOMBINATIVE HUMAN INTERLEUKIN-2 FOR FEVER DUE TO CANCER]. YAN JIQUI ET AL. chinese acupuncture and moxibustion. 1999;19(7):415 (chi).

1237- gera: 59199/di/ra

POST-RADIOTHERAPY ACUPUNCTURE. CASE REPORT. RAJAN S. acupuncture in medicine. 1999;17(1):64-5 (eng). Shortly following mastectomy and radiotherapy 17 years ago for cancer of the breast, post-radiation brachial plexus neuralgia had developed, together with a weeping radiation ulcer along the scar. The lady also suffered from multiple sclerosis with peripheral sensation loss, such that she was unable to walk properly, often burnt her hands and arms, and could not manage fine movements of the fingers. Simple manual acupuncture treatment gave rapid pain relief, induced healing of the ulcer, and restored peripheral sensation.

1238- gera: 59223/di/ra

[TREATMENT OF 60 CASES OF CARCIMOMA OF LARGE INTESTINE DURING PROGRESSIVE STAGE WITH RETENTION- ENEMA OF CHINESE DRUGS AND CHEMOTHERAPY]. LI YONGJUN ET AL. jiangsu journal of tcm. 1999;20(6):30 (chi).

1239- gera: 59252/di/ra

[TREATMENT OF 36 CASES OF LATE CARCINOMA OF STOMACH WITH "LONGXUE POWDER"]. GU KUIXING ET AL. jiangsu journal of tcm. 1999;20(3):24 (chi).

1240- gera: 59253/di/ra

[TREATMENT OF 27 CASES OF LATE OOPHOROMA WITH CHINESE DRUGS AND CELIAC CHEMOTHERAPY]. XIA QINHUA ET AL. jiangsu journal of tcm. 1999;20(3):26 (chi).

1241- gera: 59405/di/ra

[PROTECTION OF ASTRAGALUS MEMBRANACEUS AGAINST CISPLATIN-INDUCED NEPHROTOXICITY IN MICE]. KONG QINGZHI ET AL. chinese pharmaceutical journal. 1999;34(7):447 (chi*).

1242- gera: 59420/di/ra

[PROFESSOR SONG MINGZHI'S EXPERIENCE IN TREATING TUMOUR IN GYNECOLOGY]. ZHU JIAXIONG. jiangsu journal of traditional chinese medicine. 1999;20(7):10 (chi).

1243- gera: 59421/di/ra

[PROFESSOR TANG HANJUN'S EXPERIENCE IN TREATING COMPLICATIONS OF OPERATION FOR MAMMARY CANCER]. HAN HUIXUE ET AL. jiangsu journal of traditional chinese medicine. 1999;20(7):12 (chi).

1244- gera: 59468/di/ra

[COUNTERACTING EFFECT OF XINO WEI LING ON PRECANCEROSIS OF GASTRIC MUCOSA IN RATS]. WANG WEN ET AL. new journal of tcm. 1999;31(7):39 (chi).

1245- gera: 59479/di/ra

[CLINICAL APPLICATION OF ANIMAL DRUG IN CHILDREN'S MALNUTRITION DUE TO DIGESTIVE

DISTURBANCES]. LIU SHUKUI. shaanxi journal of traditional chinese medicine. 1999;20(7):323 (chi).

1246- gera: 59487/di/ra

[OBSERVATION FOR THE 135 PATIENTS WITH NASOPHARYNGEAL CARCINOMA TREATED BY **COMBINATION OF ZENGYE DECOCTION AND RADIATION** THERAPY]. LI LIANHUA ET AL. traditional chinese medicinal research. 1999;12(3):16 (chi).

1247- gera: 59503/di/ra

[THE HEMORRHEOLOGY ASSAY FOR PATIENTS OF PRIMARY LIVER CANCER AND LIVER CIRRHOSIS WITH BLOOD STASIS SYNDROME]. WANG RONGPING ET AL. fujian journal of tcm. 1999;30(3):2 (chi).

1248- gera: 59521/di/ra
[OBSERVATION OF THERAPEUTIC EFFECT OF CHINESE HERBAL TREATMENT AND PREVENTION OF **GASTROINTESTINAL REACTION IN CHEMOTHERAPY].** ZHOU XIONG-GEN. shanghai journal of tcm. 1999;6:24 (chi*).

Gastointestinal reaction is a common toxic and side effect in malignant tumors treated by chemotherapy. 160 cases of malignant tumors treated by chemotherapy were divided randomly into cisplatinum group and non-cisplatinum. 80 cases in each group were further divided into 40 cases in Group A and 40 cases in Group B. In Group A, Chinese herbal medicines were added in the first course of the treatments and Metoclopranide Tablets and dexamethasone were added in the second course of the treatments. In Group B, only Metoclopramide Tablets and dexamethasone were used. The results showed that vomiting and nausea in the group treated with Chinese herbal medicines decreased

1249- gera: 59612/di/ra

POSSIBILITA DI IMPIEGO DELL'AGOPUNTURA NEL TRATTAMENTO DELLA SINDROME CLIMATERICA NELLE PAZIENTI IN TRATTAMENTO CON TAMOXIFEN. RISULTATI PRELIMINARI. RESUME. TRAPASSO T ET AL. rivista italiana di agopuntura. 1999;95:30-2 (ita).

1250- gera: 59656/di/ra

[ACUPUNCTURE TREATMENT IN A PATIENT WITH IMPAIRED DEFECATION AND URINATION AFTER RADICAL OPERATION FOR UTERINE CERVICAL CANCER]. KEISOU ISHIMARU ET AL. journal of the japan society of acupuncture. 1999;49(1):15-8 (chi*). patient with uterine cervical cancer underwent radical operation and radiotherapy in 1956 and subsequently began to suffer from impaired bowel movements. For the next 40 years, a large amount of cathartics was used to induce defecation, a urination was induced by applying abdominal pressure, but a large volume of urine remained. In this patient, the effects of acupuncture treatment were evaluated using the vesical residual urine volume as measured by abdominal ultrasonography. After acupuncture treatment, defecation became easily, and the amount of cathartics could be reduced. Simultaneously, spontaneous urination became possible, and residual urine disappeared.

1251- gera: 59659/di/ra

[CLINICAL STUDY ON TREATMENT OF RECTAL CARCINOMA WITH CHINESE HERBAL MEDICINE AND HIGH DOSE FLUOROURACILEMULSION VIA RECTAL INFUSION]. WANG CHENGUANG ET AL. chinese journal of integrated and western medicine. 1999;19(7):389-91 (chi*). Objective: To study the clinical significance of rectal infusion of Chinese herbal medicine (CHM) plus high dose fluorouracil emulsion in treating rectal carcinoma. Methods: The 86 patients of rectal carcinoma were randomly divided into CHM plus chemotherapy group and single chemotherapy group, and the changes of T lymphocyte cell subset, natural killer (NK) activity, pathologic picture and clinical symptoms were analyzed statistically before and after treatment. Results: In the single chemotherapy group, the CD3 cell and NK activity decreased after treatment and most of the pert- carcinoma cellular infiltration were in grade I. In the CHM plus chemotherapy group, the CD3, CD4/CD8 and NK activity

restored and CD8 lymphocyte decreased markedly after treatment in comparing with those before treatment (P<0.05, P<0.01), and most of the pert-carcinoma cellular infiltration concentrated in grade III. Conclusion: Chemotherapy alone could suppress cellular immune function significantly, significant immunoregulation and improvement of symptoms (as mucous-bloody stool, frequent defecation) could be obtained by combination therapy of CHM and chemotherapy.

1252- gera: 59660/di/ra [CLINICAL OBSERVATION ON RADIO- OR CHEMOTHERAPY PLUS TRADITIONAL CHINESE MEDICINE IN TREATING BRAIN METASTIC TUMOR]. QUAN DAFANG ET AL. chinese journal of integrated and western medicine. 1999;19(7):392-4 (chi*).

Objective: To observe the clinical efficacy of radio- or chemotherapy plus traditional Chinese medicine (TCM) by Syndrome Differentiation in treating brain metastic tumor. Methods: Forty-one patients were randomized into four groups: Group A treated with chemotherapy plus TCM, Group B with radiotherapy plus TCM, Group C with chemotherapy alone and Group D with radiotherapy alone. The efficacies of the four groups were compared. Results: The short-term response rate, living quality, 1-, 2-, 3- and 4-year survival rate, median survival period and immunity of the Group A and B were significantly higher than those of the Group C and D (P<0.05). Conclusion: Radio- or chemotherapy plus TCM by Syndrome Differentiation has the effect of tumor growth inhibition, survival period extension and living quality enhancement in treating brain metastases.

1253- gera: 59669/di/ra

[EFFECT OF BUILONG RECIPE ON PROLIFERATION PHENOTYPE OF HUMAN GASTRIC CARCINOMA BGC82-3 CELL LINE]. LIU JUN ET AL. chinese journal of integrated and western medicine. 1999;19(7):418-9 (chi*). Objective: To observe the reversive effect of Composite Bailong recipe (BR), a preparation of Chinese herbal medicine, on proliferation phenotype of human gastric carcinoma BGC82-3 cell line. Methods: Observation was conducted by using growth curve, colony on soft agar and nude mice oncogenesis experiment. Results: Growth curve showed the proliferation of BGC82-3 cell was obviously inhibited by BR, the inhibiting rate reached 86% in the 5th day. The colony was few and small on soft agar after treated with BR, only accounted for 52 % as compared with that of nontreated. BR obviously inhibited the oncogenesis of BGC82-3 cells in nude mice, the inhibition rate being 50%. Conclusion: Composite BR has obvious inhibiting action on malignant proliferation of human gastric BGC82-3 cell line.

1254- gera: 59670/di/ra

IPREVENTIVE EFFECT OL RADIX ASTRAGALI ON INSULIN RESISTANCE CAUSED BY TUMOR NECROSIS FACTOR- ALPHA]. LU JIN ET AL. chinese journal of integrated and western medicine. 1999;19(7):420-2 (chi*). Objective: To investigate the preventive effect of Radix Astragali (RA) on insulin resistance caused by tumor necrosis factor-alpha (TNF-alpha). Methods: Normal rats were pretreated with RA or distilled water by Intragastric infusion for one week. Glucose-insulin tolerance test was conducted in the rats 4 h after low dose TNF-alpha injection by caudal vein to estimate the change in insulin sensitivity. Meanwhile, the plasma glucagon, ACTH, blood lipid, and glycogen, triglyceride in tissue were also observed. Results: Exogenous TNF-alpha could induce hyperinsulinemia in normal rats. K value in glucose-insulin tolerance test decreased, serum ACTH, glucagon, blood lipid increased, glycogen content in liver and red quadriceps muscles decreased, the liver triglyceride level increased in the TNF-alpha treated rats. RA could improve all the above-mentioned changes significantly except the blood lipid and triglyceride depots in liver. Conclusion: RA has obvious preventive effect on in sulin resistance caused by TNF-alpha, it may be due to its action in decreasing insulin antagonistic hormones and increasing glycogen synthesis in

1255- gera: 59671/di/ra

[INTEGRATED TCM-WM PREVENTION AND TREATMENT

OF MALIGNANT TUMOR IN 21ST CENTURY]. YU GUQING ET AL. chinese journal of integrated and western medicine. 1999;19(7):423-5 (chi).

1256- gera: 59692/di/ra

IANALYSIS OF 30 CASES OF LUNG CANCER IN MIDDLE-LATE STAGE TREATED WITH KUNLATE INJECTION COMBINED WITH CHEMOTHERAPY]. CHEN ZHIPING. journal of zhejiang college of tcm. 1999;23(4):35 (chi).

1257- gera: 59707/di/ra

[STUDY ON CHANGES OF LINGUAL COATING BEFORE AND AFTER SURGICAL TREATMENT IN STOMACH CARCINOMA]. FAN DONGXIANG ET AL. journal of tcm. 1999;40(7):433 (chi*).

Eighteen cases of cancer of stomach receiving operation with pre-operated white-thick-greasy or yellow - thick - greasy coatings were observed. Results showed that the coating dropped off gradually 1 - 2 weeks after the operation. In the coating, there were mostly hyperkeratosis cells. In yellow coating, the necrotic cells in different degrees were found. Bacteriological exams showed that there were large amount of bacteria in the coating, mostly gram- negative coccus, diplococcus and negative bacilli. It was found that lowdifferentiated cancer and myxo cellular cancer can all be found in yellow thick greasy fur.

1258- gera: 59718/di/ra
[EXPERIMENTAL STUDY ON PROTECTIVE ACTION OF **MEDICINAL MOXIBUSTION AT SHENQUE (CV 8) POINT** ON GASTRIC MUCOSA OF RATS CARRING TUMOR IN CHEMOTHERAPY]. YANG DANHONG ET AL. chinese acupuncture and moxibustion. 1999;19(8):483 (chi*). Therapeutic effect of medicinal moxibustion at "Shenque" (CV 8) point on toxic reaction of digestive tract induced by antineoplastic chemotherapeutic drug 5-flrorouracil (5-Fu) was observed in the rats earring tumor 256. Results indicated that medicinal moxibustion at "Shengue" (CV8) point could raise obviously PGE2 level and volume of blood flow in gastric mucosa, decrease injury index of gastric mucosa, and slightly thicken gastric mucosa as compared with those of chemotherapy group. It is suggested that medicinal moxibustion at "Shenque" point has protective action on injury of gastric mucosa induced by 5-Fu, which is related to increase of PGE2 level and improvement of volume of blood

1259- gera: 59770/di/ra WHAT SHOULD BE KEPT IN MIND FOR MANAGEMENT OF THE TOXIC SIDE-EFFECTS INDUCED BY POSTOPERATIVE CHEMO-AND RADIOTHERAPY FOR OVARIAN TUMOR?. YAO SHIAN. journal of tcm. 1999;19(3):238 (eng).

1260- gera: 59774/di/ra

THERAPEUTIC EFFECTS OF MOXIBUSTION ON EXPERIMENTAL TUMOR. DOU-MONG HAU ET AL. american journal of chinese medicine. 1999;27(2):157-66

This work investigated the therapeutic effects of the improved form of moxibustion (MT) on experimental tumor. Sarcoma 180 cells (1 x 10 puissance 7) were transplanted into the subcutaneous tissue in the breast area of female ICR mice. Mice bearing a tumor were divided into one control and four experimental groups. The experimental groups were treated with MT for 1, 2, 3 and 4 times (abbreviated as MT1, MT2, MT3, MT4 respectively). This study showed that the experimental group treated with MT3 displayed the optimal therapeutic response. The longest mean survival time (87.8 days) within 120 days after treatment of MT3 significantly differed from the control group (60.2 days). In addition, uptake of 86Rb-radioactive tracer significantly decreased in tumors treated with MT3. The improved form of moxibustion used in this study is a reliable model of localized hyperthermia in tumor therapy.

1261- gera: 59784/di/ra

EFFECTS OF BERBERINE ON ARYLAMINE N-**ACETYLTRANSFERASE ACTIVITY IN HUMAN COLON** TUMOR CELLS. LIN JG ET AL. american journal of chinese medicine. 1999;27(2):265-75 (eng.).

Berberine was used to determine loss of viable cells and inhibition of arylamine Nacetyltransferase (NAT) activity in a human colon tumor (adenocarcinoma) cell line. The viable cells were determined by trypan blue exclusion under a light microscope. The NAT activity was measured by high performance liquid chromatography for the amounts of Nacetyl-2- aminofluorene (AAF), N-acetyl-p-aminobenzoic acid (N-Ac-PABA), and the remaining 2-aminofluorene (AF) and paminobenzoic acid (PABA). The viability and NAT activity in a human colon tumor cell line was inhibited by berberine in a dose-dependent manner, i.e., the higher the concentration of berberine, the higher the inhibition of NAT activity and cell death. The NAT activities measured in the intact human colon tumor cells were decreased over 50% by AAF and NAc- PABA production from acetylation of AF and PABA. The apparent values of Km and Vmax of NAT from colon tumor cells were also inhibited by berberine in cytosols and in intact cells. This report is the first to show that berberine did affect human colon tumor cell NAT activity.

1262- gera: 59806/nd/re

[THE USE OF REFLEXOTHERAPY IN THE INITIAL FORMS OF CEREBROVASCULAR INSUFFICIENCY IN PERSONS WHO SUFFERED AS A CONSEQUENCE OF THE ACCIDENT AT THE CHERNOBYL ATOMIC ELECTRIC POWER STATION]. SHCHERBATYI AA ET AL. lik sprava. 1999;3:151-5 (ukr*).

A comprehensive evaluation has been done in 120 patients presenting with primary forms of cerebrovascular insufficiency (PFCVI), who had become victims of Chernobyl accident. PFCVI diagnosis was made on the basis of findings from the clinical investigation, rheoencephalography, electroencephalography, echoencephalography, iridodiagnosis, electropuncture diagnosis as recommended by Nakatani, variation pulsometry, study into the vegetative nervous system. Functional inadequacies were disclosed in the bodily regulatory-adaptive system, specifically, the system of regulation of cerebral circulation. Cerebral symptoms in PFCVI are a reflection, first of all, of the brain nonspecific systems dysfunction. All this was taken into account in working out schemes of treatment for the above- named category of patients, incorporating lasero- and acupuncture. Exposure to the treatments described resulted in a noticeable improvement in 78% of the patients, and improvement in the rest of the series. High efficiency of the proposed approach to the treatment of PFCVI patients having become victims of Chernobyl accident suggests its

1263- gera: 59813/di/re

PAIN-RELIEF AND MOVEMENT IMPROVEMENT BY ACUPUNCTURE AFTER ABLATION AND AXILLARY LYMPHADENECTOMY IN PATIENTS WITH MAMMARY CANCER. HE JP ET AL. clin exp obstet gynecol. 1999;26(2):81-4 (eng).

INTRODUCTION: In the traditional Chinese medicine (TCM), pain and movement restrictions are considered as the result of a blocking of the "Jing-Luo-system" or of a disordered flow of the Jing-Qis in the "Jing-Luo-system". PATIENTS AND METHODOLOGY: In this study 48 patients with mammary cancer after ablation and axillary lymphadenectomy were treated with acupuncture (group I); a control group of 32 patients with the same operation but without acupuncture was compared (group II). RESULTS: The results showed a significantly higher maximum abduction angle (AA) at the first treatment immediately after acupuncture without pain (59.1 degrees vs. 80.4 degrees, p < 0.001) with respect to maximum tolerable pain barrier (73.6 degrees vs. 92.3 degrees, p < 0.001). Between group I (12.3%) and group II (50%) there was a statistically significant difference (p < 0.01) in the appearance of pain in the operation field in the rest position on the 5th postoperative day, while on the 7th postoperative day 8.3% vs. 12.5%) and at the time of discharge a significant difference could not be seen (p > 0.05). The percentage of patients with pain during arm movements showed a statistically significant difference between group I and group II on the 5th postoperative day (81% vs. 100%, p < 0.01), on the 7th postoperative day (43% vs. 96.9%, p < 0.01) and at time of discharge (27.1% vs. 65.6%, p < 0.001). The differences in the

abduction angle between group I and group II were also statistically significant on the 5th postoperative day at indolency (89.3 degrees vs. 74.5 degrees, p < 0.001) with respect to maximum tolerable pain (105.8 degrees vs. 87.4 degrees, p < 0.001). The differences in the abduction angle on the 7th postoperativeday at indolency (97.5 degrees vs. 81.2 degrees, p < 0.001) and at maximum tolerable pain (118.5 degrees vs. 93.4 degrees, p < 0.001) were statistically significant. This statistically significant difference in the maximum abduction angle between group I and group II at indolency (116.1 degrees vs. 91.5 degrees) with respect to maximum tolerable pain (129.4 degrees vs. 112.7 degrees, p < 0.001) could be observed until discharge. DISCUSSION: Acupuncture seems to be an effective treatment to relieve pain and improve arm-movements after ablation and axillary lymphadenectomy. The "Xie- technique" is used at the main acupuncture points and the patient's feeling must be particularly considered. The combination of the different main points with the correctly selected additional acupuncture points--referred to the basic state and the pre- und postoperative state of the patient--are very important for a successful application of acupuncture.

1264- gera: 59835/di/ra

A CLINICAL STUDY ON ACUPUNCTURE FOR PREVENTION AND TREATMENT OF TOXIC SIDE-EFFECTS DURING RADIOTHERAPY AND CHEMOTHERAPY. ZHOU J ET AL. journal of traditional chinese medicine. 1999;19(1):16-21 (eng).

Revue des études cliniques chinoises dans le domaine de la chimiotherapie et radiotherapie.

1265- gera: 59917/di/ra

TRATTAMENTO SECONDO LA MTC DELLA FEBBRE INDOTTA DALLA CHEMIOTERAPIA IN PAZIENTI LEUCEMICI. HAN QING ET AL. rivista italiana di medicina tradizionale cinese. 1999;76(2):37-8 (ita).

La chemioterapia costituisce uno dei presidi principali nel trattamento della leucemia, tuttavia induce spesso febbre elevata che rende impossibile il successo della terapia. Dal gennaio 1992 al febbraio 1996, utilizzammo un trattamento differenziato secondo la MTC in pazienti affetti da leucemia con febbre indotta dalla chemioterapia, ottenendo soddisfacenti risultati terapeutici come riferito di seguito.

1266- gera: 69522/di/ra

[SHORT TERM CURATIVE EFFECT OF QING DI DECOCTION ON PREVENTION AND CURE OF REACTION AFTER REDIATION FOR NASOPHARYNGEAL CARCINOMA]. WANG MEI ET AL. journal of shandong university of traditional chinese medicine. 1999;23(1):53 (chi).

1267- gera: 69983/di/ra

PROGETTO DI IMPIEGO DELLA MEDICINA TRADIZIONALE CINESE (MTC) IN PAZIENTI SOTTOPOSTI A CHEMIOTERAPIA ADIUVANTE PER CARCINOMA MAMMARIO. LI XIAO MING ET AL. rivista italiana di agopuntura. 1999;94:43-8 (ita).

1268- gera: 69987/di/ra

AGOPUNTURA E FARMACOLOGIA CINESE NEL TRATTAMENTO DEGLI EFFETTI COLLATERALI LOCO-REGIONALI DA RADIOTERAPIA IN NEOPLASIE DEL DISTRETTO CERVICO-FACIALE. VALESI MG ET AL. rivista italiana di agopunctura. 1999;94:95-100 (ita).

1269- gera: 70556/di/re

ACUPUNCTURE FOR PATIENTS IN HOSPITAL-BASED HOME CARE SUFFERING FROM XEROSTOMIA. RYDHOLM M ET AL. journal of palliative care.

1999;15(4):20-3 (eng).

A total of 20 patients (17 cancer patients) in late-stage palliative care reporting dryness of mouth and associated problems were treated for 5 weeks with 10 acupuncture treatments. Ten patients were also evaluated for speech problems (articulation) and dysphagia caused by xerostomia. Subjective assessments used Visual Analog Scales (VAS). Acupuncture had a dramatic effect on xerostomia and,

subsequently, on dysphagia and articulation, with subjects showing definite improvement after 5 treatments. Release of neuropeptides that stimulate the salivary glands and increased blood flow are possible explanations for the effects.

1270- gera: 70567/di/ra

A STUDY OF THE EFFECT OF ENERGY HEALING ON IN VITRO TUMOR CELL PROLIFERATION. SHAH S ET AL. journal of alternative and complementary medicine. 1999:5(4):359-65 (eng).

This study examined the effect of energy healing on in vitro tumor cell growth using the cell culture model similar to that embraced by oncologists to assess the effect of chemotherapeutic agents. After selecting an energy healer based on his ability to influence this model, we assessed the effects of energy treatment compared to cells left at ambient temperature and to a control treatment consisting of a medical student mimicking the healer. A chi-square test comparing a medical student's and the practitioner's ability to inhibit tumor cell growth by 15% associates our practitioner with inhibition of tumor cell proliferation (P = 0.02). We also found that the magnitude of change was too close to the assay's intrinsic margin of error, thus making our quantitative data difficult to interpret. Although energy healing appears to influence several indices of growth in in vitro tumor cell proliferation, these assays are limited in their ability to define and prove the existence of this phenomenon. More sensitive biological assays are needed for further

1271- gera: 71936/di/ra

HE-NE LASER ACUPUNCTURE FOR CHEMOTHERAPEUTIC REACTION IN CANCER CASES. LIU XIA. international journal of clinical acupuncture. 1999;10(2):169-71 (eng).

Traitement par laser en alternance de deux groupes de points: a) 6MC, 6RTE, 13F et b) 10RTE, 36E, 20V - Etudes sur les effets secondaires au niveau gastro-intestinal, oro-pharingy, rectal, vesical et sanquin.

1272- gera: 72264/di/ra

AN ANALYSIS FOR DEATH CAUSES IN 45 CASES OF LIVER CANCER TREATED WITH TRADITIONAL CHINESE DRUGS. YANG ZONGYAN ET AL. journal of tcm. 1999;19(2):97-9 (eng).

Among the 165 cases of late-stage liver cancer treated in our hospital, 65 (39.4%) died, with an average survival time of 8.1 months and a median survival time of 7 months. Among the 65 dead patients, 45 were treated with traditional Chinese drugs and 20 with western medicine. The average survival time was 8.4 months in the former and 7.3 months in the latter group. The direct causes of death for the 65 patients were hepatic coma, severe haemorrhage of the upper digestive tract, Heyd's syndrome, hepatorrhexis, respiratory failure, cardiac failure, etc. The incidence rates of haemorrhage of the upper digestive tract and hepatorrhexis in the 45 patients treated with traditional Chinese drugs were obviously lower than those treated with western medicine.

1273- gera: 72507/di/ra

HISTORIA CLINICA. MORENO L. **medicina tradicional.** 1999:147:10-1 (esp).

Paciente varonde 54 ados diagnosticado de colangiocarcinoma bien diferenciado (tumor de Klatskin), acude a la consults el 3-3-98 con la esperanza de ser tratado el intense prurito que le aquejaba debido a las cifras elevadas de bilirrubina en sangre, come una alternative al ya inminente tratamiento morfico.

1274- gera: 72708/di/ra

EXPERIMENTAL STUDY OF CYTOBIOLOGY ON ANTITUMOR EFFECT OF MOXIBUSTION AND IMMUNOMODULATORS. ZHAO CUIYING ET AL. word journal of acupuncture-moxibustion. 1999;9(4):28-1 (eng). In the study, the antitumor effect was observed by employing HAC-tumor-bearing mice treated with direct moxibustion on point Guanyuan (CV 4) (Group M), subcutaneous administration of liposome encapsulated immunomodulators called IMC (Group IMC), and combination of these two methods (Group M+ IMC). Parameters reflecting biological

characteristics of tumor cells, including 5 kinds of lectins, mitotic cycle, expression of C-erbB-2 oncogene and counts of AgNORs were further investigated. The results showed that treatment with combination of moxibustion and IMC could significantly lower three lectins (ConA, LCA, RCA) among these five lectins (BSL, ConA, LCA, RCA, WGA), significantly reduce the expression of C-erbB-2 oncogene, the counts of AgNORs and the percentage of phase S in HAC tumor cells (compared with Group IMC). Moxibustion or IMC alone did render a certain degree of influence on the above-mentioned parameters, although most of changes were not statistically significant. The above-mentioned results indicated that the antitumor efficacy achieved by treatment with combination of moxibustion and IMC was mainly through its influence on biological characteristics of the tumor cells, namely, its reducing effect on DNA synthesis or on the proliferating rate of tumor cells and its influence on other biological characteristics of tumor cells

1275- gera: 72869/di/ra

A CLINICAL STUDY ON ACUPUNCTURE FOR PREVENTION AND TREATMENT OF TOXIC SIDE-EFFECTS **DURING RADIOTHERAPY AND CHEMOTHERAPY.** ZHOU JUNQIN ET AL. journal of tcm. 1999;19(1):16-21 (eng). Yu Cong Tang (Li), a TCM decoction, was used to treat senile dementia. It has the action of invigorating the spleen, reinforcing the kidney, nourishing yin, strengthening yang, improving blood circulation, dredging the channels, removing phlegm and restoring consciousness. CT, EEG, KEG, Hb, PaO2, Tch, TO and 17-OHCS were tested, showing significant differences (P<0.05 or <0.01) before and after the treatment. Remarkable improvement was found in clinical symptoms, and the effective rate was 94.1%. Significant differences were found between the TCM and western medicine (WM) groups in symptom improvement (P<0.05-0.01) and therapeutic results (P<0.001).

1276- gera: 72978/di/ra

ACTUACION DE LA ACUPUNTURA EN EL PACIENTE ONCOLOGICO FUERA DE POSIBILIDAD TERAPEUTICA. SIDORAK M. revista argentina de acupuntura. 1999;89:24-5 (esp).

It is reported the experience of the author with acupuncture in advanced cancer patients. In addition to analgesia (a well-known, disseminated, and stabilised phenomena related to acupuncture), results were observed on lymphedema, skin involvement, peritoneal carcinomatosis, respiratory distress, muscular movements adenomegaly, hepatomegaly, and oral functions. It was also noticed an improvement of depression and performance status levels. Two parameters are followed to include a patient in acupuncture program: pain syndrome presence and a survival over 3 months. Regarding future, it will be necessary to determinate the acupuncture role in management of other patient problems, including those presented in free-disease patients, as it is postmastectomy lymphedema.

1277- gera: 73076/di/ra

[(STUDY ON RELATIONSHIP BETWEEN DEFICIENCY SYNDROME OF TCM AND THE BIOLOGICAL BEHAVIOR IN PATIENTS OF ESOPHAGEAL CARCINOMA).]. SHEN WEIXI ET AL. chinese journal of integrated traditional and western medicine. 1999;19(2):84 (chi).

Objective. To investigate the relation between Deficiency Syndrome (DS) of TCM and the invading depth, lymphnode nietastasis, TNM stage and prognosis prediction of oesophageal carcinoma. Methods: According to, Syndrome Differentiation of TCM, 101 patients of oesophageal carcinoma were evaluated before operation and divided into two groups, the DS group and the non-DS group. Results: Thirty-eight cases in the 101 patients were DS, among them, 14 were Qi-Deficiency, 10 Yin-Deficiency, 10 Qi-yin Deficiency, 2 Qi-and blood Deficiency, 1 Yang-Deficiency and 1 Yin-Yang Deficiency. There were significant differences between the DS group and non-DS group in the invading depth (deeper in DS), metastasis of lymphnode (severer in DS) and TNM stage (later in DS) of oesophageal carcinoma, (P < 0. 05.)'. Conclusion: There is a significant relation between DS and the biological behaviour of oesophageal carcinoma. The prognosis of DS

patients is poorer than that of the non-DS patients.

1278- gera: 73082/di/ra

[(INFLUENCE OF BLOOD-ACTIVATING DRUGS ON ADHESION AND INVASION OF CELLS IN LUNG CANCER PATIENTS).]. ZHANG PEITONG ET AL. chinese journal of integrated traditional and western medicine.

1999;19(2):103 (chi).

Objective: To investigate the influence of some bloodactivating drugs like Tetramethylpyrazine, Tanshinone II A, Hirudin and thrombin on adhesive and invasive behaviour of PGCL3 and PAa cell lines. Methods: Using the abovementioned blood-activating drugs in various concentration to treat PGCL.3 and PAa cells, and the changes in adhesion to fibronectin and invasion in Boyden Chamber of these cells, alone or after interacted with human platelets, were observed. Results- Tetramethylpyrazine, Hirudin and thrombin could increase the adhesion of cells to fibronectin and Tanshinone II A decrease it. Tetramethylpyrazine, Tanshinone II A and Hirudin inhibited the invasion of PGCL3 cells in Boyden Chamber, and thrombin augmented the process. Conclusion: The blood-activating drugs may either inhibit or promote the invasion and metastasis of PGCI, 3 and PAa cells in the light of various conditions.

1279- gera: 73086/di/ra

[(EFFECT OF CHINESE HERBAL MEDICINE ON IMMUNO-INHIBITION CAUSED BY CHEMO- AND RADIO THERAPY).]. BAI JIE ET AL. chinese journal of integrated traditional and western medicine. 1999;19(2):124 (chi).

1280- gera: 73598/di/ra

COMPREHENSIVE PREVENTION AND TREATMENT FOR ESOPHAGEAL CANCER. LU SHIXIN ET AL. chinese medical journal. 1999;112(10):918-23 (eng).

1281- gera: 73621/di/ra

ESPERIENZE IN TEMA DI PRURITO IN CORSO DI EMOPATIE MALIGNE. DI STANISLAO C ET AL. rivista italiana di agopuntura. 1999;20(96):87-5 (ita*).

The causes of neoplastic pruritus are singulary analised in patients who are affected by malignant hematophathies, according both to accademic medicine and to TCM. Are showed the results of a preliminary study based on a little spot of patients, on the acupuncture treatment of this serious disease.

1282- gera: 73674/di/ra

[(STUDY ON PREVENTIVE AND THERAPEUTIC EFFECT OF RADIX SALVIAE MILTIORRHIZAE ON RECURENCE AND METASTASIS OF LIVER CANCER).]. SUN JINGINGET AL. chinese journal of integrated traditional and western medicine. 1999;19(5):292 (chi).

To study the inhibitory effect of Radix Salviae Miltiorrhizae (RSM) on adhesive and invasive ability of SMMC-7721 liver cancer cells, and on the metastasis and recurrence on posthepatectomy liver cancer in nude mice. Methods: Effect of RSM on SMMC-7721 cell membrane intercellular adhesive molecule-1 (ICAM-1) expression was observed by immunofluorescence flow cytometry; effect on invasive ability and of SMMC-7721 cell and the detachment of which attached to fibronectin (FN) by cell migration experiment; effect on adhesion of SMMC-7721 cell with FN by MTT method and effect on adhesion between 7721-7721, 7721lymphocyte and 7721-endothelial cell by cell adhesion experiment. LCI-D20 human liver cancer metastasis model, after hepatectomy, was used to observe the effect of RSM on recurrence and metastasis of liver carcinoma in nude mice. Results: ICAM-1 expression in SMMC-7721 cells incubated with RSM was significantly lower than that in cells did not treated with RSM. RSM could inhibit the invasive ability of SMMC-7721 cell and made the cells already attached to FN exfoliated. It could also inhibit the adhesion of 7721-7721, 7721- lymphocyte and 7721-endothelial cell. And RSM showed preventive and therapeutic effect on intrahepatic and remote metastasis/recurrence of early and late human posthepatectomy liver cacer in nude mice. Conclusion: RSM could inhibit the invasion and adhesion of SMMC-7721 cell and could also prevent and inhibit metastasis and recurrence of human

liver cancer after hepatectomy in nude mice.

1283- gera: 73723/di/ra

[(THE TERATOGENIC, MUTAGENIC EFFECTS AND INJURY OF CYCLOPHOSPHAMIDE AND PROTECTION OF CHINESE HERBAL MEDICINE AGAINST THEM).]. LIANG QIANJIN ET AL. chinese journal of integrated traditional and western medicine. 1999;19(9):571 (chi).

1284- gera: 73944/di/ra

ESTUDIO EXPERIMENTAL SOBRE EL EFECTO DE LA **ACUPUNTURA Y LA MOXIBUSTION EN LA ACTIVACION** DE LA CIRCULACION SANGUINEA Y EL REMOVIMIENTO DEL ESTASIS DE LA SANGRE EN RATONES CON TUMOR TRANSPLANTADO. LIU HONGWEI ET AL. ener qi. 1999;6:22-8 (esp).

Traduction espagnole de: Chinese Acupuncture and Moxibustion, 1997; 11: 659. Réf gera: [69070]. Tomando el raton con tumor transplantado como objeto, se realizo el estudio del efecto de la acupuntura y la moxibustion sobre la activacion de la circulacion sanguinea y el removimiento del éstasis sanguineo, asi como la observacion experimental de la inhibicion de la acupuntura y la moxibustion sobre el tumor y la capacidad superviviente y la funcion inmunologica en el animal con tumor transplantado. Los resultados indicaron que la acupuntura y la moxibustion pueden disminuir la viscosidad de la sangre, acortar acusadamente el tiempo de electroforesis eritrocitica, elevar la tasa fagocitica de macrofago, incrementar el peso timico y la tasa de transformacion linfocitica, prevenir efectivamente la inhibicion de la ciclofosfamida sobre la tasa de transfor macion leucocitica y linfocitica del animal con tumor, asi como reducir el peso del tumor y prolongar el tiempo de multiplicacion del diametro del tumor.

1285- gera: 73960/di/ra

ESTUDIO CLINICO SOBRE LA FUNCION DE LA ACUPUNTURA PARA ALIVIAR EL DOLOR POR PATOLOGIA CANCEROSA. DAN NING ET AL. energi. 1999;5:5-9 (esp).

113 pacientes con diferentes niveles de dolor por patologia cancerosa fueron divididos en tres grupos diferentes: el de acupuntura, el de medicamentos del who para aliviar el dolor divididos en 3 etapas y el de acupuntura combinada con medicamentos. Respecto a la mejoria de los pacientes, el resultado demostro diferencias con claro significado estadistico (p<0,05) entre el grupo de medicamentos (20,59%) y el de acupuntura (48,65%). Lo mismo sucedio respecto a la eficacia total del tratamiento, con claras diferencias (p<0,05) entre el grupo de medicamentos (50,00%) y el de acupuntura (72,97%). Ademas se observo que las diferencias también eran muy notables (p<0,001) entre el grupo de medicamentos y el de medicamentos y acupuntura combinados (95,24%). Todo lo cual demuestra que la acupuntura resulta mejor que los medicamentos para aliviar el dolor, mientras que el tratamiento combinado de acupuntura y medicamentos tiene asimismo una alta eficacia en la clinica.

1286- gera: 73961/di/ra

LA REGULACION DE LA COMPETENCIA INMUNOLOGICA DE RBC (GLOBULOS ROJOS) MEDIANTE ACUPUNTURA EN SHENSHU (V23). LIAO FANGZHEN LILI ET AL. energi. 1999;5:10-11 (esp).

1287- gera: 74087/di/ra [CLINICAL AND EXPERIMENTAL STUDY ON XIAOLIU PINGYI MIXTURE INHIBITING TUMOR METASTASIS OF POSTOPERATION PATIENTS]. WANG ZHIXUE. journal of shandong university of tcm. 1999;23(4):213 (chi*). In view of postoperative tumor patients ' pathogenesis characteristics of body resistance weakened and blood stagnated while toxic materials having not been cleared, Xiao Liu Pingyi mixture was composed for supplementing Qi, activating blood circulation, detoxicating and resolving masses. In clinical study, the patients in stage of I or IIIa whose tumor relapsed or metastasised in one year were treated with Xiaoliu Pingyi mixture plus chemotherapy, compared with the control group which patients were treated with chemotherapy merely. The results showed the rates of metastasis of pulmonary carcinoma, carcinoma ventricule and mammary cancer in the

observation group were 11.11%, 0,10.00%, which were markedly lower than those in the control group (58. 33%, 33. 33%, 45. 45%, P<0. 05 or P < 0. 01). The recurrence rates in the observation group were 27. 78 %, 12. 50 %, 15. 50 % while those in the control group 66.67%, 55.56%, 54.55% (P<0.05). In experimental study, the results showed Xiaoliu Pingyi mixture cut down the ratio of the spontaneous in lung and lymph nodes of Lewis pulmonary carcinoma or H22 hepatic carcinoma in mice and inhibited the growth of implanted subcutaneous tumor or metastasis tumor of mice significantly.

1288- gera: 74093/di/ra

[CLINICAL AND EXPERIMENTAL STUDY ON RELIEVING CANCER PAIN WITH AITONGXIN NOSE DROPS]. NIU HONGMEI. journal of shandong university of tcm. 1999;23(6):430 (chi*).

The therapeutic action of Aitong xin nose drops against pain in light or moderate degree in cancer patients was observed, and its mechanism was studied at the angle of morden medicine. Forty-one cases were treated only with the drug. In 60 minutes after the first dose, the lysis rate of pain in grades 2 to 4 was 73. 17% and the total effective rate was 92. 68%, the mean time of initiatory effect was (4. 20±1. 13) min. The experimental study showed that the naristillae can relieve pain excellently. improve the level of ß-EP in hypothalamus. Moreover, it can prolong the life of tumor-bearing mice, restrain the growth of local tumor and improve proliferation of immune organs.

1289- gera: 74309/di/ra

[QIAN BOWEN'S EXPERIENCES IN TREATMENT OF PRIMARY LIVER CARCINOMA]. WANG CHANGJUN ET AL. journal of tcm. 1999;40(8):460 (chi).

1290- gera: 74337/di/ra

INTRODUCTION TO RESEARCH ON THE ATTENUATION AND SYNERGISM ACTIONS OF TCM ON RADIOTHERAPY OF NASOPHARYNGEAL CANCER]. LIU CHENGLIN ET AL. journal of tcm. 1999;40(5):309 (chi).

1291- gera: 74338/di/ra

[BASIC PATHOLOGY OF ACCUMULATION OF PATHOGENIC COLD, RETENTION OF TOXIC SUBSTANCES, BLOOD STASIS AND LATE GASTRIC CANCER]. ZHOU CHUNXIANG. journal of tcm. 1999;40(12):712 (chi).

1292- gera: 74343/di/ra

ICLINICAL STUDY ON TREATMENT OF SIDE-EFFECTS BY XIAO CHAI HU DECOCTION AFTER INTERVENTIONAL TREATMENT FOR LIVER CANCER]. YE ANNA ET AL. journal of tcm. 1999;40(12):734 (chi*).

Of the 300 inpatients who were diagnosed definitely as primary liver cancer and excision could not be carried out on them. The patient had fever vomit pain in the liver region haemorrhage of digestive tract and other side effects after interventional treatment. 150 cases were treated with Xiao Chai Hu. Decoction and the other 150 cases were treated by simple Western medicine as control. Results showed that Xiao Chai Hu Decoction in therapeutic effects was superior to the simple Western medicine.

1293- gera: 74386/di/ra

[INFLUENCE OF NIUPOZHIBAODAN ON PLASMAL TUMOR NECROTIC FACTOR-ALPHA AND ACTIVITY OF SERUM TRANSAMINASE IN RATS IN SHOCK STATE INDUCED BY ENDOTOXIN]. MA CHAOYING ET AL. journal of tcm. 1999;40(3):172 (chi*)

Shock rat models were made by injecting a one lethal dose Ecold deactivated endotoxin to cause serious infectious shock. For the treatment group. Niupozhibaodan was administered in advance which was compared with normal group and endotoxin- shock group. Results show that in the endotoxin group the plasma TNF-alpha, serum ALT and AST contents were all markedly higher while in the experimental group the increase of the indexes was markedly lower than the shockgroup all with significant difference.

1294- gera: 74468/di/ra

[CLINICAL AND EXPERIMENTAL STUDIES ON TREATMENT OF CARCINOMATOUS PAIN BY QU TONG SPRAYING TINCTURE]. LI YUAN. journal of tcm.

1999;40(10):609 (chi*).

Analgesic effect of Qu Tong Spraying Tincture on 54 cases of carcinomatous pain was observed with 33 cases treated by fortanodyn as control. Random control method was used for analysis of effective rate pain extent position of pain and TCM syndrome differentiation typing. Results indicated that the total effective rate was 79. 63% in the treated group and 72. 73% in the control group, with no statistically significant difference (P > 0.05) between the two groups. Both acetic acid twisting method of mouse and hot-plate method of mouse showed analgesic effect of Qu Tong Spraying Tincture and analgesic experiment on formalin-induced chronic inflammation indicated that the drug had the action of analgesia. anti- inflammation and detumescence. Immunohistologic ABC method showed that the drug had inhibitory action on the formalin - induced increase of SP immunologic positive reaction in posterior horns of L4 -L5 in the rats.

1295- gera: 74579/di/ra

[CLINICAL OBSERVATION ON THE PREVENTION EFFECT OF RECURRENCE OF CARDIAC CANCER AFTER RADICAL OPERATION WITH COMBINED TCM AND WM]. ZHANG KEMING ET AL. shanxi journal of tcm. 1999;15(6):22 (chi*).

Twenty three of cardiac cancer cases after radical operation were treated with combined TCM and WM, and 20 cases of the control group were managed with chemical treatment. Result The survival rate of the first, third and fifth year in the treatment group respectively was 84. 6%, 78. 9%. 33. 3%, while it respectively was 72. 7%,27. 3%, 0 in the control group. The recurrence rate in the treatment group was respectively 30. 8%, 52. 6%, 100%, while in the control group it was 59. 1%, 100%. The difference of the third, fifth year survival and the recurrence rate between the two groups were significant (P<0.05).

1296- gera: 74641/di/ra

[CATGUT IMPLANTATION AT ACUPOINT AND AURICULAR-PLASTER THERAPY IN THE TREATMENT OF GASTROINTESTINAL REACTION CAUSED BY CHEMOTHERAPY]. GAO ZHAN ET AL. shanghai journal of acupuncture and moxibustion. 1999;18(2):5 (chi*). Objective To investigate the effect of catgut implantation at acupoint and auricular-plaster therapy in the treatment of gastrointestinal reaction caused by chemotherapy. Method 178 patients were divided randomly into two groups. The treatment group (98 cases) were treated with catgut implantation at acupoint and auricular-plaster therapy. The control group were only given metoclo-pramide and dexamethasone. Result After a course of treatment. The recovery of gastrointestinal function in treatment group was higher than that of control group (P<0. 05). Conclusion: It is proved that catgut implantation at acupoint and auricular-plaster therapy is an effective therapy for gastrointestinal dysfunction such as nausea and vomiting.

1297- gera: 74669/di/ra

ITHE INFLUENCE OF ELECTROACUPUNCTURE ON THE ACTIVITIES OF T CELL SUBGROUP AND NK CELLS IN PATIENTS WITH TUMOR DURING CHEMOTHERAPY]. CHEN SHAOZHONG ET AL. shanghai journal of acupuncture and moxibustion. 1999;18(5):17 (chi*). Objective: To observe the influence of electropuncture on the activities of T cell subgroup and NK cells in patients with tumor during chemotherapy. Method: During chemotherapy, electropuncture was performed and the activities of T cell subgroup and NK cells were determined before chemotherapy and after 4 courses of electropuncture treatment. Result: Before chemotherapy, CD3 was in normal range but low in value, CD4 was markedly below normal range, and CD8, CD4/CD8 and the number of NK cells were in normal range; after 1 month's chemotherapy accompanied by chemotherapy, each index didn't drop (P>0. 05). Conclusion: Electropuncture can reduce the toxic side effect of chemotherapeutic drugs on immunocytes (T cells and NK cells).

1298- gera: 74670/di/ra

[EFFECT OF AUTOHEMOTHERAPY AND PINCHING-BACK THERAPY ON PERIPHERAL BLOOD OF THE PATIENTS WITH MALIGNANT TUMOR]. QIAN BAOYAN ET AL. shanghai journal of acupuncture and moxibustion. 1999;18(5):19 (chi*).

Objective To observe the effect of autohemotherapy and pinching-back therapy on peripheral blood of the patients with malignant tumor. Method With the method of autohemotherapy and pinching-back therapy, the author observed the peripheral blood of the patients with malignant tumor that had been treated by chemotherapy and radiotherapy. Result: Injecting autologous blood into acupoint Zusanli (S 36) could remarkably increase the total count of WBC and maintain numeration of leukocyte; and compared with the control group, autohemotherapy and pinching-back therapy also obviously increase the total count of RBC and the content of heloglobin. Conclusion: The above results suggested that autohemotherapy and pinching-back therapy had the effects of improving hematopoietic function and enhancing resistance of human being.

1299- gera: 74671/di/ra

[THREE-STAGE ANALGETIC THERAPY PLUS ELECTROPUNCTURE FOR 15 CASES OF CANCER PAIN]. XU JINHUA ET AL. shanghai journal of acupuncture and moxibustion. 1999;18(5):21 (chi*).

Objective and Method: To observe the therapeutic effect and the side effect of electropuncture treatment combined with the triple stage therapy for stopping pain in treating pain caused by cancer before and after the treatment (15 cases). Result: 57. 14% were effective, 35. 71% significantly effective and 7. 11% ineffective; the total effective rate was 92. 86%. Conclusion: Electropuncture treatment combined with the triple stage therapy for stopping pain is effective to control pain caused by cancer and to improve the life quality of the patients. No side effect is observed

1300- gera: 74770/di/ra

SURVEY SHOWS EXTENSIVE ALTERNATIVE THERAPY USE BY BREAST CANCER PATIENTS. CASSILETH B. focus on alternative and complementary therapies. 1999;4(4):184-5 (eng).

Analyse et commentaire de l'article: VandeCreek L et al. Use of alternative therapies among breast cancer outpatients compared with the general population. Alt Ther Health Med, 1999; 5(1): 71-6. Réf gera: [74777].

1301- gera: 75129/di/ra

[THINKING ABOUT THE PATHOGENESIS AND TREATMENT OF CANCER]. YANG XINZHONG ET AL. china journal of traditional chinese medicine and pharmacy. 1999;14(6):57 (chi).

1302- gera: 75181/di/ra

[EFFECTS OF CORDYCEPS MILITARIS ON TAMUNOLOGICAL FUNCTION IN MICE SARCOMA S180 MODEL]. LIU MINPEI ET AL. china journal of traditional chinese medicine and pharmacy. 1999;14(1):25 (chi*). To investigate effects of cordyceps militaris (CM), a kind of composition cultured from cordyceps sinensis (Berk.) Sacc. on immune function in sarcoma S180 bearing mice in vivo. Several immunomodulatory effects of the drug were measured after per os with two dosages of 300mg/kg and 600mg/kg body weight daily for 10 days, respectively. The two doses of CM have a significant enhanced effect in comparison with controls on spleen indes, hemolysin in sera, antibody production of B cells in the spleen, activation of phagocytosis on reticuloendothelial, mononuclear macrophage system and NK cells, and levels of TNF-,ß and IL-2 secretion and so on. CM evokes an antitumor immune response in the mice. It is important for immunomodulation of cancer.

1303- gera: 75270/di/ra

[TREATING METASTATIC CARCINOMA OF BONE WITH PRESCRIPTION OF TONIFING KIDNEY AND ACTIVATING CIRCULATION COMBINED WITH BONE PHOSPHINE]. WANG JUXIANG ET AL. journal of beijing university of tcm. 1999;22(3):61 (chi*).

1304- gera: 75304/di/ra

[DISCUSSION ON THE TUMOR GROWTH INHIBITION ACTION AND INHIBITORY MECHANISM OF KAIXIPING ORAL FLUID ON H222 TUMORIGENIC MICE]. ZHANG LI ET AL. journal of beijing university of tcm. 1999;22(5):60 (chi*).

1305- gera: 75319/di/ra

[FLOW CYTOMETRIC ANALYSIS OF SCHINIFOLINE'S INHIBITION ON RAT HEPATOMA CELL INDUCED BY DEN. BAI JINWEN ET AL. journal of beijing university of tcm. 1999;22(6):34 (chi*).

1306- gera: 75353/di/ra

[XUANFU DAIZHE TANG WITH MODIFICATION APPLIED TO THE TREATMENT OF GASTRO-INTESTINAL SYMPTOMS CAUSED BY CHEMOTHERAPY]. ZHU XIAN ET AL. henan traditional chinese medicine. 1999;19(3):11 (chi).

1307- gera: 75486/di/ra

[RESEARCHING OF CLINIC AND EXPERIMENT ON EFFECT OF YANGZHEN SHENGBAL CAPSULE TO THE CANCER PATIENTS WITH THE SYNDROME OF WHITE CELLS DECREASING AFTER CHEMICAL THERAPY]. ZHENG XIANMING ET AL. yunnan journal of tcm and materia medica. 1999;20(3):13 (chi*).

98 cases of malignant tumor patient with the syndrome of white cells decreasing after chemical therapy were treated with YANGZHEN SHENGBAII Capsule from the pure Chinese Materia and Medica and the result showed that 30 cases were in improvement, 50 cases were hi effect, 18 cases were in inefficiency and the total effective rate was 97. 58% (P<0.005). The experimental researching indicated that the prescription could improve the general statues of the mouse wounded with CTX, increase the karvocyte in bone marrow, raise the index of spleen and control the decreasing

1308- gera: 75487/di/ra

[COMPARATIVE OBSERVATION ON EFFECT OF SHENGLING BAISHU DECOCTION TREATING THE INDIGESTION AFTER CHEMICAL THERAPY]. SHEN LIDA ET AL. yunnan journal of tcm and materia medica. 1999;20(3):24 (chi*).

40 cases of malignant tumor patient with the indigestion after chemical therapy were treated by the way of comparative observation by themselves passing oral mordinline, multienzyne tablet. or SHENGLINC BAISHU Decoction individually. The result showed that the effective rate of Traditional Chinese Medicine group was 90. 2% and the effective rate of Westem Medicine group was 40% . So, there was obviously difference between two groups ($\mathsf{P} < 0.01$) .

1309- gera: 75655/di/ra

[DIFFERENTIAL DIAGNOSIS OF COMMON SYMPTOMS IN TCM (17)-ABDOMINAL MASSES AND DIARRHEA]. ZHU WENFENG ET AL. liaoning journal of tcm. 1999;26(5):199 (chi).

1310- gera: 75665/di/ra

[CHEN LIANQI'S EXPERIENCE WITH DIGESTIVE TUMOURS]. WU QIYAN ET AL. liaoning journal of tcm. 1999;26(6):243 (chi).

1311- gera: 75674/di/ra

[EFFECT OF GLUCOSIDORUM PAEONIAE ALBA ON EXZYMATIC ACTIVITY OF LYMPHOCYTES IN EXPERIMENTAL LIVER CANCER]. CAI YUWEN ET AL. liaoning journal of tcm. 1999;26(6):285 (chi*).

The effects of total glucosides of peony on enzyme activities in Lymphocytes of the Lymph node around the cancer in Rat liver during AFB1 were studied using electron enzyme histochemical method. The results showed: 1) The activities of Mg2+-ATPase. G-6-Pase and SDH in Lymphocytes of the Lymph node around cancer become lower in group of experimental liver carcinogenesis. ATOP could promote enzyme activities in Lymphocytes on the Lymph node around the cancer. which might be one of its immunomodulatory mechanism. These results suggests that promoting enzyme activities in Lymphocytes on the Lymph node constitutes part of the pharmaceutical basis of the treatment of immunologic

inadequacy with malignant tumors, for which "TGP" is an effective prescription.

1312- gera: 75681/di/ra

[CLINICAL STUDY ON DIAGNOSIS OF HEPTOCARCINOM IN ZHUANG AND YAO TRADITIONAL MEDICINE]. LI TONG ET AL. liaoning journal of tcm. 1999;26(12):541 (chi*). The rate of liver cancer in Guangxi Zhuang Autonomies Kegion is higher than another region. There is much clinic experience in treating liver cancer in Zhuang, Yao national medical in ocular diagnosis. We hat observed 800 cases which includes 4 groups treatment group and three contrasting groups. Treatment group by 200 cases of liver cancer, contrasting groups by 200 cases of tumor (no liver cancer) and 200 cases of no tumor and 200 cases of no rmal. With observation eyes, nails. Tongue, etc. There was statistical of GRA results demonstrating that the 7 indice can be served as a comprehesue index for diagnosis of liver cancer.

1313- gera: 75697/di/ra

[EXPERIMENTAL STUDY AND THERAPEUTIC OBSERVATION ON THE ANTI-LUNG CARCINOMA ACTION OF BAISHAN TABLET]. XU DEXIN ET AL. liaoning journal of tcm. 1999;26(1):44 (chi).

1314- gera: 75713/di/ra

[CLINICAL INVESTIGATION OF MALIGNANT TUMORS IN MIDDLE AND ADVANCED PHASES TREATED WITH MIXTURE FOR SUPPORTING THE VITAL TO ELIMINATE TUMOR]. LI YONGHAO ET AL. liaoning journal of tcm. 1999;26(7):300 (chi*).

One hundred and twenty patients with malignant tumour in middle or advanced stage diagnosed in TCM as syndrome of Qi-deficiency plus blood-stasis were randomly divided into two groups, 6C cases w60 cases are treated with Fuzheng Xiaoliu mixture as treatment group, while the other 60 cases with the composed Chinese herbs to eliminate phlegm and dissipate mases as control group. Both groups were treated for one month. The results showed that the improvement rates of main symptoms and living quality in the treatment group were significantly higher than those in the control group. The functions of cellular immune in the treatment group kept stable, while those in the control group reduced. The rate of progressive disease in the treatment group was 3. 33%(2/60), and that in the control group was 15. 00% (9/60) (P<0. 05). The study showed that the Fuzheng Xiaoliu mixture have effect on improving the living quality of tumour patients and inhibiting tumour growth.

1315- gera: 76064/di/ra

[PROGRESS OF CLINICAL AND EXPERIMENTAL STUDY ON MAMMARY CANCER]. CHEN GUOAN ET AL. shanghai journal of tcm. 1999;5:42 (chi).

1316- gera: 76074/di/ra

[CONSTITUTION MUST BE DEFICIENT WHEN THERE IS TUMOR AND THE SPLEEN MUST BE STRENGTHENED FIRST WHEN THERE IS DEFICIENCY-XIU JIA-XIN'S RESEARCH THOUGHTS IN TREATMENT OF GASTRIC CANCER]. SHEN KE-PING ET AL. shanghai journal of tcm. 1999;8:20 (chi*).

In review of Xiu Jia-Xin's clinical and experimental study on malignant tumor, mainly gastric cancer, in the digestive duct for the recent 15 years, this article summarizes his academic viewpoint of " constitution must be deficient when there is tumor and the spleen must be strengthened first when there is deficiency " and introduces his research thoughts and methods in the explanation about the blocking function, anti-cancer effect-enhancing effect and metastasis-resisting function and mechanism of the herbal drugs to strengthen the spleen in occurrence and development of gastric cancer with the theory of molecular biology.

1317- gera: 76119/di/ra

[TREATMENT OF EMOTIONAL DISORDER AFTER MAMMARY CANCER OPERATION ON PATTERN IDENTIFICATION: A REPORT OF 100 CASES]. NI AI-TI ET AL. shanghai journal of tcm. 1999;11:23 (chi).

1318- gera: 76411/di/ra

SUPERFICIAL TALK ABOUT TREATMENT OF FEVER DUE TO CANCER BY DIFFERENTIATION OF SYMPTOMS AND SIGNS IN TCM]. FANG XIAO-HUA ET AL. journal of tcm and chinese materia medica of jilin. 1999;19(4):19 (chi).

1319- gera: 76511/di/ra

[CLINICAL OBSERVATION ON MILLIMETER WAVE MERIDIAN TRANSMISSION TREATING CANCEROUS PAIN]. LIN JIANJUN ET AL. fujian journal of tcm. 1999;30(5):1 (chi).

1320- gera: 77039/di/ra

IINFLUENCE OF ACUPUNCTURE AND MOXIBUSTION ON SERUM CSF ACTIVITY OF PATIENTS WITH LEUKOPENIA CAUSED BY CHEMOTHERAPY]. ZHAO XIXIN ET AL. acupuncture research. 1999;24(1):17 (chi*).

The patients with leukopenia caused by chemotherapy were treated with acupuncture and moxibustion. Before and after treatment, the WBC of peripheral blood was counted with routine examination. Besides, the activity of serum colony stimulating factor (CSF) was detected with cell culture. It is proved that acupuncture and moxibustion have to confirmed effect on leukopenia. One of the mechanisms is that acupuncture and moxibustion can improve CSF activity. In addition, the results indicate that CSF activity is regulated by WBC negative feedback.

1321- gera: 77049/di/ra

[EXPERIMENTAL STUDY OF THE ANTINEOPLASTIC EFFECT OF MOXIBUSTION]. TANG ZHAOLIANG ET AL. acupuncture research. 1999;24(1):60 (chi*)

S180 solid tumor models in mice were established to observe the antineoplastic effects of moxibustion. The study shows that the moxibustion on the point of "Guanyuan" and cutting into the subacutaneous tissue with surgical knife blade after moxibustion on the location of the tumor could hinder the growth of the tumor, thus heightened the survival rate and prolonged the duration of life of the mice. A more than 33% rate of inhibition in treating the tumor was gained. It is also showed that the therapy improved the proliferative reaction of the splenic lymphocyte induced by the ConA and LPS, and improved the activity of IL-1 and IL-2. All these effects have statistical significance as compared with that of the control group, and were equal or superior to that of cyclophosphamide (CY). The results indicate thet the thermotherapeutic effect, the effect of eliminating the stagnation and activating the blood, the heightening of the immune function may all play a role in the moxibustion's antineoplastic effects.

1322- gera: 77066/di/ra

[STUDIES ON THE EFFECT OF MEDICINAL VESICULATION ON HEMATOPOIETIC FUNCTION AND ITS MECHANISM IN MICE]. SUN DELI ET AL. acupuncture research. 1999;24(3):206 (chi*).

In this paper, we have studied the effect of medicinal vesiculation on the hematopoietic function and its mechanism in mice treated by cyclophosphamide (CTX). The results show that CTX can cause serious bone marrow inhibition of mouse, decrease significantly the number of karyocyte of bone marrow and WBC and the production ability of GM-CSF by abdominal cavity macrophage. Medicinal vesiculation or moxibustion of wheat grain form on "Dazhui", "Shenshu" and "Zusanli" has significant effect on bone marrow inhibition caused by chemotherapy. It can promote bone marrow cell proliferation, increase the number of karyocyte of bone marrow and WBC significantly. It can also strengthen abdominal cavity macrophage cell to produce GM-CSF. Furthermore, we discussed the nerve-endocrine-immune mechanism of the effect of medicinal vesiculation.

1323- gera: 77092/di/ra

[THE EXPERIMENTAL RESEARCH ON THE EFFECT OF DRUG-PARTITIONED MOXIBUSTION AT "SHENQUE" ON THE GASTROINTESTINAL FUNCTION OF TUMOR-BEARING CHEMOTHERAPY RAT]. YANG DANHONG ET AL. acupuncture research. 1999;24(4):303 (chi*). In this experiment, the gastrointestinal hormones and pathology were used as indices to research the protective

effect of drug-partitioned moxibustion at "Shenque" (RN8) on the functin of gastrointestinal tract in tumor-bearing chemotherapy rats. The results show that the way drugpartitioned moxibustion at "Shenque" (RN8) can avoid thinning gastric mucosa, prevent the necrosis of epithelial cells and superficial glands from exfoliating, and can also raise the levels of serum gastrin, serum motilin and gastrin of gastric mucosa. As a result, the repair of gastric mucosa is promoted and the gastrointestinal dynamic is adjusted. The experiment has proved that this method can effectively alleviate the gastrointestinal toxic reaction of chemotherapeutic drug (5-Fu) and protect the gastrointestinal functions.

1324- gera: 160288/di/ra
[POINT INJECTION THERAPY AND TCM TREATMENTS IN LEUKOPENIA AFTER CANCER CHEMOTHERAPY], YANG L, LI X. yunnan journal of tcm and materia medica. 1999;20(5):14-5 (chi).

1325- gera: 70440/di/re

LONG-TERM FOLLOW-UP OF PATIENTS TREATED WITH ACUPUNCTURE FOR XEROSTOMIA AND THE INFLUENCE OF ADDITIONAL TREATMENT. BLOM M ET AL. oral diseases. 2000;6(1):15-24 (eng).

OBJECTIVE: To determine the long-term effects of acupuncture in patients with xerostomia of different etiologies and the influence of additional treatment. DESIGN: Retrospective study. SUBJECTS: Seventy patients, between the ages of 33 and 82, with xerostomia due to primary and secondary Sjogren's syndrome, irradiation and other causes were included. The median duration of xerostomia was 32 months. METHODS: Salivary flow rates (SFR) for whole unstimulated and stimulated saliva were used as indicators of effects of treatment. Data from 67/70 patients were analyzed 6 months following a baseline course of 24 acupuncture treatments using two-way ANOVA. Patients data up to 3 years were also compared by those who chose to receive additional acupuncture treatment vs those who did not. These data were analyzed descriptively. RESULTS: Statistically significant differences in unstimulated and stimulated salivary flow rates (P < 0.01) were found in all etiological groups after 24 acupuncture treatments and up to 6 months follow-up compared to baseline. Three years observation of these patients showed that patients receiving additional acupuncture treatment had a consistently higher median SFR in both unstimulated and stimulated saliva compared to patients who chose not to continue acupuncture. The upper limits of the interquartile range were also higher. CONCLUSIONS: This study shows that acupuncture treatment results in statistically significant improvements in SFR in patients with xerostomia up to 6 months. It suggests that additional acupuncture therapy can maintain this improvement in SFR for up to 3 years.

1326- gera: 70447/di/re

RESEARCH ON COMPLEMENTARY/ALTERNATIVE MEDICINE FOR PATIENTS WITH BREAST CANCER: A **REVIEW OF THE BIOMEDICAL LITERATURE. JACOBSON**

JS ET AL. j clin oncol. 2000;18(3):668-83 (eng). PURPOSE: This article reviews English-language articles published in the biomedical literature from 1980 to 1997 that reported results of clinical research on complementary and alternative medical treatments (CAM) of interest to patients with breast cancer. METHODS: We searched 12 electronic databases and the bibliographies of the retrieved papers, review articles, and books on CAM and breast cancer. The retrieved articles were grouped by end point: breast cancer (eg, tumor size, survival), disease-related symptoms, side effects of treatment, and immune function. Within each end point, we organized the articles by modality and assessed study design, findings, and qualitative aspects. RESULTS: Of the more than 1,000 citations retrieved, 51 fit our criteria for review. Of the articles reviewed, 17 were randomized clinical trials; three of these were trials of cancer-directed interventions, two of which involved the same treatment (melatonin). Seven articles described observational studies, and the remainder were reports of phase I or II trials. Relatively few CAM modalities reportedly used by many breast cancer patients were mentioned in articles retrieved by this process. Most articles had shortcomings. CONCLUSION: Although

many studies had encouraging results, none showed definitively that a CAM treatment altered disease progression in patients with breast cancer. Several modalities seemed to improve other outcomes (eg, acupuncture for nausea, pressure treatments for lymphedema). If CAM studies are wellfounded, well-designed, and meticulously conducted, and their hypotheses, methods, and results are reported clearly and candidly, research in this controversial area should acquire credibility both in the scientific community and among advocates of unconventional medicine.

1327- gera: 70473/nd/re

ALTERNATIVE THERAPIES USED BY WOMEN WITH **BREAST CANCER IN FOUR ETHNIC POPULATIONS. LEE** MM ET AL. j natl cancer inst. 2000;92(1):42-7 (eng) BACKGROUND: Interest in alternative therapies is growing rapidly in the United States. We studied the types and prevalence of conventional and alternative therapies used by women in four ethnic groups (Latino, white, black, and Chinese) diagnosed with breast cancer from 1990 through 1992 in San Francisco, CA, and explored factors influencing the choices of their therapies. METHODS: Subjects (n = 379) completed a 30-minute telephone interview in their preferred language. Logistic regression models assessed factors associated with the use of alternative therapies after a diagnosis of breast cancer. RESULTS: About one half of the women used at least one type of alternative therapy, and about one third used two types; most therapies were used for a duration of less than 6 months. Both the alternative therapies used and factors influencing the choice of therapy varied by ethnicity. Blacks most often used spiritual healing (36%), Chinese most often used herbal remedies (22%), and Latino women most often used dietary therapies (30%) and spiritual healing (26%). Among whites, 35% used dietary methods and 21% used physical methods, such as massage and acupuncture. In general, women who had a higher educational level or income, were of younger age, had private insurance, and exercised or attended support groups were more likely to use alternative therapies. About half of the women using alternative therapies reported discussing this use with their physicians. More than 90% of the subjects found the therapies helpful and would recommend them to their friends. CONCLUSIONS: Given the high prevalence of alternative therapies used in San Francisco by the four ethnic groups and

1328- gera: 71173/di/ra

SURVEY ON RADIOSENSITIZING EFFECTS OF CHINESE DRUGS. LIU LIN ET AL. journal of tcm. 2000;20(1):71 (eng). Voir traduction italienne de réf gera: [94776].

the relatively poor communication between patients and

doctors, physicians who treat patients with breast cancer should initiate dialogues on this topic to better understand

patients' choices with regard to treatment options.

1329- gera: 71175/di/re

ANALGESIC EFFECTS OF AURICULAR ACUPUNCTURE FOR CANCER PAIN. ALIMI D ET AL. journal of pain and symptom management. 2000;19(2):81-2 (eng).

1330- gera: 71663/di/re

ACUPRESSURE FOR NAUSEA: RESULTS OF A PILOT STUDY. DIBBLE SL ET AL. oncol nurs forum. 2000;27(1):41-7 (eng).

PURPOSE/OBJECTIVES: To compare differences in nausea experience and intensity in women undergoing chemotherapy for breast cancer between those receiving usual care plus acupressure training and treatment and those receiving only usual care. DESIGN: Single-cycle, randomized clinical trial. SETTING: Outpatient oncology clinic in a major teaching medical center and a private outpatient oncology practice. SAMPLE: Seventeen women participated in the study. The typical participant was 49.5 years old (SD = 6.0), Caucasian (59%), not married/partnered (76%), on disability (53%), born a U.S. citizen (76%), and heterosexual (88%); lived alone (59%); had at least graduated from high school (100%); and had an annual personal income of 50,000 or greater (65%) METHODS: The intervention included finger acupressure bilaterally at P6 and ST36, acupressure points located on the forearm and by the knee. Baseline and poststudy

questionnaires plus a daily log were used to collect data. MAIN RESEARCH VARIABLES: Nausea experience measured by the Rhodes inventory of Nausea, Vomiting, and Retching and nausea intensity. FINDINGS: Significant differences existed between the two groups in regard to nausea experience (p < 0.01) and nausea intensity (p < 0.04) during the first 10 days of the chemotherapy cycle, with the acupressure group reporting less intensity and experience of nausea. CONCLUSIONS: Finger acupressure may decrease nausea among women undergoing chemotherapy for breast cancer. IMPLICATIONS FOR NURSING PRACTICE: This study must be replicated prior to advising patients about the efficacy of acupressure for the treatment of nausea.

1331- gera: 71705/di/ra

CLINICAL OBSERVATION ON TREATMENT OF NON-PARVICELLULAR CARCINOMA OF THE LUNG WITH JIN FU KANG ORAL LIQUID. LIU JIAXANG ET AL. journal of tcm. 2000;20(2):96-00 (eng).

Jin Fu Kang Oral Liquid made of traditional Chinese drugs for supplementing qi and nourishing yin, was developed according to the common symptoms in lung carcinoma with deficiency of both qi and yin. Of the 96 cases in the Jin Fu Kang group, 1 case got complete remission (CR) after treatment, 8 cases partial remission (PR), 52 cases no change (NC), PR+NC covering 63.5%. Of the 52 cases in the group of Jin Fu Kang plus chemotherapy, 11 cases got PR after treatment, 26 cases NC, PR+NC covering 71.2%. Of the 25 cases in the chemotherapy group, 4 cases got PR after treatment, 11 cases NC, PR+NC covering 60.0%. The results show that the therapeutic effectiveness in the Jin Fu Kang group and the group of Jin Fu Kang plus chemotherapy was better than that in the chemotherapy group. The one-year survival rate and the two-year survival rate after treatment in the Jin Fu Kang group were 67.3% and 67.3% respectively; 66.7% and 66.7% in the group of Jin Fu Kang plus chemotherapy; and 40.3% and 0.0% in the chemotherapy group. The improvement of clinical symptoms, increase of body weight and improvement of health situation (KPS marks) after treatment in both the Jin Fu Kang group and the group of Jin Fu Kang plus chemotherapy were better than that in the chemotherapy group. Some indicators of immunology and hemogram after treatment were greatly improved in the Jin Fu Kang group, worse in the chemotherapy group, but no obvious improvement in the Group of Jin Fu Kang plus chemotherapy.

1332- gera: 71715/di/ra

INTERACTION OF PATIENTS' EXPECTATION ON ACUPUNCTURE AS AN ANTIEMETIC ADJUNCT TREATMENT. ABSTRACT. SHEN J ET AL. deutsche

zeitschrift fur akupunktur. 2000;43(1):42 (eng). Background and Objectives: Most patients receiving myeloablative chemotherapy experience severe nausea and vomiting despite aggressive antiemetic pharmacotherapy. Prior studies suggested that acupuncture might be a useful adjunct in reducing chemotherapy-induced side effects. We assessed whether patients' expectation can affect symptomatic outcome in the use of acupuncture in myeloablative chemotherapy. Methods: Women receiving myeloablative chemotherapy for advanced breast cancer were randomly assigned to 3treatment group's (1). Specific low-frequency electroacupuncture "de Qi" at P-6 and ST-36 for 20 minutes daily for 5 days; (2) "non-specific acupuncture" at control points near LU-7 and GB-34 with mock electro-stimulation on the same schedule; (3) no adjunct acupuncture. All subjects received identical four-day chemotherapy and aggressive antiemetic pharmacotherapy. The patient's expectation of treatment effect was measured at baseline prior to the start of chemotherapy. Chemotherapy- induced symptoms were self-recorded daily using a previously validated symptom diary. Results: Patients' expectations were comparable at baseline across treatment groups. For all patients, bivariate analysis of nausea by pretreatment expectation did not reveal significant correlation. A significant effect in nausea symptom was found across treatment groups; further testing found heterogeneity and confirmed an interaction effect between expectation and treatment. Conclusions: We found that patient's -pre-treatment expectation did not strongly impact symptom outcome as a main effect; rather, expectation exerts its influence through an

interaction with the adjunct antiemetic acupuncture treatment.

1333- gera: 71807/di/ra

INTERACTION OF PATIENTS' EXPECTATION ON **ACUPUNCTURE AS AN ANTIEMATIC ADJUNCT** TREATMENT ABSTRACT, SHEN J. forsch komplementarmed. 2000;7:51 (eng).

1334- gera: 72019/di/ra

[CANCER-RESISTANT OF QIGONG IS SCIENCE AND UNREMITTING IS VICTORY]. LI AIZHI. china qigong

science. 2000;75(2):35 (chi).

1335- gera: 72031/di/tp EXPOSE SUR LA LUTTE CONTRE LA DOULEUR CHEZ LES CANCEREUX PAR ACUPUNCTURE. LE PHI. dalat. 2000; JUIN: (fra).

1336- gera: 72185/di/ra

ACUPUNCTURE PLUS EAR-POINTS PRESS IN PREVENTING VOMITING INDUCED BY CHEMOTHERAPY WITH CISPLATIN. XIA YUE-SHAN ET AL. international journal of clinical acupuncture. 2000;11(2):145-8 (eng). The effects on anti-vomiting by using acupuncture plus earpoint pressing was observed in 84 cases by random selfcontrast controls. All cases were subjected to a combined platinum chemotherapy with diamminedichoroplatinum (DDP) 50 mg daily for 3 days. The first round of chemotherapy was applied with acupuncture treatment of medication of metoclopramide, and vice versa in the second round. The results showed that in acupuncture plus ear-point press group (acupuncture group), the effective rate on anti-vomiting was 88.1%, being markedly higher than 35.7% in the metoclopramide medication group (medication group) P<0.01. The effective rate was also found higher in the medication group for late onset of vomiting. It was suggested that acupuncture could relieve vomiting caused by platinum chemotherapy, and with no adverse effects, indicating that it was useful in preventing vomiting caused by chemotherapy in patients with cancer.

1337- gera: 72327/di/ra

THE EFFECT OF GAN FU LE IN INTERVENTIONAL TREATMENT OF HEPATOCARCINOMA. XU KAI ET AL. journal of traditional chinese medicine. 2000;20(3):185-6 (eng).

1338- gera: 72334/di/ra

ADVANCES IN TCM TREATMENT OF PRIMARY HEPATOCARCINOMA. GUAN DONGYUAN ET AL. journal of traditional chinese medicine. 2000;20(3):223-6 (eng).

1339- gera: 72771/di/ra
[THE EFFECT OF WEIKANGFU ON CYTOPATHOLOGY OF GASTRIC TISSUE WHEN TREATING GASTRIC PRECANCEROSIS LESION OF PATIENTS WITH SPLEEN **DEFICIENCY SYNDROMES].** YIN GUANGYAO ET AL. chinese journal of surgery of integrated traditional and western medicine. 2000;6(4):241 (chi*).

1340- gera: 73009/di/ra
ACUPUNCTURE TREATMENT OF SIDE-EFFECTS OF CHEMOTHERAPY. FAN YU ET AL. international journal of clinical acupuncture. 2000;11(1):23 (eng).
Acupuncture has proved to be effective in alleviating the side-

effects of chemotherapeutic agents. The following is a review of the recent advances in this respect. .

1341- gera: 73183/di/ra

CHEMIOTERAPIA E CHEMO-SUPPORT. I PARTE. MACIOCIA G. rivista italiana di medicina tradizionale cinese. 2000;79(1):22-5 (ita).

1342- gera: 73188/di/ra

STUDIO CLINICO SULL'IMPIEGO DELL'AGOPUNTURA NELLA PREVENZIONE E NEL TRATTAMENTO DEGLI EFFETTI COLLATERALI TOSSICI IN CORSO DI RADIOTERAPIA E CHEMIOTERAPIA. ZHOU JUNQIN ET AL. rivista italiana di medicina tradizionale cinese.

2000;79(1):39-41 (ita).

1343- gera: 73479/di/ra

[STUDY ON ACUPOINT-STICKING OF FU ZHENG BAI PLASTER FOR ANTI-SIDE EFFECTS OF CHEMOTHERAPY]. LU MEI ET AL. chinese acupuncture and moxibustion. 2000;20(7):425 (chi*).

Changes of whole blood cells and myelogram, T-lymphocytes and its subgroups, NK cell activity and immunoglobulin before and after acupoint-sticking of Fu Zheng Cheng Hai Plaster were observed in the patient of chemotherapy by using selfcomparative method, which were combined with improvement of clinical symptoms and signs Results: proved that acupointsticking of Fu Zheng Sheng Bai Plaster had functions of strengthening vital-Qi, increasing leukocyte count and decreasing side-effects of chemotherapy.

1344- gera: 73547/di/ra

TREATMENT OF HOT FLUSHES IN BREAST CANCER PATIENTS WITH ACUPUNCTURE. TUKMACHI E.

acupuncture in medicine. 2000;18(1):22-7 (eng). A common treatment for post-menopausal hot flushes is to raise oestrogen levels with hormone replacement therapy. However this option is not considered suitable for breast cancer patients with hormone sensitive carcinoma, since an increase in oestrogen is contraindicated. This leaves little available as an effective conventional therapy. There has been some evidence that acupuncture is a suitable treatment for hot flushes, so a series of 22 consecutive breast cancer patients referred by an oncologist for treatment of hot flushes were given a course of classical body acupuncture with two 20-30min treatment sessions per week for up to 7 weeks. The frequency of recorded hot flushes (both day and night) had improved significantly (p<0.001) by the end of treatment. All patients claimed some benefit and 82% had

1345- gera: 73548/di/ra

DOES ACUPUNCTURE INFLUENCE THE VASOMOTOR SYMPTOMS EXPERIENCED BY BREAST CANCER PATIENTS TAKING TAMOXIFEN? ABSTRACT. CUMINS SM ET AL. acupuncture in medicine. 2000;18(1):28 (eng).

1346- gera: 73782/di/ra

ISTUDY ON THE REGUALTION EFFECT OF CHINESE HERBAL MEDICINE AC960 ON THE EXPRESSION OF P21RAS,BAL -2 AND P53 IN HUMAN HEPATOMA CELL LINE SMMC - 7721]. WANG CANG-JUN ET AL. chinese journal of traditional medical science and technology. 2000;7(1):10 (chi*)

Objective: To study the effects of AC960 on the expression of oncogene and tumor suppressor gene and investigate its anti cancerous mechanism. Methods: Drugcontending serum was derived from rats orally pre - administered with AC960 through gastrogavage, and was added to subcultured humand hepatoma cells (SMMC-7721)while the nominal rat serum were as the control. Cell proliferation was measured with 3H-TdR incorporation .Cell apoptosis and expressions of P53, bel - 2 and p21ras gene protein were analyzed with flow cytometry. Results: After treating with AC960, the inhibitory rate of 3 H - TdR was 33.4% for 48h. There were tipical apoptotic peaks in DNA histigram, the apoptotic rate was 21. 25% for 24h ,27 .77% for 48h, AC960 arrested cell cycling at S - phrase at early and at G0/G1 phrase at later stage Expression of p53 enhanced, bal - 2 and ras reduced . Conclusion: The inhibition of proliferation, induction of apoptosis via effect on the expression of oncogene and tumor suppressor gene might be the main anti-

1347- gera: 74010/di/ra

CANCERS. ZHANG QIN-CHUAN ET AL. international journal of clinical acupuncture. 2000;11(3):199 (eng). One of the leading causes of death, cancer has become the hot spot for medical research in both modern medicine and traditional Chinese medicine. The role of acupuncture and moxibustion is gaining recognition in the medical circle, not only in bettering clinical condition and reducing side effects of radiotherapy and chemotherapy, but also in improving general immunity and inhibiting the growth of cancer or even dissolving the tumors. It is especially suitable for those who are

contraindicated for surgery, radio- and chemotherapy; it serves to improve the quality of their life for sometime at

1348- gera: 74026/di/ra

ACUPUNCTURE TREATMENT OF SEQUELAE AFTER RESECTION OF CEREBRAL TUMORS. HU LI-NING ET AL. international journal of clinical acupuncture.

2000;11(3):261 (eng).

This study reports on the case of a forty-nine-year-old woman with a brain tumor in her left temple. Some symptoms appeared after her subtotal tumor resection. Acupuncture was applied successfully hi conjunction with medical treatment. This case illustrates that acupuncture is effective for patients with brain tumors. We advocate that acupuncture be used widely in the clinical treatment hi order to accelerate rehabilitation and improve the quality of life of patients after surgery. Furthermore, the research activities of acupuncture theory should speed up.

1349- gera: 74256/di/ra

TREATMENT BY ACUPUNCTURE AND DIETARY MODIFICATION. HOT FLUSHES IN BREAST CANCER PATIENTS. TUKMACHI E. journal of chinese medicine. 2000;64:22-31 (eng).

Many women treated surgically for early breast cancer, who then undergo treatment with chemotherapy and/or Tamoxifen and/or ovarian ablation, may have vasomotor symptoms that usually continue for years. Hot flushes are brought out from the thermo-regulatory centre, and are possibly attributable to a decrease in hypothalamic opioid activity produced by low oestrogen concentrations. Acupuncture therapy stimulates hypothalamic opioid activity and relieves hot flushes. Twentytwo breast cancer women with vasomotor symptoms following chemotherapy and Tamoxifen received acupuncture treatment sessions of 20-30 minutes twice weekly for 3-8 weeks, with a detoxifying healthy diet programme and changes in life style. All patients were followed up 3-5 weeks after the last acupuncture session and showed a reduction in the number of hot flushes (average 80% after the completion of treatment course). This study concludes that acupuncture, associated with a dietary programme and healthy life style may be an alternative treatment of choice in breast cancer survivor women suffering from hot flushes following chemotherapy and/or Tamoxifen and deserves

1350- gera: 75078/di/ra

[OBSERVATION ON THERAPEUTIC EFFECT OF INJECTION OF CORD BLOOD INTO ZUSANLI POINT FOR **46 CASES OF LEUKOPENIA CAUSED BY** CHEMOTHERAPY]. JIA ZHENHE ET AL. chinese acupuncture and moxibustion. 2000;20(10):585 (chi).

1351- gera: 75221/di/ra [IMMUNOHISTOCHEMISTRY AND IMAGE ANALYSIS ON THE ANTI-ALCOHOLIC LIVER FIBROSIS FUNCTION OF TIAOGANLIPIFANG IN RAT]. ZHAO LIYUN ET AL. journal of beijing university of tcm. 2000;23(2):25 (chi*).

1352- gera: 75436/di/ra

[EFFECT OF MEDICINAL VESICULATION ON THE HEMATOPOIETIC FUNCTION OF CYCLOPHOSPHAMIDE RAT]. SUN DELI. journal of zhejiang college of tcm. 2000;24(1):74 (chi*).

Objective: To study the effect of medicinal vesiculation on bone marrow inhibition caused by chemotherapy. Methods: Peripheral WBC, bone marrow karyocyte and bone marrow urtrastructure of rats treated by CTX were explored after medicinal vesiculation on "Dazhui", "Shenshu "and "Zusanli". Results: The bone marrow karyocyte and WBC were significantly reduced after ten days treated by CTX, and hematopoiesis cells almost disappeared. Medicinal vesiculation could remarkably promote bone marrow cell proliferation, increase the number of karyocyte of bone marrow and WBC significantly, especially in-group 1. Conclusions: Our studies indicated that medicinal vesiculation proved hematopoietic function of rats treated by chemotherapy, and the amount of stimuli could contribute to this effect. The results above were important to treat inhibition of bone marrow caused by chemotherapy.

1353- gera: 75459/di/ra [TCM PATHOGENESIS AND TREATMENT OF SUPERIOR

VENA CAVA SYNDROME DUE TO CANCER OF LUNG]. LIU YU-LONG. shandong journal of tcm. 2000;19(2):69 (chi*). The essential pathogenesis of superior vena cave syndrome due to cancer of lung are cancer noxiousness, blood stasis and accumulation of fluid-retention in the interior. The main treatment are of counteracting toxic substances, promoting blood circulation for removing blood stasis and inducing diuresis to remove edema. Reinforcement and elimination in combination and giving consideration to both the incidental

1354- gera: 75861/di/ra

[INHIBITION OF TELOMERASE ACTIVITY BY JIANPILIQI FORMULA IN LIVER CANCER]. MENG ZHI-QIANG ET AL. chinese journal of basic medicine in tcm. 2000;6(1):23 (chi*).

and fundamental should be paid attention to

1355- gera: 75862/di/ra

[RESEARCH ON THE MODEL OF MICE HEPATOMA (H22) AND APPLICATION OF THE MODEL TO EXPERIMENTAL STUDY OF TCM]. LI HAI-YAN ET AL. chinese journal of basic medicine in tcm. 2000;6(1):27 (chi*).

1356- gera: 75962/di/ra

[OBSERVATION OF THERAPEUTIC EFFECT OF STOMACH-CALMING DECOCTION" IN TREATING 51 CASES OF GASTRIC PRECANCEROUS LESION]. CAI GAN ET AL. shanghai journal of tcm. 2000;34(1):11 (chi*). To observe the therapeutic effects of "Stomach Calming Decoction" in discontinuing gastric precancerous lesion (GPL), 51 cases of GPL were treated with "Stomach Calming Decoction", with the functions to strengthen the spleen, enrich qi, disperse phlegm, dissipate stasis and clear away heattoxin, created in accordance with features of obstruction of the collaterals by phlegm and stasis and production of toxin by accumulation of heat, upon deficiency in both the spleen and stomach. The results revealed that in this formula, the total effective rate was 88.24% in relieving GPL symptoms and 76.47% in pathology and the negative-transforming rate of Helicobacter pylori (HP) was 65.52%, indicating that "Stomach Calming Decoction" can discontinue GPL development to certain extent.

1357- gera: 75963/di/ra

[CLINICAL STUDY ON "CANCER-ELIMINATING INJECTION" BY INTERVENTION THERAPY THROUGH HEPATIC ARTERY IN METASTATIC LIVER CANCER]. SUN JUE ET AL. shanghai journal of tcm. 2000;34(1):14 (chi*). 31 cases of metastatic liver cancer were treated with "Cancer-Eliminating Injection" by intervention therapy through the hepatic artery, together with 22 cases treated by chemotherapeutic intervention as control. The results revealed that the total effective rate were respectively 70.97% and 40.91% with a significant difference between two groups (P<0.01); that PR+NC were respectively 67.74% and 63.63%, with no significant difference between two groups (P>0.05); that the average survival days were respectively 226.07 and 118.38 with a significant difference between two groups (P<0.01) and that the total effective rate by KPS were 80.65% and 50% respectively, with a marked difference between two groups. The results showed that Chinese herbal "Cancer-Eliminating Injection" could improve the clinical symptoms and signs, enhance the patient's life quality, diminish or stabilize the focus and prolong the survival time.

1358- gera: 75992/di/ra

[KNOWLEDGEABLE IN CHINESE AND WESTERN MEDICINE, STRUGGLING FOR CREATION]. SHNAGHAI MUNICIPAL HEALTH BUREAU. shanghai journal of tcm. 2000;34(2):34 (chi*).

Pang Pan-Chi (1919-1999), female, a native of Shanghai, a professor in Shanghai University of Traditional Chinese Medicine and a Shanghai famous physician of Chinese medicine, was engaged in Chinese internal and gynecological medicine for over 50 years, and was one of the foretunners in the development of the treatment and experimental study of

tumors by integration of Chinese and western medicine in the domestic circle of Chinese medicine after liberation and was skillfull in the treatment of intractable gynecological diseases of malignant tumors and sterility. Two proven cases respectively about " Prevention of Recurrence and metastasis after Oophoroma Operation " and " Sterility due to Obstruction of Fallopian Tube " were listed.

1359- gera: 76298/di/ra

[CLINICAL REPORT OF GENERAL ANAESTHESIA WITH ACUPUNCTURE COMBINED WITH METHYLFLURETHER IN RADICAL OPERATION OF CARCINOMA OF ESOPHAGUS]. TANG YU-MING ET AL. journal of chengdu university of tcm. 2000;23(3):13 (chi).

1360- gera: 76973/di/ra

IEFFECTS OF ACUPOINT APPLICATION OF FU ZHENG SHENG BAI PLASTER ON HEMATOPOIETIC AND IMMUNE SYSTEMS IN MICE OF REPEATED CHEMOTHERAPY]. CAO DAMING. chinese acupuncture and moxibustion. 2000;20(11):697 (chi).

1361- gera: 77145/di/re

ELECTROACUPUNCTURE FOR CONTROL OF MYELOABLATIVE CHEMOTHERAPY-INDUCED EMESIS. A RANDOMIZED CONTROLLED TRIAL. SHEN J ET AL. jama.

2000;284(21):2755-61 (eng).

Context: High-dose chemotherapy poses considerable challenges to emesis management. Although prior studies suggest that acupuncture may reduce nausea and emesis, it is unclear whether such benefit comes from the nonspecific effects of attention and clinician-patient interaction. Objective: To compare the effectiveness of electroacupuncture vs minimal needling and mock electrical stimulation or antiemetic medications alone in controlling emesis among patients undergoing a highly emetogenic chemotherapy regimen. Disgn: Three-arm, parallel-group, randomized controlled trial conducted from March 1996 to December 1997, with a 5-day study period and a 9-day follow- up. Setting: Oncology center at a university medical center. Patients: One hundred four women (mean age, 46 years) with high-risk breast cancer. Interventions: Patients were randomly assigned to receive low-frequency electroacupuncture at classic antiemetic acupuncture points once daily for 5 days (n = 37); minimal needling at control points with mock electrostimulation on the same schedule (n = 33); or no adjunct needling (n = 34). All patients received concurrent triple antiemetic pharmacotherapy and high-dose chemotherapy (cyclophosphamide, cisplatin, and carmustine). Main Outcome Measures: Total number of emesis episodes occuring during the 5-day study period and the proportion of emesis-free days, compared among the 3 groups. Results: The number of emesis episodes occuring during the 5 days was lower for patients receiving electroacupuncture compared with those receiving minimal needling or pharmacotherapy alone (median number of episodes, 5, 10 and 15, respectively; P<0.01). The electroacupuncture group had fewer episodes of emesis than the minimal needling group (P<0.01), whereas the minimal needling group had fewer episodes of emesis than the antiemetic pharmacotherapy alone group (P = 0.1). The differences among groups were not significant during the 9-day follow-up period (P = 18). Conclusions: In this study of patients with breast cancer receiving high-dose chemotherapy, adjunct electroacupuncture was more effective in controlling emesis than minimal needling or antiemetic pharmacotherapy alone, although the observed effect had limited duration.

1362- gera: 77175/di/ra

[CLINICAL OBSERVATION OF FU YUAN HUO XIE DECOCTION IN PREVENTION OF DIFFICULTY IN OPENING MOUTH AFTER RADIOTHERAPY FOR NASOPHARYNGEAL CARCINOMA]. HUANG NENG ET AL. guangxi journal of tcm. 2000;23(5):13 (chi).

1363- gera: 77193/di/ra [PONDER OVER CLINICAL ANALYSIS WITH SYNDROME DIFFERENTIATION FOR 190 CANCER PATIENTS]. GUO YONG. chinese journal of basic medicine in tcm. 2000;6(10):44 (chi*).

To evaluate the clinical significance of syndrome-classification in Traditional Chinese Medicine (TCM) oncology. The syndrome characteristic of 190 patients with malignant tumor had been analyzed by the four methods of physical examination (inspection, listening and smelling, inquiring, palpation). The result suggested: there are no significance of the syndrome classification with clinical stage and KPS (P>0. 05). The data indicated: the patients main pathogenesis is asthenia-syndrome (include deficiency of QI, YIN and both QI and YIM) (170/190 cases, 89.4%). It would caused stasis heat and phlegm ect. According to the characteristic of difference syndromes of lung stomach and liver cancer, benefiting QI and nourishing YIN, invigorating spleen and supplementing QI and dispersing stagnated hepatoqi had

1364- gera: 77311/di/ra

IREGULATION EFFECT OF DIGAN ORAL LIQUOR ON IMMUNOLOGIC FUNCTION OF MOUSE WITH LEUKOCYTOPENIA INDUCED BY CTX]. LIANG YU ET AL. chinese journal of traditional medical science and technology. 2000;7(3):161 (chi).

1365- gera: 77315/di/ra

[INHIBITION EFFECT OF ABSTRACT OF COMPOUND RUI XIANG LANG DU ON TRANSPLATATION CANCER UNDER AXILLARY FOSSA MOUSSEJ. LIU ZHIMIN ET AL. information on tcm. 2000;17(1):56 (chi).

1366- gera: 77336/di/ra

[CLINICAL APPLICATION OF MODIFIED CHENG QI DECOCTION IN POSTOPERATION OF STOMACH CARCINOMA]. CHEN WENGE. information on tcm. 2000;17(2):14 (chi).

1367- gera: 77367/di/ra

[EFFECTS OF SCHINOFOLINE ON CYTOSKELETON OF EXPERIMENTAL HEPATOMA IN RATS OBSERVED BY WHOLE MOUNT CELL TRANSMISSION ELECTRON MICROSCOPY]. BAI JINWEN ET AL. journal of beijing university of tcm. 2000;23(4):27 (chi*).

1368- gera: 77402/di/ra [LI XIUWU' S EXPERIMENCES ON DIAGNOSING AND TREATING CARCINOMA OF ESOPHAGUS]. JIANG SHI QING ET AL. henan journal of tcm and pharmacy. 2000;15(2):7 (chi).

1369- gera: 77417/di/ra

[EXPLORING ON CURING MALIGNANT TUMOR IN THE WAY OF TCM INTEGRATED WITH WESTERN MEDICINE]. YANG SHANGWANG. heilongjiang journal of tcm. 2000;3:58 (chi).

1370- gera: 77509/di/ra

[CLINICAL OBSERVATION OF OLIGOLEUKOCYTHEMIA CAUSED BY CHEMOTHERAPY ON TUMOR PATIENTS TREATED WITH " DALI" MIXTURE]. REN YANMING. chinese journal of ethnomedicine and ethnopharmacy. 2000;10(5):264 (chi).

1371- gera: 77518/di/ra
[THE EFFECTS OF CYCLOPHOSPLAMIDE ON SPERMATOGENIS IN MICE]. CHEN AN ET AL. journal of hunan college of tcm. 2000;20(1):2 (chi*).

Cyclophosplamide (CY) were injected intrapertontally to male mice. On the 21,28,34,36 d after administration, the changes of sperm and testis tissue in mice were observed. The results showed that on the 34~36 d the total sperm count decreased (P<0. 01), and the deformity rate of sperm increased (P<0. 01), on the 21,28,34,36 d the number of spermatogenetic cells decreased (P<0. 05 or P<0. 01), the ultrastructural changes (36 d) were mainly break of nuclear membrane, injury of nuclear in the spermatogenetic cells and abnormal acrosomic vesicle in spermatid, but the tight junction were normal. The results indicated that directly injuring the spermatogonia and spermatocyte at DNA-synthetic phase was the way by which CY disturbed the mice's spermatogenesis.

1372- gera: 77521/di/ra

[THE INHIBITATION EFFECTS OF KANGXIA LING ON THE RESTRAINING TUMOR GROWING IN TUMOR BEARING NUDE MICE]. GUO ZHENQIU ET AL. journal of hunan college of tcm. 2000;20(1):8 (chi*).

The restraining tumor from growing in tumor-bearing nude mice was used to verify the effects of Kangxianling (TCM) in inhibiting tumor. The mice were divided into three groups: the Kangxianling Group, the CTX Group and the Control Group. The results showed that the volume difference of the tumor in all groups had no significance before therapy (I,>O. 05). The volume of the tumor in the Kangxianling group and the CTX group was smaller than that in the control group after therapy (P<0.01); The weight of the tumor and the percentage of inhibiting tumor in nude mice growth had no significant difference between the Kangxianling group and CTX group (P>O. 05); the percentage of inhibiting tumor in nude mice growth was 33. 0% (P>O. 05). The mechanism is related to the increasing of P waf1/cip1/21 protein

1373- gera: 77525/di/ra

[CLINIC OBSERVATION ON THE TREATMENT OF MALIGNANT PLEUROPERITONEAL CAVITY DROPSY WITH COMBINED CHINESE AND WESTERN MEDICINE]. LI JING ET AL. journal of hunan college of tcm. 2000;20(1):41 (chi).

1374- gera: 77527/di/ra

[AN EXPERIMENTAL STUDY ON THE INHINITORY EFFECT YIQIJIEDU TABLETS TO TELOMERASE AND TELOMERASE RNA IN NASOPHARYNGEAL CARCIOMA CELLS]. TANG FAQING ET AL. journal of hunan college of tcm. 2000;20(1):15 (chi*).

The IC50 of YIQIJIEDU Tablets (Chinese Herbs) killing NI'C cells with MTT assay were measured, and the NPC cells was treated under several concentration as 10 IC50, IC50 and 0. 1 IC50 for 12h, 24h.4Sh.72h and 96h with the herbs. I'elomerase and telomerase RNA in these cells were assaied. 'I'he results showed that YIQIJIEDU Tablets at high concentration (10 IC50) inhibited telomerase activity and telomerase RNA expression in NPC cells, and it was the same as cyclophosphamide; Under lower concentration. It also inhibited telomerase activity, but its effect was less significant than at high concentration; Although the lowest concentration YIQIJEIDU Tablets used in the experiment could not inhibit telomerase activity and telomerase RNA expression in NPC cells, the telomerase activity level of target cells WAS lower than that of blank control. The findings suggest that the anticancer effect of the Chinese herbs link with their inhibitory effects on telomerase and telomerase RNA.

1375- gera: 77601/di/ra

[OBSERVATION ON THERAPEUTIC EFFECT OF NEEDLE-RETAINING METHOD OF TRIPLE PUNCTURE IN 80 CASES OF PAIN DUE TO HEPATIC CANCER]. SUN YALIN ET AL. chinese acupuncture and moxibustion. 2000;20(4):211

1376- gera: 77612/di/ra

LA EXPERIENCIA DEL DR. GUO CHENGJIE EN EL TRATAMIENTO DE LOS TUMORES DE MAMA. EMBID A. medicinas complementarias. 2000;58:7 (esp).

1377- gera: 77613/di/ra

BIBLIOGRAFIA SOBRE EL CANCER DE MAMA EN MEDICINA TRADICIONAL CHINA. GERA. medicinas complementarias. 2000;58:10-2 (esp).

1378- gera: 77634/di/ra

[ANALGESIC EFFECT OF CHINESE HERBS AND ACUPUNCTURE ON CANCER PATIENTS]. ZHANG MEI ET AL. acupuncture research. 2000;25(1):64 (chi*). 90 cancer patients with different degree pain were observed in the study. They were divided into 4 groups: acupuncture group, Chinese Herbs group(combination of oral medication and Chinese herb iontophoresis treatment), western medicine group and Chinese herbs and acupuncture group. The results showed that the analgesic effect of acupuncture group and Chinese herbs group was better than that of the western medicine group. The Chinese herbs and acupuncture group

had a very significant difference from the western group. Therefore, we can conclude that the acupuncture and Chinese herbs' analgenic effect on cancer patients has a high value in clinical treatment.

1379- gera: 77690/di/ra [CLINICAL STUDY ON TREATMENT OF NASOPHARYNGEAL CARCIOMA BY RADIO AND CHEMOTHERAPY WITH SUPPLEMENTARY MOXIBUSTION ON SHENQUE POINT]. CHEN KAI ET AL. chinese journal of integrated traditional and western medicine.

2000;20(10):733 (chi*).

Objective: to evaluate the effect of supplementary moxibustion in treating III, IV a stage nasopharyngeal carcinoma (NPC) with radio-and chemotherapy. Methods: fifty-six cases of NPC were randomly divided into two groups, 28 in each group. They were treated with radiotherapy in routine or chemotherapy adopting AD protocol. Salt-separated moxibustion on Shenque (Ren 8) point was given to the treated group from beginning of radio- and chemotherapy for 30 times as one therapeutic course. Results: the remission rate in the two groups after radio- and chemotherapy was not different significantly. The toxic and side-effect occurence was less in the treated group than in the control group (P<0.05). The 5- year local control rates of NPC and cervical lymphnode were 85.7% and 85.0% in the treated group, which were higher than those in the control group (78.6% and 78.9%), the 5-year survival rate in the two groups were 50.0% and 35.7% respectively. After radio- and chemotherapy, the blood content of malonyldialdehyde (MDA), middle molecular substance and sulfhydryl reduced the SOD activity ascended in the treated group, the difference was significant as compared with those in the control group (P<0.05, P<0.01). Conclusion: the supplementary moxibustion on Shenque point could obviously reduce the toxic side-effect of advanced NPC patients treated with radio- and chemotherapy.

1380- gera: 77706/di/ra

[EFFECT OF QI REPLENISHING AND BLOOD CIRCULATION ACTIVATING DRUGS IN TREATMENT OF MIDDLE ADVANCED PANCREATIC CANCER WITH RADIO AND CHEMOTHERAPY]. WANG BINGSHENG ET AL. chinese journal of integrated traditional and western medicine. 2000;20(10):736 (chi*).

1381- gera: 77714/di/ra [CLINICAL STUDY ON TREATMENT OF ADVANCED NON SMALL CELL LUNG CANCER WITH CHINESE HERBAL MEDICINE COMBINED WITH SYNCHRONOUS RADIO AND CHEMOTHERAPY]. LIU XIUFANG ET AL. chinese journal of integrated traditional and western medicine. 2000;20(6):427 (chi*).

1382- gera: 77716/di/ra

[EXPLORATION ON PROTECTIVE EFFECT OF CHINESE HERBAL MEDICINES ON HEMATOPOIETIC AND IMMUNE SYSTEMS AGAINST RADIO INJURY AND ITS MECHANISM]. HOU JUNFENG ET AL. chinese journal of integrated traditional and western medicine. 2000;20(6):469 (chi).

1383- gera: 77763/di/ra

[EFFECT OF CHANG' AI KANGFU DECOCTION ON IMMUNITY IN POSTOPERATIONAL PATIENTS WITH LARGE INTESTINE CANCER]. LI HUASHAN ET AL. chinese journal of integrated traditional and western medicine. 2000;20(8):580 (chi*).

Objective: To explore the effect of Chinese drug Shanghai Kangfu decoction (CAKF) on immunity in postoperational patients with large intestine cancer (LIC). Methods: Forty-eight patients with LIC in Dukes' B, C stage after operation were randomly assigned to 3 groups, the CAKF group (16 cases), chemotherapy group (17 cases) and combination therapy (CAKF plus chemotherapy) group (15 cases). 5-FU and mitomycin C were given to the chemotherapy group. The dynamic changes of T-lymphocyte subsets, NK cells and immunoglobulins were investigated. Results: Before operation, the CD3+, CD4+, CD4+/CD8+ and the activity of NK cells in LIC patients were lower, but CD8+ was higher than that of

normal level (P<0.01), which indicated that cellular immunity in LIC was in immunosuppressive state, they all further reduced 1 week after operation, particularly CD3 + cell counts, but CD3 +, CD4 + and the activity of NK cells normalized 1 month after operation in CAKF group, and 2 months were needed to normalise in combination therapy group. Both groups recovered to a certain extent in comparing with before treatment, but the chemotherapy group recovered slower. The similar results appeared in humoral immunity. Conclusion: CAKF could obviously increase the

1384- gera: 77764/di/ra

ICLINICAL STUDY ON HEMORRHEOLOGY CHANGES FOR METASTATIC STATE OF GASTRIC CANCER AND ITS RELATIONSHIP WITH SYNDROME TYPE IN TRADITIONAL CHINESE MEDICINE]. WU SHUISHENG ET AL. chinese journal of integrated traditional and western medicine. 2000;20(8):583 (chi*)

Objective: To explore the hemorrheologic changes of gastric cancer in various stages and the relationship between different phases and Syndrome-types. Methods: Sixty-three gastric cancer patients and 30 healthy controls matching in sex and age were studied. According to the phases of tumor and the differentiation standards of deficiency and excess syndrome in TCM, the patients were divided into 6 groups: Non-metastasis (NM), lymphnode metastasis (LM), distant metastasis (DM) groups, and Deficiency (D), Excess (E), mixed deficiency and excess (DE) groups. The hemorheology criteria including whole blood viscosity (BV), plasma viscosity (PV), hematocrit (HCT), fibrinogen (Fib), platelet count (PC), platelet aggregation rate (PAR) were measured. Results: The value of BV, PV, Fib, PC and PAR in gastric cancer groups were higher significantly (P <0.05, P<0.01) than those in the healthy control group, but BV, PV in the LM and DM groups were higher than those in the healthy control group significantly (P < 0.05), while difference between NM group and the healthy control group was insignificant (P > 0.05). Hypercoagulability state presented in all the three Syndrome Type groups of gastric cancer patients, but the difference in some criteria between D and E group were significant (P<0.05, P<0.01); and DE groups was greatly higher than D and E groups in high-shear BV, Fib and PC (P < 0.05, P < 0.01). Conclusion: The value of BV, PV Fib. PC and PAR could be regarded as good referential parameters in reflecting the condition of evil excess.

1385- gera: 77765/di/ra

[DYNAMIC OBSERVATION AND CLINICAL SIGNIFIANCE OF INTEGRATED TRADITIONAL CHINESE AND WESTERN MEDICINE ON INTERLEUKING 2 SYSTEM T CELL AND **ERYTHROCYTE IMMUNE SYSTEM IN PATIENTS OF LUNG** CANCER]. FAN GUORONG ET AL. chinese journal of integrated traditional and western medicine. 2000;20(8):586 (chi*).

Objective: To study the dynamic changes and its clinical significance of integrated traditional Chinese and western medicine (TCM-WM) on IL-2 system, T cell and erythrocyte immune system in patients of lung cancer. Methods: Fortyeight cases with lung cancer were randomly divided into two groups: TCM-WM group (group I) and the chemotherapy group (group n); and 20 healthy subjects were simultaneously compared. The relevant immune indices, clinical symptoms and signs, changes of solid tumor and living quality were dynamically observed. Results: (I) the serum IL-2 level of lung cancer patients was significantly lower, while sIL-2R level higher than that of the healthy subjects. And they were raised and lowered respectively after treatment, especially in the group I, but different from the control group yet. And there was highly negative correlation between IL-2 and sIL-2R levels. (2) The percentage of CD3, CD4 and the ratio CD4/CD3 were decreased markedly in both groups, except CD8, which was increased markedly. And the percentage of RBC-C3b RR was obviously lower, while that of RBC-ICR was obviously higher. But the above-mentioned indices could be improved after treatment, especially in the group I, and there were highly positive correlation between CD4/CDe ratio and RBC-C3bRR. (3) After treatment, all above-mentioned indices were changed significantly to their corresponding opposite. However, in regard to the degree of improvement, the patients of group I were in a better position than those of group II. At the same

time, improvement of their clinical symptoms and signs, change of solid tumor and living quality also showed advantageous. Conclusion: The therapeutic superiority of TCM-WM on lung cancer may be related with the modulation on immune function. Thus we can say that the effect of TCM-WM is better than that of chemotherapy alone.

1386- gera: 77772/di/ra

[CLINICAL STUDY ON TREATMENT OF 40 CASES OF MALIGNANT BRAIN TUMOR BY ELEMENE EMULSION INJECTION]. TAN PINGGUO ET AL. chinese journal of integrated traditional and western medicine. 2000;20(9):645 (chi*).

1387- gera: 77774/di/ra

[AN INVESTIGATION ON RISK FACTORS OF CEREBRAL ARTERIOCLEROSIS]. WU SHENGXIAN ET AL. chinese journal of integrated traditional and western medicine. 2000;20(9):656 (chi*).

1388- gera: 77831/di/ra

[PRESENT SITUATION OF STUDY ON MULTIDRUG RESISTANCE OF TUMOR]. LI WEI ET AL. chinese journal of information on tcm. 2000;7(7):6 (chi).

1389- gera: 77863/di/ra

[TREATING 42 CASES OF LATE PANCREATIC CANCER WITH TIAOPI YIYI DECOCTION]. YOU JIANLIANG ET AL. zhejiang journal of tcm. 2000;35(6):238 (chi).

1390- gera: 77873/di/ra

ITREATING CARCINOMATOUS OBSTRUCTION OF DIGESTIVE TRACT BY PAYING ATTENTION TO THE TREATMENT OF BLOOD STASIS]. SHEN WEISHENG ET AL. zhejiang journal of tcm. 2000;35(5):220 (chi).

1391- gera: 77877/di/ra

ICLINICAL OBSERVATION ON TREATING 103 CASES OF TUMOR OF DEFFICIENCY STYLE WITH YUANBU HEJI]. SHI LING ET AL. zhejiang journal of tcm. 2000;35(8):350 (chi).

1392- gera: 77884/di/ra

[GENERAL REVIEW OF THE RESEARCH OF TREATING TUMOR WITH MOXIBUSTION]. MA XIAOPENG ET AL. zhejiang journal of tcm. 2000;35(8):360 (chi).

1393- gera: 77886/di/ra

[OBSERVATION ON 36 CASES OF NAUSEA AND VOMITING BEHIND NEOPLASTIC CHEMOTHERAPY TREATED WITH UNRIPE BITTER ORANGE AND GLOMUS DISPERSING DECOCTION]. ZHAO XIAOSHAN ET AL. zhejiang journal of tcm. 2000;35(9):374 (chi).

1394- gera: 77918/di/ra

[EXPERIMENTAL RESEARCH OF ANTICANCER ACTIONS WITH MOXIBUSTING SHENQUE POINT]. YE XIANG RONG ET AL. journal of shandong university of tcm. 2000;24(3):229 (chi*).

It has been observed in mice with transplanted liver cancer (H22) that the anticancer actions with moxibusting Shenque point. It shows that moxibusting every other day is much more effective than moxibusting everyday in results. It can increase the thymus exponent of mice with tumor. On the other hand, it can decrease saliva acid in serum (P<0. 05). With moxibusting, the node amount of pulmonary tumor is obviously less than that of the control group (P<0.05). It also happened in weight of lymphnodes in both transplanted lateral armpit and renal hilus (P<0.05), and the invasive grade of cancer cell in axially lymphnodes was decreased than that of the control group. It shows that it can prevent lymphatic metastasis by moxibustion: it: to improve immune functions and decrease saliva acid in serum.

1395- gera: 77924/di/ra [CLINICAL STUDY OF COMPREHENSIVE AND SEQUENTIAL THERAPY OF MIDDLE AND ADVANCED HEPATOCELLULAR CARCINOMA]. PAN XINGNAN ET AL. chinese journal of integrated traditional and western

medicine on liver diseases. 2000;10(3):7 (chi*).

1396- gera: 77932/di/ra

[EFFECT OF HUANGQI INJECTION ON IMMUNE AND LIVER FUNCTION IN PATIENTS WITH PRIMARY HEPATIC CARCINOMA AFTER HEPATIC ARTERIAL CHEMOEMBOLIZATION]. SONG HUAIYU ET AL. chinese journal of integrated traditional and western medicine on liver diseases. 2000;10(4):5 (chi*).

1397- gera: 77935/di/ra

[INFLUENCE OF REPEATED TRANSCATHETER HEPATIC ARTERIAL CHEMOEMBOLIZATION ON HEPATIC FIBROSIS INDEXES OF PATIENTS WITH HEPATOCARCINOMA]. REN QIUGUI ET AL. chinese journal of integrated traditional and western medicine on liver diseases. 2000;10(4):15 (chi*).

1398- gera: 77941/di/ra

[SIGNIFICANCE OF DETECTING ORGANIC INTERNAL ENVIRONMENT PART INDEX IN PATIENTS WITH PRIMARY HEPATOMA]. LUO ZEMIN ET AL. chinese journal of integrated traditional and western medicine on liver diseases. 2000;10(4):3 (chi*).

1399- gera: 77967/di/ra

[APPLICATION OF TREATING PRIMARY LIVER CANCER WITH BIE JIA WAN]. CAO YANG. chinese journal of basic medicine in tcm. 2000;6(7):30 (chi).

1400- gera: 77984/di/ra

[EFFECTS AND SIGNIFIANCE OF" BENEFIING QI AND NOURISHING YIN" ON INDUCTION OF HEPATOMA CELL DIFFERENTIATION]. LIU PING ET AL. chinese journal of basic medicine in tcm. 2000;6(8):29 (chi*).

Objective to study the mechanism of the compound preparation Yi-Sui-Ling to cure leukaemia. Method based on the fact that Yi-Sui-Ling can induce the apoptosis of HL60, by serologic pharmacological test, the author choose rabbit serum samples with various density of Yi-Sui-Ling, cultured them with HL60 cells during different time, observed the effect of rabbit' serum with Yi-Sui-Ling on the apoptosis of HL60, and explored primarily the mechanism of its apoptosis. Results Yi-Sui-Ling has a marked effect of inducing the apoptosis of HL60 cells. The best effect was produced by rabbit' serum with 10 percent concentration of Yi-Sui-Ling during 48 hours. The mechanism of its inducing apoptosis is related to its inhibiting the expression of Bcl-2 gene. Conclusion Yi-Sui-Ling can induce the apoptosis of leukaemia. cells even in animal's body, which is the key mechanism of Yi-Sui-Ling curing leukaemia.

1401- gera: 78049/di/ra

[INTEĞRATED THERAPY IN TREATING PRIMARY LIVER CANCER: REPORT OF 31 CASES]. QIANG YONG ET AL. journal of nanjing university tcm. 2000;16(2):86 (chi*). OBJECTIVE To treat 31 cases of primary liver cancer of the spleen deficiency type with the herbal medicine that can invigorate the spleen and replenish qi together with hepatic arterial intubation. METHOD The treatment group was treated in the integrated way while the control was only treated with the intubation. The results were compared. RESULTS In the treatment group. The condition was improved in 67.9% of the patient, and quality of life (KS score) was improved in 80.7%, with statistical significance compared with the control. CONCLUSION The integrated method can prolong the life span and improve the quality of life.

1402- gera: 78057/di/ra

[RAT MODEL OF QI DEFICIENCY BLOOD STASIS SYNDROME OF PRECANCEROUS LESION DEVELOPED FROM CHRONIC ATROPHIC GASTRITIS]. LU WEI MIN ET AL. journal of nanjing university tcm. 2000;16(3):156 (chi*). OBJECTIVE: To study the technique for constructing an animal model of qi-deficiency-blood-stasis syndrome of precancerous lesion developed from chrome atrophic gastritis (CAG). METHODS: 25 rats were divided randornly into 2 groups. The rats of the control group were fed normally. The rats in the model group were provided with MNNG solution for drinking freely, ranitidine was introduced to their stomach, and

they were sometimes starved and sometimes overfed. 20 weeks later, the general health, immunity of red cells, the indices of LPO, SOD, GSH-P, TXB2, 6-keto-PGfla, TXB2/6keto-PGFla and pathological change of gastric mucosa of both groups were observed. RESULTS the general health of the model group was poor. The weights of their liver, spleen and thymus were lowered. The blood RBG IC rosette forming rate, the contents of LPO, TXB2, 6-keto-PGFla and the ratio of TXB2/6-keto-PGfla were all increased.. The RBC-C3b receptor rosette forming rate and the activities of SOD and GSH-PX were lowered. There were typical precancerous pathological morphological changes in the gastric mucosa, which were observed by naked eyes, through light microscope and through electron microscope. CONCLUSION: The multi-discipline and multi-index observation shows the symptoms of the animal model are consistent with chemical manifestations of qideficiency-blood-stasis syndrome of precancerous lesion developed from CAG. The model is reliable and repeatable. It bas provided a good animal model for the study of traditional Chinese medicine in treating precancerous lesion developed from CAG.

1403- gera: 78062/di/ra

[BLOOD STASIS IN MALIGNANT BLOOD DISEASES]. LI XIAO HUI ET AL. journal of nanjing university tcm. 2000;16(3):146 (chi*).

OBJECTIVE: To study the clinical significance of blood stasis in malignant blood diseases. METHODS: In 112 patients with malignant blood diseases, the symptoms and signs of blood stasis were observed and the contents of platelet alpha - granule membrane protein in plasma (GMP-140) and D-dimmer (D-D) were detected. RESULIS: 69.64% of the patients showed blood stasis. That showing blood stasis had higher levels of GMP-140 and D-D than those who did not show blood stasis (P < 0.01). CONCLUSION: In the patients with blood stasis of malignant blood diseases, more platelets are activated and consumed, and there exists secondary fibrinolysis. The levels of plasma GMP-140 and D-D are closely related to the manifestations of blood stasis.

1404- gera: 78077/di/ra

[REVERSION EFFECT OF RENZHUJIANWEI GRANULE IN TREATMENT OF PRECANCEROUS PATHOLOGICAL CHANGES OF CARCINOMA OF STOMACH]. LI CHUN TING ET AL. journal of nanjing university tcm. 2000;16(5):271 (chi*).

1405- gera: 78155/di/ra

[STUDY ON THE PREVENTION AND CURE OF THE SIDE EFFECT AND TOXIC REACTION OF RADIOTHERAPY AND CHEMOTHERAPY BY CHINESE MEDICINE]. WU JIPING ET AL. guangming journal tcm. 2000;90(5):46 (chi).

1406- gera: 78183/di/ra

[OBSERVATION ON COMPLICATED PROCTITIS FOLLOWING RADIOTHERAPY IN CHRONICAL CERVICAL CARCINOMA (106 CASES) TREATED BY DIFFERENTIATION OF SYMPTOMS AND SIGNS]. WU XIAOCHUN. journal of practical tcm. 2000;16(6):10 (chi).

1407- gera: 78185/di/ra

[INFLUENCE OF ACUPUNCTURE TO DNA TRANSCRIPTION ACTIVITIES OF LYMPHOCYTES IN PATIENTS OF INTESTINAL CANCER]. RAO BENQIANG ET AL. journal of practical tcm. 2000;16(6):35 (chi).

1408- gera: 78260/di/ra

BEHAVIOR OF T-CELL SUBSETS AND NK CELLS UNDER ELECTRO-ACUPUNCTURE DURING CHEMOTHERAPY. YE FANG ET AL. international journal of clinical acupuncture. 2000;11(4):301-3 (eng).

As is generally known, chemotherapy, when inflicting serious injury to the malignant tumor cells, also seriously damages the normal cells, especially all kinds of immune cells in the blood. This may lead to grave consequences to the whole process of treatment. Therefore, it is apparently important to attenuate these toxic effects of this regimen. The well-acupuncturist, Prof. CHEN Han-ping and his associates have been conducting valuable research on this subject. Concluding that

acupuncture is effective in regulating immunity, Prof. CHEN's observation had inspired us to undertake the study on the reduction of chemotherapeutic toxicity.

1409- gera: 78307/di/ra

IEFFECTIVE OBSERVATION ON 119 CASES OF ADVANCED STAGE OF NON MICROCEL LUNG CANCER TREATED BY TCM WM AND CHEMOTHERAPY]. PAN YUN LING ET AL. fujian journal of tcm. 2000;31(2):13 (chi).

1410- gera: 78315/di/ra

[CLINICAL OBSERVATION ON TCM THERAPY COMBINED WITH RADIOTHERAPY AND CHEMOTHERAPY FOR MIDDLE AND LATE STAGE OF ESOPHAGUS CANCER]. SUN GUI SENG ET AL. fujian journal of tcm. 2000;31(4):18

1411- gera: 78356/di/ra

TREATMENT OF PRIMARY LUNG CANCER BY TCM AND CHINESE MATERIA MEDICA]. LI GE ET AL. journal of tcm and chinese materia medica of jilin. 2000;20(3):63 (chi).

1412- gera: 78377/di/ra

[PROF ZHENG JINFU'S EXPERIENCE ON TREATING PULMONARY INFECTION OF POST CHEMOTHERAPY IN LEUKEMIA]. BAI YINCAI ET AL. journal of guiyang college of tcm. 2000;22(2):10 (chi).

1413- gera: 78413/di/ra

[CLINICAL STUDY OF SHUANGHUANGLIAN POWDER AND INJECTION PREPARATIONS COMBINED WITH **FUFANG DANSHEN INJECTION ON PAIN OF POST** RADIOTHERAPY OF NASOPHARYNGEAL CARCINOMA]. HUANG ZHIFEN ET AL. hebei journal of tcm. 2000;22(5):328 (chi*).

1414- gera: 78436/di/ra

THERAPEUTIC EFFECT OF MUXIANG DAOZHI PELLET ON RECOVERY OF INTESTINAL FUNCTION FOR POST **OPERATION OF MATIGNANT TUTIMOR OF DIGESTIVE** TRACT]. HUANG ZHIFEN ET AL. hebei journal of tcm. 2000;22(7):491 (chi*).

1415- gera: 78467/di/ra

[EFFECT OF RUNING NO 2 ON THE GROWTH OF MGF 7 HUMAN BREAST CANCER LINES IN VIVRO AND IN VITRO]. WUE XUE QING ET AL. chinese journal of traditional medical science and technology. 2000;7(4):211

1416- gera: 78472/di/ra

[MORPHOLOGIC INFLUENCE OF XINZHIKANGAI PRESCRIPTION ON TRANSPLANTED HEPATIC CARCINOMA CELL IN NUDE MICE AND ITS INHIBITION IN VIVO]. ZHU MEI JU ET AL. chinese journal of traditional medical science and technology. 2000;7(4):219 (chi).

1417- gera: 78480/di/ra

[CLINICAL AND EXPERIMENTAL STUDIES ON TUNING MIXTURE TREATING THE VOMIT CAUSED BY CHEMOTHERAPY IN TUMOURAL PATIENTS]. WANG WEN JUAN ET AL. chinese journal of traditional medical science and technology. 2000;7(5):283 (chi).

1418- gera: 78572/di/ra

[CLINICAL OBSERVATION ON ZHU YE SHI GAO DECOCTION FOR PREVENTION AND TREATMENT OF RADIATION ESOPHAGITIS]. LU JUNZHANG ET AL. journal of tcm. 2000;41(5):293 (chi).

1419- gera: 78592/di/ra

[APPROACH TO MECHANISMS OF APOPTOSIS OF GASTRIC CARCIOMA CELLS INDUCED BY XIANG LONG SAN]. YANG QINJIAN ET AL. journal of tcm. 2000;41(7):428 (chi).

1420- gera: 78596/di/ra

[ADVANCES OF STUDY ON MECHANISMS OF ANTINEOPLASTIC ACTION OF CHINESE DRUGS]. SHEN JIYUN ET AL. journal of tcm. 2000;41(7):437 (chi).

1421- gera: 78613/di/ra

[AN ANALYSIS OF EFFICACY OF TCM DRUGS IN TREATING 102 PATIENTS WITH GASTRIC CARCINOMA IN MIDDLE AND LATE STAGES]. YANG JIQUAN ET AL. journal of tcm. 2000;41(8):483 (chi*).

Drugs for expelling pathogenic cold to resolving stasis, descending the stomach-fire by invigorating the spleen and treating cancer by detoxifying were used in the controlled clinical trial. The one-year three-year and five-year survival rates in the treatment group (N = 69) were 84%. 56. 4% and 45. 4%. respectively (median, 2. 45 years). In comparison with the control group with TCM drugs plus chemotherapy (N = 30) it was 76. 7%. 53. 3% and 43. 3%. (Median, 1. 73 years) respectively. Clinical observation favoured the treatment group in improving the symptoms. Prolong the survival period, less toxic, less recurrence and metastasis, however, statistical analysis, the difference was not significant in statistical

1422- gera: 79249/di/ra

[OBSERVATION ON THERAPEUTIC EFFECT OF **ACUPOINT INJECTION ON GASTROINTESTINAL** RESPONSE AFTER CHEMOTHERAPY]. FEN JIPING ET AL. chinese acupuncture and moxibustion. 2000;20(6):343

1423- gera: 79261/di/ra [EFFECT OF QIONGYUGAO ON THE EXPRESSION OF NM23 AND PCNA OF EXPERIMENTAL LUNG CANCER MICE TREATED BY CHEMOTHERAPY]. CHEN XIAOYIN ET AL. journal of anhui traditional chinese medical college. 2000;19(2):47 (chi*).

Objective: To elucidate the effects of Qiongyugao on the expression of PCNA and nm23 of experimental lung cancer mice treated by chemotherapy. Method: cells culture, making model by transplanting cancer cells, immunohistochemistry. Result: We find chemotherapy can suppress the protein expression of PCNA, and Qiongyugao may enhance this effect, chemotherapy can promote the protein expression of nm23, and Qiongyugao may enhance the effect. Conclusion: Qiongyugao may improve the effects of chemotherapy by inhibiting tumor metastasis and cells'

1424- gera: 79330/di/ra

[TREATMENT OF 50 CASES WITH DUCTAL CARCINOMA OF BREAST]. LIU YE ET AL. shaanxi journal of traditional chinese medicine. 2000;21(5):206 (chi).

1425- gera: 79356/di/ra

TREATMENT OF 98 CASES OF BONE MARROW INHIBITION DUE TO RADIOTHERAPY AND CHEMOTHERAPY OF CARCINOMA BY BUSHEN JIANPI THERAPY]. MIAO WENHONG. shaanxi journal of traditional chinese medicine. 2000;21(7):289 (chi).

1426- gera: 79358/di/ra

[CLINICAL OBSERVATION ON ACUPUNCTURE AND MOXIBUSTION FOR TREATMENT OF 62 CASES OF CYSTOPARALYSIS POSTOPERATION OF CERVICAL CARCINOMA]. SUN SHUXIA ET AL. chinese acupuncture

and moxibustion. 2000;20(12):713 (chi*).

Sixty-two cases of cystoparalysis after operation of cervical carcinoma were divided into acupuncture moxibustion group and control group. Results indicated that there were significant differences between the two groups in the retention time of urethral catheter, residual amount of urine after operation, urine flow rate and intravesical pressure after operation (P < 0. 05), suggesting that acupuncture-moxibustion is of an obvious promoting action on the recovery of cystoparalysis after operation of cervical carcinoma.

1427- gera: 79392/di/ra

[RESEARCH PROGRESS OF CORRELATION BETWEEN EMOTION AND CANCER]. YING XIAO-XIONG. shanghai journal of tcm. 2000;34(10):46 (chi*).

1428- gera: 79456/di/ra

[PROTECTIVE EFFECTS OF SILYBIN ON CISPLATIN

INDUCED NEPHROTOXICITY WITHOUT INTERFERING WITH ITS ANTITUMOUR ACTIVITY]. LU YONG KE ET AL. liaoning journal of tcm. 2000;27(7):332 (chi*).

1429- gera: 79466/di/ra

IEFFECT OF SAN SHEN POWDER ON ADHESION MOLECULE IN PATIENTS WITH LUNG CARCINOMA]. LI SHUQI ET AL. chinese journal of surgery of integrated traditional and western medicine. 2000;6(3):158 (chi*).

1430- gera: 79467/di/ra

[ELECTRON MICROSCOPIC OBSERVATION OF BLADDER MUCOSA AND TUMORS CELLS AFTER INTRAVESICAL INSTILLATION COMPOUND WUFAN SOLUTION]. LIU SHUSHUO ET AL. chinese journal of surgery of integrated traditional and western medicine. 2000;6(3):161 (chi*).

1431- gera: 79468/di/ra

THE RELATION BETWEEN THE CLASSIFICATION OF SYNDROM DIFFERENTIATION ON TRADITIONAL **CHINESE MEDICINE AND HISTOPATHOLOGY CLASSIFICATION IN MODERATE LATE STAGE OF** GASTRIC CARCINOMA AND THE*]. WANG ANFENG. chinese journal of surgery of integrated traditional and western medicine. 2000;6(3):165 (chi*).

Objective: To analyze the relations between the classification of syndrome differentiation on traditional Chinese medicine and Histopathology classifications in moderate-late stage of postoperative gastric carcinoma and observe the therapeutic effects of each type. Method: The patients with moderate-late stage of gastric carcinoma are classified by the syndrome differentiation preoperatively, received combined chemotherapy and Chinese herbs treatment, Followed up closely and got the observed results. Results: Most carcinoma of the type of deficiency of spleen-yang and the type of incoordination between the liver and the stomach qi stagnation are adenocarcinoma, which have higher survival rate: 3, 5 years survival rate are 81 .3 % (13/16); 68.8 % (11/16); 68.8 % (11/16); 81 .8 % (9/11); 72. 8 % (8/11) respectively. The differences are significant statistically. There are lower differentiated adenocarcinoma in the type of deficiency of both qi and blood and the type of qi stagnation and blood stasis. The 3,5 years survival. rate of the type of deffiency of both spleen and the kidney are 0. Conclusion: The patients with moderate-late stage of gastric carcinoma should receive combined treatments to improve the life quality and forward therapeutic effects.

1432- gera: 79474/di/ra

ISUBRENAL CAPSULE (SRC) IMPLANT ASSAY OF RENAL CARCINOMA AND MEDICAL SENSITIVITY TO RADIX RUBIAE IN MICE]. LEI JIANPING ET AL. chinese journal of surgery of integrated traditional and western medicine. 2000;6(3):192 (chi*).

1433- gera: 79477/di/ra

IPROGRESS OF THE SURGICAL TREATMENT OF RECTUM CARCINOMA]. REN DONGLIN ET AL. chinese journal of surgery of integrated traditional and western medicine. 2000;6(3):221 (chi).

1434- gera: 79480/di/ra

[SUBRENAL CAPSULE (SRC) IMPLANT ASSAY OF RENAL CARCINOMA AND MEDICAL SENSIVITY TO RADIX RUBIAE IN MICE]. LEI JIANPING ET AL. chinese journal of surgery of integrated traditional and western medicine. 2000;6(3):192 (chi*).

1435- gera: 79489/di/ra

[CLINICAL OBSERVATION ON 96 CASES CHEMICAL THERAPEUTIC SIDE EFFECTS AFTER OPERATION OF LARGE INTESTINAL CARCINOMA]. LIU JIANAN ET AL. hunan journal of tcm. 2000;16(2):9 (chi).

1436- gera: 79546/di/ra [TREATING ADVANCED CARCINOMA OF LUNG WITH TCM]. WEI HUA ET AL. hubei journal of tcm. 2000;22(8):20 (chi).

1437- gera: 79557/di/ra

[A SUMMARY ON 28 CASES OF CHEMOTHERAPY SIDE EFFECTS TREATED BY XIANGSHA LIUFUNZI DECOCTION]. DIN ZHICHUN. hunan journal of tcm. 2000;16(3):12 (chi).

1438- gera: 79564/di/ra

[EFFECT OF TCM REMEDIES OF SUPPORTING BODY RESISTANCE AND REMOVING BLOOD STASIS ON SUPPRESSING GASTRIC CANCER METASTASIS AND IMPROVING HEMORHEOLOGY]. BU PING ET AL. chinese journal of integrated traditional and western medicine on gastro-spleen. 2000;8(4):193 (chi*).

1439- gera: 79573/di/ra

[EFFECT OF WEIKANGFU ON ZN,CU AND DNA IN PRECANCEROSIS GASTRIC MUCOSA EPITHELIAL NUCLEI AND MITOCHONDRIA OF PATIENTS WITH SPLEEN DEFICIENCY SYNDROMES]. YIN GUANGYAO ET AL. chinese journal of integrated traditional and western medicine on gastro-spleen. 2000;8(4):221 (chi*).

1440- gera: 79727/di/ra

INFLUENCE OF FUZHENG BAOZHEN DECOCTION ON QUALITY OF LIFE IN MALIGNANT TUMOR PATIENTS TREATED WITH RADIO AND CHEMOTHERAPY]. LI JING ET AL. journal of zhejiang college of tcm. 2000;24(3):22 (chi).

1441- gera: 79745/di/ra

ITHE RELATIONSHIP BETWEEN AUTONOMIC FUNCTION OF PATIENTS WITH NASOPHARYGEAL CARCINOMA AND PERIPHERAL T LYMPHOCYTES SUBGROUP]. LI LIANHUA ET AL. traditional chinese medicinal research. 2000;13(2):14 (chi).

1442- gera: 79746/di/ra

JEFFECT OF XIAOZHENG ANALGESIC ON CARCINOSIS PAIN]. ZHAO JINGFANG ET AL. traditional chinese medicinal research. 2000;13(2):18 (chi).

1443- gera: 86812/di/ra

ETHNIC DIFFERENCES IN COMPLEMENTARY AND ALTERNATIVE MEDICINE USE AMONG CANCER PATIENTS. MASKARINEC G ET AL. journal of alternative and complementary medicine. 2000;6(6):531-8 (eng). Objectives: This study estimated the prevalence of complementary and alternative medicine (CAM) use and its relation to quality of life (QOL) among cancer patients from diverse ethnic backgrounds. Given the ethnically diverse population in Hawaii, we hypothesised that CAM use may be related to the ancestry and the cultural heritage of cancer patients. Design and Setting: Participants for this mail survey were identified through the Hawaii Tumor Registry, a statewide population-based cancer registry. Subjects: Patients with invasive cancer diagnosed 1995-1996. Of the 2,452 questionnaires received, 1,168 (47.6~Xo) were returned. Outcome Measures: Prevalence of CAM use and QOL measures. Results: One in four respondents reported-at least one CAM therapy since cancer diagnosis. CAM use was highest among Filipino and Caucasian patients, intermediate for Native Hawaiians and Chinese, and significantly lower among Japanese. Some ethnic preferences for CAM followed ethnic folk medicine traditions, e.g., herbal medicines by Chinese, Hawaiian healing by Native Hawaiians, and religious healing or prayer by Filipinos. CAM users reported lower emotional functioning scores, higher symptom scores, and more financial difficulties than nonusers. Conclusions: This study detected ethnic differences in CAM use, in particular a low use among Japanese patients, and supports the importance of cultural factors in determining the frequency and type of CAM therapies chosen. Consideration of patients' cultural heritage may facilitate communication between physicians and patients about CAM with the goal to achieve optimal cancer care.

1444- gera: 86813/di/ra

THE EFFECT OF A TRADITIONAL CHINESE PRESCRIPTION FOR A CASE OF LUNG CARCINOMA. KAMEI T ET AL. journal of alternative and complementary medicine. 2000;6(6):557-9 (eng).

Objective: To examine the effectiveness of Ninjin Yoei To (NYT; Ren-Shen-Yang-Rong-Tang in Chinese medicine; Kotaro Pharmaceutical Co., Ltd., Osaka, Japan), one of the traditional herbal medicines, against lung carcinoma. Setting: The Nursing Center Himawari. Design, Patient, and Preparation: The regular dosage of NYT (15g/d) was prescribed for 7 weeks to one elderly patient with lung carcinoma. The daily standard dose of NYT is prepared from dried extract obtained from 12 crude natural substances, ginseng, cinnamon bark, Japanese angelica root, astragalus root, peony root, citrus unshiu peel, rehmannia root, polygala root, atractylodes rhizome, schisanda fruit, poria sclerotium, and glycyrrhiza. NYT is certified by the Japanese Ministry of Health and Welfare. Results: The tumor marker levels (CEA and CA19-9) decreased and the scores of yin-yang and xu-shi inverted from negative and positive during 7 weeks. The patient's coughed disappeared and her appetite recovered. Conclusion: NYT has a positive effect on life expectancy for patients with malignancy. The diagnostic scoring system in yinyang and xu-shi and prescription of Chinese herb may be available to gain control over a patient's health.

1445- gera: 86816/di/ra

[EXPERIENCE OF DOCTOR LIU JIAXIANG IN TREATING CANCER WITH METHOD OF REMOVING PHLEGM AND DESINTEGRATING MASS]. LIU LING-SHUANG. liaoning journal of tcm. 2000;27(12):534 (chi).

1446- gera: 86837/di/ra

[EXPERIMENTAL RESEARCH ON PREVENTION AND TREATMENT OF DDP-INDUCED REACTION OF DIGESTIVE TRACT OF RABBITS BY ACUPUNCTURE]. LIAO WEI ET AL. shanghai journal of acupuncture and moxibustion. 2000;19(6):35 (chi*).

Objective: To observe the preventive and therapeutic effect of acupuncture on DDP induced reaction of digestive tract Methods The experiment was performed on rabbits, which the brain gut peptides (BGP)-MTL of blood plasma of rabbit was tested and the electrogastrograph (EGG) of rabbit was also recorded. Results Acupuncture could return the disturbance of EGG to the normal reduce the MTI level of blood plasma. Conclusion The suitable acupoint combination could enhance the therapeutic effect of acupuncture treatment of DDP-induced reaction of digestive tract with provide experimental evidence for the prevention and treatment of chemotherapeutic agent induced side-reaction of digestive

1447- gera: 86839/di/ra

[EXPERIMENTAL OBSERVATION ON ANTITUMOR EFFECTS OF MURINE MOXIBUSTION SERUM (MS)]. CHEN YUN-FEI ET AL. shanghai journal of acupuncture and moxibustion. 2000;19(6):39 (chi*).

Objective To observe the anti-tumor effect of Marine Moxibustion Serum (MS). Methods Anti-tumor experiment with MS was performed on marine solid carcinoma model transplanted with thymoma (El 4) to observe growth of tumor in vivo and survival period of tumor-bearing mice. Results MS could delay the occurrence of the tumor and prolong the survival period of tumor-bearing mice. The anti-tumor effect of pre-therapy group with MS was superior to that of therapeutic group. Moxibustion existed relative specificity of acupoints. Conclusion Distinct anti-tumor effect of MS has been observed in the experiment.

1448- gera: 86884/di/ra

NOSTRA ESPERIENZA NEL TRATTAMENTO DELLA SINDROME CLIMATERICA DA TAMOXIFEN IN DONNE CON CANCRO MAMMARIO. TRAPASSO T ET AL. rivista italiana di agopuntura. 2000;99:87-91 (ita).

Numerose sono le indicazioni dell'agopuntura nella terapia adiuvante del paziente oncologico. Oltre al dolore ed all'emesi essa puo trovare utile indicazio`e nella ridazione degli effetti collaterali dei farmaci. Si riferiscono i dati, preliminari ma espressivi, di un'esperienza condotta su donne con cancro mammario in trattamento postchirurgico con

1449- gera: 86909/di/ra

CHE COSA SI DOVREBBE TENERE PRESENTE PER LA GESTIONE DEGLI EFFETTI COLLATERALI CAUSATI DA CHEMIO E RADIOTERAPIA POSTOPERATORIE PER IL TUMORE OVARICO?. YAO SHIAN. rivista italiana di medicina tradizionale cinese. 2000;81(3):77-8 (ita). Il tumore ovarico si puè manifestare nelle donne di ogni età, ma in gencre si riscontra nelle donne durante il periodo fertile. La malattia dovrebbe essere trattata principalinente con l'intervento chirurgico, integrato da radioterapia e chernioterapia. Le terapie sopra citate tuttavia possono causare una serie di effetti collaterali, quali ad esempio alopecia, diarrea, edema, anoressia, nausea, bocca secca, sudorazione spontanea, cefalea, palpitazione, esantema, disfunzioni del fegato e del rene, e granulocitopenia, che non solo ritardano la guarigione, ma incidono anche sulla continuazione della chemioterapia e della radioterapia. Clinicamente, si dovrebbe prestare attenzione ai seguenti fattori

1450- gera: 87304/di/re

COMPLEMENTARY AND ALTERNATIVE MEDICINE IN THE MANAGEMENT OF PAIN, DYSPNEA, AND NAUSEA AND VOMITING NEAR THE END OF LIFE. A SYSTEMATIC REVIEW. PAN CX ET AL. j pain symptom manage. 2000;20(5):374-87 (eng).

To review the evidence for efficacy of complementary and alternative medicine (CAM) modalities in treating pain, dyspnea, and nausea and vomiting in patients near the end of life, original articles were evaluated following a search through MEDLINE, CancerLIT, AIDSLINE, PsycLIT, CINAHL, and Social Work Abstracts databases. Search terms included alternative medicine, palliative care, pain, dyspnea, and nausea. Two independent reviewers extracted data, including study design, subjects, sample size, age, response rate, CAM modality, and outcomes. The efficacy of a CAM modality was evaluated in 21 studies of symptomatic adult patients with incurable conditions. Of these, only 12 were directly accessed via literature searching. Eleven were randomized controlled trials, two were non-randomized controlled trials, and eight were case series. Acupuncture, transcutaneous electrical nerve stimulation, supportive group therapy, self-hypnosis, and massage therapy may provide pain relief in cancer pain or in dying patients. Relaxation/imagery can improve oral mucositis pain. Patients with severe chronic obstructive pulmonary disease may benefit from the use of acupuncture, acupressure, and muscle relaxation with breathing retraining to relieve dyspnea. Because of publication bias, trials on CAM modalities may not be found on routine literature searches. Despite the paucity of controlled trials, there are data to support the use of some CAM modalities in terminally ill patients. This review generated evidence-based recommendations and identified areas for future research.

1451- gera: 87354/di/ra

[APPLICATION OF CHINESE HERBS ENEMA IN TREATMENT OF THE GASTROENTERIC MALIGNANT TUMORS]. SHEN KE ET AL. journal of liaoning college of tcm. 2000;2(2):86 (chi*).

1452- gera: 87361/di/ra

[SHORT TERM THERAPEUTIC OBSERVATION OF 32 CASES OF LUNG CANCER TREATED WITH FEIAI DECOCTION]. LI RUI ET AL. shandong journal of tcm. 2000;19(4):211 (chi).

1453- gera: 87535/di/ra

[IMMUNOHISTOCHEMICAL RESEARCH OF CORRELATION BETWEEN IL-1ß,IL-6,TNF-ALPHA,INF-Y IN LUNG CANCER CELLS AND LUNG CANCER YIN-DEFICIENCY SYNDROME]. SHEN WEI-XI ET AL. chinese journal of basic medicine in tcm. 2000;6(12):28 (chi*). Object: To observe the correlation between IL-Iß, IL-6, TNFalpha, IFN-Y in lung cancer cells and lung Yin-deficiency syndrome. Method: 51 patients were divided into 2 groups: lung cancer non-Yin-deficiency group, lung cancer Yin-deficiency group. II, -1ß,IL-6, TNF alpha, IFN-Y was determined in postoperative, paraffin-embedded specimen with immunohistochemistry. Result: The results showed that there was a close correlation between TNF alpha and lung Yin-

deficiency syndrome. TNF alpha content in lung cancer cells was higher 1 in lung cancer Yin-deficiency group than in lung cancer non-Yin-deficiency group (P<0. 05). Conclusions: The results showed TNF alpha in lung cancer cells was related to lung Yin-deficiency syndrome.

1454- gera: 87558/di/ra

[RECENT SITUATION OF PAIN CAUSED BY CANCER TREATED WITH TCM]. LIU YULONG. chinese journal of information on tcm. 2000;7(12):22 (chi).

1455- gera: 87611/di/ra

[CLINICAL OBSERVATION OF SHENGQI SHENGBAI DECOCTION ON THE TREATMENT OF LEUCOPENIA OF POSTCHEMOTHERAPY]. ZHENG YU ET AL. hebei journal of tcm. 2000;22(4):303 (chi*).

1456- gera: 87615/di/ra

[STUDY OF THE SEPARATE COMPREHENSIVE TREATMENT ON TRADITIONAL CHINESE AND WESTERN MEDICINE FOR PATIENTS WITH ADVANCED HEPATOMA]. LUO ZEMIN ET AL. chinese journal of integrated traditional and western medicine on liver diseases. 2000;10(6):7 (chi*).

1457- gera: 87645/di/ra

[OBSERVATIONS ON THE CURATIVE EFFECT OF COMBINED MERIDIAN-TRANSMITTED MILLIMETER WAVE AND CHINESE HERBS ON INTERMEDIATE AND ADVANCED CARCINOMA OF STOMACH]. ZHOU RONG-YAO ET AL. shanghai journal of acupuncture and moxibustion. 2000;19(2):7 (chi*).

Purpose: To investigate the curative effect of combined meridian- transmitted millimetre wave and Chinese herbs on intermediate and advanced carcinoma of stomach. Method: Forty-eight patients with intermediate and advanced carcinoma of stomach were randomly divided into 2 groups, 24 cases for each. Results: The relieving effect on palpitation, short breath, nausea, vomiting, abdominal distension and abdominalgia, and the improving effect on living quality and immunologic function in combination group were superior to those in herb group. Conclusion: Millimetre wave has a better helping effect on Chinese herb treatment of intermediate and advanced carcinoma of stomach.

1458- gera: 87694/di/ra

[RESEARCH DEVELOPMENT IN THE TRADITIONAL CHINESE HERB MEDICINE'S CONTRIBUTION TO REDUCTION OF TOXICITY IN CHEMICAL TREATMENT OF TUMOUR]. MA GUO-HAI. journal of liaoning college of tcm. 2000;2(4):305 (chi*).

1459- gera: 87710/di/ra

[APOPTOSIS OF HUMAN GASTRIC CANCER CELL LINE MGC-803 INDUCED BY GLYCYRRHIZA URALENSIS EXTRACT]. MA JING ET AL. chinese journal of integrated traditional and western medicine. 2000;20(12):928 (chi*).

1460- gera: 89063/di/ra

[RELATION OF SERUM APOPROTEIN AI AND B100 CONTENTS AND THEIR RATIO WITH DEFICIENCY AND EXCESS SYNDROMES OF TCM IN THE PATIENT OF MALIGNANT TUMOR]. LI XIAOFENG ET AL. journal of tcm. 2000;41(12):743 (chi*).

One hundred and sixteen cases of malignant tumor were divided into deficiency syndrome group, excess syndrome group, and deficiency with excess syndrome group, and 100 cases were used as control group. Serum apoprotein A1(ApoA1) and apoprotein B100 (ApoB,100) levels and their ratio were determined. Results indicated that proportion of abnormal serum apoprotein in the patient of malignant tumor was higher than that of the control group; and there were very significant differences between the patient of malignant tumor and the control in ApoA1 and ApoBl00 levels and their ratio all (P<0.01), suggesting that the patient of malignant tumor has disturbance of apoprotein metabolism. In the deficiency syndrome group level of ApoA, decreased, and in the excess syndrome group ApoB,100 level increased and A/B ratio in the deficiency and excess syndrome group lowered significantly all (P<0. 01) . It is indicated that changes of the level and ratio of

ApoA 1 and ApoB100 can be used as reference of differentiation of clinical deficiency and excess

1461- gera: 89125/di/ra

[TREATMENT OF LATE RECTAL CANCER BY CHINESE DRUGS]. GU ZHEDIAN. journal of gansu college of tcm. 2000;17(4):16 (chi).

1462- gera: 89197/di/ra

[EFFECTS OF A NEWLY-MADE ANTI-CANCER RECIPE ON CANCER-RESTRAINED GENE OF EXPERIMENTAL LIVER-CANCER]. GUO ZHENQIU ET AL. journal of hunan college of tcm. 2000;20(4):1 (chi*).

Aim: To study the effects of newly - made anti - cancer recipe Kangqianling in Prorenting and treating liver fibrosis. Method: The experiment adopted human liver - cancer's cell HepG2 cultivation, human liver - cancer cell rat - naked replanted carcinoma and methods of serum pharmacology, and analysed effect of anti - cancer recipe on human liver - cancer's cell plant HepG2 cells, and analysed P53 with LSAB method, expression of HepG2, cells P21 wafl/Cipl protein with immunity histochemistry method and observed its varieties of cellular morphology and expression of P21 protein gene with optical microscope and electron microscope in human liver cancer cell rat - naked replanted carcinoma. Results: Anti - cancer recipe could restrain HepG2 growth in evidence and its half growth. restraint dose (IC 50) was 1 mg/ml. With LSAB method we observed that anti - cancer recipe was able to induce from very feeble to very strong and thick karyon pigmentation in HepG2, cell plants and its low concentration (0. 1 mg/ml) was stronger than its high one (1 mg/ml) in P53 protein expression and nearly 50% of cell show P53 high expression. HepG2, P21wafl/Cipl of human liver's cancer cells in serums of all groups of anti - cancer recipe had higher expression than those of CTX group, and blank serum group (all P < 0.05). HCPG2 P21wafl/Ciplof big dose group of anti cancer recipe was higher expression than one of its middle and small dose groups (all P < 0.05). HePG2 1>21wafl/Cipl of both CTX serum and blank serum had no significant difference of its expression (all P > 0.05). After human liver cancer - cell rat - naked replanted carcinoma were treated, replanted bodies %um and weight of both anti - cancer recipe and CTX groups were respectively smaller than that of blank model group (all P < 0. 0 1), and their rate of restraining - cancer was 33 %. and in the group of the anti - cancer recipe expression of HePG2 and P21 of cancer tissue became strong and in the groups of bland model and CTX their expression was terribly low. With electron microscope we observed: in the group of anti - cancer recipe cancer - cell was integrity, and karyon chromatin was condense and gathering in sides, and cell organ frame was clear. In the blank models group, cells linked tightly; in the CTXs group cancer cell was no integrity and cell organ became vacuole and function of its restrained cancer was mainly cancer cell becoming putrescent; and function in the anti - cancer recipes group was to induce cancer cell apotosis. Conclusion: Newly - made anti - cancer recipe indeed had effective ingredients restraining HepG2, of human liver cancer cells and taking orally in effect, and its rate of restraining - cancer was same as one of CTX but it had not as evident side - effect as CTX in lowing blood leukocyte. Its mechanism restraining HepG2, growth in and out of cell was related to inducing HepG2, of liver - cancer cell apotosis and advancing expression of P53 and P21wafl/Cipl proteins.

1463- gera: 89358/di/ra

[CLINICAL RESEARCH ON ATTENUATION OF SHIQUAN DABU DECOCTION FOR PATIENTS TREATED WITH RADIOTHERAPY AND CHEMOTHERAPY]. ZHENG JIAN-JUN ET AL. shandong journal of tcm. 2000;19(7):395 (chi).

1464- gera: 89376/di/ra

[CLINICAL OBSERVATION OF 40 CASES OF RETENTION OF URINE REDUCED BY GYNECOLOGIC OPERATING OF TUMOR TREATED BY ACUPUNCTURING SAN-YIN-JIAO AND CI-MIAO POINT]. ZHE ZI-HONG ET AL. journal of chengdu university of tcm. 2000;23(2):23 (chi).

1465- gera: 89539/di/ra

CHEMIOTERAPIA E CHEMO-SUPPORT. IL PARTE.

MACIOCIA G. rivista italiana di medicina tradizionale cinese. 2000;80(2):15-20 (ita).

1466- gera: 89690/di/ra

[CLINICAL OBSERVATION OF "MUTOUHUI GLYCOSIDE PILL" IN TREATING CARCINOMA OF LARGE INTESTINEI. WANG HUAI-ZHANG ET AL. shanghai journal of tcm. 2000;34(12):16 (chi*).

The clinical effects of " Mutouhui Glycoside Pill " in treating carcinoma of large intestine and in coordinating with chemotherapy were observed. 132 patients were randomly classified into group A (treated by chemotherapy), group B (treated by Chinese herbs) and group C (treated by cheomtherapy and Chinese herbs). The life quality, long-term and short-term curative effects, immunologic function and CEA were observed after treatment. The life quality in group B and group C was increased obviously after treatment; in group C, the short-term effects and survival period were enhanced most significantly, immunity was improved and the chemotherapeutic injury was abated.

1467- gera: 89691/di/ra

[CLINICAL OBSERVATION OF "SHENQI FUZHENG INJECTION" IN TREATING MALIGNANT TUMOR]. LIN JUN-HUA ET AL. **shanghai journal of tcm.** 2000;34(12):18 (chi*). To observe the curative effects of " Shenqi Fuzheng Injection " in treating malignant tumor, 28 patients were divided into 3 groups : group A (8 cases, treated by " Shenqi Fuzheng Injection "), group B (10 cases, treated by " Shenqi Fuzheng Injection " and chemotherapy or radiotherapy) and group C (10 cases, treated by simple chemotherapy or radiotherapy), and 3-week treatment made up a course. The remission rates were 12.5%, 30% and 30% respectively in group A, group B and group C; the effective rates of improving symptom were 75%, 70% and 20% respectively, with better effects in group A and group B than in group C (P<0.05); there was no difference in improving life quality and increasing NK cell activity among the three groups. The results revealed that the injection was guite effective in easing clinical symptoms and that combination of Chinese medicine and western medicine had better effect on malignant tumor.

1468- gera: 89830/di/ra

THE COUNTERACTION OF TUOLIXIAODU POWDER ON THE ADVERSE REACTIONS CAUSED BY TRANSCATHETER HEPATIC ARTERIAL CHEMOEMBOLIZATION IN TREATING PRIMARY HEPATOCARCINOMA]. LIANG JUNXIONG ET AL. journal of beijing university of tcm. 2000;23(5):56 (chi*).

1469- gera: 90404/di/ra

[CLINICAL OBSERVATION ON 60 CASES OF SENILE GASTRIC CANCER TREATED BY HUZHEN PEIBENG CHONGJI WITH CHEMOTHERAPY]. SONG LING ET AL. fujian journal of tcm. 2000;31(3):15 (chi).

1470- gera: 90632/di/ra

[EXPERIMENT STUDY OF INFLUENCE ON APOPTOSIS OF HUMAN COLON CANCER CELL LINE WITH CHINESE TRADITIONAL MEDICINE KANG AI FANG]. CHEN ZEXIONG ET AL. chinese journal of integrated traditional and western medicine on gastro-spleen. 2000;8(3):135 (chi*).

1471- gera: 90643/di/ra

[CLINICAL EFFECTS OF REDUCING THE CHEMOTHERAPEUTIC TOXICITY WITH EAP IN POST-OPERATIVE CHEMOTHERAPY OF ADVANCED GASTRIC CANCER BY SHENMAI INJECTION]. TAO KAIXIONG ET AL. chinese journal of integrated traditional and western medicine on gastro-spleen. 2000;8(5):260 (chi*).

1472- gera: 90644/di/ra

[EFFECT OF WEIYANXIAO ON APOPTOSIS AND ITS RELATIVE GENES' EXPRESSION IN TREATING PRECANCEROSIS OF GASTRIC CANCER]. TANG CHUNZHI ET AL. chinese journal of integrated traditional and western medicine on gastro-spleen. 2000;8(5):263 (chi*).

1473- gera: 90652/di/ra

ICLINICAL AND EXPERIMENTAL RESEARCH WITH FUFANG-BANXIA-KOUFUYEIN CONTROLLING VOMITING INDUCED BY CHEMOTHERAPY]. QIAN YALIN ET AL. chinese journal of integrated traditional and western medicine on gastro-spleen. 2000;8(5):285 (chi*).

1474- gera: 90665/di/ra

[CLINICAL ANALYSIS OF GANLUYIN DRINK ON INJURE OF RADIOACTIVE ORAL MUCOSA CAUSED BY SUPER BRANCH RADIOTHERAPIES, WHICH TREATS CANCER OF NASOPHARYNX]. CAI KAI ET AL. hebei journal of tcm. 2000;22(11):807 (chi*).

1475- gera: 90888/di/ra

[THERAPEUTIC EFFECT OF JIANPI HEWEI JIANGNI DECOCTION ON CONTROLLING VOMIT INDUCED BY CHEMOTHERAPY OF MALIGNANT TUMOR]. WANG SHULIN ET AL. hebei journal of tcm. 2000;22(8):577 (chi*). Objective: To study the clinical effect of Jianpi Hewei Jiangni decoction on controlling vomit induced by chemotherapy of malignant tumor. Methods 216 patients of tumor were randomly allocated to two groups. In treatment group (n =108) the decoction was utilised and in control group (n = 108) routine treatment was applied to control vomit induced by chemotherapy. Results: The total effective rate concludes controlling vomit and increasing weight was significantly higher in treatment group (98%) compared with those in control group (63%, P < 0. 01). Conclusions: Jianpi Hewei Jiangni decoction can produce definite effect on controlling vomit induced by chemotherapy of malignant tumor.

1476- gera: 90911/di/ra

[ELEMENTARY INTRODUCTION TO LI XIUWU' S EXPERIENCE OF DIAGNOSING AND TREATING PRIMARY CARCINOMA OF LIVER]. LI YONG HONG ET AL. journal of henan college of tcm. 2000;15(3):8 (chi).

1477- gera: 90920/di/ra

THE PROTECTIVE EFFECT OF BAOFETAI TO THE LIVER AND KIDNEY HURT BY CHEMICAL TREATMENT FOR LUNG CANCER]. LI XINQING ET AL. shanxi journal of tcm. 2000;16(2):38 (chi*).

1478- gera: 90975/di/ra [CLINICAL OBSERVATION OF ZIQU MIXTURE IN PROTECTING AND TREATING NAUSEA AND VOMITING INDUCED BY CHEMOTHERAPY]. WANG DE SHAN ET AL. traditional chinese drug research and clinical pharmacology. 2000;11(3):134 (chi*).

1479- gera: 90986/di/ra

[QI XUE BAO KOU FU YE (ORAL LIQUID) AND ADRIAMYCIN FOR CHEMOTHERAPY SYNERGY IN MICE WITH TUMOR]. LA SHENG MING ET AL. henan traditional chinese medicine. 2000;20(3):22 (chi*).

1480- gera: 90987/di/ra

[EXPERIMENTAL STUDY OF THE EFFECT OF ZHENG SHENG BAI GAO ON THE HEMATOPOEISIS AND IMMUNE SYSTEM OF MICE AFTER CHEMOTHERAPY]. LU MEI ET AL. henan traditional chinese medicine. 2000;20(3):20

1481- gera: 90989/di/ra

[DIFFERENTIATION AND TREATMENT PLUS QIGONG THERAPY FOR THE INTERMEDIATE AND LATE STAGE OF 153 CASES OF PRIMARY CARCINOMA OF THE LIVER]. FAN YAN LEI ET AL. henan traditional chinese medicine. 2000;20(3):35 (chi*).

The 153 patients of primary carcinoma of liver include 30 cases of stagnation of qi and blood stasis, 52 imparirment of yin due to blood stasis, 34 water retention due to hypofunction of the spleen and 37 of weakened body resistance. They are differentiated and treated in combination with gigong and general chemotherapy. Observation of the changes of tumor itself as well as those of the survival period and weight post treatment has shown that best result is seen in those who are

treated by differentiating syndromes in combination with gigong. Thus, it's believed this is an ideal therapy for the intermediate and late stage of primary carcinoma of liver.

1482- gera: 91137/di/ra

IRECENT DEVELOPMENTS ON TRADITIONAL CHINESE MEDICINE TO TREAT PRIMARY BRONCHOPULMONARY CANCER]. WANG ZHONGSHAN. research of tcm. 2000;16(6):48 (chi).

1483- gera: 91177/di/ra

[CLINICAL OBSERVATION ON INTERMEDIATE-LATE RECTAL CARCINOMA TREATED BY XIAOZHILING INJECTION]. YAN RUHAO ET AL. hubei journal of tcm. 2000;22(10):22 (chi).

1484- gera: 91398/di/ra [MALIGNANT TUMOR TREATED SUBSERVIENTLY BY SMALL DOSE CHINESE DRUGS INJECTING POINT]. GAO ZHUO ET AL. hubei journal of tcm. 2000;22(5):22 (chi).

1485- gera: 91399/di/ra

[30 CASES OF CARDIAC CANCER TREATED WITH REMOVING BLOOD STASIS AND RESOLVING MASSES]. ZHANG SHENYING. hubei journal of tcm. 2000;22(5):23

1486- gera: 91445/di/ra [CLINICAL OBSERVATION OF SYNERGIC AND ANTI-TOXIC EFFECT OF SHENGMAI INJECTION ON PRIMARY LIVER CANCER WITH TREATMENT OF TRANSCATHETER ARTERIAL EMBOLIZATION]. CHEN ZHE ET AL. journal of anhui traditional chinese medical college. 2000;19(5):15 (chi*).

1487- gera: 91457/di/ra

[80 CASES OF NON-SMALL CELL LUNG CANCER TREATED BY YIFEI RECIPE AND CHEMOTHERAPY]. WANG RUI-PING ET AL. journal of anhui traditional chinese medical college. 2000;19(6):23 (chi*).

1488- gera: 91458/di/ra

JOBSERVATION ON SHORT-TERM EFFECT OF COMBINED THERAPY OF CHINESE AND WESTERN MEDICINE ON MALIGNANT TUMOR]. LI YONG-AN ET AL. journal of anhui traditional chinese medical college. 2000;19(6):25 (chi*).

1489- gera: 91482/di/ra

ICLINICAL AND PRACTICAL OBSERVATION ON SHIQUAN DABU TANG'S REDUCING SIDE EFFECTS OF CHEMOTHERAPY]. QI CHONG. journal of zhejiang college of tcm. 2000;24(4):16 (chi).

1490- gera: 91488/di/ra

ICLINICAL OBSERVATION ON TREATMENT OF CHEMO-OR RADIOTHERAPY INDUCED LEUKOPENIA WITH **DEXAMETHASONUM AT ZUSANLI POINT]. GUO** JIANXING. journal of zhejiang college of tcm. 2000;24(4):39

A Clinical Study of Zusanli (S36) Point Injection Therapy (ZPIT) with Dexamethasonum, on leukocyte count in 36 patients with ancer of advanced stage after chemo-or radiotherapy were observed. The results showed that the clinical curative effect of ZPIT was significantly higher than that of control group, the count was (4. 73±1.17) X 10'/L and (3. 30±1. 06) X 10'/L respectively, the difference was significant (P<0. 01). It indicates that ZPIT can improve hemopoietic function of bone marrow and has leukocytogenic effect.

1491- gera: 91526/di/ra

[EXPERIMENTAL STUDY ON THE EFFECT ON COLORECTAL CANCER IN ANIMAL TAKING BY TUMOR NECROSIS FACTOR AND ACUPUNCTURE]. RAO BEN-QIANG ET AL. chinese journal of basic medicine in tcm. 2000;6(9):55 (chi*)

Objective: it were to study the effect on the central neurotransmitter of moxibustion when it were used to treat rheumatoid arthritis, so as to determine the mechanism of anti-

inflammatory and immunity action of moxibustion. Method: adjuvant arthritis models rats were made, and the degree of inflammatory swelling, IL-6, IL-2 and NE, 5-HT, NO in hypothalamus after moxibustion on point "Shen shu" were measured. Result: 1) treatment of moxibustion alleviated the swelling, reduced IL-6 and increased IL-2 (P<0.01, comparing with control group), indicating that moxibustion can relieve inflammation, restrain the forming of inflammatory factors and raise the immunity of body; 2) treatment of moxibustion elevated the level of NE, 5-HT and brought down the level of NO, indicating that moxibustion can activate or regulate the anti-inflammatory and immunity function of HPA axis, and help relieve adjuvant arthritis. Conclusion: moxibustion has the effect of anti-inflammatory and immunity and hypothalamic neurotransmitters may take part in its action of central

1492- gera: 91802/di/ra [ANALYSIS OF THE TONGUE PICTURE OF PRIMARY LUNG CANCER]. SU JINMEI ET AL. shanxi journal of tcm. 2000;16(5):12 (chi*).

The tongue pictures of 380 cases of primary lung cancer were observed and analysed. The value of tongue picture analysis on the judgement of lung cancer stage was found. Pink tongue with thin and moist mostly indicated the early stage of cancer. Red or purplish tongue with thick early and greasy fur mostly indicated the intermediate or late stage of cancer. The diseases turned better when the purplish tongue turned pink, or the thick fur turned thin or unquoted tongue turned thin fur, on the contrary, the disease turned worse. Bright red tongue with less fur or without fur indicated that there was no stomach-gi left and the unfavourable prognosis. All above showed the effect of tongue picture analysis on the prognosis of primary lung cancer.

1493- gera: 91908/di/ra

[CLINICAL OBSERVATION ON EFFECT OF BUXUE GRUEL ON PROMOTING BLOOD CELL AND REDUCING ADVERSE **REACTION OF DIGESTIVE CANAL OF PATIENTS** TREATED WITH CHEMOTHERAPY]. GAO HUI ET AL. shandong journal of tcm. 2000;19(9):533 (chi).

1494- gera: 91922/di/ra

ITREATING 40 CASES OF RADIATION PNEUMONITIS WITH INTEGRATION OF TRADITIONAL CHINESE AND WESTERN MEDICINE]. ZHAO FU-ZHI ET AL. shandong journal of tcm. 2000;19(12):737 (chi).

1495- gera: 92006/di/ra

[CLINICAL AND EXPERIMENTAL RESEARCH ON INTERCEPTING THE PRE-PATHOGENIC CHANGES OF GASTRIC CARCINOMA BY CHINESE HERBAL MEDICINE]. YUAN HONGXIA ET AL. tianjin journal of tcm. 2000;17(5):56 (chi).

1496- gera: 92092/di/ra

[INFLUENCE OF THREE KINDS OF CHINESE MEDICINES ON MOUSE'S UNTOWARD EFFECT INDUCED BY CO60 EXPOSURE]. ZHOU YI-PING ET AL. chinese journal of traditional medical science and technology. 2000;7(6):369 (chi).

1497- gera: 92220/di/ra

[RELATIONSHIP OF METASTASIS OF HUMAN COLORECTAL CANCER WITH TYPE II COLLAGENASES]. CAI XIANGJUN ET AL. chinese journal of surgery of integrated traditional and western medicine. 2000;6(6):389 (chi*).

1498- gera: 92279/di/ra

[A CLINICAL OBSERVATION ON THE DETOXIFYING EFFECT OF THE RECIPE FU ZHENG JIE DU FANG IN CHEMOTHERAPY OF ACUTE LEUKEMIA]. YANG WENHUA ET AL. journal of tcm. 2000;41(10):610 (chi).

1499- gera: 92304/di/ra [ADVANCES IN INTEGRATED TREATMENT OF CARCINOMA OF ESOPHAGUS]. YE JIA ET AL. journal of tcm. 2000;41(11):693 (chi).

1500- gera: 92315/di/ra

[STRENGTHENING BODY AND DISPELLING PATHOGEN THERAPY FOR HEPATOCARCINOMA]. ZHANG CUN-YI ET AL. shanghai journal of tcm. 2000;34(11):22 (chi*).

1501- gera: 92352/di/ra

[CORRELATION BETWEEN SPLEEN-ASTHENIA PATTERN IN ADVANCED GASTRIC CARCINOMA AND ITS EXPERIMENTAL DETECTION INDEXES]. ZHENG JIAN ET AL. shanghai journal of tcm. 2000;34(8):12 (chi*). 153 patients with spleen-asthenia pattern in advanced gastric carcinoma were treated and the relevant indexes were observed to investigate the correlation between the degrees of spleen-asthenia and experimental indexes. Results showed that in the patients with moderate and severe spleen-asthenia, the RBC, hemoglobin, total protein and albumin dropped; blood sendimentation quickened; complements C3, C4 and IgA rose; T cell subgroups CD3 and CD8 fell; all the changes were significant (P<0.05-0.01). Therefore, these indexes could be utilized to judge the degrees of

1502- gera: 92353/di/ra

[CLINICAL OBSERVATION OF INTRAVENOUS DRIP OF "ANTIINFLAMMATION I" IN TREATING 24 PATIENTS WITH MID AND LATE GASTRIC CARCINOMA]. ZHOU RONG-YAO ET AL. shanghai journal of tcm. 2000;34(8):15 (chi*).

1503- gera: 92372/di/ra
[EXPERIMENTAL STUDY ON THE INFLUENCE OF "CANCER-ELIMINATING INJECTION" ON HUMAN HEPATOCARCINOMA CELLS]. SUN JUE ET AL. shanghai journal of tcm. 2000;34(7):12 (chi*).

1504- gera: 92373/di/ra

JOBSERVATION OF CLINICAL EFFECTS AND IMMUNE INDEXES OF TUMOR TREATED BY "PINGXIAO CAPSULE" AND CHEMOTHERAPY]. NI AI-DI ET AL. shanghai journal of tcm. 2000;34(7):15 (chi*).

1505- gera: 92401/di/ra

[EFFECTS OF HUANGQI INJECTION ON IMMUNOLOGIC FUNCTION IN PATIENTS WITH PRIMARY CARCINOMA OF LIVER]. SONG HUAI-YU ET AL. journal of shandong university of tcm. 2000;24(6):459 (chi*).

1506- gera: 92551/di/ra

[EFFECT OF HUOLI CAPSULE ON PERIPHERAL BLOOD PICTURE AND IMMUNOLOGIC FUNCTION AFTER **RADIOTHERAPY AND CHEMOTHERAPY IN PATIENTS** WITH MALIGNANT TUMOR]. LU SHOUBIN ET AL. journal of emergency in tcm. 2000;9(6):252 (chi).

1507- gera: 92552/di/ra

[TREATMENT OF LATE ESOPHAGEAL CANCER PAIN WITH INTEGRATED TRADITIONAL CHINESE AND WESTERN MEDICINE]. LIN SHAODONG. journal of emergency in tcm. 2000;9(6):254 (chi).

1508- gera: 92958/di/ra

[RESEARCH ON INHIBITORY EFFECT OF VENIN COMPLEX ENZYME ON HUMAN HEPATOCELLULAR CARCINOMA BEL- 7402]. ZOU JING ET AL. liaoning journal of tcm. 2000;27(9):424 (chi*).

1509- gera: 93117/di/ra

[DISCUSSION ON SYNDROME DIFFERENTIATION AND TREATMENT OF INTESTINAL CANCER]. CHENG JIANHUA. new journal of traditionnal chinese medicine. 2000;32(12):3 (chi).

1510- gera: 93533/di/ra

[STUDIES ON THE ANTINEOPLASTIC CONSTITUENTS FROM MARINE BRYOZOAN BUGULA NERITINA INHIBITING SOUTH CHINA SEA (III): ISOLATION AND STRUCTURAL ELUCIDATION OF BRYOSTATIN 10,11 AND 18]. LIN HOUWEN ET AL. chinese journal of marine drugs. 2000;19(4):1 (chi*).

1511- gera: 93695/di/ra

[OBSERVATION ON LATE LIVER CANCER TREATED BY WAY OF TCM IN COMBINATION WITH CHEMOTHERAPY IN SMALL DOSE]. WANG SHOUFENG ET AL. inner mongol journal of tcm. 2000;19(4):2 (chi).

1512- gera: 93783/di/ra

[THERAPEUTIC EFFECT ON MALIGNANT TUMORS OF DIGESTIVE TRACT BY COMBINED TREATMENT, ANALYSIS OF 135 CASES]. WANG ZHIQUAN ET AL. chinese journal of surgery of integrated traditional and western medicine. 2000;6(5):311 (chi*).

1513- gera: 93882/di/ra

SURVEY IN RESEARCH ON TUMOR TREATMENT BY ACUPUNCTURE IN CHINA]. FAN YUSHANG. guangxi journal of tcm. 2000;23(2):54 (chi).

1514- gera: 94360/di/ra

BREAST CANCER. A SUMMARY OF RESULTS. SHAW S. compmed bulletin. 2000;2(2):1 (eng).

1515- gera: 94361/di/ra

BREAST CANCER. OPINION. MILES D. compmed bulletin. 2000;2(2):2 (eng).

1516- gera: 94362/di/ra BREAST CANCER.

NATUROPATHY, OSTEOPATHY, ACUPUNCTURE-A PRACTITIONER'S PERSPECTIVE. GOODMAN J. compmed bulletin. 2000;2(2):4 (eng).

1517- gera: 160190/di/re

LE CANCER DU SEIN. TEXTE DES RECOMMANDATIONS ANAES. j radio. 2000; 81:269-80 (fr).

Proscription de l'acupuncture au niveau du membre supérieur homolatéral,

1518- gera: 89265/di/ra

[CARCINOMA OF STOMACH (48 CASES) TREATED BY "SHEN-QI-SHE-CHAN" DECOCTION]. CHEN NANYANG. journal of practical tcm. 2001;17(1):12 (chi).

1519- gera: 89281/di/ra

TREATMENT OF HEPATIC TUMOR BY XIAO LIU YE: A CLINICAL OBSERVATION OF 36 CASES]. QU LIANGYI ET AL. new journal of tcm. 2001;33(1):53 (chi).

1520- gera: 89580/di/ra

JEFFECTS OF SHENXIANG YANGWEI POWDER ON PRECANCEROUS LESION IN CHRONIC ATROPHIC GASTRITIS]. SUN WEI-FENG ET AL. journal of anhui traditional chinese medical college. 2001;20(1):13 (chi*).

1521- gera: 89586/di/ra

ISTUDY ON GYPENOSIDES INHIBITING NEOPLASM GROWTH AND ELEVATING IMMUNOLOGICAL FUNCTION IN LEWIS LUNG CANCER OF MICE]. LIU XIA ET AL. journal of anhui traditional chinese medical college. 2001;20(1):43

1522- gera: 89650/di/ra
[STUDY ON THE EFFECT OF QINGDUYIN AND YANGZHENG TABLET COMBINING WITH CHEMOTHERAPY ON IMMUNOLOGICAL FUNCTION IN L7212 LEUKEMIA RAT]. ZENG GUO-WU ET AL. chinese journal of traditional medical science and technology. 2001;8(1):19 (chi).

1523- gera: 89743/di/ra

[EFFECT OF WEN-SHEN HUO-XUE CHINESE DRUGS ON HUMAN BREAST CARCINOMA CELL LINE MCF-7 PROLIFERATION IN VICO AND IN VITRO]. LIU SHENG ET AL. chinese journal of basic medicine in tcm. 2001;7(1):54 (chi*).

1524- gera: 89793/di/ra

[LIVER CANCER OF LATE STAGE (31 CASES) TREATED BY EXTERNAL APPLICATION OF CHINESE DRUGS]. ZHU YINGLAI ET AL. journal of practical tcm. 2001;17(2):36 (chi). 1525- gera: 89870/di/ra

[PROSPECTS OF STUDY ON TREATMENT OF **CARCINOMATA WITH INTEGRATION OF TCM WITH** WESTERN MEDICINE IN 21TH CENTURY]. YU RENCUN ET AL. journal of tcm. 2001;42(1):50 (chi).

1526- gera: 90005/di/ra

[ANALYSIS ON THERAPEUTIC EFFECTS OF POINT-INJECTION OF METOCLOPRAMIDE AND VITAMIN B6 INTO ZUSANLI POINT FOR TREATMENT OF RESPONSE OF DIGESTIVE TRACT AFTER CHEMOTHERAPY]. MA DONGXING ET AL. chinese acupuncture and moxibustion. 2001;21(2):75 (chi*).

Purpose: To observe the therapeutic effect of acupointinjection of metoclopramide and vitamins B6 for treatment of response of digestive tract after chemotherapy. Methods: Acupoint-injection of metoclopramide and vitamins B6 into Zusanli (ST36) was used for treatment of response of the digestive tract after chemotherapy in 162 cases of malignant cancer and the therapeutic effect was compared with that of routine intramuscular injection of Endanxitone. Results: The control rate for the digestive tract response was 93.9 % in the acupoint-injection group and 95. 0 % in the control group, P >0 .05; the toxic-side effect was 8.5 % and 26.3 % respectively, P < 0. 05. Conclusion: The two therapeutic have similar control rate for the digestive tract response and the toxic-side effect in the acupoint-injection group is obviously lower than that of the control group.

1527- gera: 90014/di/ra

IOBSERVATION ON CLINICAL APPLICATION OF COMBINED ACUPUNCTURE ANESTHESIA IN RADICAL OPERATION FOR CARCINOMA OF ESOPHAGUS]. TANG YUMIN ET AL. chinese acupuncture and moxibustion. 2001;21(2):102 (chi*).

Methods: Forty-five cases of radical operation of carcinoma of oesophagus were randornly divided into, observation group, and electrode-plate group and drug-anesthesia group. In the observation group and the electrode-plate group, bilateral Xiayifeng and Sanyanyluo (TE8)-through-Ximen (PC4) were selected and the silver needle or electrode plate was connected to a Han's Stimulator. In the drug-anesthesia group other treatment was same as the above, two groups except acupuncture and electrode plate anesthesia. Results: The anaesthetic effects in the former two groups were significantly superior to that of the drug-anesthesia group, with lighter inhibition of the heart and blood vessels, stable awaking and rapid recovery. Conclusion Combined acupuncture anesthesia. is one of anaesthetic methods for radical operation of carcinoma of oesophagus.

1528- gera: 90612/di/ra [EFFECT OF LONGHU SANBAODAN ON IMMUNOCYTE OF LOADING TUMOR MICE]. PANG DEXIANG ET AL. chinese journal of integrated traditional and western medicine on digestion. 2001;9(1):28 (chi*).

1529- gera: 90679/di/ra

INEW IDEA OF ONCOMA TREATED WITH COMBINATION OF TRADITIONAL CHINESE AND WESTERN MEDICINES]. YANG XINZHONG ET AL. hubei journal of tcm. 2001;23(1):3 (chi).

1530- gera: 90746/di/ra

[RECENT RESEARCH INTO TCM PATHOGENESIS OF METASTATIC CARCINOMA]. HE CHUNMEI. zhejiang journal of tcm. 2001;36(2):84 (chi).

1531- gera: 90790/di/ra

[QIU JIAXIN'S ACADEMIC IDEAS IN THE PREVENTION AND TREATMENT OF GASTRIC CANCER]. YANG JIN-ZU. liaoning journal of tcm. 2001;28(2):80 (chi*)

Prof. Qiu Jiaxin's academic ideas in the prevention and treatment of gastric cancer was introduced. It was thought that gastric cancer was a whole disease. It must be combined treatment with prevention of the disease. Prof. Qiu was good at applying classic formula of TCM and emphasised integrating TCM with accepted tumor theory of western medicine under

the instruction of TCM theory.

1532- gera: 90795/di/ra [CLINICAL STUDY ON THE SYNERGIC FUNCTION OF FUZHENG ELIMINATING CANCER JUICE IN THE CHEMIOTHERAPY]. GAO PENG ET AL. liaoning journal of tcm. 2001;28(2):97 (chi*).

1533- gera: 90838/di/ra

[CLINICAL OBSERVATION OF "LUNG-NOURISHING ANTI-TUMOR BEVERAGE" IN TREATING NONSMALL-CELL LUNG CANCER IN 271 CASES]. LIU JIA-XIANG ET AL. shanghai journal of tcm. 2001;35(2):4 (chi*).

To observe the curative effects of "Lung-Nourishing Anti-tumor Beverage" (Astragalus root, Glehnia root, Lucid asparagus, etc) in treating nonsmall-cell lung cancer, 271 subjects were randomly classified into group A (127 cases treated by "Lung-Nourishing Anti-tumor beverage", group B (80 cases treated by "Lung-Nourishing Anti-tumor Beverage" and chemotherapy) and group C (64 cases treated by single chemotherapy). Results: CR (complete remission) +PR (partial remission) +NC (no change) amounted to 81.10% in group A, 87.50% in group B and 71.88% in group C; short- term metastasis rates were 23.50% in group A, 20.00% in group B and 35.71% in group C; the "Beverage" could prolong the survival period, increase survival rate and quality, and enhance the immunity.

1534- gera: 90848/di/ra

[SPLEEN-QI NOURISHING THERAPY FOR POSTOPERATIVE INTESTINAL CANCER IN 48 CASES]. LU KE-QIN. shanghai journal of tcm. 2001;35(2):29 (chi*) 48 cases with postoperative intestinal cancer were treated by nourishing spleen-qi, disinhibiting dampness to stop diarrhea, melting blood-stasis and relieving toxin. Results showed that the clinical symptoms and survival quality improved to varying degrees and the total effective rate was 87.5%.

1535- gera: 91556/di/ra

[CLINICAL STUDY ON PREVENTING THE VIRULENT AND SIDE-EFFECT OF MALIGNANT TUMOR DUE TO CHEMOTHERAPY BA ACU-MOX]. FAN YU ET AL. shanghai journal of acupuncture and moxibustion. 2001;20(1):12 (chi*).

Objective: To investigate the different action of moxibustion and hydropuncture on the virulent and side-effect of malignant tumor resulted from chemotherapy. Methods: Sixty-three patients with malignant tumor were randomly divided into prevention group (23 cases), hydropuncture group (22 cases) and control group (18 cases). In the course of chemotherapy, the patients were respectively applied with moxibustion, Astragalus Root injection and routine western medicines to observe the changes of leukocyte number and immunoglobulins before and after treatment. Results: Both moxibustion and hydropuncture could increase the number of leukocyte and immunoglobulins and their effects were better than western medicine (P<0. 05, P<0. 01); and the hydropuncture was better than moxibustion in increasing the number of leukocyte (P<0.05). Conclusion: moxibustion and hydropuncture could prevent the virulent and side-effect of malignant tumor caused by chemotherapy and they had different effects.

1536- gera: 91706/di/ra

[CLINICAL DOUBLE BLIND AND SIMULATED TESTS ON GUISENG ZHITONG MIXTURE]. LU RENQI ET AL. yunnan journal of tcm and materia medica. 2001;22(4):5 (chi*).

1537- gera: 92231/di/ra

[DIFFERENTIATION OF SYMPTOM COMPLEX OF BREAST CANCER BY INTEGRATED MEDICINE]. ZHANG JIN ET AL. chinese journal of surgery of integrated traditional and western medicine. 2001;7(1):13 (chi*)

Objective: To study the differentiation of syndromes of breast cancer by integrated traditional Chinese and western medicine Methods: A series of 147 cases of breast cancer were studied by using traditional Chinese method of differentiation of syndromes, the states of humoral immunity and cytoimmunity were also, detected. Results: According to the clinical manifestation and tongue inspection. Patients with breast

cancer were divided into five clinical types: stagnation of qi; blood stasis; Yin-blood deficiency; Yang-qi deficiency and breast cancer without general abnormality. Immunological examination showed that in the early stage most humoral immunity criteria were elevated and those of cytoimmunity decreased, especially in late cases. Conclusion: Stagnation of qi and blood stasis occurred mostly in early cases of breast cancer, whereas Yin-blood and Yang-qi deficiency usually appeared in late cases with depressed

1538- gera: 92620/di/ra

[RECENT PROFILE CONCERNING THE PRIMARY LIVER CANCER TREATED WITH TCM]. WANG LI-LIN ET AL journal of laoning college of traditional chinese medicine. 2001;3(1):67 (chi).

1539- gera: 92641/di/ra [PROGRESS OF DRUG STUDIES FOR INDUCING APOPTOSIS AND RESISTING APOPTOSIS]. HE JIAN-CHENG ET AL. chinese journal of basic mtc. 2001;7(3):77

1540- gera: 92683/di/ra

[EFFECT OF VARIOUS DRUGS AND THEIR COMPATIBILITY OF STRENGTHENING HEALTHY QI ON INDUCING SMMC-7721 CELL DIFFERENTIATION]. ZHOU JIAN-FENG ET AL. chinese journal of traditional medical science and technology. 2001;8(2):75 (chi*). Objective: To investigate the effect of various drugs for strengthening healthy Qi and their compatibility on inducing SMMC - 7721 hepatocarcinoma cell differentiation and the mechanism. Methods: some herbs for strengthening healthy Qi, which were often used to treat live cancer in clinic, such as qi tonics, yang tories, tonics and yin tonics were selected and divided into four complex groups according to the Yin - Yang principle, then decocted, administrated the rats via gavage and separated die phannacal sera for using on SMMC - 7721 cells in vitro. Normal sera of rats and Retinal acid as controls. HE stain method was applied to observe cell morphosis; RIA, Albumin, measured AFP and cAMP by ELISA. Results: Albumin secretion and cAMP of the cell increased, AFP secretion decreased in each compatibility group and the ratio

1541- gera: 93443/di/ra

of the cell nucleus to plasma decreased.

[INFLUENCE OF "BU-SHENG-YI-QI" GRANULE TO NATURAL KILLER CELL AND ACTIVITY OF INTERLEUKIN-2 OF P388 LEUKEMIA MICE AFTER TREATING BY CHEMISTRY THERAPY]. LI OU ET AL. journal of chengdu university of tcm. 2001;24(1):40 (chi).

1542- gera: 93462/di/ra

ITREATMENT OF STAGES II AND III OF PRIMARY HEPATOCARCINOMA BY GAN HUO XI COMBINED WITH TAE: A CLINICAL OBSERVATION OF 23 CASES]. SONG JIE ET AL. new journal of tcm. 2001;33(3):53 (chi*).

1543- gera: 93708/di/ra

[OBSERVATION ON EFFECT OF MO TONG PASTE IN TREATMENT OF OSTALGIA DUE TO METASTATIC CANCER]. XU ZHONG-WEI ET AL. liaoning journal of tcm. 2001;28(3):146 (chi*).

1544- gera: 93711/di/ra

[RESEARCH ON MODIFIED DECOCTION OF INULAE AND HAEMATITUM PREVENTING AND CURING VOMITING INDUCED BY TUMOR CHEMICAL THERAPY]. WANG DE-SHAN ET AL. liaoning journal of tcm. 2001;28(3):183 (chi*).

1545- gera: 93932/di/ra

[CLINICAL STUDY OF COMBINING INTRA-PERITONEAL THERAPY AND TCM FOR CARCINOMATOUS ASCITES]. WANG WEIPING ET AL. hebei journal of tcm. 2001;23(3):167 (chi*).

1546- gera: 93935/di/ra

[CLINICAL STUDY OF GANLU DRINK ON ORAL ULCER DUE TO CHEMOTHERAPY]. HUANG ZHIFEN ET AL. hebei journal of tcm. 2001;23(3):198 (chi*).

1547- gera: 94200/di/ra

[CLINICAL STUDY ON EFFECT OF GINSENOSIDE IN INDUCING RECTAL CANCER CELL APOPTOSIS]. XING JIAN-HUA ET AL. chinese journal of integrated traditional and western medicine. 2001;21(4):260 (chi*).

1548- gera: 94201/di/ra

[STUDY ON EFFECT OF MOXIBUSTION AND GUBEN YILIU COMBINED WITH CHEMOTHERAPY IN TREATING MIDDLE- LATE STAGE MALIGNANT TUMOR]. LIU JU ET AL. chinese journal of integrated traditional and western medicine. 2001;21(4):262 (chi*).

Objective: To observe the complementary function of moxibustion and Guben Yiliu JU (GBYL), a Chinese herbal composite preparation, in combination with chemotherapy Methods: Eighty-one patients of middle-late stage malignant tumor were randomly divided into three groups, 16 in the control group treated with chemotherapy alone, 35 in the TCM group treated with chemotherapy combined GBYL and 30 in the TCM combined moxibustion group. The therapeutic effect of treatment was evaluated according to the immediate effect, living quality scoring, etc. Results: The comprehensive living quality score and Karnofsky score dropped significantly in the control group after treatment with significant increase of pain score and decrease of tongue figure score (P < 0.05 or P < 0.05) 01). In the TCM group, the former two criteria lowered less than those in the control group did, but no significant difference in the latter two criteria was shown. For those in the TCM combined moxibustion group, all the four criteria were improved better than those in the control group, (P < 0.01 or P < 0. 05). Conclusion: GBYL combined or not combined with moxibustion could improve the living quality of patients received chemotherapy.

1549- gera: 94211/di/ra [PROGRESSION OF RESEARCHES ON PC-SPES ANTI-CANCER AGENTS OF PROSTATIC CARCINOMA IN USA]. ZHANG QUN-HAO ET AL. chinese journal of integrated traditional and western medicine. 2001;21(4):295 (chi).

1550- gera: 94301/di/ra

ISELECTION OF OPTIMAL INDICES COMBINATION FOR DIAGNOSIS OF LIVER CANCER]. HE QINGSI ET AL. chinese journal of surgery of integrated traditional and western medicine. 2001;7(2):73 (chi*).

1551- gera: 94302/di/ra

IBRUČEA JAVANICA OIL EMULSION INDUCES APOPTOSIS IN HUMAN URINARY BLADDER CANCER CELL LINE BIU-87 CELL]. LIU YUE ET AL. chinese journal of surgery of integrated traditional and western medicine. 2001;7(2):76 (chi*).

1552- gera: 94317/di/ra

IEFFECT OF QUANJIA YANGSHEN CAPSULE ON THE TUMOR WEIGHT AND THE RBC IMMUNITY OF MICE WITH TUMOR]. REN LIAN-SHENG ET AL. shanxi journal of tcm. 2001;17(2):50 (chi*).

1553- gera: 94324/di/ra

TREATING 16 CASES OF MALIGNANT THORACIC HYDROPS WITH INTEGRATED TCM AND WM]. LIU QI. guangxi journal of tcm. 2001;24(2):19 (chi).

1554- gera: 94413/di/ra

[CLINICAL OBSERVATION ON TREATING PROPHASE DISORDER OF GASTIC CARCINOMA BY TEA PIGMENT]. YUAN HONGXIA ET AL. tianjin journal of tcm. 2001;18(2): (chi).

1555- gera: 94428/di/ra

[53 CASES OF BONE METASTASIS IN THE ADVANCED BREAST CANCER TREATED BY CHEMICAL THERAPY WITH CHINESE MEDICINE]. WANG HUAI-ZHANG. liaoning journal of tcm. 2001;28(4):211 (chi*).

1556- gera: 94485/di/ra

["LUNG-NOURISHING AND MASS-DISSOLVING

DECOCTION" FOR LATE LUNG CANCER IN 40 CASES]. HUANG TING. shanghai journal of tcm. 2001;35(4):16 (chi*).

1557- gera: 94502/di/ra

[CLINICAL STUDY ON LIVER CANCER TREATED BY CHINESE MEDICINE]. SONG DONG-JUAN. shanghai journal of tcm. 2001;35(4):47 (chi*).

This paper presents the advances of the clinical treatment of liver cancer by Chinese medicine in recent years. Previous literature revealed that the treatment of liver cancer focused on the whole body and local area, meanwhile, interventional treatment by Chinese medicine is the hot spot in the future.

1558- gera: 94527/di/ra

[A CONTROLLED CLINICAL STUDY BETWEEN HEPATIC **ARTERIAL INFUSION WITH EMBOLIZED CURCUMA** AROMATIC OIL AND CHEMICAL DRUGS IN TREATING PRIMARY LIVER CANCER]. CHENG JIAN-HUA ET AL. chinese journal of integrated traditional and western medicine. 2001;21(3):165 (chi*).

1559- gera: 94528/di/ra

[CLINICAL STUDY ON TREATMENT OF MIDDLE-ADVANCED STAGE LIVER CANCER BY COMBINED TREATMENT OF HEPATIC ARTERY CHEMOEMBOLIZATION WITH GAN'AI NO. I AND NO. II]. SHAO ZHONG-XING ET AL. chinese journal of integrated traditional and western medicine. 2001;21(3):168 (chi*).

1560- gera: 94529/di/ra

JEFFECT OF HUANGQI ZENGMIAN POWDER ON INTERSTITIAL RESPONSE IN PATIENTS WITH **ESOPHAGEAL CANCER AT PERI-OPERATIONAL** PERIOD]. GAO XIN-PING ET AL. chinese journal of integrated traditional and western medicine. 2001;21(3):171 (chi*).

1561- gera: 94530/di/ra

[CLINICAL OBSERVATION ON EFFECT OF ELECTROACUPUNCTURE THERAPY IN TREATING SUPERFICIAL TUMOR]. XIN YU-LING ET AL. chinese journal of integrated traditional and western medicine. 2001;21(3):174 (chi*).

Objective: To investigate the clinical effect of electroacupuncture therapy (EAT) in treating superficial tumors. Methods: The healthy tissue was protected by insulation sleeve, and the platinum electrodes served as needles was inserted into the tumor and connected to an EAT instrument using galvanic current. The electric voltage applied was 6 - 8V, the electric current was in a range of 40 - 80mA, and 80 - 100 coulomb electricity for 1 cm diameter of tumor mass was administered. Results: In the 320 cases, 123 were complete remission (CR), 129 partial remission (PR), 36 with their tumor shrinked by 1/4 and 32 with size of tumor unchanged. The total effective rate (CR + PR) was 78. 7 %. Conclusion: EAT shows good effect in treating superficial tumor and provides a new therapeutic means for the patients with tumor of unresectable or relapsed. It is a simple, convenient, safe and effective method with less injury and quick recovery.

1562- gera: 94579/di/ra

[EFFECTS OF FU ZHENG HUA YU PRESCRIPTION ON INHIBITORY ACTION ON METASTASIS AND SUBGROUPS OF T-LYMPHOCYTES AFTER OPERATION IN THE PATIENT OF STOMACH CANCER]. BU PING ET AL. journal of tcm. 2001;42(4):226 (chi).

1563- gera: 94599/di/ra

[CLINICAL STUDY ON COMBINED TREATMENT OF TCM WITH POST HEPATOCELLULAR CARCINOMA LP-TAE]. LI HAILIANG ET AL. chinese journal of integrated traditional and western medicine on digestion. 2001;9(2):97 (chi*).

1564- gera: 94776/di/ra CONSIDERAZIONI SULL'EFFETTO RADIOSENSIBILIZZANTE DEI FARMACI CINESI. LIU LIN ET AL. rivista italiana di medicina tradizionale cinese. 2001;83(1):75-7 (ita*).

Traduction italienne de réf gera: [71173]. Radiotherapy is one of the main therapeutic methods for malignant tumors at present. Clinically, about 70% cases of malignant tumor are treated by radiotherapy. However, the therapeutic effects of radiotherapy are often unsatisfactory because of the particular biological characteristics and local microenvironment of cancer cells, and of other factors as well. Therfore, radiosensitizing agents have become as a heat of study in radiation oncology. Although some radiosensitizing compounds can sensitize specifically hypoxic cells with higher sensitivity- enhancing ratio, their clinical applications are greatly limited due to severe toxic side effects. Thus, increasing attention has been paid to the searching for radiosensitizing agents with high efficacy and low toxicity in Chinese herbs. In recent 10 years, the studies have obtained certain achievements as reported in the

1565- gera: 94822/di/re

COMPLEMENTARY THERAPIES IN PALLIATIVE CANCER CARE. ERNST E. cancer. 2001;91(11):2181-5 (eng). BACKGROUND: Complementary medicine has become an important aspect of palliative cancer care. This overview is primarily aimed at providing guidance to clinicians regarding some commonly used complementary therapies. METHODS: Several complementary therapies were identified as particularly relevant to palliative cancer care. Exemplary studies and, where available, systematic reviews are discussed. RESULTS: Promising results exist for some treatments, e.g. acupuncture, enzyme therapy, homeopathy, hypnotherapy, and relaxation techniques. Unfortunately, the author finds that the evidence is not compelling for any of these therapies. CONCLUSION: These results point to some potential for complementary medicine in palliative care. They also demonstrate an urgent need for more rigorous research into the value (or otherwise) of such treatments in palliative and supportive cancer care.

1566- gera: 94824/di/re

ACUPUNCTURE FOR PILOCARPINE-RESISTANT XEROSTOMIA FOLLOWING RADIOTHERAPY FOR HEAD AND NECK MALIGNANCIES. JOHNSTONE PA ET AL. int j radiation oncology biol phys. 2001;50(2):353-7 (eng). OBJECTIVE: Xerostomia is a frequent and potentially debilitating toxicity of radiotherapy (XRT) for cancers of the head and neck. This report describes the use of acupuncture as palliation for such patients. METHODS AND MATERIALS: Eighteen patients with xerostomia refractory to pilocarpine therapy after XRT for head and neck malignancy were offered acupuncture as palliation. All patients are without evidence of cancer recurrence at the primary site. Acupuncture was provided to three auricular points and one digital point bilaterally, with electrostimulation used variably. The Xerostomia Inventory (XI) was administered retrospectively to provide an objective measure of efficacy. RESULTS: Acupuncture contributed to relief from xerostomia to varying degrees. Palliative effect as measured by the XI varied from nil to robust (pre- minus post- therapy values of over 20 points). Nine patients had benefit of over 10 points on the XI. CONCLUSIONS: Acupuncture reduces xerostomia in some patients who are otherwise refractory to best current

1567- gera: 94879/nd/re

COMPLEMENTARY AND ALTERNATIVE MEDICINE IN EARLY-STAGE BREAST CANCER. TAGLIAFERRI M ET AL. semin oncol. 2001;28(1):121-34 (eng).

Complementary and alternative medicine (CAM) are becoming increasingly popular in many medical situations, particularly among patients with cancer. CAM encompasses a range of modalities including dietary and vitamin supplements, mindbody approaches, acupuncture, and herbal medicines. In contrast to standard chemotherapeutic and hormonal regimens used for the adjuvant treatment of early-stage breast cancer, controlled clinical trials have generated few data on the relationship between CAM and the outcomes of recurrence or survival, or even overall quality of life and safety. The objectives of CAM treatments are manifold: the reduction of toxicities of therapy, improvement in cancer-related symptoms, enhancement of the immune system, and even a direct anticancer effect. The primary basis of CAM rests on empirical

evidence and case studies, as well as theoretic physiologic effects. In some cases, laboratory or clinical data lend support to these modalities. Some types of CAM are based on ancient Oriental forms of medicine founded on centuries of experience documented through oral and written text. Nevertheless, the paucity of evidence in the clinical setting limits firm conclusions about the effectiveness or safety of most CAM approaches in breast cancer. This review will summarize the basis for the application of certain CAM modalities in the therapy of earlystage breast cancer and will highlight some of the directions of investigative work that could lead to a rational integration of CAM into conventional adjuvant therapy.

1568- gera: 94887/nd/re NEEDING AWAY CHEMO NAUSEA. X. health news. 2001;7(2):7 (eng).

1569- gera: 94889/di/re METHODOLOGICAL ISSUES IN TRIALS OF ACUPUNCTURE. (LETTER). FRANK E. jama.

2001;285(8):1016 (eng).

1570- gera: 94890/di/re

METHODOLOGICAL ISSUES IN TRIALS OF ACUPUNCTURE. (LETTER). KAPTCHUK TJ. jama.

2001;285(8):1015-6 (eng).

1571- gera: 94946/di/re METHODOLOGICAL ISSUES IN TRIALS OF ACUPUNCTURE. (LETTER). SHEN J ET AL. jama.

2001;285(8):1016 (eng).

1572- gera: 94954/di/ra

[INFLUENCE OF JINFUKANG ON EXPRESS OF T LYMPHOCYTE ANTIGEN IN LUNG CANCER PATIENT'S PERIPHERAL BLOOD]. SUN GANG ET AL. liaoning journal

of tcm. 2001;28(5):279 (chi*).

1573- gera: 94989/di/ra
TREATMENT OF 104 CASES OF CHEMOTHERAPY-INDUCED LEUKOPENIA BY INJECTION OF DRUGS INTO

ZUSANLI. YIN XIANZHE ET AL. journal of tcm.

2001;21(1):27-8 (eng).

1574- gera: 95001/di/ra

EFFECTS OF MOXA-CONE MOXIBUSTION AT GUANYUAN ON ERYTHROCYTIC IMMUNITY AND ITS REGULATIVE FUNCTION IN TUMOR-BEARING MICE. WU PING ET AL.

journal of tcm. 2001;21(1):68-71 (eng).

1575- gera: 95017/di/ra

EFFECT OF GAN FU LE ON 24 CASES OF PRIMARY HEPATOCARCINOMA. ZHAO HONGTAO ET AL. journal of

tcm. 2001;21(2):134-5 (eng).

1576- gera: 95053/di/ra

ICLINICAL AND EXPERIMENTAL STUDY ON EFFECTS OF KANGFU ZHITONG ADHESIVE PLASTER IN TREATING CARCINOMATOUS PAIN]. CHENG SHU-QUAN ET AL. shandong journal of tcm. 2001;20(5):332 (chi).

1577- gera: 95057/di/ra

TREATING ARREST OF BONE MARROW IN TUMOR PATIENTS AFTER CHEMOTHERAPY WITH ACUPUNCTURE THERAPY]. ZHAO XIAO-QING ET AL. shandong journal of tcm. 2001;20(5):349 (chi).

1578- gera: 95148/di/ra

[CLINICAL COMPARATIVE STUDY ON DIFFERENT ACUPUNCTURE METHODS FOR PREVENTION AND TREATMENT OF TOXIC AND SIDE-EFFECTS IN **CHEMOTHERAPY OF MALIGNANT TUMOR]. FAN YU ET** AL. chinese acupuncture and moxibustion. 2001;21(5):259

Purpose: to investigate the different actions of moxibustion and acupoint-injection on toxic and side-effects of chemotherapy in patients of malignant tumor. Methods: sixty-three cases of malignant tumor were divided into 3 groups, moxibustion group (23 cases), acupoint-injection group (22 cases) and control

group (18 cases). They were treated with moxibustion, acupoint-injection of Huangqi injectio and routine western medicine in chemotherapy respectively; and WBC count and immunoglobulin contents before and after treatment were observed. Results: both acupoint-injection and moxibustion could increase WBC count and immunoglobulin contents. being better than those of the control group (P<0.05 or P<0.01); acupoint-injection was better than that of the moxibustion in improvement of WBC count (P<0.05); and moxibustion was better than that of the acupoint-injection in improvement of immunoglobulin content (P<0.05). Conclusion: both moxibustion and acupoint-injection can prevent and cure the toxic and side-effect caused by chemotherapy in the patient of malignant tumor and different therapies have different effects.

1579- gera: 95348/di/ra
[BRIEF TALK ABOUT GUIDANCE OF DIET OF CANCER PATIENTS BY APPLYING THEORY OF TCM]. ZHOU XUE-YI. journal de mtc and chinese materia medica of jilin. 2001;21(3):1 (chi).

1580- gera: 95420/di/ra

ISTUDY ON CORRELATION BETWEEN DIFFERENTIATION SYNDROMES AND IMMUNITY INDEX IN PRIMARY LIVER CARCINOMA]. WANG RONG-PING ET AL. fujian journal of tcm. 2001;32(2):4 (chi).

1581- gera: 95479/di/ra

[ADVANCES IN THE TREATMENT OF METASTATIC CARCINOMA OF BONE WITH THE METHODS OF TCM]. NIU WEIET AL. traditional chinese medicinal research. 2001;14(2):53 (chi).

1582- gera: 95481/di/ra

[AN APPLICATION OF WARMING YANG IN TREATMENT OF TUMOR]. LI YONGILAN ET AL. acta chinese medicine and pharmacology. 2001;29(2):1 (chi).

1583- gera: 95502/di/ra [COMPARATIVE STUDY -ON ROENTGENOGRAM, CLNICAL AND PATHOLOGICAL FINDINGS IN GIANT CELL TUMOR OF BONE]. LEI ZHIDAN. journal of traditional chinese orthopedics and traumatology. 2001;13(5):17 (chi).

1584- gera: 95513/di/ra [BRIEF EXPLANATION ON THE DEVELOPMENT OF LUNG CANCER'S TREATMENT WITH TCM AND CHINESE DRUGS]. SUN JIANLI. study journal of traditional chinese medicine. 2001;19(3):208 (chi).

1585- gera: 95785/di/ra

[EFFECT OF SHENQI FUSHENG INJECTION ON IMMUNE FUNCTION IN GASTRIC CARCINOMA PATIENTS IN POST-OPERATIONAL AND CHEMOTHERAPEUTIC PERIOD]. SHAO QUN ET AL. chinese journal of integrated traditional and western medicine. 2001;21(6):424 (chi*).

1586- gera: 95795/di/ra

[PROGRESSION ON TREATMENT OF NASOPHARYNGEAL CARCINOMA BY COMBINED THERAY OF RADIATION AND CHINESE HERBAL MEDICINE]. WEI BAO-HE. chinese journal of integrated traditional and western medicine. 2001;21(6):477 (chi).

1587- gera: 95887/di/ra

ITREATMENT OF 20 CASES OF GASTRIC EMPTYING TROUBLE AFTER OPERATION OF EOSOPHAGOCARDIAC CARCINOMA BY COMPOUND DACHENGQI DECITIO]. MENG WEI ET AL. shaanxi journal of traditional chinese medicine. 2001;22(7):390 (chi).

1588- gera: 95920/di/ra

[EXPERIMENTAL STUDY ON THE INFLUENCE OF XIAO-JI-YIN CELL CYCLE IN LEWIS PULMONARY CARCINOMA]. LU JUNREN ET AL. research of tcm. 2001;17(3):38 (chi).

1589- gera: 96054/di/ra

[THE RELATION OF SERUM APOPROTEIN A, AND B100 LEVELS AND THE RATIO WITH DEFICIENCY AND **EXCESS SYNDROMES OF TCM OF PATIENT OF** MALIGNANT TUMOR]. LI XAO-FENG, LIN HE-XI, HUANG WEI-XIAN, ET AL. chinese journal of basic medicine in traditional chinese medicine. 2001;7(8):9 (chi).

1590- gera: 96063/di/ra

[INFLUENCE OF "OING DU YIN AND YANG ZHENG PIAN" COMBING CHEMOTHERAPY ON IMMUNE FUNCTION OF L7212 LEUKEMIA MICES]. CAI YU, CAI TIAN-GE, TANG FENG-DE. chinese journal of basic medicine in traditional chinese medicine. 2001;7(8):33 (chi).

1591- gera: 96064/di/ra

[EFFECT OF "RUNINGLL" ON CELL DIFFERENTIATION OF CA761 MICE BREAST TRANSPLANTED NEOPLASM]. CHEN QIAN-JUN, ZHANG CE, LU DE-MING, ET AL. chinese journal of basic medicine in traditional chinese medicine. 2001;7(8):34 (chi).

1592- gera: 96140/di/ra

[STUDY ON RELATION OF TCM SYNDROME TYPES OF PRIMARY LIVER CANCER WITH RELATIVE OBJECTIVE INDEXES]. LIN LIZHU, LAN SHAOQING. journal of traditional chinese medicine. 2001;42(8):486 (chi*). Relation of different TCM syndrome types of primary liver cancer with some relative objective indexes, including a fetoprotein (AFP), alkaline phosphatase (AKP), 7glutamyltranspeptidase (GGT), L - lactic dehydrogenase (LDH), aspartate aminotransferase (AST), alanine aminotransferase (ALT), albumin (ALB), globulin (GLO), A/G, total bilirubin (TB), indexes of hepatic reserve (ICG), prothrombin time (PT), natural killer (NK), lymphocyte transformation rate (LBT) and T - lymphocye subgroups, were analysed for probing into objective indexes of diagnosis in TCM syndrome typing. Results indicated that there were significant differences in AST, ALB, TB, PT, ICG, NK, CD4 among different syndrome types, and relative indexes for syndrome typing of liver cancer are ALB, TB, NK and CD4

1593- gera: 96178/di/ra

JEXPERIMENTAL STUDY ON XIAOLIU PINGYI MIXTURE WITH MEDICATED SERUM IN INDUCING APOPTOSIS OF **HUMAN HEPATOCELLULAR CARCINOMA CELL LINE H-**7402]. LI XIU-RONG, ZHANG DAN, QI YUAN-FU, ET AL. chinese journal of integrated traditional and western medicine. 2001;21(9):684 (chi*).

1594- gera: 96198/di/ra [THINKING AND EXPERIENCE IN COMBINED TREATMENT OF TRADITIONAL CHINESE MEDICINE AND WESTERN MEDICINE FOR LATE GASTRIC CANCER]. WANG GUANTING. journal of traditional chinese medicine. 2001; 42(9):560 (chi).

1595- gera: 96246/di/ra

[ESTABLISH AN ORTHOTOPIC IMPLANTED MODEL OF HUMAN GASTRIC CANCER IN NUDE MICE AND STUDY THE SPLEEN ASTHENIA SYNDROME IN THIS ANIMAL MODEL]. ZHAO AIGUANG, ZHAO HAILEI, YANG JINKUN, ET AL. chinese journal of integrated traditional and western medicine on digestion. 2001; 9(4):198 (chi*). To explore spleen asthenia syndrome in an orthotopic implanted model of human gastric cancer in nude mice and the feasibility of using this model to study the anti-gastric cancer effect of traditional Chinese medicine. Methods: Establish an orthotopic implant model of human gastric cancer in nude mice. The mice were divided into 3 groups, one control and the two which were implanted the gastric cancer cell SGC-7901 representing experimental conditions. Animals, in two experimental groups received either N. S. (NS group) or SRRS (SRRS group) after implanting. The growth and metastasis of tumor were observed. The changes of weight, quantity of food intake, NS cell activity and erythrocyte immune function were valued too. We also examined the progression of the tumor after the treatment of SRRS. Results: All implanted animals developed gastric cancer in gastric mucosa confirmed by pathologic examination. Metastasis in liver, pancreas and

diaphragm were the most sites could be observed in NS group. Meanwhile mice in Ns group showed decreased food intake quantity, lose of weight, decreased activity of NK cell and significant increase in RICR, comparing the state before implantation, whereas the animals in SRRS group existed little decrease in food intake quantity, stable weight, higher activity of NK cell vs. NS group. The growth of tumor in situ was inhibited and the metastasis existed less in SRRS group. Conclusion: After the nude mice were implanted in situ with human gastric cancer cell, the function of digestion and immune was decreased. This animal model is deserved further investigation as integration of disease, symptoms and signs in traditional Chinese medicine. The recipe SRRS which tonifies the spleen function for its major action may inhibit the growth of tumor and treat the state of spleen asthenia in experimental

1596- gera: 96619/di/ra

[THE EFFECT OF QI-GAN-LI-SHI DECOCTION ON TUMOR NECROSIS FACTOR IN RABBITS WITH CHOLECYSTITIS AND CHOLELITHIASIS]. LI JIABANG, TIAN YONGLI, LIU SHENG. journal of hunan college of traditional chinese medicine. 2001;21(3):21 (chi*).

1597- gera: 96633/di/ra

[EFFECT OF QI-GAN-SHI(QGLS) DECOCTION ON TUMOR NECROSIS FACTOR IN RABBITS OF CHOLECYSTITIS AND CHOLEITHIASIS]. YU CHANG-YUAN, 11 JA-BANG, TIAN YONG-LI. chinese journal of basic medicine in traditional chinese medicine. 2001;7(9):38 (chi*).

1598- gera: 96716/di/ra

[STUDY ON THE EFFECT OF IMMUNOLOGIC FUNCTION TO THE PATIENTS OF LATE CARCINOMA OF LUNG WITH THE XIAOBU INFUSION]. GENGJIA HUDEBAO HU BINGCHENG. heilongjiang journal of traditional chinese medicine. 2001;4:30 (chi)

1599- gera: 96723/di/ra [CLINICAL STUDY ON TREATMENT OF PRIMARY HEPATOCARCINOMA BASED ON DEFICIENCY OF SPLEEN]. DONG XIU-LI CHANG-HUA, LI WEI. shandong journal of traditional chinese medicine. 2001;20(8):459 (chi*).

The relation between primary hepatocarcinoma WHO and the deficiency of spleen is discussed. It suggests that the deficiency of spleen is the basic cause of PHC, whether it is external sensibility or internal injury. Its usual symptom, especialy icterus, hydroperitoneum, tumor pain and fever, which occur at advanced stage all can be analysed on spleen. Modern medicine has proved that the treatment of strengthening the spleen and regulating the flow of qi can resist or detain the growing and transfering of the tumor, improve the immunity of organism and prolong the survival period, and, obviously better than the treatment of activating the blood circulation and clearing away pathogenic heat and, toxic material. The curative effect should be even better if it isused together with other treatment based on overall analysis of symptoms and signs.

1600- gera: 96742/di/ra

[EFFECTS OF LIANDAI TABLET ON RELEVANT ONCOGENIC PROTEINS EXPRESSION OF ULCERATIVE GASTRIC CANCER IN RATS]. ZHOU BENGJIE, XU QING, TANG YUHUI, ET AL. traditional chinese medicinal research. 2001;12(4):249 (chi).

1601- gera: 96938/di/ra

[EFFECT OF FICUS CARICA POLYSACCHARIDE ON TUMOR-BEARING MICE]. DAI WEI-JUAN SI DUAN-YUN ET AL. chinese traditional patent medicine. 2001;23(10):740 (chi).

1602- gera: 96962/di/ra

[THE FUNCTION OF CRUD HERBAL MOXIBUSTION TO AGAINST TRANSPLANTATION TUMOR OF MICE AND AFFECTION TO IMMUNITY]. HAN CUI, LI XUEWU, LIU ZHEN. tianjin journal of traditional chinese medicine. 2001;5(18):30 (chi).

1603- gera: 97013/di/ra

[TANG HANJUN'S EXPERIENCE IN TREATING THE POSTOPERATION STAGE OF MAMMARY CANCER WITH TRADITIONAL CHINESE MEDICINE]. JIA XIHUA. zhejiang journal of traditional chinese medicine. 2001;36(10):419 (chi).

1604- gera: 97031/di/ra

[EVALUATION ON SUPERIORITY OF TREATING CANCER WITH COMBINED WESTERN MEDICINE AND CHINESE MEDICINE]. WU ZHENGJUN. study journal of traditional chinese medicine. 2001;19(5):473 (chi).

1605- gera: 97040/di/ra

[ESTIMATION ON THE TREATMENT EFFECT OF 90 PATIENTS WITH OVARIAN CANCER BY TRADITIONAL CHINESE MEDICINE AND CHEMOTHERAPY]. LIU AI-WU, HU ZHENG-YAN. liaoning journal of traditional chinese medicine. 2001;28(10):618 (chi*).

1606- gera: 97179/di/ra

[COMPREHENSIVE TREATMENT OF LATE CANCER OF PANCREAS]. GAO GUOJUN. jiangsu journal of traditional chinese medicine. 2001;22(9):22 (chi).

1607- gera: 97221/di/ra

[EFFECT OF HAIMIDIN ON LIPID FLUIDITY IN ERYTHROCYTE MEMBRANE AND DNA CONTENT IN NORMAL AND H22 TUMOR BEARING MICE]. JI YU-BIN, ZHANG XIU-JUAN, KONG QI, ET AL. chinese traditional and herbal drugs. 2001;32(8):713 (chi*).

1608- gera: 97233/di/ra

IPROGRESS IN STUDIES ON ANTITUMOR EFFECT OF SNAKE VENOM]. CHE JUN, LIU JIE-SHENG, YANG WEI-DONG. chinese traditional and herbal drugs. 2001;32(8):757 (chi).

1609- gera: 97241/di/ra

[EFFECTS OF SHENLING BAIZHU GRANULE ON MID-LATE LIVER-CANCER-ASSOCIATED DIARRHEA]. LAI YI-QIN, JIN YUAN, HUANG PING, ET AL. fujian journal of traditional chinese medicine. 2001;32(4):11 (chi).

1610- gera: 97445/di/ra

[EFFECT OF VESICULATING MOXIBUSTION ON B -ENDORPHIN CONTENT IN RAT PERITONEALLY INJECTED CYCLOPHOSPHANIDE]. SUN DE-LI, ET AL. chinese journal of traditional medical science and technology (. 2001;8(5):279 (chi).

1611- gera: 98012/di/ra

[CLINICAL OBSERVATION ON TREATMENT OF ADVANCED RECTAL CANCER WITH JIANPI QUSHI JIEDU TANG AND LOCAL PERFUSION CHEMOTHERAPY]. WANG ZHAOXIANG, ET AL. beijing journal of traditional chinese medicine. 2001;20(3):36 (chi).

1612- gera: 98019/di/ra

[RESEARCH PROGRESS OF ATTENUATION OF TCD ON RADIOTHERAPY AND CHEMOTHERAPY]. HE DONGCHU, ET AL. chinese journal of information on traditional chinese medicine. 2001;8(5):18 (chi).

1613- gera: 98025/di/ra

[CLINICAL OBSERVATION ON ATTENUATION AND SYNERGY OF FUZHENG YILIU DECOCTION ON CHEMOTHERAPY OF INTERMEDIATE AND LATE PRIMARY CARCINOMA OF LIVER]. LI WEI, ET AL. chinese journal of information on traditional chinese medicine. 2001;8(5):52 (chi).

1614- gera: 98033/di/ra

JANALYTICAL AND STATISTICAL STUDY ON THE REFERENCES OF 2492 CASES OF TREATING PRIMARY CARCINOMA OF LIVER]. MA JUN, LI YONGJIAN. traditional chinese medicinal research. 2001;14(3):15 (chi).

1615- gera: 98035/di/ra

[32 CASES OF TREATMENT OF BONY METASTATIC CARCINOMA WITH YISHEN - ZHUANGGU RECIPE]. LI YONGJIAN. traditional chinese medicinal research. 2001;14(3):34 (chi).

1616- gera: 98065/di/ra

[CLINICAL STUDIES ON TREATING LIVER CANCER WITH TRADITIONAL CHINESE HERBS COMPANYING WITH INTERVENE TREATMENT]. TIAN HUA-QIN, LIANG GUI-WEN, TAO YIN, ET AL. henan journal of traditional chinese medicine and phrmacy. 2001;16(1):47 (chi).

1617- gera: 98137/di/ra [RECENT CURATIVE EFFECT OF CHANG - FU - KANG CAPSULE FOR PRIMARY MIDDLE AND LATE COLORECTAL CANCER]. WU XUE-MEI, YAO DE-JIAO. journal of chengdu university of traditional chinese medicine. 2001;24(2):12 (chi).

1618- gera: 98176/di/ra [INHIBITING EFFECT AND MECHANISM OF DITANQUYU DECOCTION ON MOUSE TUMORS]. ZHANG MIN-QING, CHEN HUA-SHENG, XU AI-HUA, ET AL. journal of nanjing university 0 traditional chinese medicine (natural science). 2001;17(4):221 (chi*).

1619- gera: 98182/di/ra
[TREATMENT OF PATHOLOGICAL CHANGES BEFORE GASTRIC CARCINOMA WITH TRADITIONAL CHINESE MEDICINE]. LI CHUN-TING, YU JING-HUA. journal of nanjing university 0 traditional chinese medicine (natural science). 2001;17(4):259 (chi*).

1620- gera: 98515/di/ra

CHINESE HERBAL ENEMA FOR TREATMENT OF TUMORS AT THE MIDDLE AND LATE STAGE. ZHOU YIQIANG ET AL. journal of tcm (english edition), 2001;21(4):256 (eng).

1621- gera: 98530/di/ra

A SURVEY OF RESEARCHES ON SYNERGY AND TOXICITY ABATEMENT OF TRADITIONAL CHINESE MEDICINE IN RADIOTHERAPY OF NASOPHARYNGEAL CARCINOMA. LIU CHENGLIN ET AL. journal of tcm (english edition). 2001;21(4):303 (eng).

1622- gera: 98537/di/ra INVESTIGACION ACTUAL EN ACUPUNTURA. EMBID A. medicina holistica. 2001;65:17 (esp). Bibliografia Internacional de MTCH comotratamiento complementario de la radioterapia.

1623- gera: 98622/di/ra

[TREATING 59 CASES OF RADIOACTIVE RECTITIS WITH BAITOUWENG JIA GANCAO EJIAO DECOCTION]. CAI YONG, ET AL. zhejiang journal of traditional chinese medicine. 2001;36(11):490 (chi).

1624- gera: 98625/di/ra

IRECENT RESEARCH INTO THE TREATMENT OF PRIMARY LIVER CANCER WITH TRADITIONAL CHINESE MEDICINE]. FANG YUAN. zhejiang journal of traditional chinese medicine. 2001;36(11):499 (chi).

1625- gera: 98649/di/ra

[CLINICAL OBSERVATION ON SHORT - TERM THERAPEUTIC EFFECT IN 30 CASES OF INTERSTITIAL LUNG DISEASE AFTER RADIO - AND CHEMOTHERAPY DUE TO MALIGNANT TUMOR TREATED WITH FEI TONG ORAL LIQUID]. TAO KAI ET AL. journal of traditional chinese medicine. 2001;42(11):662 (chi).

1626- gera: 98924/di/ra

[EFFECT OF JINFUKANG DECOCTION ON IL-10 AND IFN-Y OF HEPATOCARCINOMA]. SUN GANG ET AL. shandong journal of traditional chinese medicine. 2001;20(12):721 (chi).

1627- gera: 99200/di/ra

[INTRASPINAL TUMORS TREATED BY INTEGRATED MEDICINE: REPORTS OF 30 PATIENTS]. LIU JUN ET AL. chinese journal of surgery of integrated traditional chinese and western medicine. 2001;7(6):366 (chi*) Objective: To observe the clinical effects of treating patients with intraspinal tumors by integrated traditional Chinese and western medicine Methods: Thirty patients with benign intraspinal tumors were treated using operation and postoperative therapies of traditional medicine such as Chinese herbs, acupuncture, massage, etc. Results : The follow - up study of 3 months to 6 years, averaging 3. 4 years, showed that 9 patients were cured, 16 significantly improved, 3 improved, and in only 2 patients without improvement. Conclusion: It is suggested that treatment of patients with intraspinal tumors using traditional medicine methods postoperatively may improved the patients' recovery with

1628- gera: 99202/di/ra

[RELATIONSHIP BETWEEN ERYTHROCYTE IMMUNE FUNCTION AND LYMPHOCYTE CELL FUNCTION IN PATIENTS WITH GASTRIC CARCINOMA BEFORE AND AFTER OPERATION]. LI YONG ET AL. chinese journal of surgery of integrated traditional chinese and western medicine. 2001;7(6):370 (chi*).

1629- gera: 99404/di/ra

[PROGRESS IN RESEARCH OF CHINESE MATERIA MEDICA ANTINEOPLASM MECHANISM]. LIAO MEIDE ET AL. journal of guiyang college of traditional chinese medicine. 2001;23(4):52 (chi).

1630- gera: 99484/di/ra

COMPARATIVE RESEARCH ON REMITTING HEMOGRAM LESION EFFECTS DUE TO CHEMOTHERAPEUTIC AGENT WITH ACUPUNCTURE IN DIFFERENT TIME. DU XIDIAN ET AL. international journal of clinical acupuncture.

2001;12(3):223-27 (eng).

The occurrence of Hemogram lesions in patients with malignant carcinoma due to a chemotherapeutic agent can be reduced by needling bilateral Zusanli (ST 36) and Pishu (BL 20), Dazhui (GV, DU 14), and bilateral Sanyinjiao (SP 6). The observation of 42 patients and statistical analysis indicated that the effectiveness of acupuncture was closely related to the needling time, i.e., the occurrence of leukopenia and thrombocytopenia was significantly reduced when chemotherapy was given after 5 days of acupuncture treatment than with chemotherapy and acupuncture at the same time. We confirmed that acupuncture therapy can enhance the abilities of antiradiotherapy and antichemotherapy and leukocyte. However, its effectiveness is influenced by many technical parameters in which needling time is the main factor. In this paper, we tried to find the best time to increase leukocyte count and the ability of anti-side effects by observing the different effects on the remission of hemogram lesions due to chemotherapy with acupuncture at a

1631- gera: 99496/di/ra

[THE CHANGES OF CD34+ CELLS IN ONE MARROW OF BLOOD DEFICIENCY MICE INDUCED Y

CYCLOPHOSPHAMIDE]. MA ZENG-CHUN ET AL. chinese journal of basic medicine in tcm. 2001;7(7):44 (chi*). Abstract: Objective: To observe the changes of CD34+ cells and characterize the cell cycle status of bone marrow cells of blood deficiency mice induced by cyclophosphamide (CTX) Methods: Establishment of the blood deficiency model in mice by injected i. p with CTX. Flow cytometric enumeration of CD34+ hematopoietic stem and progenitor cells by double fluorescent labeling, and cell cycle detection by PI labeling at the indicated detection time. Results: (1) Compared with normal group, the rate of CD34+ cells in bone marrow nuclear cells decreased at first, then increased for some days, and then decreased. (2)Bone marrow cell cycle perturbed after CTX injected, a large fraction of bone marrow cells are relatively more quiescent at first, then are in an actived state and proliferated, then a significant increase in the number of quiescent bone marrow cells. These changes matched those changes of CD34+ cells. Conclusion: CTX mobilize more hematopietic stem and progenitor cells into S/G2/M cycle, and the number of stem and progenitor cells increased, this result

in the exhaustion of pool of stem and progenitor cells and a lot of damage to bone marrow. This may be one of causes of blood deficiency induced by CTX.

1632- gera: 100028/di/ra

[EFFECT OF JINFUKANG DECOCTION ON IL-10 AND IFN-Y OF HEPATOCARCINOMA]. SUN GANG ET AL. shandong journal of traditional chinese medicine. 2001;20(12):721

1633- gera: 100090/di/ra

[EFFECTIVE OBSERVATION ON 35 CASES OF LATE LARGE INTESTINAL CANCER TREATED BY **CHEMOTHERAPY AND SHENGBAI TABLETS].** LIU HUA ET AL. hunan journal of traditional chinese medicine. 2001;17(6):13 (chi).

1634- gera: 103746/di/ra

[EFFECT OF DITAN HUAYU DECOCTION ON GROWTH OF HUMAN STOMACH CANCER SGC-7901 CELLS]. XU DONG-QING ET AL. journal of nanjing university tcm. 2001;17(3):164 (chi).

1635- gera: 103756/di/ra

[DEVELOPMENT IN RESEARCH OF TREATMENT OF MALIGNANT TUMOUR WITH TRADITIONAL CHINESE MEDICINE]. ZHOU HONG-GUANG. journal of nanjing university tcm. 2001;17(3):198 (chi*).
The treatment of malignant tumour with traditional Chinese

medicine has its unique advantage. This paper deals with the mechanisms of the treatment with reference to cytobiology and molecular biology and the effect of Chinese medicine on immunity, the blood system and pathological changes.

1636- gera: 160183/di/ra

OBSERVATION ON THE EFFECT OF ELECTRO-ACUPUNCTURE THERAPY ON T-CELL SUBPOPULATION, NK CYTOACTIVE, LEUKOCYTE COUNT, AND HUMORAL IMMUNITY OF PATIENTS TREATED BY CHEMOTHERAPY, CHEN SHAOZONG, YIEFANG. international journal of clinical acupuncture. 2001;12(2):91-5 (eng).

The authors studied the effect of electro-acupuncture therapy (EAT) on the immune dysfunction of patients with malignant tumor caused by chemotherapy. Results: in pre-chemotherapy, CD, was low within normal range, and CD, was significantly below normal. These indices did not decrease significantly (P> 0.05) after one month of chemotherapy. Due to the simultaneous application of EA in Zusanli (ST-36) and Sanyinjiao (SP-6), although the leukocyte count did not recover to the level before the treatment of chemotherapy, it was higher than that of the raising-WBC group (RW group). IgG, IgA, and IgM did not decrease significantly (P>0.05) in comparison with that of pre-chemotherapy. The results showed that EAT, as an effective auxiliary therapy, could lessen the immune dysfunction of patients with malignant tumor caused by chemotherapy.

1637- gera: 161546/di/re

THE EFFECT OF ACUPUNCTURE TREATMENT ON THE INCIDENCE AND SEVERITY OF HOT FLUSHES EXPERIENCED BY WOMEN FOLLOWING TREATMENT FOR BREAST CANCER: A COMPARISON OF TRADITIONAL AND MINIMAL ACUPUNCTURE, DAVIES FM. european journal of cancer. 2001;37 supp 6:s1-488

1638- gera: 19107/di/re

ACUSTIMULATION WRISTBANDS FOR THE RELIEF OF CHEMOTHERAPY-INDUCED NAUSEA. ROSCOE JA ET AL. altern ther health med. 2002;8(4):56-7 (eng).

CONTEXT: Substantial evidence suggests that acupuncturepoint stimulation may be effective in controlling side effects of chemotherapy. OBJECTIVE: To examine the efficacy of an acustimulation wristband for the relief of chemotherapyinduced nausea. DESIGN: Randomized clinical trial using a 3-level crossover design. SETTING: Three outpatient oncology clinics in the northeastern United States. PARTICIPANTS: Twenty-five women and 2 men who experienced moderate or more severe nausea following their first chemotherapy

treatment. INTERVENTION: We compared active acustimulation of the Pericardium 6 (PC-6) point on the ventral surface of the wrist with sham acustimulation (a corresponding point on the posterior surface of the wrist). A control group received no acustimulation. OUTCOME MEASURES: Severity of nausea and quantity of antiemetic medication used. RESULTS: No statistically significant differences in average severity of nausea were observed between the 3 interventions. However, the data showed a difference close to statistical significance in the severity of delayed nausea reported during active acustimulation compared to no acustimulation (P < .06). In addition, patients took fewer antinausea pills during the active- acustimulation cycle of this experiment compared to the no-acustimulation phase (P < .05). CONCLUSION: Findings on the efficacy of an acustimulation band for the control of chemotherapy-induced nausea are positive but not conclusive. These findings provide ample justification for further study of acustimulation in clinical oncology.

1639- gera: 99567/di/ra

EFFECTS OF ELECTRO-ACUPUNCTURE ON IMMUNE FUNCTION AFTER CHEMOTHERAPY IN 28 CASES. YE FANG ET AL. journal of tcm. 2002;22(1):21-3 (eng).

1640- gera: 101326/di/ra

[INFLÜENCE OF COMBINED THERAPY OF GUBEN YILIU III, MOXIBUSTION AND CHEMOTHERAPY ON IMMUNE FUNCTION AND BLOOD COAGULATION MECHANISM IN PATIENTS WITH MID-LATE STAGE MALIGNANT TUMOR*]. LIU JU ET AL. chinese journal of integrated traditional and western medicine. 2002;22(2):104 (chi*).

Objective: To observe the supplementary effect of moxibustion and Guben Yiliu III (GBYL), a Chinese herbal compound preparation, in combination with chemotherapy. Methods: Eighty-one patients of mid-late stage malignant tumor were randomly divided into 3 groups: 16 in Group A treated with chemotherapy and placebo; 35 in Group B treated with chemotherapy and GBYL and 30 in Group C treated with chemotherapy and GBYL plus moxibustion. The short-term effect of treatment, changes of blood picture, cell mediated immune function and blood coagulation in patients were observed. Results: After chemotherapy, the lymphocyte count was significantly lowered in Group A and B (P<0.01), but not in Group C (P>0.05); lymphocyte subset T3 raised significantly in Group B; the average level of T-lymphocyte subsets was reduced in Group A while it increased in the other two groups; and a bi-directional regulation on plasma fibrinogen concentration was shown in Group C (P<0.05). Conclusion : Moxibustion prevented dropping of lymphocyte count caused by chemotherapy. Combination of GBYL and moxibustion could prevent the lowering of T-lymphocyte subsets caused by chemotherapy, and moxibustion could regulate bi-directionally the patients' abnormality in part of blood coagulation mechanism.

1641- gera: 101404/di/ra

[INFLUENCE OF SCALP ACUPUNCTURE ON SERUM TUMOR NECROSIS FACTOR IN PATIENTS WITH ACUTE CEREBRAL INFARCTION]. ZHOU WEI ET AL. shanghai journal of acupuncture and moxibustion. 2002;21(1):11 (chi*).

Purpose: To observe the influence of scalp acupuncture on serum tumor necrosis factor in patients with acute cerebral infarction. Methods Sixty cases of acute cerebral infarction were randomly divided into an acupuncture group and a nonacupuncture group. Enzyme linked immunoassay was used to measure serum TNF before and after acupuncture and evaluate limb function. Results : Serum TNF dropped in both the groups after the treatment was finished, but it did markedly in the acupuncture group and there was a significant difference (P<0.01). The evaluation of limb function showed that it improved markedly in the acupuncture group after 15 days and there was a significant difference between before and after acupuncture (P<0.05), while it did not in the control group 15 days after general treatment. Conclusion : Scalp acupuncture in the early stage of acute cerebral Infarction can decrease serum TNF content and promote the recovery of brain tissues and limb function.

1642- gera: 101890/di/ra

[THE TREATMENT OF GASTROINTESTINAL REACTION TO CHEMOTHERAPY BY POINT ZUSANLI INJECTION OF METOCLOPRAMIDE]. JING HUA LIU HUA LING ZHEN. shanghai journal of acupuncture and moxibustion. 2002;21(2):12 (chi*). Purpose: To investigate the curative effect of point Zusanli

Purpose: To investigate the curative effect of point Zusanli injection of metoclopramide on gastrointestinal reaction to chemotherapy by cross blank auto-control. Method: The patients were randomly divided into group AB or group BA. In group AB, metoclopramide was injected into point Zusanli (ST 36) in the first period and not in the second period during chemotherapy; in group BA, vice versa. Results and Conclusion: The total rate of efficacy against anorexia, nausea and vomiting was significantly higher in the acupoint injection group than in the simple chemotherapy group (P<0.05).

1643- gera: 102002/di/ra

[CLINICAL OBSERVATION AND STUDY ON ACUPOINT-NEEDLING PLUS INJECTION FOR TREATMENT OF ARREST OF BONE MARROW INDUCED BY CHEMOTHERAPEUTIC DRUGS]. DOU JIANQING, ZHANG HUI, GAO WENBIN, ET AL. chinese acupuncture and moxibustion. 2002;22(5):301 (chi*).

Purpose: To probe into feasibility and effectivity of acupointneedling, acupoint-needling plus injection for treatment of arrest of bone marrow induced by chemotherapeutic drugs. Methods: Acupoint-needling and acupoint needling plus acupoint-injection of 5 mg dexamethasone were used to treat 110 cases of malignant tumor at the stage of bone marrow arrest after arterial chemotherapy, and the acupoints selected were Zusanli (Sr 36), Sanyinjiao (SP 6), Xuehai (SP 10), Guanyuan (CV 4) and Qihai (CV 6). Results Both the acupoint acupoint-needling and acupoint-needling plus acupointinjection could effectively improve arrest of bone marrow after chemotherapy, the therapeutic effect of the acupoint-needling plus injection being better. Conclusion : Acupoint-needling can effectively relieve the acute and short- term arrest of bone marrow induced by chemotherapeutic drugs, and acupointinjection can effectively shorten therapeutic course and the low hemogram stage of peripheral blood, and their combination has obvious cooperation.

1644- gera: 102126/di/ra

[CLINICAL OBSERVATION OF 68-CASE MID-LATE PANCREATOBLASTOMA TREAT BY THE TRADITIONAL CHINESE MEDICINE]. YANG BING-KUI, HUO JIE-GE, CAO ZHEN-JIAN. chinese journal of basic medicine in traditional chinese medicine. 2002;8(4):56 (chi*). The pancreatoblastoma is one of the common clinical alimentary tumors. According to the principle of the treatment based on the differential diagnosis, we divided the pancreatoblastoma into four types which are dampness-heat evil type, stasis and Qi-stagnation type, dampness-heat and asthenic of the spleen type and asthenic energy and evil sthenic type. The result showed the effective rate is 52.94%, the three-year survival rate is 19.12%, the clinical symptoms were significantly relived. There were significant differences between the pre-post treatment of CA199, TNF, ERFR, PR, LTD indexes by statistics.

1645- gera: 102471/di/ra

[CLINICAL OBSERVATION OF ELECTRO - ACUPUNCTURE COMBINED WITH COMPOUND SALVIA MILTIORRHIZA INJECTION IN TREATING LYMPHATIC EDEMA OF UPPER LIMB OF POSTOPERATION IN THE PATIENTS WITH MAMMARY CANCER]. LI HANZHONG, HUANG ZHIFEN, ZHANG ZUOJUN, ET AL. hebei journa of tcm. 2002;24(4):255 (chi*).

Objective: To investigate the therapeutic effect of electro - acupuncture combined with compound Salvia miltiorrhiza injection on the lymphatic edema of upper limb of postoperation in the patients with mammary cancer. Methods: 42 patients with lymphatic edema of upper limb of postoperation of mamary cancer were randomly divided into two groups, 22 patients in treatment group were treated by electro - acupuncture combined with compound Salcia miltiorrhiza injection; 22 patients in control group were treated with diuretics, with a treatment course of 10 days for both

groups. The therapeutic effects were evaluated after two treatment courses. Results: The total effective rate was 86. 4 % in treatment group and 45. 0% in control group, there was a significant difference between the two groups (P < 0.01) Conclusion: Electro-acupuncture combined with compound Salvia miltiorrhiza injection can increase the excitability of muscular tissue, improve the lymphokinesis and local microcirculation, increase the activity of macrophages, induce the apoptosis of fibroblast of granulation tissue, relieve the synulosis, as a result, to improve the symptoms caused by

1646- gera: 102760/di/ra

134 CASES OF MALIGNANT TUMOR OF LATE STAGE TREATED WITH COMBINATION OF TRADITIONAL CHINESE AND WESTERN MEDICINES]. PENG MINGE, ET AL. hubei journal of traditional chinese medicine. 2002;24(4):7 (chi).

1647- gera: 102786/di/ra

[CLINICAL OBSERVATION ON 136 CASES OF CYSTOPARALYSIS AFTER RADICAL OPERATION OF **CERVICAL CARCINOMA TREATED WITH WARMING** ACUPUNCTURE]. XIE YING . journal of traditional chinese medicine. 2002;43(4):267 (chi).

1648- gera: 102790/di/ra

[CLINICAL STUDY ON MODIFIED WEI ER FANG FOR TREATMENT OF 30 CASES OF GASTRIC PRECANCEROUS LESION]. CHEN YUANLING, PAN YIBIN. journal of traditional chinese medicine. 2002;43(4):275 (chi).

1649- gera: 102909/di/ra

[OBSERVATION ON EFFECTS OF SHENMAI INJECTION INTO POINTS ON IMMUNOLOGICAL FUNCTION AFTER **CHEMOTHERAPY IN 20 CASES OF ESOPHAGEL** CARCINOMA]. LIN BIN XIE ZHAO-PING, LIAO XIAO-QI, ET AL fujian journal of traditional chinese medicine. 2002;33(2):12 (chi).

1650- gera: 103017/di/ra

JAPPLICATION OF THE METHOD TO SUPPORT ANTI-PATHOGENIC ABILITY AND EXPEL PATHOGENS IN THE TREATMENT OF MAMMARY CANCER]. WAN HUA, WU XUE-QING, LU DE-MING. acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai. 2002;16(1):30 (chi*).

In the introduction of the clinical therapies for mammary cancer, this article stresses the therapeutic method to support antipathogenic ability and expel pathogens, by the methods to strengthen the spleen and benefit qi, nourish yin and produce body fluid, warm the kidney and assist yang to support the anti-pathogenic ability in predominance, and by the methods to dissolve phlegm, soften the hard, clarify heat and dissolve toxins and attack poisons with poisons to expel

1651- gera: 103021/di/ra

[COMPARATIVE STUDY ON FUNCTIONS OF DIFFERENT THERAPIES ON LIVER CANCER IN MICE]. FANG ZHAO-QIN, GUAN DONG-YUAN, LIANG SHANG-HUA, ET. acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai. 2002;16(1):42 (chi*).

1652- gera: 103032/di/ra

[CLINICAL OBSERVATION ON TREATMENT OF 30 CASES OF MALIGNANT THORACIC HYDROPS WITH TING QI DA ZAO DECOCTION COMBINED WITH INTRATHORACIC CHEMOTHERAPY]. LIU HUA. journal of traditional chinese medicine. 2002;43(5):353 (chi).

1653- gera: 103209/di/ra

[PREVENTION AND TREATMENT OF HERBA SCUTELLARIAE BARBATAE COMPOUND ON **DIETHYLNITROSAMINE-INDUCED HEPATOCARCINOMA** OF RAT]. YE JIAN, XU XIKUN, ZHOU JIANWEI, ET AL. chinese journal of integrated traditional and western medicine on digestion. 2002;10(2):67 (chi*).

1654- gera: 103210/di/ra

[EFFECT OF LENTINAL ON THE EXPRESSION OF IFN MRNA AND SOD MRNA IN S180-BEARING C57 BL/6 MICE]. PAN JINYOU, YAO ZUYI, LU LUHUA, ET AL. chinese journal of integrated traditional and western medicine on digestion. 2002;10(2):71 (chi*).

1655- gera: 103402/di/ra

[CLINICAL OBSERVATION ON 80 CASES OF MODERATE CANCER-PAIN TREATED BY HUA JIAN BA DU MO]. JIA YINGJIE. journal of tianjin university of traditional chinese medicine. 2002;21(1):11 (chi).

1656- gera: 103422/di/ra

[CLINICAL STUDY ON TREATMENT OF 178 CASES OF CANCEROUS PAIN WITH A QI TIE]. CAI YONGMIN, LI GENLIN. journal of traditional chinese medicine. 2002;43(3):200 (chi).

A summary was made on clinical studies of treatment of Graves by TCM in the last five years. The author proposed that more stess should be put on the studies of the combined Chinese-Western therapy - Chinese herbs joining hands with induced thyroid arterial embolism, ethanol histoinjection and radiation I method, etc.; particularly special attention should be given to the prevention and treatment of recurrent Graves.

1657- gera: 105011/di/ra

[REVIEW AND PROSPECT OF CLINIC AND EXPERIMENTAL STUDY OF TCM ON PRIMARY HEPATOCARCINOMA]. PAN MINGQIU, ET AL. hunan journal of traditional chinese medicine. 2002;18(4):1 (chi).

1658- gera: 105014/di/ra

[A SUMMARY ON 32 CASES OF COUGH IRRITATED BY PULMONARY CARCINOMA TREATED WITH THE **COMBINATION OF CHINESE TRADITIONAL AND** WESTERN MEDICINA]. HUANG ZHIFEN, ET AL. hunan journal of traditional chinese medicine. 2002;18(4):7 (chi*).

1659- gera: 105044/di/ra [THE CHANGES OF BLOOD SERUM MDA, SOD AND GSH -PX IN MICE S180 - BEARING AND THE EFFECTS OF POLYSACCHARIDE OF COMMON FIG ON ITS CHANGE]. ZHU FAN-HE, ET AL. chinese journal of ethnomedicine and ethnopharmacy. 2002;8(4):231 (chi).

1660- gera: 105303/di/ra

[CLINICAL OBSERVATION ON TREATMENT THE REACTION OF SIDE EFFECT IN THE POSTOPERATIVE BREAST CANCER CHEMOTHERAPY WITH SHENG XUE HE ZHONG TANG]. LIANG SHAOHUA LI MINJIANG LI TINGGUAN . guangxi journal of traditional chinese medicine. 2002;25(4):8 (chi).

1661- gera: 105317/di/ra

THINKING OF PREVENTING AND TREATING TUMOR TRANSPLANTATION WITH TRADITIONAL CHINESE MEDICINE]. YANG XINZHONG . hubei- journal of traditional chinese medicine. 2002;24(8):6 (chi).

1662- gera: 105328/di/ra
[PERIOPERATIVE MANAGEMENT OF INTEGRATED MEDICINE FOR AGING PATIENTS WITH DIGESTIVE TRACT TUMORS]. SHI XIAOGUANG, LI BAOZHONG, YUAN HAI, ET AL. chinese journal of surgery of integrated traditional chinese and western medicine. 2002;8(4): (chi*).

1663- gera: 105333/di/ra

IEFFECT OF YANGWEIKANGLIU GRANULES ON PERIPHERAL BLOOD T-LYMPHOCYTE RDNA TRANSCRIPTION ACTIVITY AND FAS EXPRESSION IN GASTRIC CANCER METASTASIS]. LI JIE, SUN GUIZHI, QI XIN, ET AL. chinese journal of surgery of integrated traditional chinese and western medicine. 2002;8(4):253 (chi*).

1664- gera: 105411/di/ra

[48 CASES OF TREATMENT OVER I-ATE STAGE TUMOUR COMBINED WITH TRADITIONAL CHINESE AND WESTERN MEDICINE]. MA ZHE-HE, GUO HONG-FEI. jiangxi journal of traditional chinese medicine. 2002;33(4):40 (chi).

1665- gera: 105513/di/ra

THE RELATIONSHIP BETWEEN TEST INDEX ABOUT THE STATE OF SPLEEN DEFICIENCY AND SURVIVAL PERIOD OF CARCINOMA OF STOMACH .]. ZHENG JIAN, ZHU YINJIE, ZHOU HAO ET AL. journal of practical traditional chinese medicine. 2002;8(18):3 (chi*).

1666- gera: 105528/di/ra

[EFFECT OF ELECTRIC NEEDLE ON THE MANIFESTATIONS OF SPINAL PRIMARY CARCINOMA GENE: C-FOS IN RATS WITH ADJUVANT ARTHRITIS]. WANG RUI-HUI. journal of shaanxi college of traditional chinese medicine. 2002;25(4):52 (chi).

1667- gera: 105571/di/ra [STUDY ON THE AND - TUMOR EFFECT OF COMPOUND PREPARATION OF DEAD BCG VACCINE AND **GINSENOSIDES ON MOUSE WITH TRANSPLANTED** TUMOR]. JIN HE-KUI ET AL. chinese journal of traditional medical science and technology. 2002;9(4):210 (chi).

1668- gera: 105574/di/ra

IPRIMARY DISCUSSION ON THE EFFECT OF SI= DECOCTION ON HEMOPOIETIC SYSTEM IN IRRADIATED MICE]. LU XIAO-QIN ET AL. chinese journal of traditional medical science and technology. 2002;9(4):216 (chi).

1669- gera: 106030/di/ra

ICLINICAL OBSERVATION ON REDUCING SIDE EFFECT OF CHEMOTHERAPY TO NON-SMALL-CELL CARCINOMA OF THE LUNG WITH YIQIYANGYINGBUTANG]. WANG ZHAO-LIN. jiangxi journal of traditional chinese medicine. 2002;33(3):41 (chi).

1670- gera: 106226/di/ra

[ELEMENTARY OBSERVATION OF "QI YI LING" ON LEWIS PULMONARY CANCER CELLS IN MICE]. JIN CHANG-JUAN, SHA HUI-FANG. acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai. 2002;16(2):54 (chi*).

1671- gera: 106258/di/ra

THE INFORMATION ON THE TREATMENT OF LUNG CANCER WITH TCM INTEGRATED WITH WEST MEDICINE.]. CHEN ZHIJIAN IAN ET AL. information on traditional chinese medicine. 2002;19(2):10 (chi).

1672- gera: 106510/di/ra

TREATING TUMORS BY FLEXIBLELY APPLYING LI DONGYUAN'S FORMULAE]. YAN ZHONGQING. zhejiang journal of traditional chinese medicine. 2002;37(9):398

1673- gera: 106785/di/ra

THERAPEUTIC EFFECT OF CF/5-FU COMBINED WITH TRADITIONAL CHINESE MEDICINE ON 33 CASES OF ADVANCED CARCINOMA OF LARGE INTESTINE]. ZHU DIYING, CHEN WEIJUN, FAN XIAOHUA, EL AL. hebei journal of traditional chinese medicine. 2002;24(8):568

1674- gera: 107426/di/ra

[OBSERVATION ON THE THERAPEUTIC EFFECT OF ACUPUNCTURE ON POST-EMBOLIC SYNDROME AFTER ENDARTERIAL CHEMOTHERAPY FOR LIVER CANCER]. MU RONG, ZHENG QUBIN. chinese acupuncture and moxibustion. 2002;22(1):21 (chi*).

Purpose: To observe the therapeutic effect of acupuncture on post-embolic syndrome after endarterial chemotherapy for liver cancer. Methods: Thirty-six cases with post-embolic syndrome after endarterial chemotherapy for liver cancer were treated with acupuncture at Neiguan (PC 6) and Zusanli (ST 36), and treatment of Ondansetron was used as controls. and the clinical results of the two groups were compared. Results The effective rate was 97. 2% and 95. 2% in the treatment group and the control group respectively, with no significantly difference. But there was a significant difference in the

markedly effective rate between the two groups (P<0.05). Conclusion: The therapeutic effect in the treatment group is superior to that in the control group.

1675- gera: 107508/di/ra

[TREATING LEUKOPENIA CAUSED BY RADIOTHERAPY AND CHEMOTHERAPY WITH POINT- INJECTION AT TSUSANLI]. LI YING, LI HAI-BIN, HUANG TAO. journal of yunnan college of tcm. 2002;25(1):44 (chi).

1676- gera: 107631/di/ra

[CLINICAL OBSERVATION OF GRANISETRON CAPSULE WITH COMBINATION OF INVIGORATING SPLEEN TO REGULATING QI CHINESE HERB ON THE PREVENTION OF VOMITING INDUCED BY CHEMOTHERAPY]. CHEN CHUN-YONG, XU KAI, ZHU DI-YING. journal of chengdu university of traditional chinese medicine. 2002;25(3):14 (chi).

1677- gera: 108504/di/ra

[SPECIFICITY OF ELECTRICAL SPECIFIC RESPONSE OF AURICULAR POINT AND PATHOLOGICAL CHANGES OF ESOPHAGEAL CANCER]. YU MING, XU DING, ZHU BING, ET AL. journal of nanjing university of tcm (natural science). 2002;18(6):357 (chi).

1678- gera: 108582/di/ra

[EFFECT OF SHENQI FUZHENG INJECTION COMBINED WITH CHEMOTHERAPY IN TREATMENT OF MALIGNENT TUMORS]. LI NAIQING, SHI XIAOGUANG, ZHOU KEXIN, ET AL. chinese journal of surgery of integrated traditional chinese and western medicine. 2002;8(5):323 (chi).

1679- gera: 108658/di/ra

ICLINICAL OBSERVATION ON POSTOPERATIVE ADVANCED COLORECTAL CANCER TREATED BY CHINESE MEDICINE PREPARATION THROUGH IMPLANTED PUMP]. LI ZHIYONG, DENG XIAOJUN. chinese journal of surgery of integrated traditional chinese and western medicine. 2002;8(5):343 (chi).

1680- gera: 108960/di/ra

TRADITIONAL CHINESE MEDICINE IN THE TREATMENT OF BREAST CANCER (PART THREE). COHEN I, TAGLIAFERRI M, TRIPATHY D. journal of chinese medicine. 2002;70:44 (eng).

Yue ju wan is a regpe that moves and regulates qi, dissolves stagnations and clears heats.

1681- gera: 110014/di/ra

THE TREATMENT OF CANCER PAIN WITH STEREOTACTIC RADIOTHERAPY]. REN BEN, DING TIAN-GUI, YIN LI-JIE, ET AL. chinese journal of pain medicine. 2002;8(4):195 (chi*).

1682- gera: 110051/di/ra

[HEWEI JIANGNI DECOCTION TREATING UNTOWARD EFFECT OF CHEMOTHERAPY FOR DIGESTIVE TRACT TUMORS-AN ANALYSIS OF 166 CASES]. WU ZHENGJUN, ET AL. chinese archives of tcm. 2002;20(6):714 (chi).

1683- gera: 110109/di/ra

THE INFLUENCE OF QIONGYU GAO ON THE CONTENT OF SERUM IL - 2 AND TNF IN EXPERIMENTAL MICE PULMONARY CARCINOMA WITH CHEMOTHERAPY -INDUCED IMMUNOSUPPRESSION]. CHEN XIAOYIN. new journal of tcm. 2002;34(12):61 (chi).

1684- gera: 110112/di/ra

[CLINICAL STUDY ON EARLY POSTOPERATIVE INTRA-PERITONEAL CHEMOTHERAPY FOR GASTRIC CANCER WITH COMBINED ADMINISTRATION OF RADIX SALVIAE MILTIORRHIZAE AND 5 - FLUOROURACIL]. YU QINGSHENG, WANG WEI, WANG XIAOMING, ET AL. chinese journal of surgery of integrated traditional chinese and western medicine. 2002;8(6):393 (chi*).

1685- gera: 110208/di/ra

[TREATMENT OF 51 CASES OF MALIGNANT TUMOR OF

DIGESTIVE TRACT WITH MODIFIED BA ZHEN DECOCTION AND HPF CHEMOTHERAPY]. KUANG JIAN-MIN, ZHAO XI-YI, ZHAO HUI-QIN, ET AL. shandong journal of tcm. 2002;21(12):720 (chi).

1686- gera: 110706/di/ra

ICLINICAL OBSERVATION OF INTERMEDIATE AND LATE PANCREATIC CARCINOMA TREATED BY JINLONG **CAPSULE IN COOPERATION WITH CHINESE HERBAL** MEDICINE]. WU YINGMEI, ET AL. beijing journal of tcm. 2002;21(6):349 (chi).

1687- gera: 116313/di/ra

[EFFECT OF ACUPUNCTURE ON SERUM TUMOR NECROSIS FACTOR IN THE PATIENT OF ACUTE CEREBRAL INFARCTION]. WANG LIPING, BIAN YIN, LI JIANYUAN, ET AL. chinese acupuncture and moxibustion. 2002;22(2):117 (chi*).

Purpose: To observe effect of acupuncture on serum tumor necrosis factor(TNF) in the patient of acute cerebral infarction. Methods: Sixty- eight cases of acute cerebral infarction were divided into acupuncture group and control group, serum TNF contents before acupuncture and one week after acupuncture were determined with enzyme linked immunosorbent assay (ELISA), and the clinical therapeutic effects before acupuncture and one week and on . one month after acupuncture were assessed. Results: TNF contents in the two groups lowered one week after acupuncture, with a significant decrease in the acupuncture group (P<0.01); There was no significant difference between the two groups in the therapeutic effect one week after acupuncture and there was a significant difference 30 days after acupuncture(P < 0. 05) Conclusion : Acupuncture at early stage can decrease serum content of TNF, quicken inflammatory absorption or decrease inflammatory response and accelerate functional restoration of brain and limbs in the patient of acute cerebral infarction.

1688- gera: 126082/di/re

EXPLORATORY STUDIES OF QIGONG THERAPY FOR CANCER IN CHINA. CHEN K, YEUNG R. integr cancer ther. 2002;1(4):345-70 (eng).

The authors reviewed more than 50 studies of gigong therapy for cancer in China, in 3 categories: clinical studies on cancer patients, in vitro studies on laboratory-prepared cancer cells, and in vivo studies on cancer-infected animals. Most of the clinical studies involved observation of cancer patients' selfpractice of qigong. Although no double-blind clinical trials were found among patient studies, many had a control. The qigong groups showed more improvement or had a better survival rate than conventional methods alone. In vitro studies report the inhibitory effect of gi emission on cancer growth, and in vivo studies find that qigong-treated groups have significantly reduced tumor growth or longer survival among cancerinfected animals. However, there is much room for improvement in these studies, and some require replication to verify the findings. Qigong therapy is an area that is often neglected by mainstream medicine and research, but our review strongly suggests that qigong deserves further study as a supplement to conventional cancer

1689- gera: 141007/di/tp
ACUPUNCTURE RESEARCH: EXAMPLES OF THE STATE OF THE SCIENCE FROM BENCH TO BEDSIDE. X. the nci office of cancer complementary and alternative medicine. 2002;: (eng)

The National Cancer Institute's Office of Cancer Complementary and Alternative Medicine (OCCAM) hosted Acupuncture Research: Examples of the State of the Science from Bench to Bedside, the first session in its Invited Speakers Series on complementary and alternative medicine research. On January 17, 2002, in Lipsett Auditorium at the National Institutes of Health (NIH), a panel of international experts in acupuncture research presented data from animal studies and some of the latest in clinical practice.

1690- gera: 154186/di/re

REVIEW OF QIGONG THERAPY FOR CANCER TREATMENT, CHEN K, YEUNG R. journal of the international society of life information science. 2002;20(2): (eng).

1691- gera: 159311/nd/re

INTEGRATION OF ACUPUNCTURE INTO THE ONCOLOGY CLINIC. JOHNSTONE PA, POLSTON GR, NIEMTZOW RC, MARTIN PJ.. palliat med.. 2002;16(3):235-9 (eng). PURPOSE/OBJECTIVE: Patients with cancer or symptoms referable to cancer therapy were offered acupuncture as potential palliation of their symptoms. This paper describes the physical integration of the discipline into the Oncology Clinic, and patient perspectives on its availability and efficacy PATIENTS AND METHODS: Between August 1999 and May 2000, 123 patients with varying symptoms received acupuncture in our Center's Radiation and Medical Oncology Clinics and Breast Health Center. These patients had 823 visits during this time period. A practice outcome analysis was performed on patients receiving therapy between 1 January 2000 and 30 April 2000. The 89 patients treated during this interval had 444 total visits. In June and July 2000, a questionnaire was administered by phone to 79 of these patients (89%). Standard allopathic care continued while patients were receiving acupuncture. RESULTS: Major reasons for referral included pain (53%), xerostomia (32%), hot flashes (6%) and nausea/loss of appetite (6%). Patients had a mean of five acupuncture visits (range 1-9). Most patients (60%) showed at least 30% improvement in their symptoms. About one-third of patients had no change in severity of symptoms. There were no untoward effects reported related to the acupuncture. When analysed by diagnosis, these values persist. Irrespective of response to therapy, 86% of respondents considered it 'very important' that we continue to provide acupuncture services. CONCLUSION: Acupuncture may contribute to control of symptoms for cancer patients. Expansion of providers, continued patient follow-up, optimization of techniques and prospective objective measurement of response continue in our clinic

1692- gera: 160250/di/ra

[ACUPUNCTURE TREATMENT FOR RADIO-CHEMOTHERAY INDUCED LEUKOPENIA WITH 58 CASES], LI QJ, JIA XH, MA YJ. henan journal of tcm and materia medica. 2002;17:53-4 (chi).

1693- gera: 160677/di/ra

[OBSERVATION ON INJECTION IN ACUPUNCTURE POINT FOR THE TREATMENT OF LEUKOPENIA AFTER CHEMICAL TREATMENT TO 45 PATIENTS WITH CANCER], CHANG BY, LIAN BH. journal of practical tcm. 2002;18(2):30-1 (chi).

1694- gera: 109548/nd/re

THE EFFECT OF ELECTROACUPUNCTURE AS AN ADJUNCT ON CYCLOPHOSPHAMID- INDUCED EMESIS IN FERRETS. LAO L ET AL. pharmacology biochemistry and behavior. 2003;74(3):691-9 (eng).

The effect of electroacupuncture (EA) on cyclophosphamideinduced emesis in ferrets was studied at acupuncture point Neiguan (P6) with various electrical stimulation parameters (5-100 Hz, 1.5-3 V, 5-20 min, n=6/group). The combination therapy of EA (100 Hz, 1.5 V and 10 min) with the lower doses of ondansetron (0.04 mg/kg), droperidol (0.25 mg/kg) and metoclopramide (2.24 mg/kg) significantly reduced the total number of emetic episodes by 52%, 36% and 73%, respectively, as well as the number of emetic episodes in the first phase as compared to the sham acupuncture control (P<.01). These EA/drug combinations also showed a significant effect in preventing emesis as compared to either EA or drug alone (P<.05). The present study suggests that acupuncture may be useful as an adjunctive therapy in the treatment of chemotherapy-induced emesis

1695- gera: 113452/di/ra

[CLINICAL OBSERVATION ON EFFECT OF MOXIBUSTION AT SHENQUE ON RECENT DIARRHEA IN PATIENTS TREATED WITH CHEMOTHERAPY FOR CERVICAL CARCINOMA]. SONG YA-GUANG, YUAN HUI, XU-LAN-FENG. journal of nanjing university of tcm. 2003;19(2):107 (chi*).

1696- gera: 117002/di/ra

[RESEARCH ON THE RELATIONSHIP BETWEEN TCM SYNDROME PATTERNS OF GASTRIC CARCINOMA AND THE EXPRESSIONS OF THE GENETIC PROTEINS P53, BCL-2 AND BAX]. ZHOU DONGZHI, WU SUDONG, LIU YONGHUI, ET AL. journal of beijing university of tcm. 2003;26(2):56 (chi*)

Objective: To investigate the con-elation between TCM syndrome patterns of gastric carcinoma and the expressions of the genetic proteins p53, bcl-2 and bax, for revealing the inner relationship between a disease and a TCM syndrome and finding the material basis of a TCM syndrome. Methods: 65 Cases of poorly differentiated gastric carcinoma at the progressive stage were chosen and divided into the group of splenic deficiency (SD) and the group of non-splenic deficiency (NSD) on the basis of TCM syndrome differentiation, and their main symptoms were processed by a semi- quantitative scoring method; the normal control group was made up by 20 subjects. The expressions of the genetic proteins p53, bcl-2 and bax in the pathologic tissues were detected by the S-P method. Results: The rates and the levels of the positive expressions of p53 and bcl-2 were significantly higher in the patients in SD group than those in NSD group (P < 0.05); the level of the positive expression of bax was lower in SD group than that in NSD group but there was no significant difference between the two results; there was a positive correlation between the values of the symptomatic scoring and the levels of the expressions of p53 and bcl-2 in SD patients (P < 0.01), but there was no such correlation between the values of the symptomatic scoring and the level of bax expression; and there was also no correlation between the values of the symptomatic scoring and the levels of the expressions of p53, bcl-2 and bax in NSD patients. Conclusion: The discrepant expressions of p53 and bcl-2 found in this experiment are related to the pathogenesis of SD syndrome of gastric carcinoma, and p53 and bcl-2 genes are part of the material basis of SD syndrome.

1697- gera: 117516/di/re

ANALGESIC EFFECT OF AURICULAR ACUPUNCTURE FOR CANCER PAIN: A RANDOMIZED, BLINDED, CONTROLLED TRIAL. ALIMI D, RUBINO C, PICHARD-LEANDRI E, FERMAND-BRU. j clin oncol. 2003;21(22):4120-6. (eng).

PURPOSE: During the last 30 years, auricular acupuncture has been used as complementary treatment of cancer pain when analgesic drugs do not suffice. The purpose of this study is to examine the efficacy of auricular acupuncture in decreasing pain intensity in cancer patients. PATIENTS AND METHODS: Ninety patients were randomly divided in three groups; one group received two courses of auricular acupuncture at points where an electrodermal signal had been detected, and two placebo groups received auricular acupuncture at points with no electrodermal signal (placebo points) and one with auricular seeds fixed at placebo points. Patients had to be in pain, attaining a visual analog score (VAS) of 30 mm or more after having received analgesic treatment adapted to both intensity and type of pain, for at least 1 month of therapy. Treatment efficacy was based on the absolute decrease in pain intensity measured 2 months after randomization using the VAS. RESULTS: The main outcome was pain assessed at 2 months, with the assessment at 1 month carried over to 2 months for the eight patients who interrupted treatment after 1 month. For three patients, no data were available because they withdrew from the study during the first month. Pain intensity decreased by 36% at 2 months from baseline in the group receiving acupuncture; there was little change for patients receiving placebo (2%). The difference between groups was statistically significant (P <.0001). CONCLUSION: The observed reduction in pain intensity measured on the VAS represents a clear benefit from auricular acupuncture for these cancer patients who are in pain, despite stable analgesic treatment.

1698- gera: 118078/di/ra [CLINICAL OBSERVATION ON JIAOZHEN DECOCTION IN TREATING 518 CASES OF LEUKOCYTOPENIA CAUSED BY RADIOTHERAPY AND CHEMOTHERAPY]. HAO ZENGLAI, CHEN ZHIFENG, SI CHONGYANG, ET AL. hebei

journal of tcm. 2003;25(8):570 (chi).

1699- gera: 118507/di/ra

TROUBLES DE LA DEGLUTITION CHEZ UN QUASI-CENTENAIRE AVEC CANCER DE LA TETE DU PANCREAS. PERNICE C. acupuncture & moxibustion. 2003;2(1-2):62 (fra).

1700- gera: 119964/di/ra

[EFFECT OF BAZHEN SHENNONG DECOCTION ON INHIBITING S37 MICE INJURY CAUSED BY CHEMOTHERAPY]. GE SHIWEN, ZHU JLANLI, ZHANG YAN ET AL. traditional chinese medicinal research. 2003;16(2):11 (chi).

1701- gera: 120191/di/ra

THERAPEUTIC EVALUATION ON ADVANCED PANCREATIC CANCER TREATED BY INTEGRATIVE **CHINESE AND WESTERN MEDICINE - CLINICAL** ANALYSIS OF 56 CASES. LIU LU-MING, WU LIANG-CUN, LIN SHENG-YOU, ET AL. chinese journal of integrative medicine. 2003;9(1):39 (eng*).

1702- gera: 120393/di/ra

[CLINICAL ANALYSIS OF TWO-PHASE ACUPUNCTURE-MOXIBUSTION THERAPY FOR LARGE INTESTINE CANCER IN 27 CASES]. JIN ZHE-XIU. shanghai journal of tcm. 2003;37(5):48 (chi*).

1703- gera: 121083/di/ra

ISTUDY OF BAZHEN DECOCTION AND CHEMOTHERAPY ON MAMMARY CANCER IN METAPHASE OR LATER PERIOD]. HUANG ZHI-FEN, WEI JIN-SONG, SHI ZHI-YAN, ET AL. modern journal of integrated traditional chinese and western medicine. 2003;12(11):1123 (chi*).

1704- gera: 121336/di/ra

IRELATIONSHIP BETWEEN INSUFFICIENCY OF THE HEART-QI (YANG) OF CONGESTIVE HEART-FAILURE AND TUMOR NECROSIN -DELTA ,INTERLEUKIN-6]. CHEN RUI, ET AL. hubei journal of tcm. 2003;25(5):10 (chi).

1705- gera: 121876/di/ra

[INFLUENCE OF MOXIBUSTION ON HEMOGLOBIN DURING RADIOTHERAPY IN PATIENTS WITH CERVICAL CANCER]. YUAN HX YU ZC CHENG HZ ET AL. shanghai j ournal of acupuncture and moxibustion. 2003;22(7):33

1706- gera: 122169/di/ra SUPPRESSING TUMOR PROGRESSION OF IN VITRO PROSTATE CANCER CELLS BY EMITTED PSYCHOSOMATIC POWER THROUGH ZEN MEDITATION. TIING YU, ET AL. american journal of chinese medicine. 2003;31(3):499 (eng).

1707- gera: 123155/di/ra

[CLINICAL OBSERVATION OF VOMITING DUE TO CHEMIOTHERAPY TREATED WITH TCM AND WESTERN MEDICINE]. YOU XIANG-GIAN. acta chinese medicine and pharmacology. 2003;31(5):55 (chi).

1708- gera: 123290/di/ra

[ACUPUNCTURE'S PROSTHETIC EFFECT ON CHEMOTHERAPY- INDUCED INJURY OF BONE MARROW NERVES IN MOUSE]. ZHAO XIXIN, LU MEI, WANG MINJI,ET AL journal of henan university of chinese medicine. 2003;18(108):24 (chi*).

Objective: To see whether chemotherapy will injure bone marrow nerves as well as whether acupuncture has a prosthetic effect on such injury. Method: Cyclophospharnide was given to mouse, followed by acupuncture treatment in groups. Tissue staining method was employed to observe the distribution of marrow nerves and nerve ending. Acupuncture treatment can rapidly repair such injury, and has a better effect than moxibustion. Conclusion: Its restoration of marrow nerves and nerve ending is the major mechanism of therapeutic effect.

1709- gera: 123397/di/ra

[CLINICAL OBSERVATION ON YIQITIAOFU DECOCTION COMBINED CHEMICAL THERAPY FOR THE TREATMENT OF 43 CASES OF LARGE INTESTINE CANCER]. PAN MINQIU, PAN BO, LI YUEHENG . hunan guiding journal of tcm. 2003;9(11):12 (chi).

1710- gera: 124356/di/ra

[EFFECT OF PUNCTURING POINT ZUSANLI ON T - AOC OF RATS UNDER CHEMOTHERAPY]. SUN YI-NONG, ZHA WEI, SHANG MING-HUA. journal of nanjing university of tcm. 2003;19(6):360 (chi*).

1711- gera: 124794/di/ra

[EFFECT ON BU - SHEN YI - QI - XUE PRESCRIPTION TO RATS CELLULAR DAMAGE AFTER 60 COYRAYS EXPOSURE]. FENG QUAN-SHENG, LIU JI-LIN, HUANG GUO-JUN, E. journal of chengdu university of tcm. 2003;26(4):30 (chi).

1712- gera: 124797/di/ra

[EFFECT ON BU - XU HUA - YU PRESCRIPTION TO BONE MARROW DEPRESSION DUE TO HEMORRHEOLOGICAL INDICES OF CARCINOMATOSIS MICE AFTER CHEMOTHERAPY]. GOU ZHONG-PING, DENG DAO-CONG. journal of chengdu university of tcm. 2003;26(4):37 (chi).

1713- gera: 125409/di/ra

[OBSERVATIONS ON TREATMENT OF LEUKOPENIA CAUSED BY CHEMOTHERAPY WITH SHENGBAI HEJI IN 98 CASES]. JIANG DAO-GUO ET AL. journal of tcm and chinese materia medica of jilin. 2003;23(10):12 (chi).

1714- gera: 125570/di/ra

[EFFECT OF LIVER-STAGNATION AND SPLEEN-DEFICIENCY ON THE CELL CYCLE OF H22 ASCITIC FLUID TUMOR IN MICE AND THE TREATMENT OF SHUGANJIANPIFANG]. WANG JI, ET AL. chinese journal of information on tcm. 2003;10(10):28 (chi*).

1715- gera: 125651/di/ra

[CHINESE DRUGS FOR PREVENTING AND TREATING ALOPECIA-TOXICITY INDUCED BY ADM COMBINED CHEMOTHERAPY]. WANG HUI-JIE, SUN WEI-FEN. fujian journal of tcm. 2003;34(5):8 (chi).

1716- gera: 131528/di/ra

TRATTAMENTO MEDIANTE AGOPUNTURA DEL VOMITO PROVOCATO DA CHEMIOTERAPIA. LI DONGFANG ED ALTRI. rivista italiana di medicina tradizionale cinese. 2003;94(4):44 (ita*).

Chemotherapy is mainly used for treating malignant tumor. However, some patients can not withstand the side effects in the digestive system and had to abandon the treatment. In order to prevent vomiting, antiemetics, such as metoclopramide and ondansetron (a new kind of antiemetic), are used. But some patients still vomit after taking these drugs. Moreover, drugs like ondansetron are very expensive for many patients. Since March 1999, we have applied acupuncture to prevent vomiting caused by chemotherapy with satisfactory results. The following is a report of 34 cases

1717- gera: 133468/di/ra

ELECTROACUPUNCTURE FOR HOT FLASHES SECONDARY TO CANCER THERAPY: RESULTS OF TREATING THE EASTERN DIAGNOSIS OF KIDNEY WATER EXHAUSTED (PILOT STUDY). JOHNSTONE PAS. medical acupuncture. 2003;15(1):23 (eng*).

Background Many cancer patients experience hot flashes as toxicity of cancer therapy; this may be diagnosed by the Eastern practitioner a! Kidney Water Exhausted.Objective To review outcomes of acupuncture as palliation of hot flashes.Design, Setting, and Patients Thirteen patients with hot flashes secondary to hormonal manipulation for breast cancer (n=8), prostate cancel (n=3), chemotherapy (n=1), or pelvic radiation (n=1) were referred to the Naval Medical Center San Diego (NMCSD) Acupuncture Service. Two patients had received medication for hot flashes prior to acupuncture with minor benefit. Patients were offered acupuncture therapy designed to replenish drained kidney Yin; this technique also

relieves fatigue. A single physician acupuncturist provided all treatments; sterile single-use needles were exclusively used.Main Outcome Measure Using the Mayo Clinic Hot Flash Index, patients recorded the number of episodes in a 24-hour period and graded these from mild to very severe Results After a median of 5 treatments in 3 weeks (range 2-6 treatments in 0.5 to 9 weeks), 12 patients responded with fewer and less severe hot flashes as measured by self-report. For these patients, benefits involved a decrease from a median of 8 "moderate" episodes per day to a median of 3 "mild" episodes a day. Subjectively, 12 of 13 patients expressed improvement in quality of life or reduction of symptomatic hot flashes Conclusions In this cohort of cancer patients experiencing hot flashes, acupuncture may provide improvement in number and severity of episodes. Subjective improvement was noteworthy in many patients. An institutional prospective, randomized controlled trial has been approved for patient accrual.

1718- gera: 133472/di/ra

REVERSAL OF CHEMOTHERAPY-INDUCED
MYELOSUPPRESSION WITH ELECTROACUPUNCTURE.
GERALD W GRASS,. medical acupuncture. 2003;15(1):35
(eng*)

Background Chronic lymphocytic leukemia (CLL) is the most common form of leukemia in the Western Hemisphere. Although chlorambucil has been widely used in the treatment of malignant lymph oproliterative disease, several reports of irreversible bone marrow failure and death have been attributed to its use. Electroacupuncture may be a treatment modality to reverse chhorambucih-induced myelosuppression. Objective To illustrate the use of electroacupuncture in the treatment of chemotherapy-induced myelosuppression. Design, Setting, and Patient A case report of a 61-year-old man with myelosuppression following chhorambucil administration for Rai stage III CLL Intervention The patient was treated with electroacupuncture at BL 11, BL 17, LR 3, and SP 6 Main Outcome Measure Resolution of chemotherapy- induced myelosuppression following treatment; specifically, measurement of hemoglobin, leukocytes, and platelets, and need for blood transfusions. Results Following 8 treatment sessions, the patient's hematological measurements increased and stabilized. The patient did not report an adverse effects following acupuncture. Follow-up at 1 year revealed hemoglobin, leukocyte, and platelet counts within normal ranges. He hai not required any additional blood transfusions. Conclusion The case reported herein suggests that electroacupuncture may be a promising therapeutic modality for the treatment of myelo suppression secondary to chemotherapeutic regimens.

1719- gera: 135985/di/ra

CASE REPORT: ACUPUNCTURE FOR THE TREATMENT OF SWEATING ASSOCIATED WITH MALIGNANCY. HALLAM C, WHALE C. acupuncture in medicine. 2003;21(4):155 (eng*).

Acupuncture was used to treat a 60-year old woman with unexplained sweating associated with inoperable lung cancer that prevented her from sharing a bed with her husband. Other measures failed to improve her sweating, but she responded well to a course of acupuncture allowing her to continue sharing the marital bed.

1720- gera: 159345/di/tp

NATIONAL GUIDELINES FOR THE USE OF COMPLEMENTARY THERAPIES IN SUPPORTIVE AND PALLIATIVE CARE THE NATIONAL COUNCIL FOR HOSPICE AND SPECIALIST PALLIATIVE CARE SERVICES. the prince of wales's foundation for integrated health. 2003;:112p (eng).

1721- gera: 160043/di/re

THE EFFICACY OF ACUPRESSURE AND ACUSTIMULATION WRIST BANDS FOR THE RELIEF OF CHEMOTHERAPY- INDUCED NAUSEA AND VOMITING, ROSCOE JA, MORROW GR, HICKOK JT, BUSHUNOW P, PIERCE HI, FLYNN PJ, KIRSHNER JJ, MOORE DF, ATKINS JN.. j pain symptom manage. 2003;26(2):731-42 (eng). The efficacy of acupressure and acustimulation wrist bands for the relief of chemotherapy-induced nausea and vomiting. A

University of Rochester Cancer Center Community Clinical Oncology Program multicenter study. As an adjunct to standard antiemetics for the relief of chemotherapy-induced nausea and vomiting (NV), 739 patients were randomly assigned to either: 1) acupressure bands, 2) an acustimulation band, or 3) a no band control condition. Patients in the acupressure condition experienced less nausea on the day of treatment compared to controls (P<0.05). There were no significant differences in delayed nausea or vomiting among the three treatment conditions. Additional analyses revealed pronounced gender differences. Men in the acustimulation condition, but not the acupressure condition, had less NV compared to controls (P<0.05). No significant differences among the three treatment conditions were observed in women, although the reduction in nausea on the day of treatment in the acupressure, compared to the no band condition, closely approached statistical significance (P=0.052). Expected efficacy of the bands was related to outcomes for the acupressure but not the acustimulation

1722- gera: 160189/di/re

RANDOMIZED DOUBLE-BLIND STUDY OF THE **RELIEFBAND AS AN ADJUNCT TO STANDARD** ANTIEMETICS IN PATIENTS RECEIVING MODERATELY-HIGH TO HIGHLY EMETOGENIC CHEMOTHERAPY.

TREISH I, SHORD S, VALGUS J, HARVEY D, NAGY J, STEGAL J, LINDLEY C.. support care cancer. 2003;11(8):516-21 (eng).

GOALS: Our goal was to evaluate the efficacy and tolerability of the Reliefband as an adjunct to standard antiemetics in patients receiving moderately-high to highly emetogenic chemotherapy. PATIENTS AND METHODS: Forty-nine adult cancer patients receiving moderately-high or highly emetogenic chemotherapy were randomized to receive either the active Reliefband (n=26) or an inactive device (n=23). Patients continued to receive all scheduled and as needed antiemetic agents as prescribed. The device was worn the day of chemotherapy administration for 5 days (days 1-5). Patients maintained a daily dairy of nausea severity, vomiting and retching episodes, and antiemetic medications taken. Each patient completed a Functional Living Index Emesis (FLIE) and a tolerability survey at the conclusion of the study. A Wilcoxon rank sum test was used to compare the number of vomiting episodes, severity of nausea and FLIE scores between the two groups. MAIN RESULTS: Patients wearing the active Relifband experienced less vomiting (Reliefband 1.9 versus inactive device 4.6 mean episodes; p=0.05), retching (1.4 versus 3.6 mean episodes; p=0.05), and nausea severity (0.91 versus 1.65 mean cm/day; p=0.01) over the 5-day period compared to patients wearing the inactive device. Vomiting was statistically significantly reduced during the delayed period (0.42 versus 1; p=0.032), whereas nausea was significantly reduced during the acute (0.71 versus 2.3; p=0.028) and delayed (1.8 versus 3.3; p=0.020) periods. FLIE scores did not differ between the two treatment groups (91 versus 80; p=0.088). CONCLUSIONS: This study suggests that patients receiving moderately-high to highly emetogenic chemotherapy who experience nausea and vomiting despite scheduled antiemetics may benefit from the use of the Reliefband as an adjunct to antiemetics. Limitations of this study include differences in risk factors for emesis, chemotherapy, and antiemetic regimens. A larger, better, controlled randomized study is needed to better define optimal use of this device.

1723- gera: 160354/co/re

THE EFFECTS OF TAI CHI AND WALKING ON FATIGUE AND BODY MASS INDEX IN WOMEN LIVING WITH BREAST CANCER: A PILOT STUDY, GALANTINO ML CAPITO L. KANE RJ. OTTEY N. SWITZER S. PACKEL L.. rehabilitation oncology. 2003;21(7):17-22 (eng).

1724- gera: 124068/di/ra

TREATMENT OF RADIATION ESOPHAGITIS BY NIANCIAN' S CHUANBEI PIPA GAO COMBINED WITH YUNNAN BAIYAO:A CLINICAL OBSERVATION OF 32 CASES]. GUO YUE-FENG, CHENG HUI-JUN, MA CHUN-ZHENG, new journal of tcm. 2004;36(1):23 (chi*).

1725- gera: 124833/di/ra

[ANALYSIS ON CHARACTERISTICS OF SYNDROME IN 2060 CASES OF PRIMARY HEPATIC CANCER]. FANG ZHAOQIN, LI YONGJIAN, TANG CHENLONG, ET AL. journal of tcm. 2004;45(1):53 (chi*).

1726- gera: 125168/di/ra

[EFFECT OF DANSEN ON RAT DIGESTIVE TRACT WITH ACATE RADIATION ENTERITIS]. ZHAO YUANZHEN, GAO CHUNFANG . chinese journal of surgery of integrated traditional chinese and western medicine. 2004;10(1):8

1727- gera: 126377/co/re
MANY CANCER PATIENTS SEEK ALTERNATIVE MEDICAL TREATMENT IF INSURANCE COVERS IT, NEW STUDY SHOWS. MANOS D. rep med guidel outcomes res. 2004;15(7):9-10, 12 (eng).

1728- gera: 126417/di/re

ACUPUNCTURE FOR POSTCHEMOTHERAPY FATIGUE: A PHASE II STUDY. VICKERS AJ, STRAUS DJ, FEARON B, CASSILETH BR. j clin oncol. 2004;22(9):1731-5. (eng).

1729- gera: 126432/nd/re
USE OF COMPLEMENTARY AND ALTERNATIVE THERAPIES: A NATIONAL MULTICENTRE STUDY OF ONCOLOGY HEALTH PROFESSIONALS IN NORWAY. KOLSTAD A, RISBERG T, BREMNES Y, WILSGAARD T, HOLT. support care cancer. 2004;12(5):312-8. (eng).

1730- gera: 127076/di/ra

[EFFECT OF HCPT ON HUMAN PANCREATIC CANCER CELL]. GU QUN-HAO, LIAO QUAN, ZHANG SHENG-HUA, ET AL. modern journal of integrated traditional chinese and western medicine. 2004;13(5):570 (chi*).

1731- gera: 129196/di/ra

[CONTRAST OBSERVATION ON INJECTION METOCLOPRAMIDE IN DIFFERENT ACUPUNCTURE POINT FOR THE TREATMENT OF EMESIS AFTER CHEMICAL TREATMENT TO MAMARY CANCER], X. hunan guiding journal of tcm. 2004;10(2):39 (chi).

1732- gera: 129422/di/ra

IRESEARCH ADVANCE IN CHINESE DRUGS' ANTI-RADIATION]. QIAN YI,KONG XIANGYAN . forum on tcm. 2004;19(3):51 (chi).

1733- gera: 129520/di/ra

[CLINICAL OBSERVATION OF COMPOUND KUSHEN INJECTION IN TREATING CANCEROUS PAIN]. WANG ZHENG-YAN, SUN HONG-JIE . shanghai journal of tcm. 2004;38(6):19 (chi*).

1734- gera: 129540/di/ra

IEVOLUTION OF TYPICAL SYNDROMES AND THE CHARACTERISTICS OF HIND PAW IMAGES IN TUMOR-BEARING MICE]. PAN ZHI-QIANG, FANG ZHAO-QIN, FU XIAO-LING, ET AL shanghai journal of tcm. 2004;38(6):62 (chi*).

1735- gera: 129651/di/ra

CLINICAL INVESTIGATION ON CHINESE HERB SEQUENTIAL THERAPY FOR 219 CASES OF LIVER CANCER WITH EMBOLISM OF PERIPHERAL HEPATIC ARTERY AT CHEMOTHERAPEUTIC STAGE. SU XIAOKANG, ZHOU WEISHENG, XU FABIN, ET AL. journal of tcm. 2004;45(6):434 (eng).

1736- gera: 129656/di/ra

EFFECTS OF BUGANSHEN YIQIXUE FORMULA ON P53, P21WAF1, CASPASE-3 AND CD3, PROTEIN EXPRESSION IN THE MOUSE OF MARROW INJURY INDUCED BY 60CO Y-RAY. FENG QUANSHENG, LIU JILIN, HUANG GUOJUN, ET AL. journal of tcm. 2004;45(6):453 (eng).

1737- gera: 129670/di/ra

[CURATIVE EFFECT OBSERVATION ON TREATING

ADVANCED CARCINOMA OF STOMACH COMBINED WITH TRADITIONAL CHINESE MEDICINE AND CHEMOTHERAPY]. SHI HANG, SHAN GUANG-ZHI, LU WEI-NA. jiangxi journal of tcm. 2004;35(6):40 (chi).

1738- gera: 129717/di/ra

[INTEGRATED TCM AND WM TREATMENT FOR LEUKOPENIA DUE TO CHEMOTHERAPY FOR TUMOR]. TIAN GUOFANG, LI XIN, DUAN RENHUI. shaanxi journal of tcm. 2004;25(6):492 (chi).

1739- gera: 129738/di/ra

[CLINICAL OBSERVATION ON PREVENTIVE AND THERAPEUTIC EFFECTS OF GARGLED DAHUANG -**HUANGLIANXIEXIN DECOCCIÓN FOR RADIATION -**INDUCED MOUTH CAVITY MUCTITIS]. LU JUNZHANG, ET AL . journal of emergency in tcm. 2004;13(7):438 (chi*).

1740- gera: 129739/di/ra

[CLINICAL OBSERVATION ON EFFECT OF PREVENTION AND TREATMENT OF SHENMAI INJECTION FOR CARDIAC DAMAGE CAUSED BY CHEMOTHERAPY]. HUANG JINGYU. journal of emergency in tcm. 2004;13(7):442 (chi*).

1741- gera: 129876/di/ra

[CLINICAL STUDY ON LATE GASTRIC CANCER TREATED BY WEITIAO I[MIXTURE OF CHINESE HERB]. YOU JIANLIANG, ET AL. hubei journal of tcm. 2004;26(6):8 (chi).

1742- gera: 129894/di/ra

[RADIOACTIVE RECTITIS (12 CASES) TREATED BY PURGATION METHOD OF CLEARING HOLLOW VISCERA]. CHEN JIESHEN . journal of practical tcm. 2004;20(6):293

1743- gera: 129960/di/ra

JAN ANALYSIS ON SYNDROME CLUSTERING AND MAIN COMPONENTS OF 120 CASES OF STOMACH CARCINOMA]. LIU YING, ZHU WENFENG, LU FANGGUO, ET AL. jiangsu journal of tcm. 2004;25(6):20 (chi).

1744- gera: 129970/di/ra

[ADVANCEMENT IN TREATMENT OF CARCINOMA PAIN]. CHEN CHENGGANG . jiangsu journal of tcm. 2004;25(6):59 (chi).

1745- gera: 130023/di/ra

THE TREATMENT OF MALIGNANT TUMOR BONE METASTASIS BY LINEAR ACCELERATOR AND BONEFOS: A THERAPEUTIC-EFFECT OBSERVATION]. MU LIXIANG, DANG WENSHENG, AND YAN LIUYU. journal of traditional orthopedics and traumatology. 2004;16(6):10

1746- gera: 130049/di/ra

[CLINICAL OBSERVATION ON WRIST ANKLE ACUPUNCTURE FOR TREATMENT OF PAIN OF MIDDLE-LATE LIVER CANCER]. HU XIA, LINA CHANG-QUAN, ZHOU QING-HUI . chinese acupuncture and moxibustion. 2004;24(3):149 (chi*)

Objective To observe therapeutic effect of stone needle therapy on primary dysmenorrhea. Methods Twenty-one cases of primary dysmenorrhea were divided into three types, stagnation of Qi and blood stasis, accumulation of cold and dampness, deficiency of Qi and blood, and treated by 16 manipulations of stone needle therapy using Bian-stone cone made by Sibin float-stone. Results Three cases were markedly effective, 15 cases were effective and 3 cases were ineffective. Conclusion Stone needle therapy is a safe and effective for primary dysmenorrhea.

1747- gera: 130089/di/ra

[EFFECT OF RUNING II ON EXPRESSION OF VASCULAR ENDOTHELIAL GROWTH FACTOR IN TRANSPLANTED TUMOR OF MAMMARY CANCER MA-891 IN TA2 MICE*]. WU XUE-QING, GAO SHANG-PU, MU MING-CHUN, ET AL. chinese journal of integrated traditional and western medicine. 2004;24(3):251 (chi*).

1748- gera: 130113/di/ra

[QUANTIFIED STANDARDS FOR LIVER-GALLBLADDER DAMPNESS-HEAT SYNDROME OF PRIMARY LIVER CANCER]. HOU FENG-GANG ZHAO GANG HE XIAN-MIN,ET AL. acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai. 2004;18(1):31 (chi*). This article establishes the quantified standards for livergallbladder dampness-heat syndrome of primary liver cancer. On the basis of epidemiological survey, the factors related to the syndromes of and of no liver-gallbladder dampness- heat are quantified and scored, hence to set up the standards. Results: The diagnostic standard for liver-gallbladder dampness-heat was 26 points; its retrospective and prospective sensitivity, specificity and accuracy were over 90% ;positive ratios were 12. 68 and 11. 78; grading standards were 26 - 35 points for mild syndrome, 36 - 45 points for moderate syndrome , and over 46 points for severe syndrome. It is showed that this standard is of more practice and

1749- gera: 130137/di/ra

[A CLINICAL STUDY ON THE ANALGESIC EFFECT OF COMPOUND SHANSHU POWDER ON CANCEROUS PAIN **USED IN A WAY OF EXTERNAL APPLICATION-A REPORT** OF 60 CASES]. CHEN MENGXI, HUANG LIZHONG, HE YINGHONG, ET AL. journal of tcm university of hunan. 2004;24(3):37 (chi*).

1750- gera: 130194/di/ra

[THERAPEUTIC OBSERVATION ON NON-SMALL CELL CARCINOMA OF LUNG TREATED WITH SHENGMAI INJECTION AND RADIOTHERAPY]. MU JIAN-GUO, ZHANG GUANG-HUA, ZHENG HAI-TAO, ET AL. shandong journal of tcm. 2004;23(4):206 (chi).

1751- gera: 130303/di/ra
[ANALYSIS ON THE LONG-TERM LIFE QUALITY OF 71 CASES OF YOUNG ADOLESCENTS' NASOPHARYNGEAL CARCINOMA]. CHEN ZHIREN, XU XIAONAN, CHEN LIBIN, ET AL . journal of zhejiang college of tcm. 2004;28(4):27 (chi).

1752- gera: 130308/di/ra

[) THE ANTICANCER OF MAORENSHEN AND ITS EFFECT ON RABBIT'S IMMUNE FUNCTION]. WAN XUYING ZHANG CHENG, LING CHANGQUN, ET AL. journal of zhejiang college of tcm. 2004;28(4):56 (chi*).

1753- gera: 130340/di/ra

[CLINICAL OBSERVATION ON CYTOPENIA AFTER RADIOTHERAPY OR CHEMIOTHERAPY TREATED WITH BU - XU DECOCTION]. LAN MA. journal of chengdu university of tcm. 2004;27(2):4 (chi).

1754- gera: 130346/di/ra

[INFLUENCE ON MAIN RECIPE FOR PAIL DIARRHEA TO EXPRESS OF EGFR AND P53 GENE OF EXPERIMENTAL COLORECTAL CARCINOMA]. LIAN NAN, CAO JUN-GAO, YAN MING-QING. journal of chengdu university of tcm. 2004;27(2):17 (chi).

1755- gera: 130350/di/ra

ISTUDY ON THE INHIBITORY EFFECT OF SUI - QING PILL ON METASTASIS IN B16 MELANOMA]. YANG ZHEN-JIANG, ZHAOXIA, ZHOU LIUBING, ET AL. journal of chengdu university of tcm. 2004;27(2):30 (chi).

1756- gera: 130387/di/ra

[ELABORATION ON CHINESE MEDICAL SYNDROMES FOR CHEMOTHERAPEUTIC SIDE REACTION IN PATIENTS WITH TUMOR]. SUN HONG-YOU, MA BIN-4N WANG RUO-SHENG, ET AL. xinjiang journal of tcm. 2004;22(3):9 (chi).

1757- gera: 130401/di/ra

[INFLUENCE OF CHINESE MEDICINE SHANWEI DECOCTION ON P21 IN CASES FROM PRECANCEROUS LESIONS IN CHRONIC ATROPHIC GASTRITIS]. DAI ER-QING, YUAN HONG-XIA, FENG LI, ET AL . liaoning journal of tcm. 2004;31(7):561 (chi*).

1758- gera: 130520/di/ra

[EFFECTS OF "FUZHENG DECOCTION" ON EGFR AND PCNA IN LA795 LUNG CANCER MICE]. LIU HAI-TAO DAI XI-MENG . shanghai journal of tcm. 2004;38(7):48 (chi*).

1759- gera: 130521/di/ra

[EFFECTS OF "FUZHENG YILIU GRANULE" ON **ERYTHROCYTE IMMUNITY IN ESOPHAGEAL CARCINOMA** PATIENTS ON CHEMOTHERAPY]. LI XUE-FENG ZHAO JIAN-XIONG. shanghai journal of tcm. 2004;38(7):51 (chi*).

1760- gera: 130538/di/ra

[IN VITRO EFFECT OF ZILONGJIN ON PROSTATE CANCER CELL LINE LNCAP *]. LI XUE-SONG, LIANG YUN-YAN, WANG DAI-SHU, ET AL. chinese journal of integrated traditional and western medicine. 2004;24(7):621 (chi*).

1761- gera: 130750/di/ra

['EFFECTIVE OBSERVATION ON 49 CASES OF INTERMEDIATE AND LATE CARCINOMA OF ESOPHAGUS TREATED BY YEGE DECOCTION]. LI YING, ET AL. hunan journal of tcm. 2004;20(4):1 (chi*).

1762- gera: 130870/di/ra

[EFFECT OF DOUGEN GUANSHITONG ORAL LIQUID ON PATHOLOGICAL CHANGES IN ESOPHAGUS CARCINOMA RATS]. MENG YULING, WANG XIANGQI, YANG XI . journal of tcm . 2004;45(3):217 (chi).

1763- gera: 130953/di/ra

[EXPERIENCE OF TREATING PRECANCEROUS LESION IN GASTRIC MUCOSA BY PROFESSOR XIE JIAN-QUN]. PAN XIANG-XUE, YUAN JIAN-YE. jiangxi journal of tcm. 2004;35(5):8 (chi).

1764- gera: 131112/di/ra

[CLINICAL ADVANCES AND THINKING MODE OF USING HERBAL MEDICINES TO TREAT LUNG CANCER WITH TCM]. LI ZHONG ET AL. china journal of tcm and pharmacy. 2004;19(3):176 (chi).

1765- gera: 131168/di/ra

THERAPEUTIC EFFECT OF XIANLONGDINGTONG DECOCTION ON 32 PATIENTS WITH PAINS CAUSED BY BONE METASTASIS CARCINOMA]. LUO HAIYING, XU KAI , CHEN DACAN. hebei journal of tcm. 2004;26(3):174 (chi*).

1766- gera: 131192/di/ra

TREATMENT OF 21 CASES OF CARCINOMATOUS STRICTRER OF UPPER DIGESTIVE TRACT WITH 5-FU THROUGHT ENDOSCOPE AND FUZHENG HEWEI MIXTURE]. HU PING-PING. shandong journal of tcm. 2004;23(7):417 (chi).

1767- gera: 131347/di/ra

[EFFECT OF PS - T AND IL - 2 ON PTEN AND IL - 2R POSITIVE CELLS IN EXPERIMENTAL HEPATIC CARCINOMA]. LU PENG CHEN LI, LU ZHENG-XIN . modern journal of integrated traditional chinese and western medicine. 2004;13(15):1982 (chi*).

1768- gera: 131375/di/ra [HISTORY OF SURGERY FOR BREAST CANCER]. GAO JIN-BO, SHI WEN-JIA. chinese journal of medical history. 2004;34(3):166 (chi*).

Surgery is the major treatment for breast cancer. This paper reviews the history of surgery for breast cancer, which can be divided into five stages, namely, primary local excision, radical mastectomy, extensive radical mastectomy, modified radical mastectomy and breast - conserving surgery. Modified radical mastectomy and breast - conserving surgery are the most popular surgical therapy. The breast-conserving surgery which have good therapeutic and cosmetic outcome is especially the preferred method for early breast cancer.

1769- gera: 131742/di/ra

[PERSONAL EXPERIENCE IN PATTERN IDENTIFICATION

ON TREATMENT OF CANCEROUS HEAT WITH TCM]. LIU CHAOXIA, JIAO ZHONGHUA . beijing journal of tcm. 2004;23(4):199 (chi).

1770- gera: 131836/di/ra

ICLINICAL OBSERVATION ON TREATING DERMATITIS CAUSED BY RADIATION THERAPY WITH SHIRUNSHAOSHANGGAO]. WANG YOUJUN ET AL. china journal of tcm and pharmacy. 2004;19(9):575 (chi).

1771- gera: 131924/di/ra

[REPORT ON TREATMENT OF 114 CASES OF LATE NON-SMALL CELL LUNG CANCER WITH INTEGRATED CHINESE AND WESTERN MEDICINE]. XUE LU-JUN SHEN XIN ZHANG YAN ET AL. chinese journal of basic medicine in tcm. 2004;10(8):78 (chi).

1772- gera: 131933/di/ra

[EXPRESSION OF P16 SUPPRESSION GENE IN PRECANCEROUS LESIONS OF GASTRIC CANCER AND THE REGULATING EFFECT OF WEI-YANXIAO]. HU LING, LAO SHAO-XIAN. chinese journal of basic medicine in tcm. 2004;10(9):35 (chi*).

1773- gera: 132085/di/ra [CLINICAL OBSERVATION ON THE TREATMENT OF MIDDLE-LATE STAGE LIVER CARCINOMA BY COMBINED THERAPY OF HEPATO-ARTERIAL CHEMO-EMBOLISING AND CHINESE DRUGS FOR STRENGTHENING PI AND REGULATING QI]. REN HUA-PING, CHENG LIN . chinese journal of integrated traditional and western medicine. 2004;24(9):838 (chi).

1774- gera: 132232/di/ra

IEXPRESSION OF CELL ADHESION MOLECULES CD15 AND CD15S IN COLORECTAL CARCINOMA AND ITS RELATIONSHIP WITH MALIGNANT PROCLIVITY]. SHANG PEIZHONG, GU HUAPING, SUN YINCHEN, ET AL. chinese journal of surgery of integrated traditional chinese and western medicine. 2004;10(4):289 (chi*).

1775- gera: 132568/di/ra

[98 CASES WITH FEVER OF MALIGNANT TUMOR CURED BY SOUP OF NOURISH YIN TO CLEAR THE EVIL FEVER]. LIU XIANGXIAO. inner mongol journal of tcm. 2004;24(4):2 (chi).

1776- gera: 132637/di/ra

ITREATMENT BASED ON CATEGORICAL IDENTIFICATION AND CONTRAINDICATION OF DRUG USE OF CARCINOMA HEPATITIS]. GUO HONG-FEI, CAL RU-CHUN. jiangxi journal of tcm. 2004;35(10):45 (chi).

1777- gera: 132644/di/ra

[SUMMARY OF SHAO MENG-YANG'S EXPERIENCE OF DIAGNOSING AND TREATING HEPATOMA]. LIU SHU-JING. jiangxi journal of tcm. 2004;35(8):.8 (chi).

1778- gera: 132659/di/ra

IOBSERVATIONON THERAPEUTIC EFFECTS IN TREATMENT OF CARCINOMA OF ESOPHAGUS IN METAPHASE AND LATE STAGE WITH KAIYE QIGE TANG IN 36 CASES]. ZHANG ZHI-MIN. jilin journal of tcm. 2004;24(10):23 (chi).

1779- gera: 132741/di/ra

TREATMENT OF INTRACTABLE HICCUP WITH ACUPUNCTURE IN 56 CANCER PATIENTS. WANG FANG, GAO QI-QUAN . journal of acupuncture and tuina science. 2004;2(5):28 (eng*).

Fifty-six cases of intractable hiccup in cancer patients treated with acupuncture in a treatment group were compared with 58 cases treated with routine western medicine in a control group. The result showed that the effective rate was 87.5% in the treatment group and 32.8% in the control group. Ridit was used for analysis. The effective rate in the treatment group was much higher than that in the control group (P<0.01).

1780- gera: 132758/di/ra

[CLINICAL RESEARCH ON THE TREATMENT OF PRIMARY OVARIAN RIAN CANCER WITH OPERATION, CHEMOTHERAPY AND TRADITIONAL CHINESE HERBS]. PAN TIAN-HUI, FAN QIAO-YUN. journal of anhui of traditional chinese medical college. 2004;23(4):15 (chi).

1781- gera: 132805/di/ra

[MDR1/P-GP RELATING TO MULTIDRUG RESISTANCE IN LARGE INTESTINAL CANCER AND ITS RESEARCH SURVEY IN TRADITIONAL CHINESE MEDICINE]. X U JIAN-HUA, FAN ZHONG-ZE. journal of anhui traditional chinese medical college. 2004;23(5):57 (chi).

1782- gera: 132808/di/ra [PROGRESS IN RAT MODEL OF PRECANCEROUIS LESION OF GASTRIC CARCINOMA]. YUAN XIAO-BING. journal of anhui traditional chinese medical college. 2004;23(5):62 (chi).

1783- gera: 132858/di/ra

[[]CLINICAL OBSERVATION ON TRADITIONAL CHINESE HERB TREATMENT TO MUCOUS MEMBRANE OF MOUTH AFTER RADIOTHERAPY FOR NASOPHARYNGEAL CARCINOMA]. PU ZHI. journal of chengdu university of tcm. 2004;27(3):15 (chi).

1784- gera: 132938/di/ra

[OBSERVATION OF CHRONIC VOMIT CAUSED BY MALIGNANT TUMOUR CHEMOTHERAPY TREATED WITH ZHIOU PASTE]. ZHOU XIAOJUN, ZHOU JINHUA, XU CHUNMING. journal of external therapy of tcm. 2004;13(4):11 (chi).

1785- gera: 133020/di/ra

[EFFECT OF SHENGLU LAIJU PILLS ON TNF, IL-6 AND CRP IN PATIENTS WITH BONE TUMOR]. WANG LEIMING . journal of henan university of chinese medicine. 2004;10(5):29 (chi*).

1786- gera: 133090/di/ra

[CLINICAL RESEARCH INTO THE TREATMENT OF MAMMARY CANCER BY CHEMOTHERAPY COMBINED WITH TCM DRUGS BEFORE OPERATION]. YANG LIPING, SUN SHILING. journal of henan university of chinese medicine. 2004;8(4):40 (chi*).

1787- gera: 133103/di/ra

[CLINICAL OBSERVATION OF TREATING RADIATION PROCTITIS BY QING RE GU CHANG ZHI XIE TANG]. ZHANG WEIHENG, ZHANG BAORONG, LI LIUJIAN. journal of henan university of chinese medicine. 2004;8(4):56

1788- gera: 133165/di/ra

TREATMENT OF 36 CASES OF RADIATION PROCTITIS WITH COMPOUND GLUTAMINE CAPSULE]. YANG WEN JUAN. journal of nanjing university of tcm. 2004;20(5):318 (chi).

1789- gera: 133225/di/ra

JAPPLICATION OF DOCTRINE OF EPIDEMIC FEBRILE DISEASE IN TREATMENT OF MALIGNANT CANCER]. ZHOU DAIHAN . journal of tcm . 2004;45(9):703 (chi).

1790- gera: 133242/di/ra

[CLINICAL STUDY ON JIAN PI XIAO JI ORAL LIQUID FOR **IMPROVEMENT OF LIFE QUALITY IN 32 CASES OF LATE** LIVER CANCER]. HUANG ZHIFEN,LI HANZHONG,ZHANG ZUOJUN, ET AL. journal of tcm university of hunan. 2004;45(10):754 (chi*).

1791- gera: 133302/di/ra

[THE REPAIR OF OSTEOSARCOMA REMOVAL FOCUS BY PLA COMPOUND SLOW-RELEASED BAR FILLING:AN **EXPERIMENTAL STUDY].** GUO GENCHENG, CHEN KANG, AND GUO HONGJUN. journal of traditional chinese orthopedics and traumatology. 2004;16(8):6 (chi*).

1792- gera: 133426/di/ra

[EXPRESSION OF HSP70 AND P53 IN MALIGNANT TUMOR TISSUES AND ITS RELATIONSHIP TO HEAT SYNDROME OF TCM]. WANG HONG-QI, ZHANG ZHENG, ZHAO YAN-PING, ET AL . chinese journal of integrated traditional and western medicine. 2004;24(10):897 (chi*). Objective To investigate the expression of HSP70 and P53 in malignant tumor tissues of patients with TCM Heat- Syndrome (HS) or with non-Heat-Syndrome (NHS). Methods S-P immunohistochemical method was used to detect the gene expression, and ELISA and RT-PCR were adopted to determine the content of HSP70 and P53 mRNA expression in different malignant tumor tissues. Results (1) Positive ratio of HSP70 and P53 in the colorectal cancer of HS was significantly higher than that in colorectal cancer of NHS respectively, and the total positive ratio of the two genes in all tumors of HS was higher than those of NHS(P < 0.05); (2) HSP70 expression content in colorectal, nasopharyngeal and lung cancers of HS was higher than in those of NHS respectively, and the total HSP70 expression content in tumors of HS was higher than in those of NHS (P < 0. 01); (3) HSP70 mRNA expression content in colorectal and lung cancers of HS was higher than in those of NHS respectively, and the total HSP70 mRNA expression content in tumors of HS was higher than in those of NHS (P < 0. 01). Conclusion HSP70 and P53 positive ratio and HSP70 expression content in patients of malignant tumor with HS was higher than in those with NHS.

1793- gera: 133427/di/ra [EFFECT OF SHENQI FUZHENG INJECTION FOR ASSISTANCE OF CHEMOTHERAPY IN TREATING SENILE PATIENTS WITH NON-SMALL CELL LUNG CANCER']. LIU CHENG-LI, CHEN WEI-PING, CUI SHU-ZHONG, ET AL. chinese journal of integrated traditional and western medicine. 2004;24(10):901 (chi*).

1794- gera: 133441/di/ra [PROGRESS ON CLINICAL STUDY OF CHINESE MEDICINE ON MALIGNANT TUMOR COMPLICATED WITH DEPRESSION]. XIN HAI, LUO HE-CHUN . chinese journal of integrated traditional and western medicine. 2004;24(10):955 (chi).

1795- gera: 133560/di/ra

[STAGE II CLINICAL STUDY OF TROPISETRON MESYLATE ON THE PREVENTION OF NAUSEA AND VOMIT INDUCED BY CHEMOTHERAPEUTIC DRUG]. ZHAO YUN-BO, WU JIAN-YU, CHENG GANG, ET AL. modern journal of integrated traditional chinese and western medicine. 2004;13(18):2393 (chi*).

1796- gera: 133570/di/ra

[LIMITED OUTLOOK OF GROPING DIRECTION OF PREVENTION AND CURE OF TUMOR ACCORDING YIN -YANG THEORY SUMMARIZED IN NEIJING]. WANG XIN-HUA, ZHANG MANG, QIAO JUN-HONG, ET AL. modern journal of integrated traditional chinese and western medicine. 2004;13(20):2667 (chi).

1797- gera: 133680/di/ra

ISTOMACH CANCER TREATED BY INTEGRATED TCM AND WM]. WANG JIAN'AN, ZHOU FENGXUE, ZHANG MEILAN. shaanxi journal of tcm. 2004;25(9):772 (chi).

1798- gera: 133752/di/ra [EFFECTS OF "KE AI TIN" ON P53 AND BCL-2 EXPRESSIONS IN RATS WITH LIVER CARCINOMA]. WANG YU CHEN GANG XIANG YONG-CHEN, ET AL. shanghai journal of tcm. 2004;38(10):48 (chi*).

1799- gera: 133776/di/ra

[CLINICAL STUDY ON CHINESE HERBS PLUS CHEMOTHERAPY IN TREATING LATE NON-SMALL CELL LUNG CANCER]. ZHANG WAN-HAI JIN PING HE HONG-TAO . shanghai journal of tcm. 2004;38(8):36 (chi).

1800- gera: 133792/di/ra

[CLINICAL OBSERVATION OF COMBINED CHINESE AND WESTERN MEDICINE IN TREATING EMBOLIC SYNDROME FOLLOWING LIVER CANCER INTERVENTION]. YANG JIN-

ZU YANG JIN-KUN ZHENG JIAN, ET AL. shanghai journal of tcm. 2004;38(9):11 (chi*).

1801- gera: 133802/di/ra

[CLINICAL STUDY ON THE IMPACT OF " RU'AISHUHOU HERBS" ON LIFE QUALITY IN BREAST CANCER PATIENTS]. WAN HUA WU XUE-QING FU QIN-HUI, ET AL. shanghai journal of tcm. 2004;38(9):28 (chi*).

1802- gera: 133820/di/ra

[CONSIDERATION ON TREATMENT OF MALIGNANT TUMOR BY TRADITIONAL CHINESE MEDICINE GUIDED BY EVIDENCE-BASED MEDICINE]. ZHANG MING XU ZHEN-YE. shanghai journal of tcm. 2004;38(9):7 (chi*). Shortness of credibility of treatment results of Chinese medicine someway hinders the development of Chinese medicine. It is because the research level is lower, inadequate attention is paid to the scientific research method, and the treatment results are not fully exerted. It is argued that evidencebased based medical guidance should be adopted in the diagnosis and treatment of malignant tumor.

1803- gera: 133860/di/ra

ISTRENGTHENING HEALTHY QI TO ELIMINATE PATHOGENS AND TUMOR TREATMENT]. HE REN. tianjin journal of tcm. 2004;21(5):353 (chi*).

Integrating with the experiences in clinic treatment and laying emphasis on the therapeutic principle of strengthening healthy qi to eliminate pathogens the preventive and curative effects of the herbal medicines on tumor are discussed. Strengthening healthy qi to eliminate pathogens is dominated by supporting spleen and kidney, including supporting the vital energy, blood, ying and yang. Stabilazing the foundation combined with removing the evil (anti-tumor drugs) will do much with less side effects for the treatment than anticarcinogen alone. Taking either strengthening or eliminating as pivotal will be predetermined in the light of specific conditions. Neglecting any one is not acceptable.

1804- gera: 133897/di/ra

[THERAPEUTIC ANALYSIS OF OSTEOSCAROMA BY THE COMPLEX OF WESTERN AND CHINESE MEDICINE]. LIANG ZHIQIANG traditional chinese medical research. 2004;17(4):4 (chi).

1805- gera: 134154/di/ra

RADIX BUPLEURI CONTAINING COMPOUND (KY88 LIVER-LIVO) INDUCES APOPTOSIS AND PRODUCTION OF INTERLEUKIN-4 AND TUMOR NECROSIS FACTOR-A IN LIVER CANCER CELLS IN VITRO . LOUIS WC CHOW, WINGS TY LOO, JONATHAN S T SHAM AND MARY N B CHEUNG american journal of chinese medicine. 2004;32(2):185 (eng*).

1806- gera: 134172/di/ra

4-ACETYL- 12,13-EPOXYL-9-TRICHOTHECENE-3, 15-DIOL FROM ISARIA JAPONICA MEDIATES APOPTOSIS OF RAT **BLADDER CARCINOMA NBT-II CELLS BY DECREASING** ANTI-APOPTOTIC BCL-2 EXPRESSION AND INCREASING PRO- APOPTO. HYUNG-JIN KIM, SEON IL JANG, YOUNG-JUN KIM, HYUN-OCK PAE, HAE- YOUNG WON,KYUNG-HWAN HONG, HYUNCHEOL OH, TAE-OH KWON AND HUN-TAEG CHUNG. american journal of chinese medicine. 2004;32(3):377 (eng*).

1807- gera: 134188/di/ra

EVALUATION OF THE RADIOPROTECTIVE ACTION OF GERIFORTE IN MICE EXPOSED TO DIFFERENT DOSES OF Y- RADIATION . GANESH CHANDRA JAGETIA AND MANJESHWAR SHRINATH BALIGA. american journal of chinese medicine. 2004;32(4):551 (eng*).

1808- gera: 134190/di/ra

REGRESSION OF HEPATOCELLULAR CARCINOMA SPONTANEOUS ORHERBAL MEDICINE RELATED? . HON MEI CHENG AND MING CHE TSAI. american journal of chinese medicine. 2004;32(4):579 (eng*).

1809- gera: 134194/di/ra

CHANGES IN SERUM TUMOR NECROSIS FACTOR (TNF-A) WITH KAMI-SHOYO-SAN ADMINISTRATION IN **DEPRESSED CLIMACTERIC PATIENTS. TAKAHISA** USHIROYAMA, ATSUSHI IKEDA, KOU SAKUMA AND MINORU UEKI. american journal of chinese medicine. 2004;32(4):621 (eng*).

1810- gera: 134199/di/ra

ASTRAGALUS MONGHOLICUS AND POLYGONUM **MULTIFLORUM 'S PROTECTIVE FUNCTION AGAINST** CYCLOPHOSPHAMIDE INHIBITORY EFFECT ON THYMUS . XIYUN WEI, JINKUN ZHANG, JUN LI AND SUBIAO CHEN. american journal of chinese medicine. 2004;32(5):669 (eng*).

1811- gera: 134203/di/ra

CHEMOPREVENTION AGAINST HEPATOCELLULAR CARCINOMA OF CORNUS OFFICINALIS IN VITRO . JUNG-SAN CHANG, LIEN-CHAI CHIANG, FEN-FANG HSU AND CHUN-CHING LIN. american journal of chinese medicine. 2004;32(5):717 (eng*).

1812- gera: 134214/di/ra

ICLINICAL STUDY ON CLASSIFICATION OF SYNDROME DIFFERENTIATION OF 302 POST-OPERATION PATIENTS SUFFERED BREAST CANCER]. LIU SHENG ET AL . china journal of tcm and pharmacy. 2004;19(11):666 (chi).

1813- gera: 134250/di/ra

[EFFECTS OF ACUPUNCTURE AND MOXIBUSTION ON BLOOD CELLS AND RESPONSE OF DIGESTIVE TRACT AFTER CHEMOTHERAPY IN THE PATIENT OF NEOPLASM]. ZHOU JUN-QING, XU TIAN-SHU, QIAN LEI . chinese acupuncture and moxibustion. 2004;24(11):741 (chi*). Objective To compare effects of acup-moxibustion and medicine on blood cells and response of the digestive tract after chemotherapy in the patient of neoplasm. Methods One hundred and two cases of chemotherapy were randomly divided into acupuncture treatment group and medication group. They were respectively treated by acupuncture at Neiguan (PC 6), Zhongwan (CV 12). Zusanli (ST 36). etc. and oral administration of VitB6 and domperidone, etc. Results Blood cells increased in the patients of the two groups, the acupuncture treatment group being significantly better than the control group (P<0. 05); the total effective rate for improving main symptoms and signs after chemotherapy was 82.3% in the acupuncture treatment group and 67.6 % in the control group with a significant difference between the two groups (P<0. 05). Conclusion Acupuncture and moxibustion can antagonize adverse effects of chemotherapy and have a good protective action on the organism with chemotherapy.

1814- gera: 134284/di/ra

[EFFECTS OF ACUPOINT-INJECTION PLUS MOXIBUSTION ON IL-2/IL-2R EXPRESSION IN PERIPHERAL BLOOD IN THE PATIENT WITH CARCINOUS PAIN]. BIAN DI, CHENG ZE-DONG, ZHANG NING-SU, ET AL chinese acupuncture and moxibustion. 2004;24(9):641

1815- gera: 134323/di/ra

[EFFECT OF COMPOUND TCM ON EXPRESSION OF CYCLIN D1 GENE AND ADHERENT MOLECULE IN BONE MARROW RADIATION LESION MICE]. HE DONG-CHU,ET AL . chinese journal of information on tcm. 2004;11(11):980 (chi*).

1816- gera: 134355/di/ra

APPROACHES OF TOXICITY-REDUCING AND EFFICACY-**ENHANCING IN TUMOR PATIENTS TREATED WITH** RADIO- AND CHEMOTHERAPY. LIN HONG-SHENG, YANG YU-FEI, LI PING-PING, ET AL . chinese journal of integrative medicine . 2004;10(3):162 (eng).

1817- gera: 134357/di/ra STUDY ON TONGKUAIXIAO BABU PLASTER IN TREATING CANCER PAIN. WAN DONG-GUI AND LI PEI-WEN . chinese journal of integrative medicine . 2004;10(3):175 (eng*).

1818- gera: 134363/di/ra

EFFECT OF ALLICIN IN ANTAGONIZING MICE'S BLADDER CANCER IN VITRO AND IN VIVO. WANG JIAN, HE HUI-JUAN, HE CHENG-WEI, ET AL . chinese journal of integrative medicine . 2004;10(3):208 (eng*).

1819- gera: 134370/di/ra

COMPREHENSIVE THERAPY OF PANCREATIC CANCER BY INTEGRATIVE TRADITIONAL AND WESTERN MEDICINE. LIU LU-MING . chinese journal of integrative medicine . 2004;10(3):236 (eng).

1820- gera: 134371/di/ra STATUS QUO IN TREATING COLORECTAL CANCER WITH TRADITIONAL CHINESE AND WESTERN MEDICINE. YANG YU-FEI . chinese journal of integrative medicine . 2004;10(3):238 (eng).

1821- gera: 134387/di/ra

[The Discussion on Effects of Control of Carcinomatous Pain Treated by TCM]. TA 0 Lan, it al. chinese journal of medical history. 2004;34(4):10 (chi).

1822- gera: 134414/di/ra [STUDY ON ATTENUATION AND SYNERGY EFFECTS OF QILING CAPSULE IN MICE OF S180 SARCOMA TREATED WITH CHEMOTHERAPY]. PENG YUN - RU, LUO YU - HUI, YE QI - ZHENG, ET AL chinese journal of traditional medical science and technology. 2004;11(6):350 (chi).

1823- gera: 134463/di/ra

[OBSERVATION OF THE EFFICACY OF AIDI INJECTION COMBINED WITH CHEMOTHERAPY IN THE TREATMENT OF MALIGNANT ADVANCED TUMOR]. ZHU XIA HAN HUI-JIE ET AL. chinese traditional patent medicine. 2004;26(11):907 (chi*).

1824- gera: 134520/di/ra [FEVER OF MIDDLE AND LATER CANCER TREATED WITH LIANG XUE HUA YU METHOD ADDITIONAL CLINICAL REPORTS OF 87 CASES]. ZHOU GUANG MING, ZHU XIAOXIA . forum on tcm. 2004;19(6):31 (chi).

1825- gera: 134548/di/ra

[CLINICAL OBSERVATION ON ZHENGXIAO CAPSULE IN TREATING 242 CASES OF PRIMARY CARCINOMA OF LIVER]. SHAO JING' ZHUO YUYING, ZHOU XIAOJING. henan tcm. 2004;24(11):27 (chi).

1826- gera: 134561/di/ra

[ANALYSIS OF CURATIVE EFFECT ON CARCINOMA OF **ESOPHAGUS TREATED WITH COMBINATION OF** TRADITIONAL CHINESE AND WESTERN MEDICINES]. CHEN GUOJUN, ET AL. hubei journal of tcm. 2004;26(11):22 (chi).

1827- gera: 134648/di/ra

[CLINICAL OBSERVATION ON TREATMENT OF 24 CASES OF LATE STOMACH CANCER WITH JIANPI HUAYU MIXTURE AND CHEMOTHERAPY]. WANG RUIPING, PAN YU, YE ZHICHAO, ET AL. jiangsu journal of tcm. 2004;25(11):22 (chi).

1828- gera: 134662/di/ra

[30 CASES OF TREATMENT OVER LIVER HARM CAUSED BY CHEMOTHERAPY WITH THE METHOD OF SHUGANJIANPI]. ZHANG JIE. jiangxi journal of tcm. 2004;35(11):22 (chi).

1829- gera: 134730/di/ra

THE PROTECTIVE EFFECT OF XUEFUZHUYU ORAL LIQUID ON THE BONE MARROW MICRANGIUM IN MICE WITH THE RADIATION DAMAGE]. TAO MING FEI, ET AL. journal of emergency in tcm. 2004;13(11):762 (chi).

1830- gera: 134740/di/ra

[CLINICAL OBSERVATION ON SHENFU INJECTION FOR RELIEF OF TOXIC REACTION IN CHEMOTHERAPY ON

CANCER, AND FOR ENHANCING THE PATIENTS' QUALITY OF VITAL CAPACITY]. LEI JING, ET AL. journal of emergency in tcm. 2004;13(12):813 (chi).

1831- gera: 134825/di/ra

[GASTROPARESIS CAUSED BY RADICAL OPERATION FOR CARCINOMA OF STOMACH (19 CASES) TREATED BY INTEGRATED TRADITIONAL CHINESE MÉDICINE AND WESTERN MEDICINE]. LIU HANDONG, WANG FENG. journal of practical tcm. 2004;20(11):633 (chi).

1832- gera: 134900/di/ra

IPRESENT SITUATION AND DEVELOPMENT COUNTERMEASURES OF EVIDENCE-BASED TCM ONCOLOGY]. CHEN ZETAO, HOU YANGSHAO . el pulso de la vida. 2004;45(11):806 (chi*).

Since 1980s, medical clinical practice turns towards evidencebased medicine model from experimental medical model. traditional TCM diagnosis of tumor difficulty link up with diagnostic methods of modern medicine, and syndrome differentiation typing is difficulty qualified and unified. Clinical studies often lack strict and reasonable design and rigorous manipulation standardization, and do not rapidly adapt changes of modern medicine model. Therefore in the present paper it is put forward that standardization of clinical diagnosis and assessment of therapeutic effects should be further completed. First establishing and adopting randomized control test of small scale and single center, and using systematical assessing techniques to scientifically evaluate results of relative studies; and scientifically and systematically systematize and strictly re-test and verify rich clinical experiences of famous and older physicians of TCM. In brief, principles of evidence-based medicine should be adopt to guide and standard TCM diagnosis and treatment

1833- gera: 134955/di/ra [A CASE IN WHICH ACUPUNCTURE WAS USED TO TREAT NONSPECIFIC COMPLAINTS ARISING AFTER SURGERY FOR COLORECTAL CANCER]. KINUTA AKIRA. journal of the japan society of acupuncture and

moxibustion. 2004;54(2):179(61) (jap*). Dietary habits in Japan have become more westernized in recent years. An increasing number of people are developing colorectal cancer, which may be considered a lifestyle disease. Moreover, many people develop post-operative problems following surgery for colorectal cancer. We present a patient who complained of excessive bowel movements and various nonspecific complaints after surgery for colorectal cancer. We performed acupuncture treatments, and in order to objectively examine changes in symptoms as well as to document the usefulness of acupuncture treatment, we used a health chart produced by the Nonspecific Symptoms Team, Research Department of the Japan Society of Acupuncture and Moxibustion. We performed tanshijutsu (treatment in which the practitioner continues holding the needle from insertion until removal), which included zuishou (therapy based on the symptoms), taikyoku (basic meridian points for total body adjustment according to the Kurono style), and topical therapies using 30mm 18-gauge needles. In total, 14 treatments were administered. The results objectively demonstrated the usefulness of acupuncture in treating the patient's postsurgical nonspecific complaints. Moreover, the acupuncture treatments were also effective in improving the patient's bowel problems. These findings suggest that acupuncture may be a useful method of postoperative care.

1834- gera: 135082/di/ra

ACUPUNCTURE FOR REFRACTORY CASES OF CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING. GUERRA MC. medical acupuncture. 2004;16(1):40 (eng*).

1835- gera: 135153/di/ra

[INHIBITION EFFECT OF ORATOSQUILLA EXTRACT ON HUMAN NASOPHARYNGEAL CARCINOMA CELL MATRIX METAL PROTEASE-9]. GU DI-SHUI, KONG XIA, HUANG PEI-CHUN. modern journal of integrated traditional chinese and western medicine. 2004;13(21):2816 (chi*).

1836- gera: 135165/di/ra

[STUDY OF INVIGORATING SPLEEN PRESCRIPTION ON POSTOPERATIVE METASTASIS OF GASTRIC CANCER]. SONG JIA-JU. modern journal of integrated traditional chinese and western medicine. 2004;13(22):2956 (chi*). Objective It is to study the action of invigorating spleen prescription on postoperative metastasis of gastric caner and its effect on survival rate and immunity function. Methods 70 patients after gastric cancer operation were divided in-to two groups. The treatment group was treated with invigorating spleen prescription and the control group was treated with chemotherapy. The relapse and metastasis of the tumour and the survival rate, life quality, immunity function of the patients in both groups after treatment were observed. Results The postoperative relapse and metastasis rates in treatment group were obviously lower than that in control group, but Karnofsky grade and survival rate in treatment group were significantly higher than that in control group. In addition, the immunity function of treatment group improved obviously. Conclusion Invigorating spleen prescription has better anti-relapse and anti-metastasis effect after gastric cancer operation and can improve the life quality and enhance the survival rate and immunity function.

1837- gera: 135168/di/ra

[EFFECT OF PREOPERATIVE CHEMOTHERAPY OF XELODA ON EXPRESSION OF THYMIDINE PHOSPHORYLASE IN COLORECTAL CANCER TISSUE]. WAN YU-LIANG, JIANG YU-SHI, WANG NING, ET AL. modern journal of integrated traditional chinese and western medicine. 2004;13(22):2962 (chi*).

1838- gera: 135178/di/ra

[TREATMENT OF RADIATION PNEUMONIA BY TCM COMBINED WITH WESTERN MEDICINE: A CLINICAL OBSERVATION OF 16 CASES]. CHEN XI, FANG WEN - ZHENG, OUYANG XUE - NONG, ET AL. new journal of tcm. 2004;36(11):53 (chi*).

1839- gera: 135279/di/ra

TRATTAMENTO DI 25 CASI DI SINGHIOZZO OSTINATO MEDIANTE CHIMIOPUNTURA SU TIANDING (LI17). JU LAITI. rivista italiana di medicina tradizionale cinese. 2004;96(2):49 (ita*).

From 1997 to 2000, the author treated 25 cases of obstinate hiccup by injecting chlorpromazine and 654-2 injection at tianding (LI17), with satisfactory therapeutic results as reported in the following.

1840- gera: 135296/di/ra

PROGRESSI NEL TRATTAMENTO DI MTC DELLE METASTASI TUMORALI. NIU HONGMEI ED ALTRI. rivista italiana di medicina tradizionale cinese. 2004;96(2):76 (ita*). As one of the basic biologic features of malignant tumors and a major cause leading to failure of treatment and even death, metastasis has aroused a great interest among the medical researchers. To date, convincing evidence is still lacking as to whether metastasis could be controlled by surgery, radioor chemotherapy. However, TCM measures have proved to be advantageous in improving the survival quality and prolonging the survival period by decreasing the rate of distant metastasis of tumors. The following is a brief summary on the advances in this field.

1841- gera: 135328/di/ra

EFFETTI DEL "SIERO DA MOXIBUSTIONE" SULLA PROLIFERAZIONE E I FENOTIPI DEI LINFOCITI INFILTRANTI IL TUMORE. CHEN YUNFEI D ALTRI. rivista italiana di medicina tradizionale cinese. 2004;97(3):72 (ita*). Tumor infiltrating lymphocytes (TIL) were cultured with "moxibustion serum" (SM) and the results were examined y flow cytometry. The results indicated that SM could enhance the proliferation of TIL, accelerate it to reach the exponential growth phase, and assist recombinant interleukin 2 (rIL-2) to enhance successively the percentage of CD3+ positive cells, maintain the number of CD4+ positive T cells, promote greatly the percentage of CD8+ positive T cells among TILs and reverse the CD4+/CD8+ratio. Such cooperative effects rely on relative specificity of acupoints. It is suggested that SM is beneficial to the growth of TIL both in the aspects of

proliferation and phenotypes.

1842- gera: 135403/di/ra

[EFFECTS OF ELECTROACUPUNCTURE ON PERIPHERAL T-LYMPHOCYTE SUBSETS AND PROLIFERATION IN PATIENTS WITH GASTROINTESTINAL TUMOR TREATED WITH SURGERY AND CHEMOTHERAPY]. WANG J, JIANG JW,CAI SJ, ET AL . shanghai journal of acupuncture and moxibustion. 2004;23(11):5 (chi*).

Objective To explore the effects of electroacupuncture (EA) on peripheral T-lymphocyte subsets and proliferation in patients with gastrointestinal tumor treated with surgery and chemotherapy. Method The changes in peripheral Tlymphocyte subsets were evaluated by flow cytometry peripheral lymphocyte proliferation was detected by MTT assay. Results Results The results indicated that the CD3' T cells and lymphocyte proliferation decreased significantly on day 3 postoperation (P<0.05, P<0.01, respectively), whereas no changes were observed in EA treatment group. Ten days post-operation, the lymphocyte proliferation back to the level of pre-operation. At the same time, EA treatment decreased CD8' T cells (P<0.05) and increased the CD4+/CD8+ ratio on day 10 post-operation (P<0.05). In the other groups which patients undergone surgery and chemotherapy, CD3' T cells, CD4+/CD8+ ratio declined on day 3 post-operation combined chemotherapy, EA could increase CD4+ T cells (P<0.05) and CD4+/CD8+ ratio (P<0.05) in patients who suffered surgical procedure and chemotherapy and enhanced the lymphocyte proliferation when compared with pre- operation (P < 0. 001). Conclusion EA could improve the immune function in patients with gastrointestinal tumor

1843- gera: 135449/di/ra

[EFFECT OF COMPOUND ZAOFAN PILLS ON THE HEMOPOIETIC FUNCTION IN MICE WITH RADIATION INJURY]. XIAO YANG, LI SONGWEN, REN WEIWEI, ET AL. traditional chinese drug research and clinical research and clinical pharmacology. 2004;15(6):387 (chi*).

1844- gera: 135512/di/ra

[ON THE RELATION BETWEEN PSYCHOLOGY AND NEOPLASTIC INVASION AND THERAPY]. LU MING, WU TAO, MA JIN-LI. xinjiang journal of tcm. 2004;22(5):4 (chi).

1845- gera: 135592/nd/re

USE OF COMPLEMENTARY AND ALTERNATIVE MEDICINE BY CHINESE WOMEN WITH BREAST CANCER. CUI Y, SHU XO, GAO Y, WEN W, RUAN ZX, JIN F, ZHENG W. breast cancer res treat. 2004;85(3):263-70 (eng*) The use of complementary and alternative medicine (CAM) has been rapidly increasing among cancer patients. The aim of this study is to evaluate the prevalence and patterns of CAM use, particularly patients' intentions and their perceived effectiveness of using Chinese herbal medicine (CHM), as well as the relations between the herbal medicine use and demographic and clinical factors among Chinese women with breast cancer. We analyzed the data from a population-based sample of 1065 breast cancer women in urban Shanghai. Patients' average age at diagnosis was 48.1 years and the median time from the initial diagnosis to the follow-up survey was 4.3 years. Overall, 98% of patients had used at least one form of CAM therapy after diagnosis of breast cancer. The most popular CAM modality was traditional Chinese medicine (86.7%), followed by the use of supplements (84.8%), physical exercises (65.5%), and support group attendance (16.6%). CHM was used by 86.4% of patients, while acupuncture was used only by 4.9% of patients. Treating cancer (81.5%) was the most common intentions of using CHM. Other cited intentions included enhancing the immune system (12%), preventing metastasis of cancer or managing other discomforts (7.9%), and lessening menopausal symptoms (4.7%). The majority of patients reported that they had benefited from the use of CHM. Patients who were younger, married, had higher education or income, received chemotherapy or radiotherapy, or had recurrence/metastasis of cancer tended to use CHM more frequently than other patients. The relations between patient characteristics and use of CHMs varied with users' intentions. Given the high prevalence of CAM use among breast cancer patients, research is urgently needed to

systematically evaluate the efficacy and safety of CAM use, particularly use of herbal medicines. Copyright 2004 Kluwer Academic Publishers

1846- gera: 135660/nd/re

COMPLEMENTARY THERAPIES FOR CANCER-RELATED SYMPTOMS. DENG G, CASSILETH BR, YEUNG KS. j support oncol. 2004;2(5):427-9 (eng*).

Relief of cancer-related symptoms is essential in the supportive and palliative care of cancer patients. Complementary therapies such as acupuncture, mind-body techniques, and massage therapy can help when conventional treatment does not bring satisfactory relief or causes undesirable side effects. Controlled clinical trials show that acupuncture and hypnotherapy can reduce pain and nausea. Meditation, relaxation therapy, music therapy, and massage mitigate anxiety and distress. Pilot studies suggest that complementary therapies may treat xerostomia, hot flashes, and fatigue. Botanicals or dietary supplements are popular but often problematic. Concurrent use of herbal products with mainstream medical treatment should be discouraged.

1847- gera: 136028/di/ra

LOW-FREQUENCY ELECTROMAGNETIC STIMULATION MAY LEAD TO REGRESSION OF MORRIS HEPATOMA IN BUFFALO RATS. FEDOROWSKI A, STECIWKO A, RABCZYNSKI J. journal of alternative and complementary medicine. 2004;10(2):251-60 (eng).

1848- gera: 136084/di/ra

COMPLEMENTARY AND ALTERNATIVE THERAPY USE AT END-OF-LIFE IN COMMUNITY SETTINGS. TILDEN VP. DRACH LL, SUASN W TOLLE S. journal of alternative and complementary medicine. 2004;10(5):811-17 (eng) Objective: To investigate the prevalence of complementary and alternative medicine (CAM) use by an end-of-life population. Design: Random selection of death certificates used to locate family caregivers who were interviewed by telephone 25 months following decedents' deaths. Participants: Decedent subjects died of natural causes in community settings. Family caregivers were very involved in the care and decision making for decedents during their terminal illness.Measure: Family caregivers reported on whether decedents had used CAM, type of modality, and motivation for use.Results: CAM use by decedents was reported by 53.7% of family caregivers. Decedents who had used CAM were more likely to be younger, to have college degrees and higher household incomes, and to have used one or more lifesustaining treatment. The most frequent reason the decedents had used CAM was for symptom relief. Conclusions: As baby boomers age, bringing their CAM familiarity and previous practices into the end-of-life phase, clinicians will need to be aware that CAM use for symptom control is likely to be

1849- gera: 136309/di/ra

INHIBITORY EFFECT OF TETRANDRINE ON PULMONARY **METASTASES IN CT26 COLORECTAL**

ADENOCARCINOMABEARING BALB/C MICE. KOU-HWA CHANG, HUI-FEN LIAO, HEN-HONG CHANG, YU-YAWN CHEN, MING-CHIEN YU, CHENG-JEN CHOU AND YU-JEN CHEN. american journal of chinese medicine. 2004;32(6):863 (eng).

Tumor metastasis is a major cause of mortality in cancer patients. The anti-metastatic effect of tetrandrine, an alkaloid isolated from Stephania tetrandrae S. Moore, was investigated in a pulmonary metastatic model of colorectal cancer- bearing mice. Tetrandrine decreased the viability of murine colorectal adenocarcinoma CT26 cells in a time- and dose- dependent manner. CT26 cells were injected into BALB/c mice via a tail vein to establish pulmonary metastases. After this, the mice were given intraperitoneal injections of tetrandrine (10 mg/kg/day), 5-fluorouracil (5-FU) at the same dose, or vehicle for 5 consecutive days. Mice treated with tetrandrine had 40.3% fewer metastases than vehicle-treated mice, and those treated with 5-FU had 36.9% fewer metastases than controls. Both tetrandrine- and 5-FU-treated mice survived longer than mice in the untreated control group. There was no acute toxicity or obvious changes in body weight in any of the mice.

These results suggest that tetrandrine may be a useful antimetastatic agent.

1850- gera: 136310/di/ra

COPTIDIS RHIZOMA INDUCES APOPTOSIS IN HUMAN COLORECTAL CANCER CELLS SNU-C4. YOUN JUNG KIM. SOON AH KANG, MEE SUK HONG, HAE JEONG PARK, MI-JA KIM, HI-JUN PARK AND HYE KYUNG KIM. american journal of chinese medicine. 2004;32(6):873 (eng) Coptidis rhizoma has been used as traditional herb medicine in gastrointestinal disorders in the Eastern Asia. We investigated whether the anticancer effects of the C. rhizoma induced apoptosis on human colorectal cancer cells SNU- C4. The cytotoxic effect of C. rhizoma was assessed by 3-(4,5dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide (MTT) assay. To determine apoptotic cell death, 4,6-diamidino-2phenylindole (DAPI) staining, terminal deoxynucleotidyl transferase (TdT)-mediated dUTP nick end labeling (TUNEL) assay, reverse transcription-polymerase chain reaction (RT-PCR) and caspase-3 enzyme assay were performed. In this study, C. rhizoma treatment (100 µg/ml) revealed typical morphological apoptotic features. Additionally, C. rhizoma treatment (100 µg/ml) increased levels of BAX and CASPASE-3, and decreased levels of BCL-2. Caspase-3 enzyme activity by treatment of C. rhizoma (100 µg/ml) also significantly increased compared to the control (p<0.05). These data indicate that C. rhizoma caused cell death by apoptosis through caspase pathways on human colorectal cancer cells SNU-C4.

1851- gera: 136313/di/ra

EFFECTS OF ANTIOXIDANT HERBS ON CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING IN A RAT-PICA MODEL. MEHENDALE SR, AUNG HH, JUN-JIE YIN, LIN E, FISHBEIN A, CHONG-ZHI WANG, JING-TIAN XIE, CHUN-SU YUAN. american journal of chinese medicine. 2004;32(6):897 (eng).

Nausea and vomiting are significant adverse effects of chemotherapeutic agents like cisplatin, and cause significant patient morbidity. Cisplatin treatment results in oxidant gut injury, which is postulated to be the primary cause of nausea and vomiting. We evaluated the effects of two antioxidant herbs, Scutellaria baicalensis and American ginseng berry, on cisplatin-induced nausea and vomiting using a rat model. Rats react to emetic or nausea-producing stimuli, such as cisplatin, with altered feeding habits, manifested by increased kaolin consumption (pica). We measured pica in rats to quantify cisplatin-induced nausea. We observed that pretreatment of rats with S. baicalensis or ginseng berry extracts resulted in a significant reduction in cisplatin-induced pica. The in vitro free radical scavenging ability of the herbal extract observed in the study, further confirmed the antioxidant action of the herb. We conclude that herbal antioxidants may have a role in attenuating cisplatin-induced nausea and vomiting.

1852- gera: 136440/nd/re

ANTI-CANCER AND PRO-APOPTOTIC EFFECTS OF AN HERBAL MEDICINE AND SACCHAROMYCES CEREVISIAE PRODUCT (CKBM) ON HUMAN HEPATOCELLULAR CARCINOMA HEPG2 CELLS IN VITRO AND IN VIVO. CHAN JY, CHEUNG JY, LUK SC, WU YJ, PANG SF, FUNG KP immunopharmacol immunotoxicol. 2004;26(4):597-609

Hepatocellular carcinoma is a major health problem worldwide. Different treatment strategies have been developed to cope with this problem. Herbal medicine is now widely studied in both Eastern and Western countries. In this study, we used both in vitro and in vivo model to illustrate the anti-tumor effect of a product, CKBM, consisting of herbal medicine and specially processed Saccharomyces cerevisiae. Dosedependent anti-proliferation effect was observed on in vitro growth of human hepatoma HepG2 cells after 48 hours incubation with CKBM. At the 50% inhibitory concentration (IC50) no significant toxic effect was observed on normal human fibroblasts Hs68 and human liver WRL-68 cells. The results of morphological changes, detection of DNA fragmentation, flow cytometric analysis and Western blot analysis indicated that this anti-tumor effect of CKBM was mediated via the process of apoptosis. In addition, HepG2

cells- bearing nude mice model was used for in vivo anti-tumor study. Our results showed that 14-day treatment with 0.8 ml daily dosage of CKBM could inhibit 54.1% of tumor growth. The plasma activities of enzymes specific for heart and liver, namely creatine kinase, lactate dehydrogenase, aspartate transaminase and alanine transaminase, remained at normal levels, indicated that CKBM did not produce toxicity to the

1853- gera: 136506/nd/re
ANTI-TUMORIGENIC AND PRO-APOPTOTIC EFFECTS OF CKBM ON GASTRIC CANCER GROWTH IN NUDE MICE. SHIN VY, SO WH, LIU ES, WU YJ, PANG SF, CHO CH. int i med sci. 2004;1(3):137-45 (eng).

Natural botanical products can be integrated with western medicine to optimize the treatment outcome, increase immune function and minimize the side effects from western drug treatment. CKBM is a combination of herbs and yeasts formulated based on traditional Chinese medicinal principles. Previous study has demonstrated that CKBM is capable of improving immune responsiveness through the induction of cytokine mediators, such as TNF-alpha and IL-6. In this study, we aimed to investigate the effect of this immunomodulatory drug on gastric cancer growth using a human xenograft model. Gastric cancer tissues were implanted subcutaneously into athymic nude mice followed by a 14-day or 28-day of CKBM treatment. Results showed that higher doses of CKBM (0.4 or 0.8 ml/mouse/day) produced a dose- dependent inhibitory effect on gastric tumor growth after 28-day drug treatment. This was associated with a decrease of cellular proliferation by 30% with concomitant increase in apoptosis by 97% in gastric tumor cells when compared with the control group. In contrast, CKBM showed no effect on angiogenesis in gastric tumors. This study demonstrates the anti-tumorigenic action of CKBM on gastric cancer probably via inhibition of cell proliferation and induction of apoptosis, and provides future potential targets of this drug candidate on cancer therapy.

1854- gera: 137015/di/ra

[DIAGNOSIS AND TREATMENT OF INSOMNIA IN PATIENTS WITH TUMORS J. XIAO LI, YU ZHENG, LI YUAN. chinese journal of basic medicine in tcm. 2004;10(10):21

1855- gera: 137175/di/ra

[AN INVESTIGATION ON THE PROGNOSTIC ASSOCIATION OF NM23-H1, EXPRESSION WITH THE INTRACRANIAL METASTASIS OF NASOPHARYNGEAL CARCINOMA]. LIU SHUJING, HU GUOBIN, CHEN SENLIN, ET AL. chinese journal of integrated traditional and western medicine otorhinolaryngology. 2004;12(6):296

1856- gera: 137296/di/ra

[CLINICAL STUDY OF FUZHENGXIAOAI I DECOCTION IN TREATING MALIGNANT TUMORS OF UPPER DIGESTIVE TRACT AT MIDDLE AND LATE STAGE]. HOU ANJI, CHEN YOUXIANG, XIANG RONG. chinese journal of integrated traditional and western medicine on digestion.

2004;12(6):332 (chi*).

[Objective] To observe the clinical effect of fuzhengxiaoai I decoction in treating malignant tumors of upper digestive tract at middle and late stage. [Methods] Sixty-five patients of upper digestive tract malignant tumors were treated with fuzhengxiaoai I decoction. Clinical symptoms and living quality of the patients were observed before and after the treatment. Syndrome types of twenty-one cases who received fuzhengxiaoai I decoction alone were differentiated, and their survival period was investigated. [Results] Fuzhengxiaoai I decoction cured the patients' clinical symptoms and increased their Karnofsky scores markedly (P < O. 05) . There was 1 case of CR, 13 cases of PR, 4 cases of SD and 3 cases of PD. The survival periods of the twenty-one cases were markedly prolonged. [Conclusion] Fuzhengxiaoai I decoction had certain therapeutic effect on upper digestive tract malignant tumors at middle and late stage.

1857- gera: 137300/di/ra

[EFFECT OF CHANGFUKANG ON PROLIFERATION AND

INFILTRATION OF HUMAN COLORECTAL CARCINOMA CELL HT- 29]. LIU BIQING, QIAN HAIBIN, WANG YI, ET AL. chinese journal of integrated traditional and western medicine on digestion. 2004;12(6):341 (chi*) [Objective] To explore the effect of changfukang recipe on proliferation and infiltration of human colorectal carcinoma cell HT-29 and its mechanism. [Methods] Cell culture and immunohistochemistry were applied to detect the expression of nuclear product antigen (Ki-67) , matrix metalloproteinases-2 (MMP2) and its tissue inhibitor (TIMP2) . [Results] The expression of Ki-67, MMP2, TIMP2 were observed following the treatment by drug serum of changfukang. The expression of both Ki-67 and MMP2 decreased while the excretion of TIMP2 increased, which showed dosage- dependent. The effect of 30% changfukang serum on carcinoma cells was the most obvious. . [Conclusion] Proliferation and infiltration of colorectal carcinoma cells could be inhibited by changfukang recipe and its mechanism might be related with inhibiting the expression of nuclear product antigen Ki-67 and affecting the mutual balance

1858- gera: 137302/di/ra

[EXPRESSION OF CD15S ANTIGEN AND CD44V6 GENE PROTEIN IN GASTRIC CARCINOMA AND ITS IMPLICATION]. GU HUAPING, SHANG PEIZHONG, FENG JILIANG. chinese journal of integrated traditional and western medicine on digestion. 2004;12(6):347 (chi*). [Objective] To study the expression of cell adhesion molecular CD15 s antigen and CD44v6 gene protein in gastric carcinoma and their relationship with the pathological behavior and prognosis. [Methods] High sensitive catalyzed signal amplification (CSA) immunohistochemical method was used to detect the expression of CD15 s antigen and CD44v6 protein in 17 samples of early stage gastric carcinoma, 21 of metaphase gastric carcinoma, and 57 of advanced gastric carcinoma. All the samples were obtained by operative excision. The study was also combined with analysis of the pathological behavior and clinical follow-up survey of gastric carcinoma. [Results] The positive expression rate of CD15s antigen and CD44v6 protein in gastric carcinoma was 86.3 % and 82. 1 % respectively. The positive expression rate of CD15s antigen and CD44v6 protein in advanced gastric carcinoma was obviously higher than that in early or metaphase gastric carcinoma (P < 0.05). The expression of CD15 s antigen was consistent with that of CD44v6 protein and both of them were positively correlated with serosa infiltration, lymph node metastasis and prognosis of the patients (P < 0.05). [Conclusion] The expression of CD15s antigen and CD44v6 protein was closely related to the potential of metastasis and survival rate in gastric carcinoma. CD15 s antigen and CD44v6 protein may be considered as prognostic indicators in gastric carcinoma.

1859- gera: 137667/di/ra

THE DISCUSSION ON EFFECTS OF CONTROL OF CARCINOMATOUS PAIN TREATED BY TCM]. TAO LAN, ET AL. gansu journal of tcm. 2004;17(11):10 (chi).

1860- gera: 137674/di/ra

[CLINICAL OBSERVATION AND EXPERIMENTAL STUDY OF VOMITING CAUSED BY CHEMOTHERAPY OF MALIGNANT TUMOR TREATED BY ZHI OU SHENTIE]. ZHOU Xiao jun, et al. gansu journal of tcm. 2004;17(12):44

1861- gera: 137794/di/ra

[A STUDY OF INHIBITION EFFECT ON MOUSE TRANSPLANTED SARCOMA 180 ABOUT RECIPE OF JIEDU XIAOTANSAN]. HE SHUIYONG, WEI PINKANG, XU LING, ET AL. hebei journal of tcm. 2004;26(10):793 (chi*). Objective To study the anti tumor effect of Jiedu Xiaotansan Recipe for mouse transplanted sarcoma 180. Methods 0.2m1 of prepared sarcoma 180 suspension was inoculated subcutaneously to mouse after taken 17g/kg X d of Jiedu Xiaotansan Recipe oral liquid for 6 days, and then 17g/kg X d of Jiedu Xiaotansan Recipe oral liquid was given to mice for 7 days, 14 days and 21 days. The anti tumor effect of Jiedu Xiaotansan Recipe was evaluated by the method of tumor weighing. Results The inhibiting rate on mouse transplanted

sarcoma 180 in 7 days and 14 days were 87.57% and 73.37%, respectively. They were higher than that in 21 days (47.27%, P < 0.05). Conclusion The anti tumor effect of Jiedu Xiaotansan Recipe earlier period may be better than that during the late

1862- gera: 137830/di/ra

[RESEARCHING EXPERIMENT ON RAT LEMIS CANCER OF LUNG BY COMPOUND CENTIPEDE CAPSULE]. ZHAO WENBO, YUAN RENBING, CCAI FENG ETC. helongjiang journal of tcm. 2004;6:10 (chi).

1863- gera: 137867/di/ra

TYPING AND DIFFERENTIATION OF SYNDROMES IN TREATING PRIMARY CARCINOMA OF LIVER: A REPORT OF 172 CASES]. WANG SHANGJIN . henan tcm. 2004;24(12):51 (chi).

1864- gera: 137988/di/ra

[CLINICAL OBSERVATION ON AIDI INJECTION WITH CHEMOTHERAPEUTIC FOR 30 CASES MALIGNANT INGESTIVE TRACT TUMOR]. GENG GANG LI XIAOLI. inner mongol journal of tcm. 2004;23(6):4 (chi).

1865- gera: 138013/di/ra

TREATMENT OF 32 CASES OF LATE STOMACH CARCINOMA WITH TWO ROUTE CHEMOTHERAPY AND CHINESE DRUGS]. CHEN PING, MAO GUOXIN, GU ERLI, ET AL. jiangsu journal of tcm. 2004;25(12):24 (chi).

1866- gera: 138329/di/ra

[CURATIVE EFFECT ON TABLET ADJUNCTIVE THERAPY DI YU SHEN BAI TABLET-IN RADIATION AND CHEMICAL THERAPY: 426 CASES REPORT ATTACHMENT]. HAO XIAO-YAN, HUA LI, LI RUI-DONG. journal of chengdu university of tcm. 2004;27(4):20 (chi).

1867- gera: 138335/di/ra

[RESEARCH ON THE RELATIONSHIP BETWEEN E CADHERIN AND TYPES OF SYNDROME IN TRADITIONAL CHINESE MEDICINE OF GASTRIC CANCER]. XULING, LIU LONG, SUN DA-ZHI, WEI PIN-KANG. journal of chengdu university of tcm. 2004;27(4):40 (chi).

1868- gera: 138792/di/ra

ISTUDY ON RELATIONSHIP BETWEEN TIMP2 AND TCM TYPES OF SYNDROME OF GASTRIC CARCINOMA]. LIU LONG, XU LING, SUN DA-ZHI. journal of shandong university of tcm. 2004;28(6):424 (chi*).

Objective: To investigate the expression of TIMP2 in different types of syndrome in traditional Chinese medicine of gastric cancer, explore the relationship between TIMP2 and the types of syndrome. Methods: Expression of TIMP2mRNA in gastric carcinoma tissues was determined by reverse transcriptionpolymerase chain reaction in incoordination between the liver and stomach, insufficiency of spleen and stomach, stomach heat due to deficiency of yin, stagnation of phlegm-damp, retention of blood stasis toxin in the interior and exhaustion of both qi and blood six types of syndrome, and analyzed the diversity in different types. Results: Evident diversity was noted in different types, the expression level in incoordination between the liver and stomach type was higher than the others, reduced slightly in stomach heat due to deficiency of yin, retention of blood stasis toxin in the interior and exhaustion of both qi and blood, decreased obviously in insufficiency of spleen and stomach and stagnation of phlegmdamp types, the difference was significant between incoordination between the liver and stomach type and insufficiency of spleen and stomach stagnation of phlegmdamp types(P < 0.05) . Conclusions: Difference of metastasic mechanism was noted between the types, TIMP2 plays various role in different types. Diversity of TIMP2 may be a base for different types.

1869- gera: 138989/di/ra [THE EFFECT OF YIQIPINGXUAN BEVERAGE ON THE **EXPRESSION OF IL-2 AND TGF-B1 MRNA IN IMPLANTING** LEWIS LUNG CANCER AMONG MICE]. WANG YUNQI, TIAN XUEFEI, HE XIN, ET AL. journal of tcm university of

hunan. 2004;24(6):18 (chi*).

Objective To investigate the effect of Yiqipingxuan Beverage (YQPXB) on the expression of interleukin-2 (IL-2) and transforming growth factor-B1, (TGF-B1,) mRNA in the tissues of implanting Lewis lung cancer among mice .. Methods 40 C57 BL/6 J mice were implanted with the cells of Lewis lung cancer by subcutaneous injection. Then, they were randomly divided into YQPXB groups at high dose and low dose, cyclophosphamide control group and tumor-bearing control group. All mice were sacrificed ten days after drug administration. The expression of IL-2 and TGF-B1 mRNA in the tissues of Lewis lung cancer of each group were determined by RT-PCR procedure. Results The expression of IL-2 mRNA was significantly higher in high and low dose of YQPXB groups than that in model group and chemotherapy group (P < 0.01). There were no significant differences between high and low dose of YQPXB groups. The expression of TGF-B1, mRNA was significantly lower in high and low dose of YQPXB groups than that in model group and chemotherapy group (P < 0.01) .There were no significant differences between high and low dose of YQPXB groups in this index as well. Conclusions YQPXB can enhance the expression of IL-2 mRNA and decrease the expression of TGF-B1, mRNA in the cells of Lewis lung cancer so as to improve the expressing pattern of cytokines

1870- gera: 139122/di/ra

ISTUDIES ON ESTABLISHING A QUANTIZED STANDARD OF DEPRESSING SYNDROME OF LIVER QI OF PRIMARY LIVER CANCER]. HOU FENG-GANG, LING CHANG-QUAN, ZHAO GANG, ET AL. journal of yunnan college of tcm. 2004;27(4):14 (chi*).

Objective: To set a quantized standard (including quantized diagnosis standard and classification standard) on depressing syndrome of liver qi of primary liver cancer (PLC) . Method : To identify depressing syndrome of liver qi of PLC according to relevant referenced standard on the base of survey on clinical epidemiology and evaluate its correlative factors on the base of difference of their appearance between depressing syndrome of liver qi and no depressing syndrome of liver qi, and then set its quantized diagnosis standard and test it; at last set the classification standard. Results: The diagnosis standard of depressing syndrome of liver qi of PLC is 20 points; The Sen, Spe and ACC of the prospective and retrospective examination of it are higher than 85% . + LR of them are respectively 8.02 and 8.82; 20 26 points is classified as low grade, 27 34 points is classified as medium grade, high grade is 35 points. Conclusions: Compared with those kinds of standards set during studying in the past, the quantized standard on depressing syndrome of liver qi of PLC has its characteristics; (1) according with clinical characteristic of PLC ; (2) rigorous statistical methods; (3) rationality of evaluation; (4) religious examination; (5) better clinical applied value.

1871- gera: 139151/di/ra

IEFFECT OF CINOBUFOTALIN INJECTION COMBINED WITH TCM DIFFERENTIATION ON LIFE QUALITY AND IMMUNE FUNCTION OF STOMACH CANCER IN ADVANCED STAGE]. SHI LU, YEYUNSHAN LUO SHIGANG, ET AL. journal of zhejiang college of tcm. 2004;28(6):20 (chi).

1872- gera: 139245/di/ra

[CLINICAL RESEARCH ON TCM PREVENTING AND TREATING RADIACTIVE ESOPHAGITIS]. HUANG YING, QIAN SUI-YI, HU YONG-HONG. liaoning journal of tcm. 2004;31(12): (chi).

1873- gera: 139246/di/ra

[EFFECTIVE OBSERVATION ON TCM TREATING STOMACH CANCER ACCOMPANIED WITH INCOMPLETE IN TESTINAL OBSTRUCTION]. ZHU XIANG, FANG MING-ZHI, WU YAN-LIN. liaoning journal of tcm. 2004;31(12):1011 (chi).

1874- gera: 139493/di/ra

[EXPERIMENTAL STUDY OF ANGIOGENESIS CHARACTERISTIC AND PD ECGF EXPRESSION IN GASTRIC CANCER]. CHEN ZHE-JING ZHANG QI-YU. modern journal of integrated traditional chinese and western medicine. 2004;13(24):3247 (chi*).

1875- gera: 139587/di/ra

TREATMENT OF LATE STAGE CANEROUS PAIN BY . QIJUE LIUJUNZI TANG ASSOCIATED WITH FENTANYL PERCUTANEOUS PLASTER: A CLINICAL OBSERVATION OF 37 CASES]. WEN BIN, HE SONG-QI, LIAO RONG-XIN, ET AL. new journal of tcm. 2004;36(12):22 (chi*) Objective: To observe the analgesic effect of Qijue Liujunzi Tang (QLT) associated with fentany percutaneous plaster for late stage of cancerous pain and its action for reducing adverse reaction. Methods: 78 cases of late stage cancer with intermediate degree or severe pain were allocated to 2 groups randomly. The control group (40 cases) was treated by fentany percutaneous plaster; the treatment group (38 cases) by QLT (composed of Radix Astragali, Semen Cassiae, Radix Codonopsis, Rhizoma A-tractylodis Macroeephalae, Poria, Pericarpium Citri Reticulatae, Rhizoma Pinelliae Preparata and Radix Glycyrrhizae) other them fentany plaster. 15 days constituted a course of treatment. Results: The total rate of analgesia was 92. 1% and 75. 0% in treatment and control group respectively (P < O. 05), and the adverse reaction was also decreased in treatment group. Conclusion: QLT associated with fentany percutaneous plaster can markedly decrease the ad-verse reaction and enhance the analgesic

1876- gera: 139593/di/ra

[THE INFLUENCE OF FUZHENG YILIU GRANULE ON LIVER CANCER CELL H22 APOPTOSIS IN MICE AND EXPRESSION OF FAS AND FAST]. XU RUI-FENG, ZHAO JIAN-XIAONG, CHENG WEI-DONG, ET AL. new journal of tcm. 2004;36(12):65 (chi).

1877- gera: 139750/di/ra

[COMBINED TCM AND WM INTERVENTIONAL THERAPY FOR ADVANCED NON SMALL CELL LUNG CANCER]. XUE LUJUN, CUI XIAOQIANG, ZHANG YAN ET AL. shaanxi journal of tcm. 2004;25(12):1059 (chi).

1878- gera: 139751/di/ra

[ADVANCED LUNG CANCER TREATED BY INTERVENTIONAL THERAPY WITH COMBINED CHINESE AND WESTERN DRUGS]. DENG YOUFENG, ZHANG MEILAN, YANG HUI ET AL. shaanxi journal of tcm. 2004;25(12):1061 (chi).

1879- gera: 139852/di/ra

[THE INFLUENCE OF ACUPUNCTURE ON TUMOR NECROSIS FACTOR LEVEL IN PATIENTS UNDERGOING AN OPERATION FOR LUNG CANCER]. ZHOU H, TONG BP, SHI LL, ET AL. shanghai journal of acupuncture and moxibustion. 2004;23(12):20 (chi*).

Objective To investigate the effect of acupuncture on serum tumor necrosis factor (TNF) level and immunological mechanism in patients undergoing an operation for lung cancer. Methods Double antibody enzyme labeled immunoassay was used to determine the tumor necrosis factor content of serum in patients undergoing an operation for lung cancer. Before, and at 1 day and 8 days after an operation for lung cancer, TNF content was determined and compared in an acupuncture anesthesia group and a general anesthesia group of patients undergoing the operation ,25 cases each. Results There was no significant difference in the tumor necrosis factor content of serum before and at 1 day after the operation (P>O. 05) but there was at 8 days after the operation (P<0.05) between the two groups. The effect was better in the acupuncture anesthesia group than in the general anesthesia group. Conclusion Acupuncture can decrease the tumor necrosis factor content of serum and regulate immunological function in patients undergoing

1880- gera: 154166/co/re

A PILOT STUDY TO ASSESS THE INFLUENCE OF TAI CHI CHUAN ON FUNCTIONAL CAPACITY AMONG BREAST CANCER SURVIVORS. MUSTIAN KM, KATULA JA, ZHAO H. j support oncol.. 2004;4(3):139-45 (eng).

Treatment of breast cancer can significantly diminish functional

capacity in patients months and even years after the completion of treatments. Tai chi chuan (TCC) is a moderate form of exercise that may be an effective therapy for improving functional capacity among breast cancer survivors. We sought to provide pilot data comparing the efficacy of TCC and psychosocial therapy (PST; physical activity control) for improving functional capacity among breast cancer survivors post treatment. Twenty-one women who had completed treatment of breast cancer were randomized to receive TCC or PST 3 times/wk for 12 weeks. Functional capacity was assessed at baseline and at 12 weeks. The TCC group demonstrated significant improvement in functional capacity (specifically aerobic capacity, muscular strength, and flexibility) whereas the PST group showed significant improvement in flexibility only. These data suggest that TCC may be an efficacious intervention for enhancing functional capacity among breast cancer survivors and may support the need for larger randomized, controlled clinical trials to further elucidate these relationships.

1881- gera: 159378/di/re

ACUPRESSURE FOR NAUSEA AND VOMITING IN CANCER PATIENTS RECEIVING CHEMOTHERAPY, KLEIN J, GRIFFITHS P. british journal of community nursing. 2004;9(9):383-88 (eng).

Practitioners working with patients undergoing chemotherapy regularly encourage them to use acupressure in the form of Sea Bands™ for the relief of treatment related nausea and vomiting. This mini-review sets out to uncover and examine the evidence base for this recommendation. A mini systematic review was carried out to identify randomized controlled trials comparing the use of acupressure plus usual care with usual care alone. The population was adult patients receiving cancer chemotherapy. The outcome was nausea or vomiting duration or intensity. Searches on Medline, Embase, AMED, the Cochrane Library, Cancerlit and Cinahl identified two randomized controlled trials involving 482 patients which compared acupressure to no intervention control. The results suggest that acupressure may decrease nausea among patients undergoing chemotherapy but further work is required before conclusively advising patients on the efficacy of acupressure in preventing and treating chemotherapy induced nausea.

1882- gera: 160131/di/re

EFFECT OF ACUPRESSURE ON NAUSEA AND VOMITING DURING CHEMOTHERAPY CYCLE FOR KOREAN POSTOPERATIVE STOMACH CANCER PATIENTS, SHIN YH, KIM TI, SHIN MS, JUON HS. cancer nursing. 2004;27(4):267-74 (eng).

Despite the development of effective antiemetic drugs, nausea and vomiting remain the main side effects associated with cancer chemotherapy. The purpose of this study was to examine the effect of acupressure on emesis control in postoperative gastric cancer patients undergoing chemotherapy. Forty postoperative gastric cancer patients receiving the first cycle of chemotherapy with cisplatin and 5-Fluorouracil were divided into control and intervention groups (n = 20 each). Both groups received regular antiemesis medication; however, the intervention group received acupressure training and was instructed to perform the finger acupressure maneuver for 5 minutes on P6 (Nei-Guan) point located at 3-finger widths up from the first palmar crease, between palmaris longus and flexor carpi radialis tendons point, at least 3 times a day before chemotherapy and mealtimes or based on their needs. Both groups received equally frequent nursing visits and consultations, and reported nausea and vomiting using Rhode's Index of Nausea, Vomiting and Retching. We found significant differences between intervention and control groups in the severity of nausea and vomiting, the duration of nausea, and frequency of vomiting. This study suggests that acupressure on P6 point appears to be an effective adjunct maneuver in the course of emesis control.

1883- gera: 160192/di/re

ACUPUNCTURE AND ACUPRESSURE FOR THE MANAGEMENT OF CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING, COLLINS KB, THOMAS DJ. journal of the

american academy of nurse practitioners. 2004;16(2):80-4 (eng).

Purpose To examine the formal and informal health care beliefs, behaviors, and practices of nurse practitioners (NPs). Data Sources A self-administered questionnaire with primarily closed-ended format was distributed over a 3-day period to a convenience sample of 321 NPs attending a national NP conference. Conclusions The overall health status and health practices of NPs were found to be fairly good, but there was room for improvement, particularly with regard to nutrition, health responsibility, physical activity, and stress management. Implications for Practice Respondents were more likely to self-diagnose and self-treat minor illnesses and largely received their primary health care from physicians. The majority of NPs indicated a willingness to receive health care from an NP; however, the nonavailability of NPs restricted this option Volume 16, Issue 2, pages 80–84, February 2004

1884- gera: 116908/di/ra

POINT INJECTION OF INJECTIO RADICI ASTRAGALI FOR TREATMENT OF POST-CHEMOTHERAPY ADVERSE REACTIONS. CHEN L, XIE C, WU L. journal of traditional chinese medicine. 2005;25(1):21-2. (eng).

1885- gera: 124885/di/ra

[ROLE OF ACUPUNCTURE ANESTHESIA IN OPERATION OF RECTAL CANCER]. YIN LH, LI WS, ZHAO WX, LI WY. chinese acupuncture and moxibustion. 2005;25(12):876-8. (chi)

OBJECTIVE: To observe analgesic effect of acupuncture anesthesia. METHODS: Sixty-nine cases undergoing rectal cancer surgery were randomly divided into 3 groups, group I, II and III, 23 cases in each group. Both Zusanli (ST 36) and Sanyinjiao (SP 6) were selected for acupuncture anesthesia. Group I received general anesthesia after acupuncture induction, group II received acupuncture after general anesthesia, and group II received only general anesthesia. Minimum alveolar concentration (MAC) before and after operation was recorded. RESULTS: MAC was (1.35 +/- 0.19) vol% in the group I, (1.49 +/- 0.22) vol% in the group II and (1.64 +/- 0.27) vol% in the group III. Acupuncture before and after general anesthesia could decrease respectively by about 0.29% and 0.15% of MAC in rectal cancer surgery undergoing general anesthesia, with a very significant difference (P < 0.01) or a significant difference (P < 0.05) among the 3 groups. CONCLUSION: Acupuncture anesthesia has a certain adjuvant action for anesthesia and analgesia, and acupuncture before general anesthesia has a better action.

1886- gera: 126010/di/ra

EFFECTS OF GANODERMA LUCIDUM EXTRACT ON CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING IN A RAT MODEL. WANG CZ, BASILA D, AUNG HH, MEHENDALE SR, CHANG WT, MCENTEE E, GUAN X, YUAN CS. american journal of chinese medicine. 2005;33(5):807-15. (eng).

Chemotherapy is highly cytotoxic, causing a number of severe adverse effects such as nausea and vomiting. Herbal medicines, which can often be used on a daily basis for prolonged treatment, may be clinically beneficial. Ganoderma lucidum or Lingzhi mushroom has been recognized as a remedy in treating a number of medical conditions, including balancing immunity and decreasing drug-induced side effects. It has been shown that rats react to emetic stimuli, like the chemotherapy agent cisplatin, by increased consumption of kaolin, known as pica; and this rat model has been utilized to evaluate novel anti-emetic compounds. In this study, we evaluated the effects of a G. lucidum extract (SunRecome, the most commonly used Lingzhi mushroom extract in China) in attenuating cisplatin-induced nausea and vomiting in the rat pica model. We observed that intraperitoneal cisplatin injection caused a significant increase in kaolin intake at 24, 48, 72 and 96 hours, reflecting cisplatin's nausea and vomiting action. This cisplatin-induced kaolin intake dose-dependently decreased after 1, 3 and 10 mg/kg G. lucidum extract injection (p < 0.01). In addition, there was a significant reduction of food intake after cisplatin. The cisplatin-induced food intake reduction improved significantly after G. lucidum extract administrations in a dose-related manner (p < 0.01),

suggesting a supportive effect of the extract on general body condition. Future controlled clinical trials are needed to evaluate the safety and effectiveness of this herbal medication.

1887- gera: 126155/di/ra

COMPLEMENTARY AND ALTERNATIVE MEDICINE USE IN COLORECTAL CANCER PATIENTS IN SEVEN EUROPEAN COUNTRIES. MOLASSIOTIS A, FERNANDEZ-ORTEGA P, PUD D, OZDEN G, PLATIN N, HUMMERSTON S, SCOTT JA, PANTELI V, GUDMUNDSDOTTIR G, SELVEKEROVA S, PATIRAKI E, KEARNEY N. complementary therapies in medicine. 2005;13(4):251-7. (eng).

PURPOSE: The aim of the present study was to examine the use of complementary and alternative medicine (CAM) in a sample of colorectal cancer patients in Europe. METHODS: The study was a descriptive cross-sectional survey and data were collected through a 27-item self-reported questionnaire from seven European countries. RESULTS: As part of a larger study, 126 colorectal cancer patients participated in this survey. Among the participants, 32% used CAM after the diagnosis of cancer. Almost half the CAM therapies used were new therapies, never tried before the diagnosis. The most common CAM therapies used included herbal medicine (48.7%), homeopathy (20.5%), use of vitamins/minerals (17.9%), spiritual therapies (15.4%), medicinal teas (15.4%) and relaxation techniques (12.8%). A dramatic increase was observed in the use of CAM from usage levels before the cancer diagnosis. High levels of satisfaction with CAM were also reported. Patients used CAM more often to increase the body's ability to fight the cancer or to improve physical wellbeing. However, expectations did not always match with the benefits reported. CONCLUSIONS: As one-third of colorectal cancer patients use CAM, health professionals should be more aware of this approach to the patient's management. They should discuss the role of CAM therapies with their patients in a non-judgemental and open manner, and endeavour to provide accurate information in order to allow patients to make their own decision about CAM.

1888- gera: 126266/di/ra

CLINICAL STUDY ON TREATMENT OF PRIMARY HEPATOCELLULAR CARCINOMA BY SHENQI MIXTURE COMBINED WITH MICROWAVE COAGULATION. LIN JJ, JIN CN, ZHENG ML, OUYANG XN, ZENG JX, DAI XH. chinese journal of integrative medicine. 2005;11(2):104-10. (eng).

OBJECTIVE: To observe the short-term efficacy and safety of Shenqi mixture (SQM) combined with microwave coagulation in treating primary hepatocellular carcinoma (HCC). METHODS: Seventy-two patients with primary HCC of stage II-III, Karnofsky scoring > or = 50 scores and predicted survival period > or = 3 months were selected and randomly assigned into two groups, the treated group and the control group, 36 in each. Microwave therapy was applied to both groups by double leads, 60 W, 800 sec once a week for two weeks. To the treated group, SQM was given additionally through oral intake of 20 ml, three times a day for 1 month. The changes in tumor size, main symptoms, serum level of alpha-fetoprotein (AFP), immune function and adverse reaction were observed after treatment and the immune parameters of the patients were compared with 30 healthy persons in the normal control group. RESULTS: (1) In the SQM treated group, after treatment 3 patients got completely remitted (CR), 24 partial remitted (PR), 4 unchanged (NC) and 5 progressively deteriorated (PD), the effective rate being 75.00%; while in the control group, 1 got CR, 19 PR, 9 NC and 7 PD, the effective rate being 55.56%. Comparison of the effective rate between the two groups showed significant difference (P < 0.05). (2) AFP level decreased after treatment in both groups, but the decrement in the treated group was significantly higher than that in the control group (P < 0.01). (3) After treatment, in the treated group, CD3(+), CD4(+), CD4(+)/CD8(+) and NK activity were improved, Karnofsky scores increased and liver function bettered, with these improvements significantly superior to those in the control group (P < 0.01). (4) The improvement in symptoms such as hepatic region pain, fever, weakness, poor appetite and jaundice in the treated group after treatment was also superior to that in the control group (P < 0.01). (5) The 12month, 18-month and 24-month survival rates were higher and

the recurrence rate was lower in the treated group than those in the control group, showing significant difference (P < 0.05). CONCLUSION: Combined therapy with SQM and microwave coagulation could not only kill the tumor and residue tumor cells to prevent recurrence, but also enhance the cellular immunity of organism. It is one of the effective therapies for patients with middle-advanced hepatocarcinoma, who have lost the chance of surgical operation. It could improve clinical symptoms, elevate the quality of life, prolong the survival period of patients, but shows no evident adverse reaction.

1889- gera: 136325/di/ra

INDUCTION OF APOPTOSIS IN HUMAN ORAL CANCER CELL LINES, OC2 AND TSCCA, BY CHINGWAYSAN. PAOHSIN LIAO, SHIOW-LING CHEN, HUNG-CHE SHIH AND MING-YUNG CHOU. american journal of chinese medicine. 2005;33(1):21 (eng).

Chingwaysan, a Chinese herbal formula, contains Cimicfugae Rhizoma, Rehmanniae Radixet Rhizoma, Moutan Radicis Cortex, Coptidis Rhizoma and Angelicae Sinensis Radix. This medicine is well-known for its curing power for ulcerated gums, toothaches, cheek boils and bleeding gingiva. However, no reports can be found on its application in the treatment of oral cancers. We are therefore interested in whether Chingwaysan is capable of causing abnormal apoptosis processes, and whether this condition can be rectified through Chingwaysan herb treatment. We used aqueous extract to treat OC2 and TSCCa cells (both are human oral cancer cell lines) with different Chingwaysan concentrations (0, 10, 25, 50, 75 and 100 µl/ml). The MTT (3, (4, 5-dimethyl-thiazol) 2, 5-diphenyltetraxolium bromide) reduction assay was employed to quantify the differences in cell activity and viability. DNA ladder formation on agarose electrophoresis was also performed. The bax expression level was monitored using immunoblotting techniques. The patterns of the changes in expression were scanned and analyzed by NIH image 1.56 software. Taken together, drastic morphological changes, reduced cell viability and the presence of inter-nucleosomal DNA fragmentation all indicated that Chingwaysan is capable of inducing apoptosis in OC2 and TSCCa cell lines. Furthermore, the accumulation of wild type bax protein significantly increased in a dosedependent manner upon treatment with Chingwaysan. In conclusion, Chingwaysan can induce apoptosis via a baxdependent pathway in cells from these two particular oral cancer cell lines.

1890- gera: 136428/nd/re

[DISCUSSION OF SOME PROBLEMS ABOUT USE OF TRADITIONAL CHINESE MEDICINE IN PERIOPERATIVE MANAGEMENT OF BREAST CANCER.]. LIU PX, LIN Y CHEN QJ. zhong xi yi jie he xue bao. 2005;3(3):178-80 (chi). The study on use of traditional Chinese medicine in perioperative management of breast cancer is still in the beginning phase. With the emergence of new understanding about the biological characteristics of breast cancer, the concept of treatment has changed. For instance, the resection extent is tending to be narrower, large doses of radiotherapy may be adopted during the operation, and early use of adjuvant chemotherapy is advocated after the operation. These have bought about changes to the intervention factors in the perioperative period for breast cancer. Some related problems about the participation of traditional Chinese medicine in perioperative management of breast cancer are discussed in this article, so as to make the perioperative management perfect.

1891- gera: 136489/di/re

ACUPUNCTURE: ROLE IN COMPREHENSIVE CANCER CARE--A PRIMER FOR THE ONCOLOGIST AND REVIEW OF THE LITERATURE. COHEN AJ, MENTER A, HALE L. integr cancer ther. 2005;4(2):131-43 (eng).

In recent studies, patients have reported an increased use of complementary and alternative medicine (CAM). Acupuncture is a popular complementary therapy for patients with cancer. This article will provide current cancer treatment providers with information on acupuncture as well as the research conducted on cancer symptoms and side effects of cancer treatments. Antiemetic studies are the most prevalent and contain the most promising results. Several studies have found that acupuncture

significantly reduces the number of emesis (vomiting) episodes for patients receiving chemotherapy. While studies on pain control vary due to the heterogeneity of pain, there are few studies investigating pain caused from cancer and the removal of cancerous tumors. These studies, while promising, provide basic results that need further investigation for more definitive results. Although relatively few studies have been done on anxiety and depression, several researchers have found acupuncture to be just as effective as or more effective than antidepressants for patients without cancer. Studies on breathlessness, while small, have shown acupuncture to have a significant positive effect on chronic obstructive pulmonary disease, breathlessness associated with end-stage cancer, and asthma. Researchers studying xerostomic individuals who have received salivary gland irradiation found significant positive results in salivary flow rates compared to baseline. Patients with hot flashes due to hormonal imbalance may benefit from the use of acupuncture. A recent pilot study showed improvement of chronic postchemotherapy fatigue following acupuncture treatments. Many individuals with cancer have turned to acupuncture because their symptoms persisted with conventional treatments or as an alternative or complement to their ongoing treatments. Despite the immense popularity in the community, few large randomized trials have been conducted to determine the effects acupuncture has on cancer symptoms and side effects of treatments. A majority of the current studies have shown beneficial effects that warrant further investigation with large trial sizes.

1892- gera: 136510/nd/re

APOPTOTIC EFFECTS OF EXTRACT FROM ANTRODIA CAMPHORATA FRUITING BODIES IN HUMAN HEPATOCELLULAR CARCINOMA CELL LINES. HSU YL, KUO YC, KUO PL, NG LT, KUO YH, LIN CC. cancer lett. 2005;221(1): (eng).

The fruiting body of Antrodia camphorata is well known in Taiwan as a traditional medicine for treating cancer and inflammation. The purpose of this study was to evaluate the apoptotic effects of ethylacetate extract from A. camphorata (EAC) fruiting bodies in two human liver cancer cell lines, Hep G2 and PLC/PRF/5. Treatment with EAC decreased the cell growth of Hep G2 and PLC/PRF/5 cells in a dose dependent manner. In Fas/APO-1 positive-Hep G2 cells, EAC increased the expression level of Fas/APO-1 and its two forms of ligands, membrane-bound Fas ligand (mFasL) and soluble Fas ligand (sFasL), in a p53-indenpendent manner. In addition, EAC also initiated mitochondrial apoptotic pathway through regulation of Bcl-2 family proteins expression, release of cytochrome c, and activation of caspase-9 both in Hep G2 and PLC/PRF/5 cells. Furthermore, EAC also inhibited the cell survival signaling by enhancing the amount of IkappaBalpha in cytoplasm and reducing the level and activity of NF-kappaB in the nucleus, and subsequently attenuated the expression of Bcl-X(L) in Hep G2 and PLC/PRF/5 cells. EAC therefore decreased the cell growth and induced apoptosis both in Hep G2 and PLC/PRF/5 cells.

1893- gera: 136523/nd/re

ANTICANCER EFFECT AND APOPTOSIS INDUCTION OF GAMBOGIC ACID IN HUMAN GASTRIC CANCER LINE BGC-823. LIU W, GUO QL, YOU QD, ZHAO L, GU HY, YUAN ST. world j gastroenterol. 2005;11(24):3655-9 (eng). AIM: To investigate the anticancer effect of a traditional Chinese medicine gambogic acid (GA) in human gastric cancer line BGC-823 and further study the mechanism of apoptosis induction of GA. METHODS: Low differential human gastric cancer line BGC-823 were treated with GA at different doses and different times, the inhibitory rates were detected by MTT assay. Apoptosis induced by GA in BGC-823 cells was observed by Annexin-V/PI doubling staining flow cytometry assay. And T/C (%) was chosen to detect the inhibition of GA on human gastric adenocarcinoma BGC-823 nude mice xenografts. Apoptosis on nude mice xenografts was observed by Annexin-V/PI doubling staining flow cytometry assay and DNA fragmentation assay. To further determine the molecular mechanism of apoptosis induced by GA, the changes on the expression of bcl-2 and bax genes were detected by RT-PCR. RESULTS: After incubation with GA, low differential human gastric cancer line BGC-823 was dramatically inhibited in a

dose-dependent manner. After these cells was exposed to GA for 24, 48 and 72 h, the IC(50) value were 1.02+/-0.05, 1.41+/-0.20 and 1.14+/-0.19 mumol/L, respectively. Apoptosis in BGC-823 cells induced by GA was observed by Annexin-V/PI doubling staining flow cytometry assay. The apoptotic population of BGC-823 cells was about 12.96% and 24.58%, respectively, when cells were incubated with 1.2 mumol/L GA for 48 and 72 h. T/C (%) of human gastric carcinoma adenocarcinoma BGC-823 nude mice xenografts was 44.3, when the nude mice were treated with GA (8 mg/kg). Meanwhile, apoptosis induced by GA was observed in human gastric carcinoma adenocarcinoma BGC-823 nude mice xenografts. The increase of bax gene and the decrease of bc1-2 gene expressions were found by RT-PCR. CONCLUSION: The inhibition of GA on human gastric cancer line BGC-823 was confirmed. This effect connects with the inducing apoptosis in BGC-823 cells and the molecular mechanism might be related to the reduction of expression of apoptosisregulated gene bcl-2, and the improvement of the expression of apoptosis-regulated gene bax. The result was also confirmed in vivo

1894- gera: 136557/nd/ra

ANTICIPATORY NAUSEA AND VOMITING. AAPRO MS, MOLASSIOTIS A, OLVER I. support care cancer. 2005;13(2):117-21 (eng).

Anticipatory nausea and vomiting (ANV) is not only a learned response but can occur without prior exposure to chemotherapy depending on patient emotional distress and expectations. The best method to avoid development or reinforcement of ANV is to avoid both vomiting and nausea from the first exposure to chemotherapy. If ANV develops, benzodiazepines have been documented to help in adult patients, and several psychological techniques are also of help, including systematic desensitization. The evidence on which these conclusions are based is reviewed in this

1895- gera: 136558/nd/re

THE EXTRACT OF HUANGLIAN, A MEDICINAL HERB, INDUCES CELL GROWTH ARREST AND APOPTOSIS BY UPREGULATION OF INTERFERON-{BETA} AND TNF-{ALPHA} IN HUMAN BREAST CANCER CELLS. KANG JX, LIU J, WANG J, HE C, LI FP. carcinogenesis. 2005;jun 15: (eng).

Huanglian (Coptidis rhizoma), a widely used herb in traditional Chinese medicine, has been shown recently to possess anticancer activities. However, the molecular mechanism underlying the anticancer effect of the herb is poorly understood. Specifically, whether huabglian extract affects the expression of cancer-related genes has not been defined. This study uses DNA microarray technology to examine the effect of the herbal extract on expression of the common genes involved in carcinogenesis in two human breast cancer cell lines, the ER-positive MCF-7 and ER-negative MDA- MB-231 cells. Treatment of the cancer cells with huanglian extract markedly inhibited their proliferation in a dose- and timedependent manner. The growth inhibitory effect was much more profound in MCF-7 cell line than that in MDA-MB- 231 cells. DNA microarray assay revealed that treatment with huanglian dramatically increased the mRNA expression of interferon-beta (IFN-beta) and tumor necrosis factor-alpha (TNF-alpha) in MCF-7 cells. Quantitative analysis by real-time PCR or Western blotting confirmed the up-regulation of the two genes (especially IFN-beta) in MCF-7 cells, but not in MDA-MB-231 cells. Addition of neutralizing antibody against IFN to culture medium markedly inhibited the huanglian- induced antiproliferative effect, confirming the involvement of IFN in the huanglian's effect and also suggesting an autocrine pathway for the action of IFN in this setting. Given that IFN is among the most important anti-cancer cytokines, the up-regulation of this gene by huanglian is, at least in part, responsible for its antiproliferative effect. The results of this study implicate huanglian as a promising herb for chemoprevention and chemotherapy of certain cancers.

1896- gera: 136563//ra

RADIOPROTECTIVE POTENTIAL OF GINSENG. LEE TK, JOHNKE RM, ALLISON RR, O'BRIEN KF, DOBBS LJ JR. mutagenesis. 2005;jun 14: (eng).

A majority of potential radioprotective synthetic compounds have demonstrated limited clinical application owing to their inherent toxicity, and thus, the seeking of naturally occurring herbal products, such as ginseng, for their radioprotective capability has become an attractive alternative. In general, ginseng refers to the roots of the species of the genus Panax. As a medicinal herb, ginseng has been widely used in traditional Chinese medicine for its wide spectrum of medicinal effects, such as tonic, immunomodulatory, antimutagenic, adaptogenic and antiaging activities. Many of its medicinal effects are attributed to the triterpene glycosides known as ginsenosides (saponins). This review addresses the issue of the radioprotective effects of ginseng on mammalian cells both in vitro and in vivo. Results indicate that the water- soluble extract of whole ginseng appears to give a better protection against radiation-induced DNA damage than does the isolated ginsenoside fractions. Since free radicals play an important role in radiation-induced damage, the underlying radioprotective mechanism of ginseng could be linked, either directly or indirectly, to its antioxidative capability by the scavenging free radicals responsible for DNA damage. In addition, ginseng's radioprotective potential may also be related to its immunomodulating capabilities. Ginseng is a natural product with worldwide distribution, and in addition to its antitumor properties, ginseng appears to be a promising radioprotector for therapeutic or preventive protocols capable of attenuating the deleterious effects of radiation on human normal tissue, especially for cancer patients undergoing radiotherapy.

1897- gera: 136591/di/ra

ACUPUNCTURE FOR THE RELIEF OF CANCER-RELATED PAIN - A SYSTEMATIC REVIEW. LEE H, SCHMIDT K,

ERNST E. eur j pain. 2005;9(4):437-44 (eng). AIMS: This systematic review summarises the existing evidence on acupuncture for cancer-related pain. METHODS: Literature searches were conducted in seven databases. All clinical studies of acupuncture, electroacupuncture and ear acupuncture in cancer patients with the main outcome measure of pain were included. Data were extracted according to pre-defined criteria by two independent reviewers and methodological quality was assessed using the Jadad scale. RESULTS: Of the seven studies included, one high quality randomised clinical trial of ear acupuncture showed statistically significant pain relief in comparison with placebo ear acupuncture. All the other studies were either non-blinded (n=2) or uncontrolled clinical trials (n=4). Most investigations suffered from methodological flaws such as inadequate study design, poor reporting of results, small sample size and overestimation of the results. CONCLUSIONS: The notion that acupuncture may be an effective analgesic adjunctive method for cancer patients is not supported by the data currently available from the majority of rigorous clinical trials. Because of its widespread acceptance, appropriately powered RCTs are needed.

1898- gera: 136594/di/ra

ACUSTIMULATION WRIST BANDS ARE NOT EFFECTIVE FOR THE CONTROL OF CHEMOTHERAPY-INDUCED NAUSEA IN WOMEN WITH BREAST CANCER. ROSCOE JA, MATTESON SE, MORROW GR, HICKOK JT, BUSHUNOW P, GRIGGS J, QAZI R, SMITH B, KRAMER Z, SMITH J. j pain symptom manage. 2005;29(4):376-84 (eng). This experiment examined the efficacy of an acustimulation wrist band for the relief of chemotherapy-induced nausea using a randomized three-arm clinical trial (active acustimulation, sham acustimulation, and no acustimulation) in 96 women with breast cancer who experienced nausea at their first chemotherapy treatment. Five outcomes related to wrist band efficacy (acute nausea, delayed nausea, vomiting, QOL, and total amount of antiemetic medication used) were examined. The five outcomes were examined separately using analysis of covariance controlling for age and severity of past nausea. There were no significant differences in any of these study measures among the three treatment conditions (P>0.1 for all). Study results do not support the hypothesis that acustimulation bands are efficacious as an adjunct to pharmacological antiemetics for control of chemotherapy-related nausea in female breast cancer patients.

1899- gera: 136596/nd/re

[SURVEY OF PARENTS OF CHILDREN WITH CANCER WHO LOOK FOR ALTERNATIVE THERAPIES.]. SUEN YI, GAU BS, CHAO SC. hu li za zhi. 2005;52(3):29-38 (chi). Alternative therapies are regimens that run counter to the mainstream of Western medicine. The main purpose of this study was to investigate and evaluate the alternative medicine with which parents of children with cancer seek to have their children treated. The research took as its subjects the parents of children with cancer who were outpatients or inpatients in six medical centers from September to December, 1999. Data were collected by questionnaire and 110 copies were effective. The results showed that 69.1% of the parents had been seeking alternative therapies. The most popular form of alternative therapy identified by this research was folk and religious therapy (68.4%), followed by Chinese medical treatment (57.9%), followed by special diets (50.0%). Other forms were used, such as herbal and arcanum therapy (13.2%), human electricity (3.9%), meditation (1.3%), and aromatherapy (1.3%). The results also showed that 61.8% of the parents had not discussed the use of the alternative therapies with the children's doctors. Hospital workers, therefore, should try to understand the situations of pediatric patients using alternative therapies, and provide appropriate suggestions to parents of pediatric patients as well as more humane, thoughtful medical care.

1900- gera: 136602/nd/ra

EFFECTS OF AMINO ACIDS FROM SELENIUM-RICH SILKWORM PUPAS ON HUMAN HEPATOMA CELLS. HU D. LIU Q, CUI H, WANG H, HAN D, XU H. life sci. 2005;jun 21:

Selenium (Se) plays an important role in cancer-prevention. Silkworm pupas have been used as a Chinese traditional medicine since ancient time. In order to find effective carcinostatic agents, Se-rich amino acids were extracted from Ziyang silkworm pupas. The Se content of Ziyang pupas was measured to be 215 times higher than that of Luoyang normal ones, and the majority of Se was stored in proteins. Composition analysis showed that Se-rich amino acids from Ziyang pupas had higher amounts of selenomethionine, methionine, cystine, and tyrosine than normal amino acids from Luoyang pupas which were rich in amino acids containing alkyl side chains. When cultured with human hepatoma cells SMMC-7721, Se-rich amino acids at concentrations of 0.5, 1.5, and 2.5 mumol L(-1) Se significantly and dose-dependently inhibited cell viability, induced changes in cell morphology and cycle, and caused cell apoptosis. On the contrary, normal amino acids did not show any inhibitory effect on SMMC-7721 cells. Sodium selenite or selenomethionine at the same Se concentrations only slightly inhibited the hepatoma cells. Mechanism study showed that selenium-rich amino acids could increase the generation of intracellular reactive oxygen species (ROS) concentration-dependently. Antioxidant Nacetylcyteine partially inhibited the increase of ROS. Those results suggested that Se-rich amino acids were effective carcinostatic agents compared with sodium selenite and selenomethionine. The mechanism for their hepatomainhibitory effects was the induction of cellular apoptosis through ROS generation.

1901- gera: 136658/di/ra

[MEDICINE BASED ON EVIDENCE AND THE TCM TREATMENT OF TUMOR]. JI JIE . acta chinese medicine and pharmacology. 2005;33(1):4 (chi).

1902- gera: 136661/di/ra

[CLINICAL OBSERVATION ON EFFECT OF COMPOUND PREPARATION FROM CHINES MEDICINAL HERBS ON **IMPROVING IMMUNOLOGY FUNCTION AND** HEMORRHEOLOGY OF POSTOPERATIVE CARCINOMA OF ESOPHAGUS]. SHEN SHI -LIN, ZHAO JIAN -XIONG, LI YING -PING, ET AL. acta chinese medicine and pharmacology. 2005;33(1):14 (chi*). Objective: To observe the effect of Fuzheng Yiliu Granule (FYG) on immunology function and hemorrheology in treated postoper-ative of esophageal carcinoma. Methods:129 patients were randomly dinvided into two groups basis on

patients esophageal carcinoma, Chemo¬therapy group and none chemotherapy group. Two group were divided into control group and therapy group too. Therapy group have FYK for one month. T – lymphocyte subsets NK cell number and blood rheology are counted in one month. Results: in both groups CD4, CD4/CD8, NK cell of patients after taking FYG are significantly higher than those not taking FYG (P < 0.05). CD8, blood rheology of patients after taking FYG are significantly down than those not taking FYG (P < 0.05) Conclusion: FYG can improve significantly immunologic function and hemorrheology of the patient with esophagus carcinoma

1903- gera: 136663/di/ra [THE INITIAL THINKING IN THE ANALYSIS OF DIAGNOSIS AND TREATMENT COMBINED WITH TRADITIONAL CHINESE MEDICINE AND RADIOTHERAPY IN MALIGNANT TUMOR PATIENTS]. WANG MEI, ZHANG HONG -JUN. LIANG JUN. acta chinese medicine and pharmacology. 2005;33(1):25 (chi*).

The paper is derived from theory of Chinese Medical Science, combined with the principle of modem radiobiology and the experiences toxicities of radiotherapy, then proved respectively that for the toxicities of radiotherapy, the basical pathology is the impairment of spleen and stomach. The function of spleen and stomach is injuried, the circulation of bodyfluid are abnormal and the damp fever is got. If the situation maintained for a long time, the vital energy will be exhaused and the vital essence will be deficiency. When emphasized the analysis of diagnosis and treatment, we should give patients advisable traditional treatment ac-cording to their local diseases, the differences of their bodies

1904- gera: 136933/di/ra

IEFFECTS OF ACUPUNCTURE AND MOXIBUSTION ON CHROMOSOME ABERRATIONS RATE AND SISTER CHROMATID EXCHANGE RATE IN BONE CELLS OF MICE]. ZHANG SHI-MIN, WEI HUI-PING, YANG CHUN-MEI, ET AL. chinese acupuncture and moxibustion. 2005;25(2):123 (chi*).

Objective To study the anti-mutation action of acupuncture and moxibustion. Methods Mice were randomly divided into 6 groups, group 1 (normal control group), group 2 (positive control group), group 3 (prevention group 1), group 4 (prevention group II), group 5 (treatment group I) and group 6 (treatment group 11). The mice in the group 2—6 were treated by cyclophosphamide (ip, 50 mg/kg body weight), and in the 3-6 groups were given acupuncture at "Zusanli" (ST 36) and moxibustion at "Guanyuan" (CV 4). At the end of experiment, all the mice were decapitated and chromosome aberration rate and sister chromatid exchange rate of bone marrow cells were investigated. Results The chromosome aberration rate and the sister chromatid exchange rate of bone marrow cells in the positive control group increased significantly as compared with the normal control group, while they decreased significantly-in the group 3, 4, 5, 6 as compared with the positive control group (P<0.01). Conclusion Acupuncture and moxibustion have anti-mutation action, inhibiting the increase of chromosome aberrations and sister chromatid exchange of bone marrow cells in mice

1905- gera: 136935/di/ra

[APPLICATION OF TRANSCUTANEOUS ELECTRIC NERVE STIMULATION IN OPERATION OF THYROID TUMORS]. HE XIU-LI, LI XUE-MIN. chinese acupuncture and moxibustion. 2005;25(2):129 (chi*).

Objective To study the effect of transcutaneous electric nerve stimulation for decreasing stress response and strengthening the anesthetic effect in the operation of thyroid tumors. Methods Sixty patients with thyroid tumors were randomly divided into an observation group and a control group, 30 cases in each group. All of them were given modified one-point cervical plexus nerve obstruction. The stimulation at bilateral Hegu (LI 4) and Quchi (LI 11) with HANDS was added to the observation group from the beginning to end of operation. Results The blood pressure, heart rate and jerking reflection were decreased significantly as compared with the control group. The oxygen saturation and respiratory frequency did not change. Conclusion Cardiovascular stress response can be

decreased with HANDS in the operation of thyroid tumors and anesthetic effect can be strengthened.

1906- gera: 136963/di/ra

[BRIEF ON STUDY OF THE LAW ABOUT SYNDROME AND DISEASE DIFFERENTIATION FOR PRECANCEROSIS OF MAMMARY CANCER]. SONG AILI, ET AL. chinese archives

of tcm. 2005;23(1):16 (chi).

1907- gera: 136995/di/ra

[CLINICAL OBSERVATION ON TREATMENT OF PLEURAL **EFFUSION SECONDARY TO LUNG CANCER WITH THE** TREATMENT METHOD OF WARMING YANG AND INVIGORATING QI, DISPERSING MASS AND EXPELLING FLUID RETENTION COMBINED WI WANG YUN-QI, ET AL. chinese information on tcm. 2005;12(3):12 (chi*). Objective To observe the curative effects of traditional Chinese medicine treatment method of warming Yang and invigorating Qi, dispersing mass and expelling fluid retention combined with the chemotherapy through the perfusion of the chest on the pleural effusion secondary to lung cancer. Methods 50 pleural effusion secondary to lung cancer patients with the syndrome of Qi deficiency of the lung (SQDL) and the syndrome of both Qi and Yin deficiency of the lung (SQYDL) were selected, and divided randomly into the treatment group (treated with the Guigitingbai decoction that have the effects of warming Yang and invigorating Qi, dispersing mass and expelling fluid retention combined with chemotherapy through the perfusion of the chest) and the control group (treated with single chemotherapy through the perfusion of the chest) after stratification, with each group having 25 cases. The clinical curative effects were observed and compared. Results Based on the clinical observation on the effects of pleural effusion, the treatment group had a better curative effect than the control group (P<0.05). There was no difference between the treatment group and the control group in the effective rate of curing the primary focus of pleural effusion secondary to lung cancer (P>0.05). Evaluated by the scoring method of Karnofsky. The quality of life of the treatment group was better than that of the control group (P<0.05). Alleviation of the toxicity and side-effects of chemotherapy on the digestive, the treatment group was better than that of the control group (P<0.05). Conclusion The traditional Chinese medicine treatment method of warming Yang and invigorating Qi, dispersing mass and expelling fluid retention has a satisfactory curative effect on the pleural effusion secondary to lung cancer with SQDL and SQYDL. It has cooperation when combined with chemotherapy through the perfusion of the chest. The curative effects of these two treatment method combined is better than that of single chemotherapy through the perfusion of the chest.

1908- gera: 137056/di/ra

[EFFECTS OF REVERSING DRUG-RESISTANT AND INDUCING APOPTOSIS OF FU-SHEN COMPOUND PRESCRIPTION ON MCF-7/ADM CELL LINE OF HUMAN BREAST CANCER]. OU YANG-BING, JI XU-MING, YANG YONG, ET AL. chinese journal of basic medicine in tcm. 2005;11(1):19 (chi*).

Objective: To study the effects of compound prescription on reversing drug-resistance and apoptosis of MCF-7/ADM. Methods: Using tetrazolium dye assay to study the reversal effects of serum containing compound prescription on MCF-7/ADM. Intracellular ADM concentration, MDR related protein P-gp,apoptosis adjusted protein p53 and bcl-2 were detected by flow cytometry (FCM); intracellular Cae' concentration and mitochondrion membrane potential were observed by Laser Scanning Confoca Microscopy (LSCM) . Results : Serum containing compound prescription could enhance sensitivity of MCF-7/ADM on ADM and intracellular ADM concentration and expression of p53, reduce expression of P-gp and intracellular Ca2+ concentration and mitochondrion membrane potential. Conclusion: Serum containing compound prescription could reverse multidrug resistance in MCF-7/ADM, which may be closely related to the mechanism of its inducing apoptosis of MCF-7/ADM.

1909- gera: 137148/di/ra

[EFFECTS OF EMODIN ON HEPATOCELLULER CANCER

CELLS IN GROWTHINHIBITING AND EXPRESSION OF P53 AND C MYC PROTEIN]. HE XUE—QIANG, ET AL. chinese journal of information on tcm. 2005;12(1):21 (chi*).

1910- gera: 137150/di/ra

[INFLUENCE OF RESTRAINT STRESS ON THE GENE EXPRESSION OF ORNITHINE DECARBOXYLASE IN RAT WITH CHEMICAL HEPATOCARCINOMA]. GU LI—GANG, ET AL. chinese journal of information on tcm. 2005;12(1):35 (chi*).

1911- gera: 137169/di/ra

[STUDY ON YIQIHUOXUEJIEDU HERB OF INDUCING APOPTOSIS OF LEWIS LUNG CANCER MOUSE]. WANG ZHE, ET AL. chinese journal of information on tcm. 2005;12(2):42 (chi*).

Objective To observe the effect of Yigihuoxuejiedu herb on inducing apoptosis of Lewis lung cancer mouse. Method We chose the cell strain of Lewis lung cancer mouse, inoculated the cell strain subcutaneously. After building the tumor animal model successfully, we divided the animal into Saline control group and Yiqihuoxuejiedu herb treating group. Using the method of light microscope (LM) and electron microscope (EM) to observe the morphology. Result To be compared with the control group, the experimental group has following characteristics: the tumor ball and the cell volum are smaller, the atypia is not evident, and the pathological karyokinesis and interstitial blood vessel are fewer. It has necrosis. Through the observation of EM, we found the formation of apoptotic body. Conclusion Yiqihuoxuejiedu herb has the function of anti-lung cancer which mechanism maybe induce the tumor cell apoptosis of the Lewis lung cancer

1912- gera: 137208/di/ra

[ANALYSIS ON THE PROGNOSTIC FACTORS IN PATIENTS WITH LARGE HEPATOCARCINOMA TREATED BY SHENTAO RUANGAN PILL AND HYDROXYCAMPTOTHECINE "]. LIN LI-ZHU, ZHOU DAI-HAN, LIU KUN, ET AL. chinese journal of integrated traditional and western medicine. 2005;25(1):8 (chi*). Objective To observe the effect of intervention therapy with Shentao Ruangan pill (SRP) and hydroxycamptothecine (HCPT) in treating 85 patients with middle-advanced large hepatocarcinoma, and to analyze the factors that could affect the prognosis. Methods Eighty-five patients were randomly divided into the treated group (n = 52) and the control group (n = 33) . The treated group was treated by oral taking of SRP combined with local perfusion of HCPT through hepatic artery catheterization, while to the control group, the convention-al therapy, transcatheter arterial chemoembolization (TACE) was conducted for control. The clinical efficacy of treatment in the two groups was evaluated by the change of tumor size, the factors related with prognosis were analyzed using Cox proportional hazards model and the analysis of survival conducted by Kaplan-Meier method. Results (1) The tumor size reducing rate in the treated group was 19.2% and the tumor size stabilizing rate was 82.7%, while those in the control group was 21,2% and 81.8% respectively, comparison of the criteria between the two groups showed insignificant difference (P > 0.05); (2) The median survival time, 0.5 - year, 1 – year and 2 – year survival rate in the treated group was 326 days, 80.95%, 41.39% and 12.42% respectively, those in the control group was 262 days, 64.29%, 25.00% and 8.33% respectively, comparison between the two groups showed significant difference (P <0.05); (3) Among the 3 TCM types in patients, the survival time and rates in patients of Gan-excess with Pi-deficiency type was similar to those in patients of Ganheat with blood stasis type showing insignificant difference (P >0.05), but as compared with those in patients of Gan-Shen Yin-deficiency type, the difference was significant (P<0.05); (4) Beneficial factor to the prognosis were therapeutic method, that used in the treated group was superior to that used in the control group. The risk factors to the prognosis were TCM type, clinical stage and liver function. Patients of Gan-ex cess with Pi-deficiency type had the optimal prognosis, those of Gan-heat with blood stasis type the next and c Gan-Shen Yindeficiency the worst. The later the clinical stage and the worse the Child-Pugh grade of live function was, the worse the prognosis would be. Conclusion (1) SRP combined with HCPT

intervention treatment is superior to the simple TACE treatment in elevating patients' survival rate and time; (2) There are some relations between TCM types and prognosis; (3) Local Chinese drug therapy combined with systemic therapy could be one of the effective measures of non-operational therapy in treating large hepatocarcinoma.

1913- gera: 137209/di/ra

[RELATIONSHIP BETWEEN SCD44V6 EXPRESSION AND TCM DEFFERENFIATION TYPE OF GASTRIC CARCINOMA PATIENTS AND INFLUENCE OF WEITAI CAPSULE ON THE EXPRESSION*]. CHEN XI, OUYANG XUE-NONG, DAI XI-HU, ET AL. chinese journal of integrated traditional and western medicine. 2005;25(1):12 (chi*).

Objective To explore the relationship of TCM type with serum level of soluble CD44v6 (sCD44v6) and different histologic parameters in gastric carcinoma patients and to observe the influence of Weitai capsule (WTC) on the sCD44v6 expression. Methods TCM typing and sCD44v6 expression were determined in all the enrolled patients (30 in the control and 32 in the trial group) before operation, and 3-4 courses of chemotherapy was applied to them from 3-4 weeks after operation. To the patients of trial group, oral administration of WTC was given additionally with 4 capsules. 3 times a day for consecutive 3 months. Results The serum level of sCD44v6 was significantly positive correlated with the degree of cancer cell differentiation, infiltration and lymph node metastasis; (2) Level of sCD44v6 was the highest in patients of blood stasis type, as compared with that in the patients of Pi-deficiency type or of damp-heat type, the difference was significant; (3) After ending treatment, level of sCD44v6 in the trial group was significantly lower than that in the control group. Conclusion (1) Serum level of sCD44v6 could be taken as the criterion for evaluating the development and prognosis of gastric cancer, as well as the therapeutic target for anti-metastasis treatment; (2) Serum level of sCD44v6 is related to some extent with TCM type of blood stasis and Pi-deficiency; (3) WTC combined with chemotherapy could further inhibit the expression of serum sCD44v6 in gastric carcinoma patients.

1914- gera: 137223/di/ra

[EXPERIMENTAL STUDY ON EFFECT OF CHEMOTHERAPY COMBINED GINSENGNOSIDE RG3 IN TREATING PULMONARY CARCINOMA]. YI CHENG, HUANG XIAO-BING, HOU MEI, ET AL. chinese journal of integrated traditional and western medicine. 2005;25(1):58 (chi).

1915- gera: 137237/di/ra

[OBSERVATION ON THERAPEUTIC EFFECT OF JIANPI HUOXUE HERBS COMBINED WITH CHEMOTHERAPY IN TREATING POST-OPERATIONAL COLONIC CANCER PATIENTS *]. LIU JING, WANG WEI-PING, ZHOU YI-YANG, ET AL. chinese journal of integrated traditional and western medicine. 2005;25(3):207 (chi*).

Objective To observe and compare the therapeutic effect of Jianpi Huoxue herbs (JPHXH) combined with chemotherapy (CT) in treating post-operational colonic cancer patients with Pi deficiency Syndrome (PDS). Methods Adopting randomized control trial method, 64 patients were divided into two groups. The treated group (n = 43) received JPHXH plus CT and the control group (n = 21) received CT alone. A treatment course of 3 months was applied to both groups. Therapeutic effect, changes of PDS and incidence of adverse reaction in the two groups were observed. Results The tumor remission rate in the treated group and the control group was 39.5 % and 33.3% respectively. The effective rate on PDS in the treated group and the control group was 72.1% and 19.0%, respectively, showing significant difference (P< 0.01) . The incidence of adverse reaction was lower in the treated group than that in the control group (P <0.05) . Conclusion JPHXH is effective in treating post-operational colonic cancer patients with PDS and relieving the adverse reaction of chemotherapy to certain extent.

1916- gera: 137240/di/ra

[CLINICAL STUDY ON AITONGPING CAPSULE IN TREATING CANCEROUS PAIN *]. WU MIAN-HUA, ZHOU XUE-PING, CHENG HAI-BO, ET AL. chinese journal of

integrated traditional and western medicine.

2005;25(3):218 (chi*).

Objective To explore the therapeutic effect and mechanism of Aitongping capsule (ATP) in treating cancerous pain. Methods Sixty cancer patients were randomly divided into two groups, 30 patients in the treated group took ATP and 30 patients in the control group took diclofenac, 1 week of treatment was applied. The relevant clinical conditions of cancerous pain, the content of plasma (B-endorphin (B-EP) and c-AMP hemorheological index, improvement of life quality of patients, occurrence rate of adverse reaction were observed before and after treatment. Results The total effective rate in the treated group and in the control group was 90.0 % and 83.3%, respectively, difference between them showed no significance. However, there were significant difference between the two groups in such aspects as the degree of pain relieving, the decrease of pain episodes, the shortening persistent time of pain and the initiation time of analgesic action and prolonged analgesic duration, the decrease of tenderness and percussion pain, the increase of plasma B-EP content and the decrease of cAMP (P< 0.05 or P < 0.01). The evidences also showed that it was better in improving quality of life, ameliorating hemorheologic indexes and reducing incidence of adverse reaction in the treated group than in the control group (P<0.05 or P<0.01). Conclusion ATP has affirmative effect on cancerous pain, its analgesic effect may be associated with the increasing of plasma (B-EP content, decreasing of cAMP level and ameliorating of hemorheologic indexes.

1917- gera: 137246/di/ra

[STUDY ON INHIBITORY EFFECT OF MATRINE ON CYCLOOXYGENASE-2 EXPRESSION IN COLON CANCER HT-29 CELL LINE *]. HUANG JIAN, ZHANG MING-JIE AND QIU FU-MING. chinese journal of integrated traditional and western medicine. 2005;25(3):240 (chi*).

Objective To explore the effect of matrine on cyclooxygenase-2 (COX-2) expression in colon cancer HT-29 cell line at the level of gene and protein. Methods Levels of mRNA and protein expression of COX-2, and its synthesized product prostaglandin E2 (PGE2) of colon cancer HT-29 cell line were detected by RT-PCR, Western-blot, ELISA respectively before and after treatment of matrine in different concentrations. Results - Matrine had inhibitory effect on the mRNA and protein expression of COX-2, and synthesis of PGE2 in colon cancer HT-29 cell line, but had no effect on COX- 1. When HT-29 cell line was treated with 2.0 mg/ml of ma-trine, the inhibitory rate on COX-2 mRNA expression were 100% at 6 hrs and 9 hrs after treatment; the inhibitory rate on PGE2 synthesis was 63 .8% at 9 hrs after treatment; and that on COX- 2 protein expression was 48% and 100% 12 hrs and 24 hrs after treatment, respectively. Conclusion Matrine has selective inhibitory effect on gene transcription, protein expression and functional activity of COX-2 in HT-29 cell line, which is time-dependent and concentration-dependent within certain range of concentration and acting time.

1918- gera: 137254/di/ra

[STUDY ON PROTECTIVE EFFECT OF SHENMAI INJECTION ON HEMATOPOIESIS OF BONE MARROW IN ACUTE LEUKEMIA PATIENTS WITH CHEMOTHERAPY]. WANG JIAN-YING AND ZHONG XUE-MEI . chinese journal of integrated traditional and western medicine. 2005;25(3):266 (chi).

1919- gera: 137458/di/ra

[CLINICAL OBSERVATION ON INTERVENTIONAL CHEMOTHERAPY WITH HYDROCAMPTOTHECINE BEFORE OPERATION FOR ADVANCED GASTRIC CARCINOMA]. PANG DEXIANG, ZHU FAPING, LIAN JIANWEI, ET AL. chinese journal of surgery of integrated traditional chinese and western medicine. 2005;11(1):30 (chi*).

1920- gera: 137462/di/ra

[TREATMENT OF MELANOMA BY DENDRIFIC CELLS COMBINED WITH B-ELEMENT]. TAN GUANG, YU ZHIHONG, GONG PENG, ET AL. chinese journal of surgery of integrated traditional chinese and western medicine. 2005;11(1):59 (chi*).

1921- gera: 137515/di/ra

[RELATIONSHIP OF MATRIX METALLOPROTEINASE 2 EXPRESSION, VASCULAR ENDOTHELIAL GROWTH **FACTOR (VEGF) EXPRESSION AND MICROVESSEL** DENSITY (MVD) IN OSTEOSARCOMA]. WANG JIANG 'CHEN ANMIN, GUO FENGJIN, ET AL. chinese journal of traditional medicine traumatology and orthopedics. 2005;13(1):19 (chi*).

Objective: To determine the relationship of the expression of matrix metalloproteinase—2 ,vascular endothelial growth factor, and microvessel density in osteosarcoma. Methods: Immunohistchemistry staining (labeled streptavidin method and indirect method) was used to detect MMP-2, VEGF and CD34 in 96 cases of osteosarcoma. The results of VEGF and MMP-2 were semi-quantitated. According to expression of CD34, the MV were reflected indirectly. Results:The positive rate of VEGF in high MVD group was significantly higher than that in low MVD group. There was no significant difference of 2 between osteosarcoma and negative control and was the same result between osteosarcoma with lung metastasis and without lung metastasis, or between primary and recurrent osteosarcoma. There was significant correlation in osteosarcoma VEGF and MVD which had no significant correlation with MMP-2. Conclusions: The expression of MMP—2 in osteosarcoma was unable to predict the prognosis of osteosarcoma. VEGF expression and MVD were a useful prognostic indicator of osteosarcoma.

1922- gera: 137556/di/ra

JEFFECT OF QIZHU ORAL LIQUID ON RADIATION INJURY IN MICE]. HE ZHONG-PING GONG BIN-RONG FANG YUAN-SHU ET AL. chinese traditional patent medicine. 2005;27(1):64 (chi*).

1923- gera: 137640/di/ra

[68 CASES OF SYNDROME OF MAMMARY CANCER TAM TREATED WITH ADDITIONAL LIU WEI DI HUANG TANG]. GAO SHAORONG, XIA HAIPING, ZHANG HUA ET AL. forum on tcm. 2005;20(2):24 (chi).

1924- gera: 137680/di/ra

ITHE OBSERVATION OF THE CURATIVE EFFECT OF 46 CASES OF NAUSEA AND VOMIT AFTER CHEMOTHERAPY TREATED BY COMBINATION OF CHINESE TRADITIONAL AND WESTERN MEDICINE]. CHEN QING—HUA. gansu journal of tcm. 2005;18(1):33 (chi).

1925- gera: 137749/di/ra

JOBSERVATION OF THE SHORT-TERM CURATIVE EFFECTS ON INTERMEDIATE OR LATE LIVER CANCER TREATED WITH CRYOCARE TM AR-HE KNIFE CHINESE HERBS AND CHEMOTHERAPY]. BAI CUANGDE, LIAN ZIQING, LIANG JIAN, ET AL. guanxi journal of tcm. 2005;28(1):16 (chi).

1926- gera: 137784/di/ra

[PROGRESS IN THE TREATMENT OF SPLEEN-TUMMY DISORDER WITH BANXIAXIEXIN DECOCTION]. MO LI. guiding journal of tcm. 2005;11(3):67 (chi*).

This article summarized the progress in the treatment of spleen — tummy disorder with Banxiaxiexin decoction from two aspects, one was experimental research, and the other was clinical research. Furthermore, the author considered the reasons, which banxiaxiexin decoction wasn't fit for expanding, were it had been added or reduced in clinical research. But it still played a very important role in preventing and treating the cancer of digestive system and releasing the bad reaction in treating malignancy. So we should study it deeply.

1927- gera: 137901/di/ra

IPROGRESS OF EXPERIMENTAL STUDY ON ANTINEOPLASTIC CHINESE DRUGS]. QIN SHANWEN, ZHENG YULING. henan tcm. 2005;25(2):76 (chi).

1928- gera: 137938/di/ra

[STUDY OF PATHOLOGY ON PRECANCEROUS LESION OF RAT'S CHRONIC ATROPHIC GASTRITIS TREATED BY ZUOJIN PILL MODIFIED]. SUN LIQUN, ET AL. hubei journal of tcm. 2005;27(3):11 (chi).

1929- gera: 138025/di/ra [CLINICAL RESEARCH ON TREATMENT OF 25 CASES OF CANCEROUS PAIN WITH PAIN RELIEVING CAPSULE OF CHINESE MEDICINE]. CHEN GAOYANG, LIU YANQING, GAO PENG, ET AL. jiangsu journal of tcm. 2005;26(1):16

1930- gera: 138026/di/ra
[CLINICAL RESEARCH ON TREATMENT OF 55 CASES OF LARGE INTESTINE CARCINOMA DURING MIDDLE AND LATE STAGES WITH CHANGFUKANG CAPSULE]. YANG YAN, LIU BIQING, DU QIUXIA. jiangsu journal of tcm. 2005;26(1):18 (chi).

1931- gera: 138132/di/ra
[CLINIC OBSERVATION ON TREATMENT OF LATE STOMACH CANCER BY COMBINATION OF CHEMOTHERAPY AND FUZHENGYIAITANG]. YANG JING. jilin journal of tcm. 2005;25(1):17 (chi).

1932- gera: 138428/di/ra

THE CLINICAL STUDY ON THE PREVENTION AND TREATMENT OF SHENQIFUZHENG INJECTION FOR THE POSTOPERATIVE SYNDROME OF PRIMARY LIVER CANCER INTERVENTION, AND THE INFLUENCE ON THE LIVER RESERVE FUNCTION]. DI LING, , ET AL. journal of emergency in tcm. 2005;14(3):215 (chi).

1933- gera: 138468/di/ra

ITHE INFLUENCE OF FRUCTUS SCHISANDRAE POLYSACCHARIDE ON BLOOD SOD AND MDA OF TUMOR-BEARING MICE]. HUANG LING, CHEN HUA, ZHANG HE-MING. journal of fujian college of tcm. 2005;15(1):28 (chi*).

Researching on the effect of delayed immunosenescence with therapeutic method of tonifying kidney in theory as well as empirical study. It is thought method of tonifying kidney could prolong life by delaying immunosenescence.

1934- gera: 138616/di/ra

IDEVELOPMENT OF STUDIES ON PREVENTING AND CURING PRIMARY CARCINOMA OF LIVER WITH TCM]. WANG XINJIE, GUO YONGYI. journal of henan university of chinese medicine. 2005;20(1):84 (chi*).

Summing up achievements in preventing and curing primary carcinoma of liver from the viewpoints of experimental studies and clinical application, this paper argues that it is markedly effective in treating the disease by promoting blood circulation to remove blood stasis, clearing away heat and toxic material, reinforcing spleen and regulating qi and nourishing yin and blood. It is predicated that treatments with intervention Chinese drugs will be the focus of studies. The paper also points out the problems in present studies and puts forward the solutions to them

1935- gera: 138670/di/ra

[SOME PROBLEMS SHOULD BE CONCERNED IN TREATING LIVER CANCER BY TCM]. XU ZHONG-WEN . journal of liaoning college of tcm. 2005;7(1):41 (chi).

1936- gera: 138721/di/ra

[EXPERIMENTAL STUDY ON TUMOR -INHIBITING EFFECT OF MELETIN AND ALABASTRA SOPHORAE JAPONICAE ON LEWIS LUNG CANCER OF MICE]. JIN NIAN-ZU, MAO LI , ZHU YAN-PING , ET AL. journal of nanjing university of tcm. 2005;21(2):108 (chi).

1937- gera: 138814/di/ra

[EXPERIMENTAL STUDY OF POLYPEPTIDE EXTRACT FROM SCORPION VENOM ON S1 SARCOMA AND H22 HEPATOMA IN MICE]. ZHANG WEI-DONG, CUI YA-ZHOU, JIA QING, ET AL. journal of shandong university of tcm. 2005;29(2):152 (chi*).

Objective: the study was designed to evaluate the antiangiogenic activity and anti-tumor activity in vivo of PESV, a peptide extract from scorpion venom. Methods: PESV was isolated by Sephadex G50 gel filtration with Sepharose FF ion-

exchange chromatography. Chicken embryo chorioallantoic membrane (CAM) assay was used to determine the effect of PESV on neovascularization in vivo. The mice with S180 sarcoma or H,2 hepatoma were injected with PESV at 3 mg/kg, angiogenesis in vivo and tumor growth were observed. Results: PESV demonstrated suppression of neovascularization in the CAM assay. In vivo, systemic administration of PESV suppressed tumor growth of implanted S180 sarcoma or H22 hepatoma in mice. Immunohistochemical examination showed a significant decrease in the number of blood vessel and reduced expression of VEGF and bFGF by PESV. Conclusions: PESV is of potent anti- angiogenic activity in vivo. PESV could be regarded as a candidate for tumor angiogenesis inhibitor (TAI) and a potent chemotherapeutic agent of malignant tumors, and its component should be further analyzed.

1938- gera: 138950/di/ra

[CLINICAL OBSERVATION ON JIANPI LIQI RECIPE FOR TREATMENT OF 25 CASES OF DISTAL METASTASIS OF LIVER CANCER]. LIN JUNHUA, GUO WEIJIAN. journal of tcm. 2005;46(1):26 (chi*).

Objective: To observe interfering action of Chinese drugs for strengthening spleen and regulating Qi on promoting metastasis of transcatheter arterial chemoemboization (TACE) of liver cancer. Methods:50 cases of primary cancer of liver were randomly divided into TACE group and TACE plus Jianpi Liqi Recipe group, and serum vascular endothelial growth factor (VEGF) level before and after TACE was determined and the survival rate and the distal metastasis rate were observed. Results: There was no significant differences before and after TACE, and between the two groups (P>0.05). The survival rates of 1 and 2 years were 76% and 40% in TACE group, and 72% and 64% in TACE plus Jianpi Liqi Recipe group, respectively. There was a significant difference between the two groups in the survival rate of 2 years (P<0.01). The distal metastasis rates of 1 and 2 years were 28%,52%, and 8% '24% in the two groups with a significant difference in the distal metastasis of 2 years between the two groups (P < 0. 05). Conclusion: The drug for strengthening spleen and regulating Qi has a certain blocking action on TACE promoting metastasis of liver cancer, but TACE does not obviously inhibit depression of VEGF within a sort term.

1939- gera: 138956/di/ra

[RELATION OF TCM SYNDROME TYPES OF THE PATIENT OF LIVER CANCER WITH SENSITIVITY OF LIVER CANCER CELLS TO CHEMOTHERAPEUTIC DRUGS IN VITRO]. HUANGFU CHAOSHEN, LIU BIN, LI LUJUAN, ET A L. journal of tcm. 2005;46(1):50 (chi*).

Objective: To observe sensitivity of liver cancer cells of the patient of liver cancer with different TCM syndromes to chemotherapeutic drugs in vitro. Methods:60 specimens from removed liver cancer were taken and the sensitivity of the hepatic cells from patients of live cancer with different TCM syndromes to 6 commonly-used chemotherapeutic drugs in vitro were determined by MTT method. Results: The sensitivity to the drugs in the deficiency of the spleen Qi-deficiency group, the liver-Qi stagnation group and the group of obstruction of blood stasis in collaterals had the tendency to gradually decrease with no statistically significant difference; the sensitivity to various drugs in the groups of stasis of blood in the liver, deficiency of the spleen and obstruction in collateral decreased significantly. Conclusion:The patients of liver cancer with different TCM syndromes have a certain difference in the sensitivity to chemotherapeutic drugs, so treatment of liver cancer should be based on the patients' sensitivity to therapeutic drugs and TCM syndromes.

1940- gera: 138957/di/ra

[EFFECT OF CHANGFUKANG ON APOPTOSIS OF HUMAN LARGE INTESTINAL CANCER HT-29 CELLS]. XIONG SHAOQUAN, JU GUOSHENG, WANG BODING, ET AL. journal of tcm. 2005;46(1):52 (chi*).

Objective:To investigate the effect of Chinese compound drug Changfukang on apoptosis of human large intestinal cancer cells and to explore its mechanism. Methods:Nude mouse model of transplanting tumor of human large intestinal cancer HT-29 was established. The low,medium and high dose

groups of Changfukang, the blank control group and 5-FU plus CF group were set up. Eight weeks after medication, all mice were killed and the tumor weights were measured, the apoptotic indexes were tested with terminal deoxynucleotidy transferase-mediated dUTP nick end labeling, the tumor bodies were respectively stained by Caspase-3,Bax and Bcl-2 immunohistochemistry and their expressions were quantitatively measured and compared by an image analysis system. Results: The tumor weight in each Changfukang group was lower than that in the blank control group, but the apoptotic index was higher than that in the blank and 5-FU plus CF groups. The apoptotic index of the high dose group was significantly higher than that in the blank group and the 5-FU plus CF group (P<O. 01). The expression of Caspase-3 and the ratio of- Bax and Bcl-2 expression (Bax/Bcl-2) in each Changfukang group was higher than that in the blank group. Conclusion: Changfukang has the function of inducing apoptosis of nude mouse transplantation tumor of human large intestinal cancer HT-29, and the mechanism is possibly related to Changfukang enhancing expression of Caspase-3 and amplifying the ratio of Bax and Bcl-2 expression in transplanted tumor cells.

1941- gera: 138983/di/ra

[EFFECTS OF SHENKUI DECOCTION ON PROLIFERATION OF OVARIAN CANCER FRESH PARENCHYMATOUS TUMOR CELLS AND OVARIAN CANCER CELL LINE TYKNU CELLS]. ZHANG JUN, CHENG JIANXIN, SHAN BAOEN, ET AL. journal of tcm. 2005;46(3):219 (chi*).

Objective: To observe effects of Shenkui Decoction on proliferation of ovarian cancer cell. Methods: The Shenkui Decoction-containing rat serum was prepared by using TCM serum pharmacological method, and effects of the drugcontaining serum on proliferation of ovarian cancer fresh parenchymatous tumor cells were investigated with 3H incorporation method, and effects of the drug-containing serum on proliferation of ovarian cancer cell line Tyk-nu cells were investigated by flow cytometry, cellular activity assay, cellular growth curve assay and cell colony formation rate assay Results: The drug-containing serum could inhibit proliferation of both fresh parenckymatous tumor cells and ovarian cancer cell line Tyk-nu cells, and the inhibitory rate raised with the increase of drug-containing serum content. Conclusion: The Shenkui Decoction-containing rat serum can inhibit proliferation of ovarian cancer fresh parenchymatous tumor cells and ovarian cancer cell line Tyk-nu cells.

1942- gera: 139168/di/ra

[EXPERIMENTAL RESEARCH OF HYDROCHLORIC ACID BERBERINE ON INHIBITING HUMAN GASTRIC CANCER CELL AND APOPTOSIS INDUCTION]. YAO BAOTAI, WANG BO, WU MIN. journal of zhejiang college of tcm. 2005;29(1):50 (chi).

1943- gera: 139169/di/ra

[ANALGESIC ACTION OF WRISTANKLE ACUPUNCTURE ON THE PAIN OF MEDIATE AND SEVERE LIVER CANCER.]. ZHOU QINGHUI, HU XIA, CU WEI, ET AL journal of zhejiang college of tcm. 2005;29(1):53 (chi*). Objective: To assess the analgesic efficacy of wrist-ankle acupuncture (WAA) in relieving moderate and severe pain of patients with primary liver cancer, and to observe its analgesic characteristics and side effects. Methods: Ninety-four patients with primary liver cancer were observed. Forty patients with moderate cancer pain were divided into 2 groups, including WAA-treated group and codine-treated group, with 20 patients in each group. Fifty-four patients with severe cancer pain were divided into 3 groups,including 16 patients treated with WAA, 20 patients treated with MS contin, and 18 patients treated with WAA and MS contin. Results: The pain relief rates of the two moderate pain groups (WAA- treated and contin treated) were 85.0 % and 65.0% respectively. The pain relief rates of the three severe pain groups (WAA-treated, MS contintreated, WAA and MS contin-treated) were 63. 0% 85. 0% and 83. 3% respectively. WAA had shorter start time and longer effective period than the drug therapy, and had no statistic difference in optimal relief time as compared with the drug therapy. Conclusion: The present study confirms the analgesic efficacy of WAA therapy for cancer pain caused by

heptocarcinoma, especially for the moderate pain.

1944- gera: 139177/di/ra

[TREAT LIVER CANCER FROM DEFICIENCY]. WU YITING. journal of zhejiang college of tcm. 2005;29(2):3 (chi*). The experience of treating liver cancer from deficiency is expounded from light and heavy diseases, as well as organ types according to the pathogenesis, the relation between local lesion and the wholeness, and the individual differences of the liver cancer. It puts forward that to treat liver cancer should pay attention to TCM features, abide by the whole concept and the differentiation of symptoms and signs. Meanwhile, under the characteristics of cancer, warmtonification,can, not warm-tonification,can be applied for treatment; "to tonify deficiency without forgetting excess,to purge excess while remembering the deficiency"means we should a-void only removing the pathogen, and harming the vital qi, causing the pathogenic factors linger and crisis.

1945- gera: 139191/di/ra

[RESEARCH REVIEW ON THE BRAIN TUMOR TREATED WITH TCM]. ZHOU YAN, GU JING JIN GUOLIANG. journal of zhejiang college of tcm. 2005;29(2):86 (chi).

1946- gera: 139192/di/ra

[MODEM RESEARCH REVIEW ON THE MECHANISM OF TREATING STOMACH CANCER WITH TCM]. SHEN LI, ZHANG GUANGJI. journal of zhejiang college of tcm. 2005;29(2):88 (chi).

1947- gera: 139501/di/ra

[RELATIONSHIP STUDY BETWEEN P2LRAS EXPRESSION AND OXYGEN-DERIVED FREE RADICALS IN GASTRIC CARCINOMA TISSUE]. SUN MAN-YI. modern journal of integrated traditional chinese and western medicine. 2005;14(1):16 (chi*).

Objective It is to discuss the relationship between p2lras expression and oxygen-derived free radicals in gastric carcinoma. Methods 30 patients with gastric carcinoma and 30 patients with chronic superficial gastritis were chosen. The p2lras expression and lipid peroxide (LPO) content in tissue were mensurated with immunohistochemical and thiobarbituric acid colorimetric method. Results The p2lras expression and LPO content in gastric carcinoma patients were obviously higher than that in chronic superficial gastritis (P <0.05) . The LPO content in gastric carcinoma patients with positive p2lras expression was higher than that in negative p2lras expression patients (P < 0.05) . Conclusion The p2lras and oxygen-derived free radicals are correlated with the occurrence of gastric carcinoma. The p2lras is correlated with oxygen-derived free radicals in gastric carcinoma tissue. There may be interaction between the two factors in attacking course of gastric carcinoma.

1948- gera: 139506/di/ra

JANALYSIS OF 62 PATIENTS WITH PANCREATIC MALIGNANT TUMOR]. GAO QING-ZE, LI YING-QIAN, ZHAO XIAO-DONG, ET AL. modern journal of integrated traditional chinese and western medicine. 2005;14(1):27

1949- gera: 139527/di/ra

[RELATIONSHIP BETWEEN PAINS IN BONE METASTATIC CARCINOMA RELEASED WITH 89SR AND SYNDROME DIFFERENCE OF TRADITIONAL CHINESE MEDICINE]. ZHOU HAI-ZHONG, CHENG HONG-XIA, LIU YUN, ET AL. modern journal of integrated traditional chinese and western medicine. 2005;14(3):301 (chi*).

Objective It is to observe the curative effect of 89Sr on pain in bone metastatic carcinoma with the angle of syndrome difference of traditional Chinese medicine. Methods 58 patients were divided into three groups. Group A was consisted of 10 patients with stagnation caused by noxious heat. Group B was consisted of 8 patients with fire stagnation due to kidney deficiency. Group C was consisted of 40 patients with stagnation due to Yin cold. The administered amount of 89Sr was 148 MBq in all patients. Results The pain-relieving effective rate was respectively 10%, 12% and 97% in the three groups. The life quality improving effective rate was

respectively 0, 12% and 97% in the three groups. The curative effect of group C was obviously higher than that in group A and B (P < 0.01) . Conclusion Syndrome difference of traditional Chinese medicine can be valuable in forecasting the curative effect of 89Sr.

1950- gera: 139539/di/ra

ISTUDY ON THE ATTENUATION OF BESTATIN FOR NONSMALL-CELL LUNG CANCER CHEMOTHERAPY]. ZHENG WAN-ZHEN, DING JI-YUAN. modern journal of integrated traditional chinese and western medicine. 2005;14(4):437 (chi*).

1951- gera: 139599/di/ra [A CLINICAL STUDY OF JIAWEI GUILU ERXIAN DAN FOR **BONE MARROW INHIBITION IN MAMMARY CANCER** AFTER CHEMOTHERAPY]. HONG SONG -ZHEN, LIN YI, SITU HONG -LIN, ET AL. new journal of tcm. 2005;37(1):32 (chi).

1952- gera: 139605/di/ra [THE INFLUENCE OF WEIKANGNING ON VASCULAR **ENDOTHELIAL GROWTH FACTOR AND ITS RECEPTOR** EXPRESSION IN GASTRIC CANCER CELL]. MIN CUN -YUN, LI QING -MING, LIU HE -QIANG. new journal of tcm. 2005;37(1):93 (chi).

1953- gera: 139615/di/ra [TREATMENT OF MEDIUM AND LATE STAGES OF NON -PARVICELLULAR LUNG CANCER BY TCM COMBINED WITH WESTERN MEDICINE: A CLINICAL OBSERVATION OF 30 CASES]. WANG YUN -QI, HE YONG -HENG. new journal of tcm. 2005;37(2):65 (chi).

1954- gera: 139621/di/ra

[TREATMENT OF III STAGE LIVER CANCER BY FUZHENG JIEDU CAPSULE: A CLINICAL OBSERVATION OF 25 CASES]. CHEN MENG -XI, ZHANG HONG, HE YING -HONG, ET AL. new journal of tcm. 2005;37(3):25 (chi*). ObjeCtive: To observe the curative effect of Fuzheng Jiedu Capsule (FJC) for III stage liver cancer (LC). Methods: 50 cases of III stage LC were allocated to 2 groups randomly. The treatment group (25 cases) was treated by FJC (composed of Radix Astragali, Rhizoma Atractylodis Macrocephalae, Caulis et Folium Clerodendri Bungei, Rhizoma Paridis, Alumen and Radix Glycyrrhizae), the control group (25 cases) by Dahuang Zhechong Wan. The changes of tumor volume and the life quality and the improvement of clinical symptoms of both groups were observed before and after treatment. Results: The stable rate of tumor volume in clinical treatment group was 60%, and 52% in control group (P > 0.05). The increase stable rate of life quality and the effective rate on the improvement of clinical symptoms was 72% and 80% in treatment group and 56% and 52% in control group respectively(P < O. 05). Conclusion: The FJC possesses a definite curative effect for III stage LC.

1955- gera: 139744/di/ra

EFFETTI DELLA MOXIBUSTIONE SU SHENQUE (CV8) SUL LIVELLO DELL' IL-12 NEL SIERO E SULLE ATTIVITA DELLA CELLULA NK IN TOPI CON TUMORE IMPIANTATO. QIU XINGSHENG ED ALTRI. rivista italiana di medicina tradizionale cinese. 2005;99(1):62 (ita*).

The study was to investigate the effect of moxibustion on the serum IL-2, IL-12 levels and NK cell and ascitic tumor cell activities in H-22 mice with tumor and its mechanisms. The method used in the study was that the IL-2 and IL-12 levels were determined by the double antibody method with ELISA, and the NK cell activities by the MTT measure. The results showed that moxibustion elevated the serum IL-2 and IL-12 levels and the NK cell activities of the mice with tumor, and the elevations were of significance as compared with the controls (P<0.05). It is concluded that moxibustion can inhibit the growth of tumor, which is related to the increase of the serum IL-2 and IL-12 levels and the strengthening of NK cell

1956- gera: 139777/di/ra

[A LABORATORY RESEARCH ON THE ANTI TUMOR

EFFECT OF CHINESE DRUGS IN S 180 TUMOR BEARING MICE]. ZHANG HONGFANG, MA JULI, GUO LANSHENG, ET AL. shaanxi journal of tcm. 2005;26(1):85 (chi).

1957- gera: 139806/di/ra

IDEVELOPMENT IN THE RESEARCH OF APOPTOSIS AND RELATED GENE EXPRESSION IN STOMACH **CANCERAND PRE CANCEROUS CHANGES]. YANG** GUOLIANG, HE SHANMING. shaanxi journal of tcm. 2005;26(3):282 (chi).

1958- gera: 139822/di/ra

ITREATMENT OF 33 CASES OF BONE METASTASIS CANCER WITH ZHITONG PLASTER AND RADIOTHERAPY]. HE JIN-GUANG . shandong journal of tcm. 2005;24(1):20 (chi).

1959- gera: 139864/di/ra

[OBSERVATIONS ON AURICULAR PLASTER THERAPY FOR REDUCING ZOFRAN DOSAGE IN PATIENTS RECEIVING CHEMOTHERAPY]. BI HD. shanghai journal of acupuncture and moxibustion. 2005;24(1):17 (chi*). Objective To investigate the influence of otopoint stimulation on Zofran dosage in 50 cases of digestive tract tumors receiving chemotherapy. Methods The patients were randomly divided into two groups. A control group received routine chemotherapy following intravenous injection of Zofran 8 mg/d (basic dose). During chemotherapy the patients used an auto-control injecting pump for the antiemetic, 4mg one injection with an interval of 2 hours, the largest dosage 40mg/d. An auricular plaster group received the same medicine as the control group with auricular plaster therapy added one day before and until the end of chemotherapy. Results Zofran dosage used was smaller in the auricular plaster group than in the control group. There was a significant difference. Conclusion Auricular plaster therapy is helpful for reducing Zofran dosage in patients receiving chemotherapy.

1960- gera: 139888/di/ra

[INFLUENCE OF COMBINED ACUPUNCTURE AND MEDICINE ANESTHESIA ON IMMUNITY-REGULATING **ACTIVITY OF 'Y- INTERFERON IN LUNG CANCER** PATIENTS UNDERGOING OPERATION]. SHI LL, ZHOU H, TONG WP, ET AL. shanghai journal of acupuncture and moxibustion. 2005;24(3):18 (chi*).

Objective To investigate the influence of acupuncture on yinterferon(INF-y) activity in lung cancer patients undergoing operation. Methods Double antibody enzyme labeled immunesandwich-assay(ELISA) was used to determine serum 'yinterferon content in lung cancer patients. INF-y content was ,for comparison, determined before,! day and 8 days after operation, separately in a acupuncture-medicine anesthesia group and a general anesthesia group ,25 cases each. Results There was no significant difference in serum y-interferon content between the two groups before and 1 dan after operation(P > 0.05); there was 8 days after (P < 0.01). The effect was better in the acupuncture-medicine anesthesia group than in the general anesthesia group. Conclusion Acupuncture can in-crease serum ,y-interferon content and regulate immunological function in lung cancer patients undergoing operation.

1961- gera: 139892/di/ra

[EFFECTS OF POINT INJECTION OF ASTRAGALUS AND MOXIBUSTION WITH HERBAL CAKE ON IMMUNOLOGICAL FUNCTION IN TUMOR MICE]. YUAN M, CHEN XH, JI YB. shanghai journal of acupuncture and moxibustion. 2005;24(3):40 (chi*).

Objective To investigate the effect of acupuncture and moxibustion on immunological function. Methods Thirty-five tumor mice as experimental models, made by transplantation of C26 mouse colonic cancer cell strain, were randomly divided into 5 groups; normal solution control, 5-FU, astragalus point injection, herbal cake moxibustion and herbal cake moxibustion plus astragalus point injection groups. Each groups was treated from the second day after cancer cell transplantation. The mice' separate spleen cells were taken at the end of treatment. Splenic T-lymphocyte subgroup, natural killer cell (NK). and CM killing function were measured by flow

cytometry. Results CD3, CD4, CD4/CD8, NK cells and CTL killing activity were significantly higher in the herbal cake moxibustion, astragalus point injection and herbal cake moxibustion plus astragalus point injection groups than in the 5-FU group (P < 0.01). Conclusion Moxibustion with herbal cake and point injection of astragalus have a positive regulating effect on immunological function in tumor mice with poor immunity due to simple 5-FU treatment.

1962- gera: 139918/di/ra

[CONSIDERATIONS ON TREATMENT OF POSTOPERATIVE MAMMARY CARCINOMA]. TANG HAN-JUN. shanghai journal of tcm. 2005;39(1):3 (chi*). In ancient times, careful attention was paid to syndrome differentiation for mammary cancer; nowadays, the attention should be paid to syndrome differentiation for postoperative mammary carcinoma. Postoperative mammary carcinoma is of excess-deficiency complex, deficiency in whole and excess in local. Supporting healthy aspects and eliminating pathogens are the major method; supporting healthy aspects concentrates on enriching qi and nourishing spleen, eliminating pathogens on clearing away turbid toxin. Chinese medicine pays a vital role in improving immunity, enhancing therapeutic effects, reducing side effects of radiotherapy and chemotherapy, decrease recurrence and metastasis, increasing life quality and prolonging life span.

1963- gera: 139928/di/ra [CLINICAL OBSERVATION OF "JIANPI XIAOLIU **DECOCTION" IN PREVENTING POSTOPERATIVE** COLORECTAL CARCINOMA RECURRENCE AND METASTASIS]. MA JUN WANG GUO-HUA CM DING-FANG, ET AL. shanghai journal of tcm. 2005;39(1):24 (chi*). To observe the clinical effects "Jianpi Xiaoliu Decoction" plus chemotherapy in the prevention of postoperative colorectal carcinoma recurrence and metastasis, 53 subjects were randomized into two groups: treatment group in which 28 cases were treated by chemotherapy and "Jianpi Xiaoliu Decoction" and control group in which 25 cases were treated by simple chemotherapy. Results: The recurrence rate was lower in treatment group than in control group (P < O. 05); the life quality was better in treatment group than in control group (P < O. 05) . It is concluded that "Jianpi Xiaoliu Decoction" plus chemotherapy has better effects than simple chemotherapy in prevention of postoperative colorectal recurrence and metastasis.

1964- gera: 139951/di/ra

[CLINICAL STUDY ON " WEIANTAI CAPSULE" IN TREATING PRECANCEROUS CHRONIC ATROPHIC GASTRITIS]. BAI ZHAO-ZHI ZHANG YAN-MIN ZHANG RUN-SHUN. shanghai journal of tcm. 2005;39(2):16 (chi*). To observe the clinical effects of "Weiantal Capsule" in treating precancerous chronic atrophic gastritis, 35 cases in treatment group were treated with "Weian Capsule" and 23 cases in control group with Pepstatin, both for 6 months. Results: The total effective rate was 91.42% in treatment group and 21. 74% in control group; according to gastroscopy and pathogenic detection, the effects were remarkably better in treatment group than in control group. It is indicated that this Capsule is fairly effective for precancerous chronic atrophic gastritis.

1965- gera: 139952/di/ra

[XIANĞSHA LIUJUNZI DECOCTION" AND FANTANYL FOR LATE CANCEROUS PAIN IN 42 CASES]. HE SONG-QI LI AI-MIN WEN BIN, ET AL. shanghai journal of tcm. 2005;39(2):18 (chi*).

To observe the clinical effects of "Xiangsha Liujunzi Decoction" and Fantanyl in relieving late cancerous pain, 82 subz jects were randomized into observation group (n = 42) and control group (n = 40) and both groups were treated with Fantanyl. Besides, "Xiangsha Liujunzi Decoction" was also given in observation group. After 15-day treatment, the pain severity, negative effects and life quality were assessed. Results: The pain relief, negative effects abatement and life quality were bet-ter in observation group than in control group (P < 0.05). It is revealed that the Decoction plus Fantanyl can be employed to relieve cancerous pain.

1966- gera: 139954/di/ra

ISTUDY ON CLINICAL DISTRIBUTION OF BASIC SYNDROME OF TRADITIONAL CHINESE MEDICINE OF PRIMARY LIVER CANCER]. HOU FENG-GANG LING CHANG-QUAN ZHAO GANG, ET AL. shanghai journal of tcm. 2005;39(2):22 (chi*).

To investigate the intrinsic laws of the major syndrome distribution of primary liver cancer, 267 subjects were surveyed and analyzed. Results: The first stage was characterized by blood-stasis and spleen-qi deficiency syndromes; the second stage by blood-stasis, spleen-qi deficiency, liver-bladder dampness-heat, and liver-qi stagnation syndromes; the third stage by blood-stasis, spleen-qi deficiency, liver-bladder dampness-heat, dampness retention, liver-qi stagnation, liveryin defi-ciency and kidney-yin deficiency syndromes. Conclusions: The six syndromes in third stage are the major syndromes of primary liver cancer.

1967- gera: 140068/di/ra

[INFLUENCE OF HUAJIAN PILLS COMBINED WITH TCM SYNDROME DIFFERENTIATION ON EXISTENCE QUALITY OF TUMOR PATIENTS IN MIDDLE AND LATE STAGE]. JIA YING-JIE, SHI FU-MIN, ZHANG YING, ET AL. tianjin journal of tcm. 2005;22(1):18 (chi*).

[Objective] To explore the influence of Huajian (dissipating hard mass) pills combined with Chinese herbs on life quality after chemotherapy in patients with malignancy tumor in middle or late stage, and summarize the clinical therapeutic effect in recent years, standardize the application of Chinese herbs during chemotherapy. [Methods] One hundred and twenty-eight cases treated with chemotherapy in our department were randomly divided into chemotherapy only group and TCM integrated with western medicine group. Diameter of tumor body,karnosfky scale,body weight,clinical symptoms,pain,T-cell subtype,NK cell,routine blood test,liverkidney function were adopted as the main investigated parameters. Statistically, t test was used for measure data, X2 test for count data, and rank sum test for therapeutic effect. [Results] 1) Changes of tumor body: in integrated group, complete recovery (CR) was found in 6 cases, partial regression (PR) 19 cases,no change(NC) 30 cases,the effective rate was 79.7%, while in chemotherapy only group ,CR was in 2 cases,PR 13 cases,NC 26 cases,progression of disease (PD) 18 cases, the effective rate was 69.5% 2)Changes of symptoms:in integrated group, improvement rate was 59.42%, rate of stability was 40.58%, while that of chemotherapy group was 33.89%,50.84% respectively. The rate of improvement and stability in integrated group was apparently better than that of chemotherapy only group, (P<0.05). 3) Changes of pain:52 cases were improved in integrated group, and the improvement rate was 92.10%; in chemotherapy group 37 cases were improved with improvement rate 71.2%. The improvement rate in integrated group was markedly better than that of chemotherapy group, there was no significant difference between these two groups. 4) Activity of CD3,CD4,CD4/CD8 and NK cell were enhanced with different degrees after chemotherapy with significant difference compared with that before treatment (P<0.05, P<0.01), there was significant difference between two groups after treatment(P<0.05). 5) Karnofsky scale and body weight: the improvement rate in integrated group was 56.07% ,while in chemotherapy only group was 28.81%, (P<0.05),the improvement rate of body weight increasing in integrated group was 44.9%, while in chemotherapy only group was 32.2%(P<0.05). [Conclusion] Huajian pills is convenient to take, and is a good therapeutic method for tumor patients in middle-late stage when combined with clinical TCM syndrome differentiation.

1968- gera: 140099/di/ra

[A PRIMARY STUDY ON QUALITY STANDARD OF FOLIUM **NELUMBINIS WANG GUANGNING, ZHAO XINHUI, LI** ZEYOU, ET AL. (68) EFFECTS OF KANGLAITE INJECTION ON COMBINED TREATMENT FOR ADVANCED ESOPHAGUS CANCER]. ZHAO GUANGRI, WANG LEI, LI HONGSHENG, ET AL. traditional chinese drug research and clinical pharmacology. 2005;16(1):71 (chi*).

1969- gera: 140109/di/ra

[STUDY OF KANGLAITE INJECTION COMBINED WITH CHEMOTHERAPEUTIC DRUGS IN INHIBITING THE **GROWTH OF TRANSPLANTED HUMAN LUNG CANCER** A549 NUDE MICE]. LI DAPENG. traditional chinese drug research and clinical pharmacology, 2005;16(2):109 (chi*).

1970- gera: 140381//ra

INDUCTION OF APOPTOSIS BY CHAN SU, A TRADITIONAL CHINESE MEDICINE, IN HUMAN BLADDER CARCINOMA T24 CELLS. KO WS, PARK TY, PARK C, KIM YH, YOON HJ, LEE SY, HONG SH, CHOI BT, LEE YT, CHOI YH. oncol rep. 2005;14(2):475-80 (eng).

Chan Su is a traditional Chinese medicine prepared from the dried white secretion of the auricular and skin glands of toads, and has been used as an Oriental drug. However, little is known about the effect of Chan Su on the growth of human cancer cells. This study was undertaken to investigate the underlying mechanism of Chan Su-induced apoptosis in a human bladder carcinoma cell line, T24. The effects of this compound were also tested on cyclooxygenase (COX) activity. Treatment of T24 cells with Chan Su resulted in the inhibition of viability and induction of apoptosis in a concentrationdependent manner, which was proved by trypan blue counts, DAPI staining, agarose gel electrophoresis and flow cytometric analysis. Apoptosis of T24 cells by Chan Su was associated with a down-regulation of anti-apoptotic Bcl-2 and Bcl-X(S/L) expression and an up-regulation of pro-apoptotic Bax expression. Chan Su treatment induced the proteolytic activation of caspase-3 and caspase-9, and a concomitant degradation of poly(ADP- ribose)-polymerase and beta-catenin protein. Furthermore, Chan Su decreased the levels of COX-2 mRNA and protein expression without significant changes in the levels of COX-1, which was correlated with an inhibition in prostaglandin E(2) synthesis. Taken together, these findings partially provide novel insights into the possible molecular mechanisms of the anti-cancer activity of Chan Su.

1971- gera: 140389/nd/re [ANALYSIS OF LITERATURE ON THERAPEUTIC METHODS AND MEDICINES OF TRADITIONAL CHINESE MEDICINE FOR PRIMARY LIVER CANCER.]. LIU Q, ZHANG YB, MA CH, YUE XQ, LING CQ. zhong xi yi jie he xue bao. 2005;3(4):260-2 (chi).

Objective: To find out the rules of therapeutic methods, formulas and medicines of traditional Chinese medicine (TCM) for primary liver cancer (PLC). Methods: The frequencies of treatments and medicines of TCM in 978 pieces of documents concerning PLC were analyzed. Results: Among the 165 therapeutic methods, 277 formulas and 459 kinds of herbs, the methods for activating blood circulation, the formulas for regulating qi-flowing and the herbs for invigorating qi are the most commonly used. Conclusion: Therapeutic methods such as invigorating qi, regulating qi-flowing and activating blood circulation are the main choices for PLC, and the methods such as clearing heat, removing dampness and nourishing yin are used as supplements.

1972- gera: 140472/di/ra

ICLINICAL OBSERVATION OF DELAYED VOMITING DUE TO CISPLATIN TREATED WITH MOXIBUSTION ON ZUSANLI]. ZHOU WEN -LI, KAO JUN, YUN CHANG- QING, ET AL. journal of clinical acupuncture and moxibustion. 2005;21(3):47 (chi*).

Objective: To observe the clinical effect on moxibustion at zu¬sanli point treating delayed vomiting caused by Cisplatin. Methods: The patients were divided into two groups (A and B) randomly. Group A was treated by gronisetron (Shuxing) 3mg iv d1,3 30min before chemotherapy and was given moxibustion at zusanli point d1 _7; Group B was treated by gronisetron(Shuxing) 3mg iv d1 _ 3 30min before chemotherapy. After chemotherapy the anti vomiting effect was observed for a week. Re¬sults: The effective rate of controlling delayed vomiting was obviously higher in group A (P < 0.05). Conclusion: moxibustion at zusanli point was proved to be not only a safe and effective but also economical and convenient way to treat delayed vomiting caused by Cisplatin.

1973- gera: 140512/di/ra

IMMUNOMODULATORY ACTIVITIES OF YUNZHI AND DANSHEN IN POST-TREATMENT BREAST CANCER PATIENTS. CHUN-KWOK WONG, YI-XI BAO, ELIZA LAI-YI WONG, PING-CHUNG LEUNG, KWOK PUI FUNG AND CHRISTOPHER WAI KEI LAM. american journal of chinese medicine. 2005;33(3):381 (eng*).

Breast cancer is the most common cancer among women worldwide. Discomfort and fatigue are usually arisen from anticancer therapy such as surgery, radiotherapy, chemotherapy, hormonal therapy, or combination therapy, because of the suppressed immunological functions. Yunzhi (Coriolus versicolor) can modulate various immunological functions in vitro, in vivo, and in human clinical trials. Danshen (Salvia miltiorrhiza) has been shown to benefit the circulatory system by its vasodilating and anti-dementia activity. The purpose of this clinical trial was to evaluate the immunomodulatory effects of Yunzhi-Danshen capsules in post-treatment breast cancer patients. Eighty-two patients with breast cancer were recruited to take Yunzhi [50 mg/kg body weight, 100% polysaccharopeptide (PSP)] and Danshen (20 mg/kg body weight) capsules every day for a total of 6 months. EDTA blood samples were collected every 2 months for the investigation of immunological functions. Flow cytometry was used to assess the percentages and absolute counts of human lymphocyte subsets in whole blood. Plasma level of soluble interleukin-2 receptor (sIL-2R) was measured by enzymelinked immunosorbent assay (ELISA). Results showed that the absolute counts of T-helper lymphocytes (CD4+), the ratio of T-helper (CD4+)/T suppressor and cytotoxic lymphocytes (CD8+), and the percentage and the absolute counts of Blymphocytes were significantly elevated in patients with breast cancer after taking Yunzhi-Danshen capsules, while plasma sIL-2R concentration was significantly decreased (all p < 0.05). Therefore, the regular oral consumption of Yunzhi-Danshen capsules could be beneficial for promoting immunological function in post-treatment of breast cancer patients.

1974- gera: 140515/di/ra

ANTI-INFLAMMATORY ACTIVITY OF HERBAL MEDICINES: INHIBITION OF NITRIC OXIDE PRODUCTION AND TUMOR **NECROSIS FACTOR-A SECRETION IN AN ACTIVATED** MACROPHAGE-LIKE CELL LINE . EUNKYUE PARK, SUSAN KUM, CHUANHUA WANG, SEUNG YONG PARK, BO SOOK KIM AND GEORGIA SCHULLER-LEVIS. american journal of chinese medicine. 2005;33(3):415 (eng*). Houttuynia cordata Thunb. (HC), Glycyrrhiza uralensis Fischer (GU), Forsythia suspense (Thunb.) Vahl (FS), and Lonicera japonica Thunb. (LJ) are Chinese herbs known to possess anti-inflammatory properties. The effects of aqueous extracts of these herbs on the production of the pro-inflammatory mediators, nitric oxide (NO) and tumor necrosis factor-alpha (TNF-α) were examined in an activated macrophage-like cell line, RAW 264.7 cells. Aqueous extracts from FS at 0.0625-2.0 mg/ml inhibited in vitro production of NO and secretion of TNF-α in a dose-dependent manner. FS at 1.0–2.0 mg/ml and 0.125-2.0 mg/ml significantly inhibited NO production and TNF-α, respectively. An extract of LJ demonstrated potent inhibition of both NO production and TNF-α secretion in a dose-dependent manner. An aqueous extract from HC inhibited NO production in a dose-dependent manner, but minimally (approximately 30%) inhibited TNF-α secretion at 0.0625 and 0.125 mg/ml. In contrast, an aqueous extract of GU had a minimal effect on both the production of NO and the secretion of TNF-α. Viability of cells at all concentrations studied was unaffected as determined by MTT cytotoxicity assay and trypan blue dye exclusion. These results suggest that aqueous extracts from FS, LJ and HC have antiinflammatory actions as measured by inhibition of NO production and/or TNF-α secretion.

1975- gera: 140604/di/ra

[OBSERVATIONS ON CURATIVE EFFECT OF POINT INJECTION ON POST-CHEMOTHERAPEUTIC LEUKOPENIA.]. DU SL, SUN YH, KANG HM, ET AL. shanghai journal of acupuncture and moxibustion. 2005;24(5): 9 (chi*).

Objective To investigate the effect of point injection on post – chemotherapeutic leukopenia. Methods Three hundred

patients were randomly divided into two groups. In the treatment group, 0.6 ml granulocyte colony stimulating factor was injected into bilateral points Xuehai and in the control group, the same dose subcutaneously into the deltoid muscle in the upper arm, once daily, three consecutive times as a course of treatment. A peripheral leukocyte count was examined at 3, 5 and 7 days after injection. Results and Conclusion Under three courses of chemotherapy, there was no significant difference in leukocyte increase between the two methods at 3 and 5 days after treatment but a leukocyte count was significantly higher at 7 days in the treatment group than in the control group (P < 0.05). After over half courses of chemotherapy, a peripheral leukocyte count was significantly higher in the treatment group than in the control group (P <0.05) and it did not rise to normal at 5-7 days after treatment in the control group. It is showed that point injection raises leukocyte quickly and kept the effect long in comparison with subcutaneous injection and the adverse responses were significantly less in the treatment group than in the control

1976- gera: 140635/di/ra

ACUPUNCTURE AGAINST CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING IN PEDIATRIC ONCOLOGY INTERIM RESULTS OF A MULTICENTER CROSSOVER STUDY. REINDL TK, GEILEN W, HARTMANN R, WIEBELITZ KR, KAN G, WILHELM I, LUGAUER S, BEHRENS C, WEIBERLENN T, HASAN C, GOTTSCHLING S, WILDBERGNER T, HENZE G, DRIEVER PH. support care cancer. 2005;14 jul: (eng*).

GOALS: In this multicenter crossover study, our aim was to evaluate the efficacy and acceptance of acupuncture as a supportive antiemetic approach during highly emetogenic chemotherapy in pediatric oncology. PATIENTS AND METHODS: Eleven children receiving several courses of highly emetogenic chemotherapy for treatment of solid tumors were included. Randomization allocated patients to start chemotherapy either with antiemetic medication plus acupuncture or antiemetic medication alone. During all study courses, patients continued to receive their programmed and additional antiemetic medication as needed. Acupuncture was given at day 1 of chemotherapy and at subsequent days on patient's demand. The amount of baseline and additional antiemetic medication during chemotherapy was documented. Patients maintained a daily diary of vomiting episodes and completed an evaluated nausea score at the end of every course. Their body weight was taken before and after a chemotherapy course. MAIN RESULTS: Twenty-two courses with or without acupuncture were compared. The benefits of acupuncture in adolescents with respect to the reduction of additional antiemetic medication were observed. Acupuncture enabled patients to experience higher levels of alertness during chemotherapy and reduced nausea and vomiting. Except for needle pain, no side effects were noted. Patient's acceptance of acupuncture was high. CONCLUSION: Our data indicate that acupuncture might reduce antiemetic medication and episodes of vomiting in pediatric oncology.

1977- gera: 140757/nd/re

EFFECTS OF TREMELLA MESENTERICA ON STEROIDOGENESIS IN MA-10 MOUSE LEYDIG TUMOR CELLS. LO HC, CHEN YW, CHIEN CH, TSENG CY, KUO YM, HUANG BM. arch androl. 2005;51(4):285-94 (eng*). Tremella mesenterica (TM), a yellow jelly mushroom, has been traditionally used as food and crude medicine to improve several kinds of symptoms in Chinese society for a long time. Recent studies have illustrated that the fractions of fruiting bodies of TM exhibit a significant hypoglycemic activity in diabetic mouse models, which usually suffer from sexual dysfunction. In a previous study, we showed that TM reduced plasma testosterone production in normal rats without any positive effect in diabetic rats. It evolved a question of TM directly regulating Leydig cell steroidogenesis. In this study, MA-10 mouse Leydig tumor cells were treated with vehicle, different dosages of TM with or without human chorionic gonadotropin (hCG 50 ng/ml) to clarify the effects. Results showed that TM at different dosages (0.01-10 mg/ml) did not have any effect on MA-10 cell steroidogenesis (p > 0.05). In the presence of hCG, there was an inhibitory trend that TA

suppressed MA-10 cell progesterone production at 3 hr treatment with a statistically significant difference by the 10 mg/ml TM (p < 0.05). In time course effect, TM alone did not have any effect on MA-10 cell steroidogenesis from at 1, 2, 3, 6 and 12 hr (p > 0.05). However, TM did reduce hCG-treated MA-10 cell progesterone production at 1, 2 and 3 hr (p < 0.05), respectively. To determine whether TM would have adverse effects on MA-10 cell steroidogenesis in the presence of hCG, MTT assay and recovery studies were conducted. MTT assay indicated that TM had no effect on surviving cells. In addition, with the removal of TM, and then the addition of hCG (2 and 4 hr), progesterone levels were restored within 4 hr. Taker together, present studies suggested that TM suppressed hCGtreated steroidogenesis in MA-10 cells without any toxicity

1978- gera: 140852/di/ra

OBSERVATIONS ON THE INCREASING EFFECT OF SPECIFIC WAVE BAND INFRARED MOXIBUSTION ON LEUKOCYTE IN TUMOR PATIENTS RECEIVING RADIOCHEMOTHERAPY. SHEN XUE-YONG FEI LUN WU YAO-CHI, LIN YU-YING DING GUANG-HONG, ZHAO LING. shanghai journal of acupuncture and moxibustion. 2005;24(4):1 (chi*).

Objective To observe the increasing effect of specific wave band infrared moxibustion on leukocyte in tumor patients receiving radiochemotherapy. Method Self-made specific wave band infrared moxibustion instrument with 15 µm as a radiative center was used to perform moxibustion on points Zusanli (ST36), Guanyuan (CV4), Geshu (BL17) and Xuanzhong (GB39) in tumor patients receiving radiochemotherapy. Results In the patients; a leukocyte count was 8.36% higher at 1 week after infrared moxibustion than before it; but there was no statistically significant difference, and it was 35.-38%- higher at 3 weeks after infrared moxibustion than before it, which was significantly different from that before moxibustion (P <0.02). Conclusion Specific wave band *infrared moxibustion has an marked increasing effect on leukocyte in tumor patients receiving radiochemotherapy.

1979- gera: 140957/di/re

ACUPUNCTURE-POINT STIMULATION FOR CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING. EZZO J, VICKERS A, RICHARDSON MA, ALLEN C, DIBBLE SL, ISSELL B, LAO L, PEARL M, RAMIREZ G, ROSCOE JA, SHEN J, SHIVNAN J, STREITBERGER K, TREISH I, ZHANG G. j clin oncol. 2005;23(28):7188-98 (eng). PURPOSE Assess the effectiveness of ac upuncture-point stimulation on acute and delayed chemotherapy-induced nausea and vomiting in cancer patients. Materials and METHODS Randomized trials of acupuncture-point stimulation by needles, electrical stimulation, magnets, or acupressure were retrieved. Data were provided by investigators of the original trials and pooled using a fixed-effects model. Results Eleven trials (N = 1,247) were pooled. Overall, acupuncturepoint stimulation reduced the proportion of acute vomiting (relative risks [RR] = 0.82; 95% CI, 0.69 to 0.99; P = .04), but not the mean number of acute emetic episodes or acute or delayed nausea severity compared with controls. By modality, stimulation with needles reduced the proportion of acute vomiting (RR = 0.74; 95% CI, 0.58 to 0.94; P = .01), but not acute nausea severity. Electroacupuncture reduced the proportion of acute vomiting (RR = 0.76; 95% CI, 0.60 to 0.97; P = .02), but manual acupuncture did not; delayed symptoms were not reported. Acupressure reduced mean acute nausea severity (standardized mean difference = -0.19; 95% CI, -0.38 to -0.01; P = .03) and most severe acute nausea, but not acute vomiting or delayed symptoms. Noninvasive electrostimulation showed no benefit for any outcome. All trials used concomitant pharmacologic antiemetics, and all, except electroacupuncture trials, used state-of-the-art antiemetics. CONCLUSION This review complements data on postoperative nausea and vomiting, suggesting a biologic effect of acupuncture-point stimulation. Electroacupuncture has demonstrated benefit for chemotherapy-induced acute vomiting, but studies with stateof-the-art antiemetics as well as studies for refractory symptoms are needed to determine clinical relevance. Acupressure seems to reduce chemotherapy-induced acute nausea severity, though studies did not involve a placebo

control. Noninvasive electrostimulation seems unlikely to have a clinically relevant impact when patients are given state-ofthe-art pharmacologic antiemetic therapy

1980- gera: 141060/di/re

STAGE-DEPENDENT ANALGESIA OF ELECTRO-ACUPUNCTURE IN A MOUSE MODEL OF CUTANEOUS CANCER PAIN. MAO-YING QL, CUI KM, LIU Q, DONG ZQ, WANG W, WANG J, SHA H, WU GC, WANG YQ. eur j pain. 2005;dec 20: (eng).

Acupuncture is one of the most effective alternative medical treatments in pain management with the advantages of simple application, low cost and minimal side effects. However its scientific evidence and laws of action are not very clear in cancer pain relieving. The aim of this study was to examine the immediate and therapeutic anti-hyperalgesic effect of electroacupuncture (EA) on a mouse model of cutaneous cancer pain. B16-BL6 melanoma cells were inoculated into the plantar region of unilateral hind paw and the thermal hyperalgesia was measured by using radiant heat test and hot plate test C57BL/6 mice showed moderate and marked hyperalgesia during days 8-12 and from day 14 after the orthotopic inoculation of B16-BL6 melanoma cells into the hind paw. Single EA on day 8 after inoculation showed significant analgesic effect immediately after the treatment, the analgesic effect reached its maximum within 15- 30min and declined to its minimum at 50min after EA treatment. Single EA treatment on day 20 showed no significant analgesic effect; Repeated EA treatments (started from day 8, once every other day) showed therapeutic analgesic effect, while it showed no therapeutic effect when started from day 16, a relatively late stage of this cancer pain model. The results demonstrated that EA had anti-hyperalgesic effect on early stage of cutaneous cancer pain but not on late stage. These results indicated a tight correlation of EA anti-hyperalgesic effects with the time window of cancer pain.

1981- gera: 141063/di/re

VASOMOTOR SYMPTOMS DECREASE IN WOMEN WITH BREAST CANCER RANDOMIZED TO TREATMENT WITH APPLIED RELAXATION OR ELECTRO-ACUPUNCTURE: A **PRELIMINARY STUDY.** NEDSTRAND E, WIJMA K, WYON Y, HAMMAR M. **climacteric.** 2005;8(3):243-50 (eng). Objective To evaluate the effect of applied relaxation and electro-acupuncture on vasomotor symptoms in women treated for breast cancer. Methods Thirty-eight postmenopausal women with breast cancer and vasomotor symptoms were randomized to treatment with electro-acupuncture (n = 19) or applied relaxation (n = 19) during 12 weeks. The number of hot flushes was registered daily in a logbook before and during treatment and after 3 and 6 months of follow-up.Results Thirtyone women completed 12 weeks of treatment and 6 months of follow-up. After 12 weeks of applied relaxation, the number of flushes/24 h had decreased from 9.2 (95% confidence interval (CI) 6.6-11.9) at baseline to 4.5 (95% CI 3.2- 5.8) and to 3.9 (95% CI 1.8-6.0) at 6 months follow-up (n = 14). The flushes/24 h were reduced from 8.4 (95% CI 6.6- 10.2) to 4.1 (95% CI 3.0-5.2) after 12 weeks of treatment with electroacupuncture and to 3.5 (95% CI 1.7-5.3) after 6 months followup (n = 17). In both groups, the mean Kupperman Index score was significantly reduced after treatment and remained unchanged 6 months after end of treatment. Conclusion We suggest that applied relaxation and electro- acupuncture should be further evaluated as possible treatments for vasomotor symptoms in postmenopausal women

1982- gera: 141102/di/co

RÔLE DE L'ÉNERGIE DÉFENSIVE WEIQI DANS LA FORMATION DES CANCERS. TRUONG TAN TRUNG HY. actes du congrès saa-samp agen, france,. 2005;:15-23 (fra).

1983- gera: 141991/di/ra

ANALYSIS OF CHARACTERISTICS FOR SYNDROMES IN 2060 PATIENTS WITH PRIMARY LIVER CANCER. FANG ZHAOQINLI, YONGJIAN, TANG CHENLONG, MA JUN, GUAI, DONGYUAN, CHEN DESU. european journal of integrated eastern and western medicine. 2005;3(2):41 (eng). Objective: To observe the evolution characteristics of syndromes and the concurrency of syndromes in patients with

liver cancer. Method: A large-sample clinical epidemiological survey was carried out to investigate changes of syndromes in 2060 patients with primary liver cancer. Result: The pathogenesis of primary liver cancer is found with constant changes with the development of the disease. Syndromes at stage 1-111 are mainly characterized by stagnation of the liverqi and deficiency of the spleen-qi; syndromes at stage II, by obstruction of the blood in the liver, qi stagnation, qi deficiency and damp-heat, and syndromes at stage III, by qi deficiency, yin deficiency, blood stasis, qi stagnation and water retention in the body. Qi stagnation, blood stasis, qi deficiency and yin deficiency stand at the first four places in the incidence of syndromes at various stages. It was also found that liver cancer patients with no differentiable syndrome account for only 1.07% while the combination of 3, 4 and 5 syndromes occupies 23.06%, 24.37% and 18.11% respectively, 3.75 syndromes on average for each patient, 2.03, 3.47 and 4.99 syndromes on average at stagel, II and III respectively. Conclusion: With the development of the disease, the concurrence of syndromes becomes more significant and their pathogenesis more complicated. Qi stagnation and blood stasis as well as deficiency of both qi and yin are the fundamental pathogeneses throughout the disease.

1984- gera: 143014/di/ra

INTEGRAZIONE TRA MEDICINA TRADIZIONALE CINESE E MEDICINA OCCIDENTALE NEL TRATTAMENTO DEL CANCRO MAMMARIO ALLO STADIO AVANZATO. A CURA DI A BEMINI. rivista italiana di medicina tradizionale cinese. 2005;100(2):11 (ita).

1985- gera: 143015/di/ra

DIFFERENZIAZIONE DEI QUADRI CLINICI NEL CANCRO MAMMARIO. A CURA DI A BEMINI. rivista italiana di medicina tradizionale cinese. 2005;100(2):12 (ita).

1986- gera: 143042/di/ra

PROGRESSI NELL'UTILIZZO DELLA COMBINAZIONE DI FARMACI CINESI E CHEMIOTERAPIA PER TRATTARE IL CANCRO. HE YONGHE. rivista italiana di medicina tradizionale cinese. 2005;100(2):76 (ita).

Traditional Chinese medicine (TCM) has been used to treat diseases including cancer in China for several thousand years. TCM holds that the pathogenesis of cancer lies mainly in deficiency of vital qi, accumulation of cold, stagnation of qi, obstruction of phlegm, blood stasis, retention of toxic heat, and that the therapeutic principles for cancer should be mainly to strengthen body resistance and restore normal function (mainly by strengthening the spleen and nourishing the kidney), to warm yang and disperse cold, to soothe the liver and regulate qi circulation, to resolve phlegm and dispel retained water, to promote blood circulation and remove blood stasis, to clear away heat and remove toxicity, to resolve hard mass and to treat malignant or p ois oning diseases with poisonous drugs. According to differentiation of syndromes in TCM, cancer patients often have several pathogeneses existing side by side and the disease should be treated with various therapeutic principles that are used in combination. Chemotherapy, one of the major methods to treat cancer in Western medicine at present, has a poor selectivity and strong toxic and side effects, thus influencing its anticancer effect, although its main mechanism lies in cytotoxic effect. In the past 40 years, Chinese experts have gained remarkable achievements in cancer treatment by integrating TCM with chemotherapy. This article summarizes the progress in this

1987- gera: 159306/nd/re

MANAGEMENT OF XEROSTOMIA RELATED TO RADIOTHERAPY FOR HEAD AND NECK CANCER. KAHN ST, JOHNSTONE PA.. oncology (williston park). 2005;19(14):1827-32 (eng).

Xerostomia is a permanent and devastating sequela of head and neck irradiation, and its consequences are numerous. Pharmaceutical therapy attempts to preserve or salvage salivary gland function through systemic administration of various protective compounds, most commonly amifostine (Ethyol) or pilocarpine. When these agents are ineffective or the side effects too bothersome, patients often resort to

palliative care, for example, with tap water, saline, bicarbonate solutions, mouthwashes, or saliva substitutes. A promising surgical option is the Seikaly-Jha procedure, a method of preserving a single submandibular gland by surgically transferring it to the submental space before radiotherapy. Improved radiation techniques, including intensity-modulated radiotherapy and tomotherapy, allow more selective delivery of radiation to defined targets in the head and neck, preserving normal tissue and the salivary glands. Acupuncture may be another option for patients with xerostomia. All of these therapies need to be further studied to establish the most effective protocol to present to patients before radiotherapy has begun

1988- gera: 159308/di/re

ACUPUNCTURE FOR SIDE EFFECTS OF CHEMORADIATION THERAPY IN CANCER PATIENTS. LU

W.. semin oncol nurs.. 2005;21(3):190-5 (eng). OBJECTIVE: To review strategies and recommendations to improve utilization of acupuncture treatment for side effects of chemoradiation therapy in cancer centers. DATA SOURCES: Research studies and articles, government reports, and author experience. CONCLUSION: Recent evidence in clinical research indicates that acupuncture is beneficial for chemotherapy-induced nausea, vomiting, and cancer pain. Other preliminary data also suggests acupuncture might be effective for chemotherapy-induced leukopenia, postchemotherapy fatigue, radiation therapy-induced xerostomia, insomnia, and anxiety. However, the utilization rate of acupuncture remains low despite the wide use of other complementary and alternative medical therapies among cancer patients. This low usage of acupuncture in cancer patients indicates a health care quality issue. IMPLICATIONS FOR NURSING PRACTICE: Oncology nurses need to increase their awareness of the available evidence in the use of acupuncture in the supportive care of cancer patients.

1989- gera: 159309/nd/re

PATHOPHYSIOLOGY AND MANAGEMENT OF RADIATION-INDUCED XEROSTOMIA. BERK LB, SHIVNANI AT, SMALL W JR.. j support oncol.. 2005;3(3):191-200 (eng). Radiotherapeutic treatment of head and neck cancer patients often causes long-term dysfunction involving their salivary function, swallowing capabilities, and taste. Salivary gland dysfunction from radiation therapy is often the most unpleasant side effect of treatment. This article will review current knowledge concerning the anatomy and function of glands involved with salivation, measurement of salivary gland function, surgical and pharmacologic prevention and treatment of xerostomia, and methods to administer radiation while causing the least amount of damage to salivary

1990- gera: 161508/di/ra

[ANALGESIC EFFICACY AND MECHANISM OF WRIST-ANKLE ACUPUNCTURE ON PAIN CAUSED BY LIVER CANCER], HU XIA,GU WEI,ZHOU QING-HUI,ET AL. chinese journal of integrated traditional and western medicine on liver diseases. 2005;3: (chi).

Objective:To assess the analgesic efficacy and mechanism of the wrist-ankle acupuncture in the treatment of the moderate and severe pain of liver cancer.Methods:94 patients were divided into 5 groups randomly. 40patients with moderate pain were divided into 2 groups(wrist-ankle acupuncture,codeine treatment).54 patients with severe cancer pain were divided into 3 groups(wrist-ankle acupuncture, acupuncture combined with MS Contin, MS Contin).Pain relief rate, side effects and the contents of the patients'plasma β -endorphin and substance P were observed. Results: The pain relief rate of the wrist-ankle acupuncture in moderate pain group were 85%,and 63% in severe pain group. Acupuncture combined with MS Contin reached to 83.33%. The contents of the patients' plasma β -endorphin and substance P before and after treatment were

(29.4±22.57)、(67.47±40.34)pg/ml and

(42.26±13.00)、(30.92±8.34)pg/ml

respectively. Conclusion: The present studies confirm the analgesic efficacy of the wrist-ankle acupuncture therapy to the cancer pain caused by heptocarcinoma, especially to the moderate pain.

1991- gera: 125817/di/ra

[CLINICAL OBSERVATION ON ELECTRIC STIMULATION OF YONGQUAN (KI 1) FOR PREVENTION OF NAUSEA AND VOMITING INDUCED BY CISPLATIN]. FU J, MENG ZQ, CHEN Z, PENG HT, LIU LM. chinese acupuncture and moxibustion. 2006;26(4):250-2. (chi).

OBJECTIVE: To search for an effective method for controlling nausea and vomiting induced by chemotherapy. METHODS: Eighty-eight cases of hepatic cancer with interventional therapy of Cisplatin were randomly divided into a treatment group and a control group, 44 cases in each group. The treatment group were treated with an antiemetic and electroacupuncture at Yongquan (KI 1), and the control group only with the antiementic. The controlling rates for nausea and vomiting were compared between the two groups. RESULTS: The controlling rates for acute nausea, vomiting and delayed vomiting in the treatment group were better than those in the control group (P < 0.05). CONCLUSION: Electroacupuncture at Yongquan (KI 1) can better prevent and improve the symptoms of nausea and vomiting in the patient with chemotherapy of Cisplatin.

1992- gera: 125979/di/ra

[ADVANCES OF STUDIES ON TRADITIONAL MOXIBUSTION THERAPY FOR TREATMENT OF CANCER]. SONG JL, FAN FJ, HAN ZP, HONG WX. chinese acupuncture and moxibustion. 2006;26(3):227-9. (chi). In recent years, the studies on moxibustion for treatment of cancer are increasing day by day, with some advances. In the paper, clinical and experimental studies on traditional moxibustion for treatment of cancer and the mechanisms are reviewed, and some problems and shortcomings are put forward.

1993- gera: 126047/di/ra

ANTIPROLIFERATIVE AND APOPTOTIC EFFECTS OF TETRANDRINE ON DIFFERENT HUMAN HEPATOMA CELL LINES. NG LT, CHIANG LC, LIN YT, LIN CC. american journal of chinese medicine. 2006;34(1):125-35. (eng). Tetrandrine (TET), a bis-benzylisoquinoline alkaloid isolated from the dried root of Hang-Fang-Chi (Stephania tetrandra S. Moore), is well known to possess activities including antioxidant, anti-inflammation, anti-fibrotic and anticancer. It is used clinically to treat hypertension and silicosis. In the present study, the anti-proliferative and apoptotic effects of TET were evaluated on three different hepatoma cell lines, namely Hep G2, PLC/PRF/5 and Hep 3B. Using XTT assay, results showed that the IC50 values of TET were 4.35 microM for Hep G2. 9.44 microM for PLC/PRF/5 and 10.41 microM for Hep 3B cells. The CC50 of TET against BNL-CL.2 mouse normal liver cells was 31.12 microM. Interestingly, TET exhibited a lower IC50 value and better selectivity against Hep G2 and PLC/PRF/5 cells than cisplatin. Microscopic observation study, DNA fragmentation assay and flow cytometric analysis further supported apoptotic effect of TET on both PLC/PRF/5 and Hep 3B cells. The cell cycle of PLC/PRF/5 treated with TET appeared to arrest at G2/M phase in a dose-dependent manner, whereas no effect was noted on the cell cycle of Hep 3B cells. The present study concludes that TET exhibited antiproliferative effect on Hep G2, PLC/PRF/5 and Hep 3B cells in a dose-dependent manner. TET also possesses a lower IC50 and better SI value than cisplatin against Hep G2 and PLC/PRF/5 cells. The effect of TET on cell cycle progression was found to vary with the type of hepatoma cells, suggesting the genetic make-up of the cells play an important role in the response to drug treatment.

1994- gera: 126057/di/ra

EFFECTS OF CHAN-CHUANG QIGONG ON IMPROVING SYMPTOM AND PSYCHOLOGICAL DISTRESS IN CHEMOTHERAPY PATIENTS. LEE TI, CHEN HH, YEH ML. american journal of chinese medicine. 2006;34(1):37-46. (enq).

The purpose of this study was to explore the effect of Chan-Chuang qigong on symptoms distress and psychological distress of breast cancer patients who underwent chemotherapy. A quasi-experimental design was adopted. Subjects were recruited from breast cancer outpatients

receiving chemotherapy at an 1800-bed medical center in Taipei, Taiwan. Of these subjects, 35 were assigned to the control group and 32 to the experimental group in which Chan-Chuang qigong was administered. Assignment was not random. The instruments included a 21-item symptom distress scale and psychological distress with the symptom checklist-90-revised. Data of the symptoms and psychological distress were collected on the day before chemotherapy as baseline values, and also collected on days 8, 15 and 22 of chemotherapy. The results showed that the overall severity of symptom distress in the experimental group was significantly lower than the control group on day 22 (p < 0.05). The symptoms with significant improvement included pain. numbness, heartburn and dizziness (p < 0.05). With regard to psychological distress, the difference of overall severity between the two groups was not statistically significant (p > 0.05). However, the items of "unwillingness to live" (p < 0.05) and "hopelessness about the future" (p < 0.05) were significantly improved in the experimental group. In conclusion, Chan-Chuang gigong had the effect of attenuating the symptom distress and probably some part of the psychological distress of chemotherapy patients.

1995- gera: 141161/di/re

ACUPUNCTURE AND ACUPRESSURE FOR THE PREVENTION OF CHEMOTHERAPY-INDUCED NAUSEA-A RANDOMISED CROSS-OVER PILOT STUDY. MELCHART D, IHBE-HEFFINGER A, LEPS B, VON SCHILLING C, LINDE K. support care cancer. 2006;mar 8: (). OBJECTIVE: To investigate whether a combination of acupuncture and acupressure is effective for reducing chemotherapy-induced nausea and vomiting. PATIENTS AND METHODS: In a randomised cross-over trial, 28 patients receiving moderately or highly emetogenic chemotherapy and conventional standard antiemesis were treated for one chemotherapy cycle with a combination of acupuncture and acupressure at point P6 and for one cycle at a close sham point. The main outcome measure was a nausea score derived from daily intensity rating. RESULTS: There was no difference between combined acupuncture and acupressure treatment at P6 and at the sham point for the nausea score, but the level of nausea was very low in both phases. The mean nausea score was 6.2 (standard deviation 9.0) for treatment at P6 and 6.3 (9.1) for treatment at the sham point (mean difference -0.1, 95% confidence interval -3.9 to 3.7; p=0.96). Seventeen of 21 participants completing the study would desire acupuncture and acupressure for future chemotherapy cycles, but there was no clear preference for either point. CONCLUSION: In this small pilot study a significant difference between treatment at P6 and a close sham point could not be detected. However, it cannot be ruled out that an existing difference was missed due to the small sample size.

1996- gera: 141212/di/re ACUPUNCTURE-POINT STIMULATION FOR CHEMOTHERAPY-INDUCED NAUSEA OR VOMITING. EZZO J, RICHARDSON M, VICKERS A, ALLEN C, DIBBLE S, ISSELL B, LAO L, PEARL M, RAMIREZ G, ROSCOE J, SHEN J, SHIVNAN J, STREITBERGER K, TREISH I, ZHANG G. cochrane database syst rev. 2006;2: (eng). BACKGROUND: There have been recent advances in chemotherapy-induced nausea and vomiting using 5-HT(3) inhibitors and dexamethasone. However, many still experience these symptoms, and expert panels encourage additional methods to reduce these symptoms. OBJECTIVES: The objective was to assess the effectiveness of acupuncture-point stimulation on acute and delayed chemotherapy-induced nausea and vomiting in cancer patients. SEARCH STRATEGY: We searched MEDLINE, EMBASE, PsycLIT, MANTIS, Science Citation Index, CCTR (Cochrane Controlled Trials Registry), Cochrane Complementary Medicine Field Trials Register, Cochrane Pain, Palliative Care and Supportive Care Specialized Register, Cochrane Cancer Specialized Register, and conference abstracts. SELECTION CRITERIA: Randomized trials of acupuncture-point stimulation by any method (needles, electrical stimulation, magnets, or acupressure) and assessing chemotherapy-induced nausea or vomiting, or both. DATA COLLECTION AND ANALYSIS: Data were provided by investigators of the original trials and pooled

using a fixed effect model. Relative risks were calculated on dichotomous data. Standardized mean differences were calculated for nausea severity. Weighted mean differences were calculated for number of emetic episodes. MAIN RESULTS: Eleven trials (N = 1247) were pooled. Overall, acupuncture-point stimulation of all methods combined reduced the incidence of acute vomiting (RR = 0.82; 95% confidence interval 0.69 to 0.99; P = 0.04), but not acute or delayed nausea severity compared to control. By modality, stimulation with needles reduced proportion of acute vomiting (RR = 0.74; 95% confidence interval 0.58 to 0.94; P = 0.01) but not acute nausea severity. Electroacupuncture reduced the proportion of acute vomiting (RR = 0.76; 95% confidence interval 0.60 to 0.97; P = 0.02), but manual acupuncture did not; delayed symptoms for acupuncture were not reported. Acupressure reduced mean acute nausea severity (SMD = 0.19: 95% confidence interval -0.37 to -0.01: P = 0.04) but not acute vomiting or delayed symptoms. Noninvasive electrostimulation showed no benefit for any outcome. All trials used concomitant pharmacologic antiemetics, and all, except electroacupuncture trials, used state-of-the-art antiemetics. AUTHORS' CONCLUSIONS: This review complements data on post-operative nausea and vomiting suggesting a biologic effect of acupuncture-point stimulation. Electroacupuncture has demonstrated benefit for chemotherapy-induced acute vomiting, but studies combining electroacupuncture with stateof-the-art antiemetics and in patients with refractory symptoms are needed to determine clinical relevance. Self-administered acupressure appears to have a protective effect for acute nausea and can readily be taught to patients though studies did not involve placebo control. Noninvasive electrostimulation appears unlikely to have a clinically relevant impact when patients are given state-of-the-art pharmacologic antiemetic

1997- gera: 141306/nd/re

PALLIATION OF NAUSEA AND VOMITING IN MALIGNANCY. MANNIX K. clin med. 2006;6(2): (eng).

1998- gera: 141339/nd/re

SYMPTOMS AND TREATMENT IN CANCER THERAPY-INDUCED EARLY MENOPAUSE. BOEKHOUT AH, BEIJNEN JH, SCHELLENS JH. oncologist. 2006;11(6)::641-54 (eng). Young women with breast cancer often experience early menopause as a result of the therapy for their malignant disease. The sudden occurrence of menopause resulting from chemotherapy, oophorectomy, radiation, or gonadal dysgenesis frequently results in hot flashes that begin at a younger age and may occur at a greater frequency and intensity than hot flashes associated with natural menopause. Hormone therapy relieves symptoms effectively in 80%- 90% of women who initiate treatment. This therapy, however, is generally contraindicated in estrogen-dependent cancers, such as breast cancer, because of the potentially increased risk for recurrence. Many agents have been investigated as potential means for alleviating hot flashes in survivors of breast cancer, such as progestagens, clonidine, gabapentin, and antidepressants. Several complementary and alternative medicines frequently used by patients have also been studied. These include black cohosh, phytoestrogens, homeopathy, vitamin E, acupuncture, and behavior strategies. To support the use of one of more of these nonpharmacological or pharmacological options in the treatment of hot flashes in breast cancer patients, more evidence from well-controlled clinical trials is needed. In particular, soundly based scientific research with complementary and alternative medicine therapies is lacking. Pharmacological treatments appear to be more beneficial than nonpharmacological treatments. This article reviews the current literature to assess the epidemiology and diagnosis of hot flashes and the nonpharmacological and pharmacological options for the treatment of hot flashes, in breast cancer patients in particular. When specific treatment options have not been evaluated in breast cancer patients specifically, published data on the management of hot flashes with this modality in healthy postmenopausal women are described

1999- gera: 142275/di/ra

OBSERVATIONS ON ELECTROACUPUNCTURE

TREATMENT OF 60 PATIENTS WITH URINE RETENTION FOLLOWING CERVICAL CANCER OPERATION. CHEN XUE-NONG. journal of acupuncture and tuina science. 2006;4(4):239 (eng).

Objective: To investigate the curative effect of electroacupuncture on urine retention following cervical cancer operation. Methods: A treatment group was treated with electroacupuncture according to classification based on syndrome differentiation and a control group, by a conventional method. One course of treatment consisted of 5 days. Results: The curative rate and cure rate were 96.67% and 76.67%, respectively, in the treatment group and 70% and 36. 67%, respectively, in the control group. There were significant differences in curative rate and cure rate between the two groups (P < 0.01). Conclusion: Electroacupuncture is a good method for treating urine retention subsequent to cervical cancer operation.

2000- gera: 142573/di/re

EFFECT OF ACUPRESSURE ON NAUSEA AND VOMITING INDUCED BY CHEMOTHERAPY IN CANCER PATIENTS.
GARDANI G, CERRONE R, BIELLA C, MANCINI L,
PROSERPIO E, CASIRAGHI M, TRAVISI O, MEREGALLI M,
TRABATTONI P, COLOMBO L, GIANI L, VAGHI M, LISSONI
P. minerva med. 2006;97(5): (eng).

AIM: Corticosteroids, antidopaminergig agents and 5-HT3 antagonists are the most commonly used drugs in the treatment of chemotherapy-induced vomiting. Acupuncture and acupressure have also appeared to exert antiemetic effects. The aim of this study was to evaluate the efficacy of acupressure in the treatment of chemotherapy-induced vomiting resistant to the standard antiemetic therapies. METHODS: The study included 40 consecutive advanced cancer patients with untreatable chemotherapy-induced vomiting. Colorectal cancer, lung cancer and breast cancer were the neoplasm most frequent in our patients. According to tumour histotype, patients received chemotherapeutic regimens containing the main emetic cytotoxic agents. including cisplatin and athracyclines. Acupressure was made by PC6 point stimulation for at least 6 h/day at the onset of chemotherapy. RESULTS: The therapeutic approach was well accepted by the overall patients. An evident improvement in the emetic symptomatology was achieved in 28/40 (70%) patients, without significant differences in relation to neither tumor histotype, nor type of chemotherapeutic agent. CONCLUSIONS: This preliminary study seems to suggest that a bioenergetic approach by acupressure on PC6 point may be effective in the treatment of chemotherapy-induced vomiting resistant to the conventional pharmacological strategies, as previously demonstrated for vomiting occurring during pregnancy.

2001- gera: 142912/di/re

STAGE-DEPENDENT ANALGESIA OF ELECTRO-ACUPUNCTURE IN A MOUSE MODEL OF CUTANEOUS CANCER PAIN. MAO-YING QL, CUI KM, LIU Q, DONG ZQ, WANG W, WANG J, SHA H, WU GC, WANG YQ. eur j pain. 2006;10(8):689-94 (eng).

Acupuncture is one of the most effective alternative medical treatments in pain management with the advantages of simple application, low cost and minimal side effects. However its scientific evidence and laws of action are not very clear in cancer pain relieving. The aim of this study was to examine the immediate and therapeutic anti-hyperalgesic effect of electroacupuncture (EA) on a mouse model of cutaneous cancer pain. B16-BL6 melanoma cells were inoculated into the plantar region of unilateral hind paw and the thermal hyperalgesia was measured by using radiant heat test and hot plate test. C57BL/6 mice showed moderate and marked hyperalgesia during days 8-12 and from day 14 after the orthotopic inoculation of B16-BL6 melanoma cells into the hind paw. Single EA on day 8 after inoculation showed significant analgesic effect immediately after the treatment, the analgesic effect reached its maximum within 15-30min and declined to its minimum at 50min after EA treatment. Single EA treatment on day 20 showed no significant analgesic effect; Repeated EA treatments (started from day 8, once every other day) showed therapeutic analgesic effect, while it showed no therapeutic effect when started from day 16, a relatively late

stage of this cancer pain model. The results demonstrated that EA had anti-hyperalgesic effect on early stage of cutaneous cancer pain but not on late stage. These results indicated a tight correlation of EA anti-hyperalgesic effects with the time window of cancer pain.

2002- gera: 150553/di/ra

EFFECTS OF HEAD ACUPUNCTURE ON POST OPERATION INFLAMMATORY REACTION OF THE INTESTINE CANCER PATIENTS. HE BI MEI, LI WAN YAO, LI GUO CAI, ET AL. journal of clinical acupuncture and moxibustion. 2006;22(5):5 (chi).

objective: Study the effects of head — acupuncture on post operation inflammatory reaction of the intestine cancer patients. Method: Sixty intestinal cancer patients were randomly divided into two groups: head - acupuncutre combined general anesthesia group (ie , head — acupuncture group) and pure general anesthesia group(ie, general anesthesia group), each group has 30 patients. Head acupuncture group induct 20 minutes with head acupuncture anesthesia and then carrys on the general anesthesia. Acupuncutre anesthesia keeps in the operation. General anesthesia group only carrys on the general anesthesia. It observer the head — acupuncture to CRP between preoperation and postoperation and the change of extra — blood cells in the serum. Result: The postoperation iumomial patients of CRP decreased significantly, and the change in the pure general anesthesia group warn't significant. In two groups, the difference of postoperation CRP was significant (P < 0.05). The range of WBC count elevation in head — acupuncture group was the minimum, and the recovery was faster than those of the general anesthesia group. Conclusion: Head — acupuncture can decrease the tissue damage, post — operation infection and

2003- gera: 150557/di/ra

[CLINICAL OBSERVATION OF ACUPUNCTURE THERAPY ON HICCUPING IN LIVER CANCER]. CHEN HONG TOO, LIU BO. journal of clinical acupuncture and moxibustion. 2006;22(5):18 (chi).

Objective: To observe the curative effect on hiccupping in liver cancer with acupuncture therapy. Methods: 60 cases were divided into 2 groups randomly, 40 cases in the therapy group were taken acupuncture treatment, 20 cases in the control group were injected with metoclopramide. Results: The curative effect in therapy group is 82.5% which was much better than that of control group (P < 0.05). Conclusion: The acupuncture therapy is superior to western medicine in the treatment of hiccupping in liver cancer.

2004- gera: 155651/di/re

TAI CHI CHUAN: MIND-BODY PRACTICE OR EXERCISE INTERVENTION? STUDYING THE BENEFIT FOR CANCER SURVIVOR MANSKY P, SANNES T, WALLERSTEDT D, GE A, RYAN M, JOHNSON LL, CHESNEY M, GERBER L. integr cancer ther. 2006;5(3):192-201 (eng).

Tai chi chuan (TCC) has been used as a mind-body practice in Asian culture for centuries to improve wellness and reduce stress and has recently received attention by researchers as an exercise intervention. A review of the English literature on research in TCC published from 1989 to 2006 identified 20 prospective, randomized, controlled clinical trials in a number of populations, including elderly participants (7 studies), patients with cardiovascular complications (3 studies), patients with chronic disease (6 studies), and patients who might gain psychological benefit from TCC practice (2 studies). However, only the studies of TCC in the elderly and 2 studies of TCC for cardiovascular disease had adequate designs and size to allow conclusions about the efficacy of TCC. Most (11 studies) were small and provided limited information on the benefit of TCC in the settings tested. There is growing awareness that cancer survivors represent a population with multiple needs related to physical deconditioning, cardiovascular disease risk, and psychological stress. TCC as an intervention may provide benefit to cancer survivors in these multiple areas of need based on its characteristics of combining aspects of meditation and aerobic exercise. However, little research has been conducted to date to determine the benefit of TCC in this population. We propose a model to study the unique

characteristics of TCC compared to physical exercise that may highlight characteristic features of this mind-body intervention in cancer survivors.

2005- gera: 159305/nd/re

ACUPUNCTURE: INTEGRATION INTO CANCER CARE. DENG G, VICKERS A, SIMON YEUNG K, CASSILETH BR. i soc integr oncol. 2006;4(2):86-92 (eng).

Acupuncture has been evaluated in clinical studies for its effect in reducing some of the common symptoms experienced by cancer patients. Here we introduce this ancient treatment modality, outline its practice in the modern Western medicine setting, discuss safety issues related to the general and oncology populations, discuss its clinical applications in treating common symptoms experienced by cancer patients, and summarize data from clinical studies related to these applications. There is good evidence supporting acupuncture's effects in the reduction of cancer- related pain and chemotherapy-induced acute nausea and vomiting. There are preliminary data suggesting that acupuncture may help reduce post-chemotherapy fatigue and xerostomia caused by radiation. Acupuncture has a good safety record when performed by qualified practitioners. Acupuncture is useful complementary therapy in cancer care. Its integration into regular oncology practice can improve the supportive care of cancer patients.

2006- gera: 160029/di/re
EXPLORATORY ANALYSIS OF THE USEFULNESS OF ACUPRESSURE BANDS WHEN SEVERE CHEMOTHERAPY- RELATED NAUSEA IS EXPECTED. ROSCOE JA, JEAN-PIERRE P, MORROW GR, HICKOK JT, ISSELL B, WADE JL, KING DK .. j soc integr oncol. 2006;4(1):16-20 (eng).

The present study examines the efficacy of acupressure wristbands, compared with standard care alone and acustimulation wristbands, in preventing severe nausea among 86 breast cancer patients receiving doxorubicin-based chemotherapy who were at high risk of experiencing severe nausea following treatment. Significant differences in the proportion of patients who reported severe nausea were observed across three conditions (standard care, standard care with acupressure bands, and standard care with an acustimulation band). The proportion of patients in the acupressure band group who reported severe nausea following their chemotherapy treatment (41%) was significantly less than that of the standard care group (68%) and the acustimulation band group (73%). Overall, these findings showed that acupressure wristbands were efficacious and may be an appropriate form of adjuvant therapy for nausea management for breast cancer patients, especially those who are most at risk for experiencing severe nausea following

2007- gera: 142923/di/re

USE OF COMPLEMENTARY AND ALTERNATIVE MEDICINE THERAPIES TO CONTROL SYMPTOMS IN WOMEN LIVING WITH LUNG CANCER. WELLS M, SARNA L, COOLEY ME, BROWN JK, CHERNECKY C, WILLIAMS RD, PADILLA G, DANAO LL. cancer nurs. 2007;30(11):45-55 (ena)

Complementary and alternative medicine (CAM) use by cancer patients, especially women, is increasing. However, CAM use among patients with lung cancer, who have been reported to have the highest symptom burden, is poorly documented. This study describes types and frequencies of specific CAM therapies used by women with lung cancer to manage symptoms, and examines differences in demographic and clinical characteristics between CAM users and non-CAM users. Participants included 189 women with non-small cell lung cancer and > or =1 of 8 symptoms. Six CAM therapies, used to control symptoms, were assessed, including herbs, tea, acupuncture, massage, meditation, and prayer. Forty-four percent (84 women) used CAM therapies, including prayer (34.9%), meditation (11.6%), tea (11.6%), herbs (9.0%), massage (6.9%), and acupuncture (2.6%). Complementary and alternative medicine use was greatest for difficulty breathing and pain (54.8% each), with prayer the most commonly used CAM for all symptoms. Significant differences (P < .05) were found for age (t = 2.24), symptom frequency (t =

-3.02), and geographic location (chi = 7.51). Women who were younger, experienced more symptoms, and lived on the West Coast or South (vs Northeast) were more likely to use CAM. We found that CAM use is variable by symptom and may be an indicator of symptom burden. Our results provide important initial data regarding CAM use for managing symptoms by women with lung cancer.

2008- gera: 143405/di/re

A DOUBLE-BLIND PLACEBO-CONTROLLED RANDOMIZED STUDY OF CHINESE HERBAL MEDICINE AS COMPLEMENTARY THERAPY FOR REDUCTION OF CHEMOTHERAPY-INDUCED TOXICITY. MOK T, YEO W, JOHNSON P, HUI P, HO W , LAM K, XU M, CHAK K, CHAN A, WONG H, MO F, ZEE B. ann oncol. 2007;42736: (eng) BACKGROUND: Chinese herbal medicine (CHM) is a common complementary therapy used by patients with cancer for reduction of chemotherapy-induced toxic effects. This study applied the highest standard of clinical trial methodology to examine the role of CHM in reducing chemotherapy-induced toxicity, while maintaining a tailored approach to therapy. PATIENTS AND METHODS: Patients with early-stage breast or colon cancer who required postoperative adjuvant chemotherapy were eligible for the study. Enrolled patients were randomly assigned to one of three Chinese herbalists who evaluated and prescribed a combination of single-item packaged herbal extract granules. Patients received either CHM or placebo packages with a corresponding serial number. The placebo package contained nontherapeutic herbs with an artificial smell and taste similar to a typical herbal tea. The primary end points were hematologic and non-hematologic toxicity according to the National Cancer Institute Common Toxicity Criteria Version 2. RESULTS: One hundred and twenty patients were accrued at the time of premature study termination. Patient characteristics of the two groups were similar. The incidence of grade 3/4 anemia, leukopenia, neutropenia, and thrombocytopenia for the CHM and placebo groups were 5.4%, 47.3%, 52.7%, and 1.8% and 1.8%, 32.2%, 44.7%, and 3.6%, respectively (P = 0.27, 0.37, 0.63, and 0.13, respectively). Incidence of grade 2 nausea was the only nonhematologic toxicity that was significantly reduced in the CHM group (14.6% versus 35.7%, P = 0.04). CONCLUSIONS: Traditional CHM does not reduce the hematologic toxicity associated with chemotherapy. CHM, however, does have a significant impact on control of nausea.

2009- gera: 143905/di/re

ELECTROACUPUNCTURE AS AN ADJUNCTIVE TREATMENT TO CONTROL NEUROPATHIC PAIN IN PATIENTS WITH CANCER. MINTON O, HIGGINSON IJ. i pain symptom manage. 2007;33(2):115-7 (eng).

2010- gera: 144290/di/re
ACUPUNCTURE FOR CHEMOTHERAPY-INDUCED LEUKOPENIA: EXPLORATORY META-ANALYSIS OF RANDOMIZED CONTROLLED TRIALS. LU W, HU D, DEAN-CLOWER E, DOHERTY-GILMAN A, LEGEDZA AT, LEE H, MATULONIS U, ROSENTHAL DS. j soc integr oncol. 2007;5(1):1-10 (eng).

Chemotherapy-induced leukopenia and neutropenia are common side effects during cancer treatment. Acupuncture has been reported as an adjunct therapy for this complication. The current study reviewed published randomized controlled trials of acupuncture's effect and explored the acupuncture parameters used in these trials. We searched biomedical databases in English and Chinese from 1979 to 2004. The study populations were cancer patients who were undergoing or had just completed chemotherapy or chemoradiotherapy, randomized to either acupuncture therapy or usual care. The methodologic quality of trials was assessed. From 33 reviewed articles, 682 patients from 11 eligible trials were included in analyses. All trials were published in non-PubMed journals from China. The methodologic quality of these trials was considerably poor. The median sample size of each comparison group was 45, and the median trial duration was 21 days. The frequency of acupuncture treatment was once a day, with a median of 16 sessions in each trial. In the seven trials in which white blood cell (WBC) counts were available, acupuncture use was associated with an increase in

leukocytes in patients during chemotherapy or chemoradiotherapy, with a weighted mean difference of 1,221 WBC/muL on average (95% confidence interval 636-1,807; p < .0001). Acupuncture for chemotherapy-induced leukopenia is an intriguing clinical question. However, the inferior quality and publication bias present in these studies may lead to a falsepositive estimation. Meta-analysis based on these published trials should be treated in an exploratory nature only.

2011- gera: 144509/di/re ACUPUNCTURE FOR CHEMOTHERAPY-ASSOCIATED COGNITIVE DYSFUNCTION: A HYPOTHESIS-**GENERATING LITERATURE REVIEW TO INFORM** CLINICAL ADVICE. JOHNSTON MF, YANG C, HUI KK, XIAO B, LI XS, RUSIEWICZ A. integr cancer ther. 2007;6(1):36-41

There is an emerging consensus that between one fifth and one half of breast cancer patients experience chemotherapyassociated cognitive dysfunction. Research shows that patients with cancer are often interested in acupuncture for symptom relief. A clinical question thus arises: What should physicians advise their patients regarding the use of acupuncture to alleviate or ameliorate chemotherapyassociated cognitive dysfunction? The authors review and synthesize 2 bodies of relevant research literature: (1) the developing literature on the etiology and nature of chemotherapy-associated cognitive dysfunction and (2) the literature concerning acupuncture for neurological diseases and psychological issues. There is evidence that acupuncture may be effectively used to manage a range of psychoneurological issues, some of which are similar to those experienced by patients with chemotherapy-associated cognitive dysfunction. The evidence of efficacy is more promising for psychological than neurological conditions. Given evidence of possible efficacy combined with evidence of demonstrated safety, we suggest that physicians should support patient decisions to use acupuncture services for chemotherapy-associated cognitive dysfunction, especially

SYMPTOM MANAGEMENT WITH MASSAGE AND

2012- gera: 144511/di/re

ACUPUNCTURE IN POSTOPERATIVE CANCER PATIENTS: A RANDOMIZED CONTROLLED TRIAL. MEHLING WE, JACOBS B, ACREE M, WILSON L, BOSTROM A, WEST J, ACQUAH J, BURNS B, CHAPMAN J, HECHT FM. j pain symptom manage. 2007;33(3):258-66 (eng). The level of evidence for the use of acupuncture and massage for the management of perioperative symptoms in cancer patients is encouraging but inconclusive. We conducted a randomized, controlled trial assessing the effect of massage and acupuncture added to usual care vs. usual care alone in postoperative cancer patients. Cancer patients undergoing surgery were randomly assigned to receive either massage and acupuncture on postoperative Days 1 and 2 in addition to usual care, or usual care alone, and were followed over three days. Patients' pain, nausea, vomiting, and mood were assessed at four time points. Data on health care utilization were collected. Analyses were done by mixed-effects regression analyses for repeated measures. One hundred fifty of 180 consecutively approached cancer patients were eligible and consented before surgery. Twelve patients rescheduled or declined after surgery, and 138 patients were randomly assigned in a 2:1 scheme to receive massage and acupuncture (n=93) or to receive usual care only (n=45). Participants in the intervention group experienced a decrease of 1.4 points on a 0-10 pain scale, compared to 0.6 in the control group (P=0.038), and a decrease in depressive mood of 0.4 (on a scale of 1-5) compared to +/-0 in the control group (P=0.003). Providing massage and acupuncture in addition to usual care resulted in decreased pain and depressive mood among postoperative cancer patients when compared with usual care alone. These findings merit independent confirmation using larger sample sizes and attention control.

2013- gera: 144582/di/ra [EFFECT OF FRUCTUS BRUCEAE OIL EMULSION ON CELLULAR IMMUNE FUNCTION AND QUALITY OF LIFE IN PATIENTS WITH NON-SMALL CELL LUNG CANCER]. TIAN HQ, YU SY, WANG B. chinese journal of integrated

traditional and western medicine. 2007;27(2):157 (eng). OBJECTIVE: To observe the effect of Fructus Bruceae oil emulsion (FBE) on cellular immune function (CIF) and quality of life (QOF) in patients with non-small cell lung cancer (NSCLC) after chemotherapy. METHODS: One hundred and fifteen patients with mid-late stage NSCLC were randomly assigned to two groups, the 57 patients in the control group were only treated with chemotherapy of GP regimen, 58 in the treatment group with the chemotherapy of the same regimen and combined with FBE. The clinical efficacy was evaluated after two cycles of chemotherapy. RESULTS: The effective rate was 51.8% and 47.4% in the treatment group and the control group respectively, the difference between them was insignificant (P > 0.05). CIF and QOF in the treatment group were better than those in the control group after chemotherapy respectively (P < 0.01), in the latter, CIF and QOF were desreased after chemotherapy (P < 0.05). CONCLUSION: FBE combined with chemotherapy can improve the cellular immune function and quality of life in patients with mid-late stage NSCLC.

2014- gera: 145588/di/ra

THE EFFECTS OF P6 ACUPRESSURE IN THE PROPHYLAXIS OF CHEMOTHERAPY-RELATED NAUSEA AND VOMITING IN BREAST CANCER PATIENTS.

MOLASSIOTIS A, HELIN AM, DABBOUR R, HUMMERSTON S. complementary therapies in medicine. 2007;15(1):3-12

BACKGROUND: Nausea, and to a lesser extend vomiting, remain significant clinical problems after the administration of chemotherapy, with up to 60% of patients reporting nausea despite use of antiemetics. Combining antiemetics with other non-pharmacological treatments may prove more effective in decreasing nausea than antiemetics alone. Hence, the aim of the current study was to evaluate the effectiveness of using acupressure in Pericardium 6 (Neiguan) acu- point in managing chemotherapy-induced nausea and vomiting. METHODS: This was a randomised controlled trial. Acupressure was applied using wristbands (Sea-Band) which patients in the experimental group had to wear for the 5 days following the chemotherapy administration. Assessments of nausea, retching and vomiting were obtained from all patients daily for 5 days. Thirty-six patients completed the study from two centres in the UK, with 19 patients allocated to the control arm and 17 to the experimental arm. RESULTS: It was found that nausea and retching experience, and nausea, vomiting and retching occurrence and distress were all significantly lower in the experimental group compared to the control group (P<0.05). The only exception was with the vomiting experience, which was close to significance (P=0.06) DISCUSSION: Results highlight the important role of safe and convenient non-pharmacological complementary therapies, such as acupressure, in the management of the complex symptoms of chemotherapy- related nausea and vomiting.

2015- gera: 146181/di/ra

CHEMOTHERAPY-INDUCED PERIPHERAL NEUROPATHY IN CANCER PATIENTS: EVALUATION OF ACUPUNCTURE VS. ELECTROTHERAPY VS. VITAMIN B - A PROSPECTIVE RANDOMIZED PLACEBO CONTROLLED PILOT-STUDY. ROSTOCK M1, LACOUR M2, JAROSLAWSKI K1, GUETHLIN C2, ZUNDER T2, LUEDTKE R3, BARTSCH HH1. forschende komplementarmedizin and klassische naturheilkunde. 2007;14(S1): (deu).

Aims: Peripheral neuropathy (PNP) is an often dosage-limiting sid of several cytostatic drugs in cancer treatment. Is a special acu puncture concept combined with electrostimulation more effective that or other more usual but yet not well proved treatment options? Methods: Prospective randomized placebo controlled pilot-study with cancer patients suffering from PNP: electrostimulation-acupuncture vs. hydroelectric baths vs. vitamin B1/B6 capsules vs. placebo capsules. Main parameter: subjective PNP complaints (numeric rating scale NRS) d21 d0. Additional parameters: special PNP-score, electroneuro graphy, common toxicity criteria (WHO), Quality of Life (EORTC QLQ-C30). Using an adaptive study-design an interim analysis (acu puncture vs. placebo) was planned after inclusion of 60 patients (one sided t-test): A) If p<0,0207: acupuncture is effective, end of the study. B) If p>0,6:

acupuncture is not effective, end of the study. C) adaptation of the needed number of patients and con tinuation of the study. Results: 60 of 199 screened patients fulfilled al criteria and were included into the study. Improvement of the neuropathy complaints in the acupuncture group (NRS - mean value) was from 4,0 (+/-1,7) to 3,2 (+/-1,9) = 0,8; in the hydroe lectric bath group from 5,5 (+/-2,6) to 3,8 (+/-2,9) = 1,7; in the Vitamin B1B6 group from 4,9 (+/-1,8) to 3,3 (+/-2,3) = 1,6; and in the placebo group from 4,9 (+/-2,1) to 3,6 (+1-1,6) = 1,3. The pvalue of the differ- ence between acupuncture and placebo group was 0,705. Conclusions: The proven special acupuncture concept combined with electrostimula- tion is not effective in treating complaints from chemotherapy-induce neuropathy in cancer patients. There was no statistical significant difference in outcome for the two other therapy groups (hydroe- lectric baths and Vitamin B1B6) too, but the adaptive study design for this clinical trial was designed to answer the first question only. Further clinical research should focus on hydroelectric baths because they are used in a long tradition but are not well proved up to now.

2016- gera: 146267/di/re

[COMPLEMENTARY AND ALTERNATIVE MEDICINES TAKEN BY CANCER PATIENTS]. SIMON L, PREBAY D, BERETZ A, BAGOT JL, LOBSTEIN A, RUBINSTEIN I, SCHRAUB S. bull cancer. 2007;94(5):483-8 (fra). 244 cancer patients from 2 public hospitals (one adult, one pediatric) and one private clinic receiving chemotherapy were asked about complementary and alternative medicine (CAM). Nearly 28% used one or several CAM, especially homeopathy (60%), special diets or dietary supplements (44%), mistletoe (40%) and less frequently acupuncture or other treatments. These CAM are started 4 to 5 months after the onset of chemotherapy. The reasons for using CAM are enhance host defenses, better tolerance of treatment, but also for nearly 27% to treat cancer. All patients were treated by anticancer classical treatments and none thought to stop them. CAM are prescribed especially by homeopathic doctors. 30% of patients using CAM did not inform their oncologist of their CAM treatment. The same conclusions were drawn for the only 10 pediatric patients. The majority of all patients did not take any CAM before their cancer. In a multivariate analysis, female, young age (30-50 y) are correlated to CAM. All patients taking CAM are satisfied by the CAM treatment with good subjective results on their general status, fatigue and nausea-vomiting. These results are similar to other studies done in Europe.

2017- gera: 146278/nd/ra

MANAGEMENT OF CANCER PAIN WITH COMPLEMENTARY THERAPIES. x. oncology (williston park). 2007;21apr:10-22 (eng).

2018- gera: 146387/di/ra QIGONG FOR CANCER TREATMENT: A SYSTEMATIC REVIEW OF CONTROLLED CLINICAL TRIALS. LEE MS, CHEN KW, SANCIER KM, ERNST E. acta oncol. 2007:46(6):717-22 (eng).

Qigong is a mind-body integrative exercise or intervention from traditional Chinese medicine used to prevent and cure ailments, to improve health and energy levels through regular practice. The aim of this systematic review is to summarize and critically evaluate the effectiveness of qigong used as a stand-alone or additional therapy in cancer care. We have searched the literature using the following databases from their respective inceptions through November 2006: MEDLINE, AMED, British Nursing Index, CINAHL, EMBASE, PsycInfo, The Cochrane Library 2006, Issue 4, four Korean Medical Databases, Qigong and Energy Medicine Database from Qigong Institute and four Chinese Databases. Randomised and non-randomised clinical trials including patients with cancer or past experience of cancer receiving single or combined qigong interventions were included. All clinical endpoints were considered. The methodological quality of the trials was assessed using the Jadad score. Nine studies met our inclusion criteria (four were randomised trials and five were non-randomised studies). Eight of these trials tested internal qigong and one trial did not reported details. The methodological quality of these studies varies greatly and was generally poor. All trials related to palliative/supportive cancer

care and none to qigong as a curative treatment. Two trials suggested effectiveness in prolonging life of cancer patients and one failed to do so. We conclude that the effectiveness of qigong in cancer care is not yet supported by the evidence from rigorous clinical trials.

2019- gera: 146522/di/ra

[EFFECT OF PREVIOUS ANALGESIA OF SCALP ACUPUNCTURE ON POST-OPERATIVE EPIDURAL MORPHINE ANALGESIA IN THE PATIENT OF INTESTINAL CANCER]. HE BM, LI WS, LI WY. chinese acupuncture and moxibustion. 2007;27(5):369-71 (chi).

OBJECTIVE: To probe the effect of previous analgesia of scalp acupuncture. METHODS: Sixty cases of radical operation of intestinal cancer were randomly divided into 2 groups: a scalp acupuncture plus epidural analgesia (scalp acupuncture group) and an epidural analgesia group, 30 cases in each group. The scalp acupuncture group received scalp acupuncture from 20 min before operation to the end of the operation, and epidural analgesia at the end of the operation. The epidural analgesia group only received epidural analgesia at the end of the operation. Recovery of VAS scores, BCS scores and gastrointestinal function after operation were investigated to probe into effects of scalp acupuncture on epidural morphine analgesia after operation in the patient of intestinal cancer. RESULTS: The VAS scores at 6 h, 12 h, 24 h and 48 h in the scalp acupuncture group were lower than the epidural analgesia group, with significant differences at 6 h and 12 h between the two groups (P < 0.05). BCS scores at the 4 time points in the scalp acupuncture group were lower than the epidural analgesia group with significant differences between the two groups (all P < 0.05). The scalp acupuncture group in recovery of bowel sound, exsufflation from the anus in the scalp acupuncture group was faster than the epidural analgesia group (P < 0.01). CONCLUSION: Scalp acupuncture has a certain previous analgesic effect, reducing discomfort of the patient after operation and promoting the recovery of gastrointestinal functions.

2020- gera: 146978/nd/ra

INTEGRATIVE ONCOLOGY PRACTICE GUIDELINES.
DENG GE, CASSILETH BR, COHEN L, GUBILI J,
JOHNSTONE PA, KUMAR N, VICKERS A; SOCIETY FOR
INTEGRATIVE ONCOLOGY EXECUTIVE COMMITTEE;
ABRAMS D, ROSENTHAL D, SAGAR S, TRIPATHY D. j soc
integr oncol. 2007;5(2):65-84 (eng).

2021- gera: 146989/di/re

THERAPEUTIC APPLICATION OF ANTI-ARTHRITIS, PAIN-RELEASING, AND ANTI-CANCER EFFECTS OF BEE VENOM AND ITS CONSTITUENT COMPOUNDS. SON DJ, LEE JW, LEE YH, SONG HS, LEE CK, HONG JT. pharmacol ther. 2007;37(5):523-6 (eng).

Bee venom (BV) therapy (BVT), the therapeutic application of BV, has been used in traditional medicine to treat diseases, such as arthritis, rheumatism, pain, cancerous tumors, and skin diseases. BV contains a variety of peptides, including melittin, apamin, adolapin, the mast-cell-degranulating (MCD) peptide, enzymes (i.e., phospholipase [PL] A(2)), biologically active amines (i.e., histamine and epinephrine), and nonpeptide components which have a variety of pharmaceutical properties. BV has been reported to have antiarthritis effects in several arthritis models. Melittin, a major peptide component of BV, has anti-inflammatory and antiarthritis properties, and its inhibitory activity on nuclear factor kappaB (NF-kappaB) may be essential for the effects of BV. The anti-nociceptive effects of BV have also been demonstrated in thermal, visceral, and inflammatory pain models. Apcupoint stimulation (apipuncture) therapy into subcutaneous region may be important in the BV-induced antinociceptive effects. Multiple mechanisms, such as activation of the central and spinal opiod receptor, and alpha(2)-adrenergic activity, as well as activation of the descending serotonergic pathway have been suggested. The inhibition of c-Fos expression in the spinal cord by BV apipuncture in several nociceptive models is also reported to be a possible mechanism. BV also has anti-cancer activity. The cell cytotoxic effects through the activation of PLA(2) by melittin have been suggested to be the critical mechanism for the anti-cancer

activity of BV. The conjugation of cell lytic peptide (melittin) with hormone receptors and gene therapy carrying melittin can be useful as a novel targeted therapy for some types of cancer, such as prostate and breast cancer.

2022- gera: 147226/di/ra

THE MANAGEMENT OF CANCER-RELATED FATIGUE AFTER CHEMOTHERAPY WITH ACUPUNCTURE AND ACUPRESSURE: A RANDOMISED CONTROLLED TRIAL. MOLASSIOTIS A, SYLT P, DIGGINS H. complementary therapies in medicine. 2007;15(4):228-37 (eng). BACKGROUND: Cancer-related fatigue after chemotherapy is a difficult symptom to manage in practice and the most disruptive symptom in patients' lives. Acupuncture is a popular complementary therapy among cancer patients and some evidence exists that it could potentially alleviate fatigue by stimulating 'energy' points in the body. Hence, this study was carried out to assess the effects of acupuncture and acupressure in managing cancer-related fatigue and the feasibility of running a randomised trial with these two complementary therapies in preparation for a large trial. METHODS: This study was a randomised controlled trial. Forty-seven patients with cancer who experienced moderate to severe fatique were randomised either to an acupuncture group (n=15), an acupressure group (n=16) or a sham acupressure group (n=16). The acupuncture group received six 20-min sessions over 2 weeks, while the patients in the two acupressure groups were taught to massage/press the points and did so daily thereafter for 2 weeks on their own. Patients completed the Multidimensional Fatigue Inventory before randomisation, at the end of the 2-week intervention and again about 2 weeks after the end of the intervention. RESULTS: Significant improvements were found with regards to General fatigue (P<0.001), Physical fatigue (P=0.016), Activity (p=0.004) and Motivation (P=0.024). At the end of the intervention, there was a 36% improvement in fatigue levels in the acupuncture group, while the acupressure group improved by 19% and the sham acupressure by 0.6%. Improvements were observed even 2 weeks after treatments, although they were lower (22%, 15%, 7%, respectively). Acupuncture was a more effective method than acupressure or sham acupressure. Subjects needed a longer treatment period to have more sustained results. The trial was methodologically feasible. CONCLUSION: Acupuncture shows great potential in the management of cancer-related fatigue. As a randomised trial with acupuncture is feasible and preliminary data shows significant improvements, it should be tested further using a large sample and a multicentre design.

2023- gera: 147346/di/re

RANDOMIZED, CONTROLLED TRIAL OF ACUPUNCTURE FOR THE TREATMENT OF HOT FLASHES IN BREAST CANCER PATIENTS. DENG G, VICKERS A, YEUNG S, CASSILETH B. j clin oncol. 2007;25(35):5584-90 (eng). PURPOSE: To determine the immediate and long-term effects of true acupuncture versus sham acupuncture on hot flash frequency in women with breast cancer. PATIENTS AND METHODS: Seventy-two women with breast cancer experiencing three or more hot flashes per day were randomly assigned to receive either true or sham acupuncture. Interventions were given twice weekly for 4 consecutive weeks. Hot flash frequency was evaluated at baseline, at 6 weeks, and at 6 months after initiation of treatment. Patients initially randomly assigned to the sham group were crossed over to true acupuncture starting at week 7. RESULTS: The mean number of hot flashes per day was reduced from 8.7 (standard deviation [SD], 3.9) to 6.2 (SD, 4.2) in the true acupuncture group and from 10.0 (SD, 6.1) to 7.6 (SD, 5.7) in the sham group. True acupuncture was associated with 0.8 fewer hot flashes per day than sham at 6 weeks, but the difference did not reach statistical significance (95% CI, -0.7 to 2.4; P = .3). When participants in the sham acupuncture group were crossed over to true acupuncture, a further reduction in the frequency of hot flashes was seen. This reduction in hot flash frequency persisted for up to 6 months after the completion of treatment. CONCLUSION: Hot flash frequency in breast cancer patients was reduced following acupuncture. However, when compared with sham acupuncture, the reduction by the acupuncture regimen as provided in the

current study did not reach statistical significance. We cannot exclude the possibility that a longer and more intense acupuncture intervention could produce a larger reduction of these symptoms.

2024- gera: 147462/di/ra

THE MANAGEMENT OF CANCER-RELATED FATIGUE
AFTER CHEMOTHERAPY WITH ACUPUNCTURE AND
ACUPRESSURE: A RANDOMISED CONTROLLED TRIAL.
MOLASSIOTIS A, SYLT P, DIGGINS H. complementary
therapies in medicine, 2007;15(4):228 (eng.)

therapies in medicine. 2007;15(4):228 (eng). BACKGROUND: Cancer-related fatigue after chemotherapy is a difficult symptom to manage in practice and the most disruptive symptom in patients' lives. Acupuncture is a popular complementary therapy among cancer patients and some evidence exists that it could potentially alleviate fatigue by stimulating 'energy' points in the body. Hence, this study was carried out to assess the effects of acupuncture and acupressure in managing cancer-related fatigue and the feasibility of running a randomised trial with these two complementary therapies in preparation for a large trial. METHODS: This study was a randomised controlled trial. Forty-seven patients with cancer who experienced moderate to severe fatique were randomised either to an acupuncture group (n=15), an acupressure group (n=16) or a sham acupressure group (n=16). The acupuncture group received six 20-min sessions over 2 weeks, while the patients in the two acupressure groups were taught to massage/press the points and did so daily thereafter for 2 weeks on their own. Patients completed the Multidimensional Fatigue Inventory before randomisation, at the end of the 2-week intervention and again about 2 weeks after the end of the intervention. RESULTS: Significant improvements were found with regards to General fatigue (P<0.001), Physical fatigue (P=0.016), Activity (p=0.004) and Motivation (P=0.024). At the end of the intervention, there was a 36% improvement in fatigue levels in the acupuncture group, while the acupressure group improved by 19% and the sham acupressure by 0.6%. Improvements were observed even 2 weeks after treatments, although they were lower (22%, 15%, 7%, respectively). Acupuncture was a more effective method than acupressure or sham acupressure. Subjects needed a longer treatment period to have more sustained results. The trial was methodologically feasible. CONCLUSION: Acupuncture shows great potential in the management of cancer-related fatigue. As a randomised trial with acupuncture is feasible and preliminary data shows significant improvements, it should be tested further using a large sample and a multicentre design.

2025- gera: 147778/di/ra

POINT INJECTION WITH ONDANSETRON TO PREVENT VOMITING INDUCED BY CHEMOTHERAPY. WANG J AND YUESHENG XIA. international journal of clinical medicine. 2007;16(3):179 (eng).

The anti-vomiting effect of using point injection of Ondansetron was observed in 84 cases by random self-contrast controls. All cases were subjected to a combined platinum chemotherapy with diamminedichloroplatinum (DDP), 50 mg daily for 3 days. The first round of chemotherapy was applied with point injection of Ondansetron treatment or point injection with Metoclopramide, and vice versa in the second round. The results showed that in the point injection with Ondansetron group (Ondansetron group), the effective rate of anti-vomiting was 88.1%, which was markedly higher than the 35.7% in the point injection with Metoclopramide group (Metoclopramide group) P<0.01. However, the effective rate in the Metoclopramide group did improve for late onset vomiting, though was still less than in the other group. It was suggested that point injection with Ondansetron can relieve vomiting caused by platinum chemotherapy, with no adverse effects, thereby indicating that it is useful in preventing vomiting caused by chemotherapy in patients with cancer. From July 2002 to November 2004, point injection with Ondansetron was used to stop vomiting caused by platinum chemotherapy, and a comparison of effects was made between point injection with Ondansetron and point injection with Metoclopramide. The results were encouraging and the following is a report of our study.

2026- gera: 147782/di/ra

THE EFFECT OF ACUPUNCTURE ON SERUM TUMOR NECROSIS FACTOR IN PATIENTS WITH ACUTE CEREBRAL INFARCTION. LIPING WANG, YIN BIAN, JIANYUAN LI, WEI ZHOU, YONGWEI FENG, AND JU YANG. international journal of clinical medicine. 2007;16(3):197 (eng).

Purpose: To explore the effect of acupuncture on serum tumor necrosis factor (TNF) in patients with acute cerebral infarction. Methods: 68 cases of acute cerebral infarction were randomly divided into an acupuncture group and a control group, and the serum TNF contents before acupuncture and one week after acupuncture were determined with enzyme linked immunosorbent assay (ELISA) and the clinical therapeutic effects were assessed respectively before the acupuncture and one month after the acupuncture treatment ended. Results: TNF contents in the two groups were found to be lower one week after acupuncture, with a significant decrease in the acupuncture group (P<0.01). There was no significant difference between the two groups in the therapeutic effect one week after acupuncture and there was a significant difference 30 days after acupuncture (P<0.05). Conclusion: Early acupuncture treatment can effectively decrease the serum content of TNF, quicken inflammatory absorption or decrease inflammatory response and accelerate functional restoration of the brain and limbs in patients with acute cerebral infarction.

2027- gera: 147819/di/ra

USING ACUPUNCTURE TO MANAGE HOT FLASHES AND NIGHT SWEATS IN WOMEN WITH EARLY BREAST CANCERT (ABSTRACT). DE VALOIS BET AL. journal of alternative and complementary medicine. 2007;13(8):863 (eng).

2028- gera: 147935/di/ra

MANUAL ACUPUNCTURE (BILATERAL ST 6, LI 4, ST 36, AND SP 6) AMELIORATES RADIATION-INDUCED XEROSTOMIA IN CANCER PATIENTS: A PILOT-STUDY (ABSTRACT). CHO JUNG HYOET AL. journal of alternative and complementary medicine. 2007;13(8):902 (eng).

2029- gera: 148089/di/re

EVIDENCE-BASED CHINESE MEDICINE FOR CANCER THERAPY. KONKIMALLA VB, EFFERTH T. j ethnopharmacol. 2007;dec 23:x (eng).

In contrast to western medicine (WM), traditional Chinese medicine (TCM) does not focus on a single target but on multiple targets involved in a particular disease condition by applying diverse modalities, such as herbal medicine, acupuncture, moxibustion, etc. There is no pre-determined treatment procedure in TCM, and every patient condition is handled individually. Such patient-tailored treatments have a millennia-old tradition in TCM. Illustrative examples of the power of TCM have been documented in cancer research, i.e., camptothecin, homoharringtonine, or arsenic trioxide. On the other hand, one major reason for reluctance of western academia towards TCM is due to the lack of clinical studies of TCM receipts. This situation is changing very recently, and a number of clinical studies were conducted on TCM providing convincing evidence for the first time to gain credibility and reputation outside China. Clinical trials with TCM remedies focus on three major fields in cancer research: (1) improvement of poor treatment response rates towards standard chemo- and radiotherapy, (2) reduction of severe adverse effects of standard cancer therapy, and (3) unwanted interactions of standard therapy with herbal medicines. Efficacy and safety of TCM treatments depend on the quality of TCM products. Appropriate quality assurance and control of TCM products as well as sustainable production methods are pre-conditions for the implementation of TCM in cancer therapy at an international level. In conclusion, the most important question for recognition and implementation of TCM into WM concerns the clinical evidence for the efficacy of TCM and international quality standards for TCM products.

2030- gera: 149104/di/re XEROSTOMIE RADIO-INDUITE, PREVENTION,TRAITEMENT, PERSPECTIVES. GUINAND N, DULGUEROV P, GIGER R. rev med suisse. 2007;3(127):2225-9 (fra).

Most of head and neck cancer patients will undergo radiotherapy. Xerostomia is probably its most frequent side effect. Subjective and objective criteria allow evaluating and grading xerostomia. New radiotherapy techniques and use of cytoprotectants can help to preserve salivary gland function. Parasym-pathicomimetics and saliva substitutes reduce symptoms. Strict mouth cleaning and fluoride's use prevent teeth deterioration and infections. Important breakthroughs have been made in the pathophysiology of xerostomia and new treatments are developed.

2031- gera: 160053/di/ra
ACUPUNCTURE FOR 70 CASES OF HICCUP AFTER **OPERATION OF PRIMARY LIVER CANCER, LUO M, SUN** BD, WU SB. world journal of acupuncture-moxibustion. 2007;17(3):52-4 (eng).

2032- gera: 161414//ra

TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION VS. TRANSCUTANEOUS SPINAL ELECTROANALGESIA FOR CHRONIC PAIN ASSOCIATED WITH BREAST CANCER TREATMENTS. ROBB KA, NEWHAM DJ, WILLIAMS JE. j pain symptom manage. 2007;33(4):410-9

Chronic pain associated with breast cancer treatment is becoming increasingly recognized. Patients with this condition can experience significant physical and psychological morbidity and may benefit from nonpharmacological interventions as part of a multidisciplinary team approach. We compared the effectiveness of transcutaneous electrical nerve stimulation (TENS), transcutaneous spinal electroanalgesia (TSE), and a placebo (sham TSE) in a randomized controlled trial. The study sample comprised 41 women with chronic pain following breast cancer treatment, and outcome measures included pain report, pain relief, pain interference, anxiety and depression, arm mobility, and analgesic consumption. There was little evidence to suggest that TENS or TSE were more effective than placebo. All three interventions had beneficial effects on both pain report and quality of life, a finding that may be due to either psychophysical improvements resulting from the personal interaction involved in the treatment or a placebo response. Although electrical stimulation appears to be well tolerated in this population, further research is needed to establish its effectiveness for chronic cancer treatment-related pain

2033- gera: 161507/co/re

PILOT STUDY OF ACUPUNCTURE FOR THE TREATMENT OF JOINT SYMPTOMS RELATED TO ADJUVANT AROMATASE INHIBITOR THERAPY IN POSTMENOPAUSAL BREAST CANCER PATIENTS. CREW KD, CAPODICE JL, GREENLEE H, APOLLO A, JACOBSON JS, RAPTIS G, BLOZIE K, SIERRA A, HERSHMAN DL.. j cancer surviv.. 2007;1(4):283-91 (eng)

INTRODUCTION: Aromatase inhibitors (Als) have become the standard of care for the adjuvant treatment of postmenopausal, hormone-sensitive breast cancer. However, patients receiving Als may experience joint symptoms, which may lead to early discontinuation of this effective therapy. We hypothesize that acupuncture is a safe and effective treatment for Al-induced arthralgias. METHODS: Postmenopausal women with earlystage breast cancer who had self-reported musculoskeletal pain related to adjuvant AI therapy were randomized in a crossover study to receive acupuncture twice weekly for 6 weeks followed by observation or vice-versa. The intervention included full body and auricular acupuncture, and a jointspecific point prescription. Outcome measures included the Brief Pain Inventory-Short Form (BPI-SF), Western Ontario and McMaster Universities Osteoarthritis (WOMAC) index, the Functional Assessment of Cancer Therapy-General (FACT-G) quality of life measure, and serum levels of inflammatory markers, IL-1 beta and TNF-alpha. RESULTS: Twenty-one women were enrolled and two discontinued early. From baseline to the end of treatment, patients reported improvement in the mean BPI-SF worst pain scores (5.3 to 3.3, p = 0.01), pain severity (3.7 to 2.5, p = 0.02), and pain-related functional interference (3.1 to 1.7, p = 0.02), as well as the

WOMAC function subscale and FACT- G physical well-being (p = 0.02 and 0.04, respectively). No adverse events were reported. DISCUSSION/CONCLUSIONS: In this pilot study, acupuncture reduced Al-related joint symptoms and improved functional ability and was well-tolerated. IMPLICATIONS FOR CANCER SURVIVORS: Musculoskeletal side effects are common among breast cancer survivors on adjuvant Al therapy, therefore, effective treatments are needed for symptom relief and to improve adherence to these life-saving medications

2034- gera: 148197/di/re

TWO MODES OF ACUPUNCTURE AS A TREATMENT FOR HOT FLUSHES IN MEN WITH PROSTATE CANCER-A PROSPECTIVE MULTICENTER STUDY WITH LONG-TERM FOLLOW-UP. FRISK J, SPETZ AC, HJERTBERG H, PETERSSON B, HAMMAR M. eur urol. 2008;feb 14:x (eng).

2035- gera: 148608/di/re

LONG-TERM FOLLOW-UP OF ACUPUNCTURE AND HORMONE THERAPY ON HOT FLUSHES IN WOMEN WITH BREAST CANCER: A PROSPECTIVE, RANDOMIZED, CONTROLLED MULTICENTER TRIAL. FRISK J, CARLHALL S, KALLSTROM AC, LINDH-ASTRAND L, MALMSTROM A, HAMMAR M. climacteric. 2008;11(2):166-74 (eng). Objective To evaluate the effects of electro-acupuncture (EA) and hormone therapy (HT) on vasomotor symptoms in women with a history of breast cancer. Methods Forty-five women were randomized to EA (n = 27) for 12 weeks or HT (n = 18) for 24 months. The number of and distress caused by hot flushes were registered daily before, during and up to 24 months after start of treatment. Results In 19 women who completed 12 weeks of EA, the median number of hot flushes/24 h decreased from 9.6 (interquartile range (IQR) 6.6-9.9) at baseline to 4.3 (IQR 1.0-7.1) at 12 weeks of treatment (p < 0.001). At 12 months after start of treatment, 14 women with only the initial 12 weeks of EA had a median number of flushes/24 h of 4.9 (IQR 1.8-7.3), and at 24 months seven women with no other treatment than EA had 2.1 (IQR 1.6-2.8) flushes/24 h. Another five women had a decreased number of flushes after having additional EA. The 18 women with HT had a baseline median number of flushes/24 h of 6.6 (IQR 4.0-8.9), and 0.0 (IQR 0.0-1.6; p = 0.001) at 12 weeks. Conclusion Electro-acupuncture is a possible treatment of vasomotor symptoms for women with breast cancer and should be further studied for this group of women.

2036- gera: 148964/di/re

INTERVENTIONS FOR ALLEVIATING CANCER-RELATED DYSPNEA: A SYSTEMATIC REVIEW. BEN-AHARON I, GAFTER-GVILI A, PAUL M, LEIBOVICI L, STEMMER SM. j clin oncol. 2008;26(14):2396-404 (eng).

PURPOSE: Dyspnea is one of the most distressing symptoms experienced by terminally ill cancer patients. This study aimed to evaluate the role of interventions for the palliation of dyspnea. METHODS: We conducted a systematic review of randomized controlled trials assessing all pharmacologic and nonpharmacologic interventions for dyspnea palliation in cancer patients, and searched the Cochrane Library MEDLINE, conference proceedings, and references. Two reviewers independently appraised the quality of trials and extracted data. RESULTS: Our search yielded 18 trials. Fourteen evaluated pharmacologic interventions: seven assessing opioids (a total of 256 patients), five assessing oxygen (137 patients), one assessing helium-enriched air, and one assessing furosemide. Four trials evaluated nonpharmacologic interventions (403 patients). The administration of subcutaneous morphine resulted in a significant reduction in dyspnea Visual Analog Scale (VAS) compared with placebo. No difference was observed in dyspnea VAS score when nebulized morphine was compared with subcutaneous morphine, although patients preferred the nebulized route. The addition of benzodiazepines to morphine was significantly more effective than morphine alone, without additional adverse effects. Oxygen was not superior to air for alleviating dyspnea, except for patients with hypoxemia. Nursing-led interventions improved breathlessness. Acupuncture was not beneficial. CONCLUSION: Our review supports the use of opioids for dyspnea relief in cancer

patients. The use of supplemental oxygen to alleviate dyspnea can be recommended only in patients with hypoxemia. Nursing-led nonpharmacologic interventions seem valuable. Only a few studies addressing this question were performed. Thus, further studies evaluating interventions for alleviating dyspnea are warranted.

2037- gera: 149052/di/ra

[OBSERVATION ON THE THERAPEUTIC EFFECT OF ACUPUNCTURE AT PAIN POINTS ON CANCER PAIN). CHEN ZHONG-JIE, GUO YU-PENG, DIRECTOR; WU ZHONG-CHUO. chinese acupuncture and moxibustion. 2008;28(4):251 (chi).

Objective To search for a safe and effective method for alleviating cancer pain. Methods Sixty-six cases of late cancer with pain were first divided into 3 different degrees of pain, mild, moderate and severe, and then the patients with pain of each same degree were randomly divided into an acupuncture group treated by acupuncture at 3-5 of the most severe tender points, and a medication group treated with oral administration according to the WHO Three Step Administration Principle, i. e. the patients with mild pain took aspirin, moderate pain took codeine and severe pain took morphine. Results Both two methods could effectively control cancer pain. The total effective rate of 94. 1% in the acupuncture group was significantly better than 87. 5% in the medication group (P<O. 05). Conclusion The analgesic effect of acupuncture treatment is better than that of the Three Step Administration, with no adverse effect and addiction of

2038- gera: 149207/di/ra

CLINICAL EFFECTS OF SHENQI FUZHENG INJECTION IN THE NEOADJUVANT CHEMOTHERAPY FOR LOCAL ADVANCED BREAST CANCER AND THE EFFECTS ON T-LYMPHOCYTE SUBSETS. DAI ZHIJUN, WANG XIJING, KANG HUAFENG ET AL. journal of traditional chinese medicine. 2008;28(1): (eng).

2039- gera: 149486/di/re

BENEFITS OF TAI CHI IN PALLIATIVE CARE FOR ADVANCED CANCER PATIENTS. HUI ES, CHENG JO, CHENG HK. palliat med. 2008;22(1):93-4 (eng).

2040- gera: 149880/di/ra

MANUAL ACUPUNCTURE IMPROVED QUALITY OF LIFE IN CANCER PATIENTS WITH RADIATION-INDUCED XEROSTOMIA. CHO JH, CHUNG WK, KANG W, CHOI SM, CHO CK, SON CG. journal of alternative and complementary medicine. 2008;14 (5):523 (eng). PURPOSE: Radiotherapy-induced xerostomia seriously reduces the quality of life (QOL) for patients with head and neck cancer. This study aimed to investigate the effects of manual acupuncture on objective and subjective assessment of symptom changes in patients with cancer who have with radiation-induced xerostomia. MATERIALS AND METHODS: Twelve (12) patients with radiation-induced xerostomia were randomized into 2 groups (real or sham acupuncture). Acupuncture was conducted twice weekly for 6 weeks in a single-blind setting. The effect was evaluated by measuring whole salivary flow rates (stimulated and unstimulated) and questionnaire-based assessment of subjective symptoms preand post-treatment (3 and 6 weeks after acupuncture treatment). RESULTS: Both groups showed a slight increase in whole salivary flow rates, with no significant difference between them. However, real acupuncture markedly increased unstimulated salivary flow rates, and improved the score for dry mouth according to the xerostomia questionnaire, by 2.33 points versus 0.33 in the controls. CONCLUSIONS: Our results showed the significantly meaningful amelioration of the subjective sensation of xerostomia closely associated with QOL in patients with head and neck cancer treated with irradiation.

2041- gera: 150006/di/re

AURICULAR ACUPUNCTURE: A NOVEL TREATMENT FOR VASOMOTOR SYMPTOMS ASSOCIATED WITH **LUTEINIZING- HORMONE RELEASING HORMONE** AGONIST TREATMENT FOR PROSTATE CANCER. HARDING C, HARRIS A, CHADWICK D. bju int. 2008;aug

OBJECTIVES To evaluate the role of auricular acupuncture (AA) in men receiving luteinizing-hormone releasing hormone (LHRH) analogues for carcinoma of the prostate, as vasomotor symptoms can affect the quality of life in such men, and similar symptoms in postmenopausal women have been successfully treated with AA. PATIENTS AND METHODS In all, 60 consecutive patients with prostate cancer and on LHRH agonist treatment (median age 74 years, range 58-83) consented to weekly AA for 10 weeks. The validated 'Measure Yourself Concerns and Well-being' questionnaire (a six-point scale to assess symptom severity) was used to assess concerns and well-being before and after treatment. RESULTS All men completed the treatment with no adverse events recorded, apart from transient exacerbation of symptoms in two men; 95% of patients reported a decrease in the severity of symptoms, from a mean 5.0 to 2.1 (Student's t-test, P < 0.01). CONCLUSIONS The symptomatic improvement was at levels comparable with that from pharmacotherapy, and cost analysis showed AA to be a viable alternative. Larger randomized studies are needed to fully evaluate AA against more conventional treatments, and these are planned.

2042- gera: 150009/di/re

DOES ACUPRESSURE HELP REDUCE NAUSEA AND **VOMITING IN PALLIATIVE CARE PATIENTS? PILOT** STUDY. PERKINS P, VOWLER SL. palliat med. 2008;22(2):193-4 (eng).

2043- gera: 150027/nd/re

BRUCEA JAVANICA FRUIT INDUCES CYTOTOXICITY AND APOPTOSIS IN PANCREATIC ADENOCARCINOMA CELL LINES. LAU ST, LIN ZX, ZHAO M, LEUNG PS. phytother res. 2008;22(4):477-86 (eng).

Brucea javanica fruit is thought to have anticancer properties in Chinese medicine and its extract has been shown to possess antiproliferative and pro-apoptotic activities on human carcinoma cells. In the present study we demonstrated for the first time that Fructus Bruceae extract exhibited cytotoxic effects on the three pancreatic adenocarcinoma cell lines, PANC-1, SW1990 and CAPAN-1; the effects were comparable to those exhibited by camptothecin in our culture system. In addition, Fructus Bruceae extract induced fragmentation of genomic DNA, as evidenced by Hoechst staining and the cell death detection ELISA(PLUS) assay. Western blot analysis further showed down-regulation of pro-caspase 3 protein expression, indicating that the observed cytotoxic effects of the extract were associated with induction of apoptosis. These findings are not only significant in the development of traditional Chinese medicine as an alternative treatment for pancreatic cancer, but also in the elucidation of the potential mechanism(s) of Fructus Bruceae extract in cancer therapy. (c) 2008 John Wiley & Sons, Ltd.

2044- gera: 150074/nd/re

IS THERE A ROLE FOR HERBAL MEDICINE IN THE TREATMENT OF PANCREATIC CANCER?. HIGHLIGHTS FROM THE "44TH ASCO ANNUAL MEETING". CHICAGO, IL, USA. MAY 30 - JUNE 3, 2008. SAIF MW. jop.

2008;9(4):403-7 (eng).

One of the greatest challenges in the treatment of pancreatic cancer remains its inherent lack of beneficial response to cytotoxic chemotherapy. According to the encyclopedic knowledge on herbal medicine regimen and clinical experience accumulated for centuries, traditional Chinese medicine can provide new avenues for alternative treatments of pancreatic diseases. Chinese herbal extracts have been widely used for the treatment of various cancers, but objective information on their efficacy in pancreatic cancer is lacking. This article provides a summary of herbal medicine, presented at the Annual Meeting of ASCO, 2008. The clinical applications of these active compounds warrant further investigation in randomized, controlled clinical trials.

2045- gera: 151010/di/re
ACUPUNCTURE FOR THE TREATMENT OF HOT FLASHES IN BREAST CANCER PATIENTS, A RANDOMIZED, CONTROLLED TRIAL. HERVIK J, MJALAND O. breast cancer res treat. 2008;oct 7:x (eng).

Acupuncture has been used to treat the problem of hot flashes in healthy postmenopausal women. The object of this study was to investigate the efficacy of acupuncture in women with breast cancer suffering from hot flashes as a result of antioestrogen medication. In a prospective, controlled trial, 59 women suffering from hot flashes following breast cancer surgery and adjuvant oestrogen-antagonist treatment (Tamoxifen) were randomized to either 10 weeks of traditional Chinese acupuncture or sham acupuncture (SA). Mean number of hot flashes at day and night were recorded prior to treatment, during the treatment period as well as during the 12 weeks following treatment. A validated health score (Kupperman index) was conducted at baseline, at the end of the treatment period and at 12 weeks following treatment. During the treatment period mean number of hot flashes at day and night was significantly reduced by 50 and almost 60%, respectively from baseline in the acupuncture group, and was further reduced by 30% both at day and night during the next 12 weeks. In the sham acupuncture group a significant reduction of 25% in hot flashes at day was seen during treatment, but was reversed during the following 12 weeks. No reduction was seen in hot flashes at night. Kupperman index was reduced by 44% from baseline to the end of the treatment period in the acupuncture group, and largely maintained 12 weeks after treatment ended. No corresponding changes were seen in the sham acupuncture group. Acupuncture seems to provide effective relief from hot flashes both day and night in women operated for breast cancer, treated with Tamoxifen. This treatment effect seems to coincide with a general health improvement measured with the validated Kupperman index.

2046- gera: 151134/di/ra

CLINICAL STUDY OF A CHANGE IN SOD LEVEL DURING LUNG CANCER SURGERY UNDER COMBINED ACUPUNCTURE AND MEDICINE ANESTHESIA. MING YI-HUA ZHU YU-MING, ZHOU HONG, TONG WEN-PU, SHI LING-LI. shanghai journal of acupuncture and moxibustion. 2008;27(10):16 (chi).

Objective To observe the change in SOD level in patients receiving lung cancer surgery under acupuncture anesthesia and investigate the influence of acupuncture on erythrocytic immunity. Methods Serum superoxide dismutase (SOD) content was measured using SOD test kit in lung cancer patients. Patients who will receive lung cancer surgery were divided into two groups. SOD content was measured in the acupuncture-medicine anesthesia group of 30 cases and the general anesthesia group of 30 cases at admission, one day before and seven days after surgery. The contents were compared. The acupuncture-medicine anesthesia group were acupunctured at points Dazhu (BL 11), Mingmen (GV 4), Zusanli (ST 36) and Sanyinjiao (SP 6) at three days before, during and six days after surgery. Results A comparison of SOD contents between the two groups showed no statistically significant difference at admission and eleven days after surgery (P > 0.05), but there was a statistically significant difference between the two groups at one day before and seven days after surgery (P < 0. 05). It was significantly better in the acupuncture-medicine anesthesia group than in the general anesthesia group. Conclusion The results indicate acupuncture can increase SOD content and produce a regulating effect on immune function in lung cancer surgery patients.

2047- gera: 151188/di/ra

THE USE OF COMPLEMENTARY AND ALTERNATIVE MEDICINE AMONG CHINESE WOMEN WITH BREAST CANCER. CHEN Z, GU K, ZHENG Y, ZHENG W, LU W, SHU XO. journal of alternative and complementary medicine. 2008;14(8):1049-55 (eng).

OBJECTIVES: Using data from the Shanghai Breast Cancer Survival Study (SBCSS), we estimated the prevalence and perceived benefits of complementary and alternative medicine (CAM) and Chinese herbal medicine (CHM), and relevant demographic and clinical factors. DESIGN: This was a cross-sectional cohort study. SUBJECTS/SETTING/LOCATION: Subjects were 5046 women who participated in the SBCSS, conducted in urban Shanghai, China.

INTERVENTIONS/OUTCOME MEASURES: Data on CAM use (at least once a week for at least 1 month), patient

sociodemographics, and medical history were collected using a structured questionnaire. RESULTS: The average diagnosis age of participants was 53.5 years. Interviews were completed about 6.5 months after diagnosis. Ninety- seven percent (97%) of participants used CAM therapy after diagnosis. Supplements were the most common type, followed by CHM, and physical activity. Walking was the most popular type of physical activity. Almost all CHM users used CHM as part of their cancer treatment; three quarters reported CHM use for boosting the immune system. About two thirds of women considered CHM effective. Supplement users were more likely to have higher income, higher educational attainment, be married, have undergone or completed radiotherapy, used tamoxifen, have estrogen receptor (ER)-negative/progesterone receptor (PR)-negative cancer, and have menopausal symptoms. CHM use was associated with younger age, higher income, menopausal symptoms, completion of chemotherapy, and past tamoxifen use. Patients with an earlier clinical stage or who had undergone radiotherapy used less CHM Chemotherapy or radiotherapy and cancer metastasis were positively related to physical activity participation. Current tamoxifen use, ER- /PR- cancer, higher educational attainment, and reporting average or better quality of life were inversely related to exercise participation. CONCLUSIONS: Given the high prevalence of CAM use in patients with breast cancer and the variety of types of CAM, more research is needed to determine the impact of CAM's effectiveness and safety and interaction with conventional cancer treatment on breast cancer survival.

2048- gera: 151222/di/ra

EFFECT OF RUNING II ON THE GROWTH AND METASTASIS OF TRANSPLANTED TUMOR IN MAMMARY CANCER- BEARING MICE AND ITS MECHANISM. QUE HF, CHEN HF, GAO SP, LU DM, TANG HJ, JIA XH, XU JN. journal of traditional chinese medicine. 2008;28(4):293-8. (eng).

OBJECTIVE: To study the effect of Runing II (a Chinese herbal preparation for mammary cancer) on the growth and metastasis of transplanted tumor of mammary cancer MA-891bearing TA2 mice and its mechanism. METHODS: The model of mammary cancer MA-891 cell strain transplanted tumor of TA2 mice with lung metastasis were developed to observe the effect of Runing II on the growth and metastasis of the transplanted tumor. The immunohistochemical method and image analysis were adopted to detect the levels of vascular endothelial growth factor (VEGF), vascular endothelial growth factor receptor (VEGFR), and micro-vessel count (MVC) and micro-vessel area (MVA). RESULTS: In the Runing II group, the tumor weight inhibition rate and the lung metastasis inhibition rate were 37.3% and 65.4% respectively, the tumor growth and lung metastasis were obviously inhibited; And the levels of VEGF and VEGFR, MVC and MVA were significantly decreased as compared with those in the tumor-bearing control group (P<0.05). CONCLUSION: The Chinese herbal preparation Running II can inhibit the metastasis of tumor through inhibiting the angiogenesis, and the mechanism is possibly related with down-regulation of VEGF and VEGFR

2049- gera: 151242/di/ra

CHANGING PATTERNS OF CAM USE AMONG PROSTATE CANCER PATIENTS TWO YEARS AFTER DIAGNOSIS: REASONS FOR MAINTENANCE OR DISCONTINUATION. PORTER M, KOLVA E, AHL R, DIEFENBACH MA. complementary therapies in medicine. 2008;16(6):318-24 (eng).

OBJECTIVES: To explore the extent to which men treated for early stage, localized prostate cancer maintain or discontinue CAM therapies over time and to investigate external as well as psychological factors that are related to maintenance or discontinuation of CAM therapies. DESIGN: A survey questionnaire was mailed to a subset of participants (N=225) from an earlier study that investigated the initiation and use of CAM therapies after a prostate cancer diagnosis. SETTING: Participants were recruited from a comprehensive cancer centre and affiliated network hospitals following treatment for early stage, localized prostate cancer. MAIN OUTCOME MEASURES: Usage history for the 17 CAM therapies most

commonly used by prostate cancer patients. Likert-scale endorsement of reasons for discontinuing or not trying CAM therapies. A discontinuation index (i.e., the ratio of instances that the therapy was discontinued to instances that it was attempted) was computed for each therapy. RESULTS: CAM usage decreased by approximately one quarter within two years following treatment for early stage, localized prostate cancer. Men most frequently cited beliefs that discontinued CAM therapies were ineffective, generally unsuitable, or harmful, despite a lack of objective criteria for making these judgments. CONCLUSIONS: The increase in CAM usage that tends to occur immediately after diagnosis subsides within two years after prostate cancer treatment. Although lack of confidence in CAM's effectiveness characterized all discontinuations, higher effort therapies tend to be discontinued more quickly than lower effort therapies.

2050- gera: 152496/di/ra

ACUPUNCTURE TO ALLEVIATE CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING IN PEDIATRIC **ONCOLOGY - A RANDOMIZED MULTICENTER** CROSSOVER PILOT TRIAL. GOTTSCHLING S, REINDL TK, MEYER S, BERRANG J, HENZE G, GRAEBER S, ONG MF, GRAF N.. klin padiatr. 2008;220(6):365-70 (eng). BACKGROUND: We investigated whether acupuncture as a supportive antiemetic approach reduces the need for antiemetic rescue medication during highly emetogenic chemotherapy in pediatric oncology. We report on a multicenter crossover study at 5 tertiary hospitals in Germany. PROCEDURE: Twenty-three children (13.6 y,+/- 2.9) receiving highly emetogenic chemotherapy for treatment of solid malignant tumors were included. Patients were randomly allocated to receive acupuncture treatment during either the second or third identical chemotherapy course together with standard antiemetic medication. The main outcome measure was the amount of additional antiemetic medication during chemotherapy. Secondary outcome measure was the number of episodes of vomiting per course. RESULTS: Fourty-six chemotherapy courses with or without acupuncture were compared. The need for rescue antiemetic medication was significantly lower in acupuncture courses compared to control courses (p=0.001) Episodes of vomiting per course were also significantly lower in courses with acupuncture (p=0.01). Except for pain from needling (4/23) no side effects occurred. Patients acceptance of acupuncture was high. CONCLUSIONS: Acupuncture as applied here seems to be effective in preventing nausea and vomiting in pediatric cancer patients

2051- gera: 152501/nd/ra

EFFICACY OF HT 7 POINT ACUPRESSURE STIMULATION IN THE TREATMENT OF INSOMNIA IN CANCER PATIENTS AND IN PATIENTS SUFFERING FROM DISORDERS OTHER THAN CANCER. CERRONE R, GIANI L, GALBIATI B, MESSINA G, CASIRAGHI M, PROSERPIO E, MEREGALLI M, TRABATTONI P, LISSONI P, GARDANI G.. minerva med. 2008;99(6):535-7 (eng).

AIM: The induction of sleep would depend on interaction between gabaergic system and the pineal gland through its main hormone melatonin. Until few years ago benzodiazepines were the only drugs effective in the treatment of insomnia. Recently, however, both melatonin and acupressure have appear to be active in sleep disorders. The aim of study was to evaluate the efficacy of HT 7 point acupressure in insomnia. METHODS: The study enrolled 25 patients affected by sleep disorders, 14 of whom had a neoplastic disease. They were treated by HT 7 stimulation for al least two consecutive weeks using a medical device named H7 Insomnia Control. RESULTS: An improvement in the quality of sleep was achieved in 15/25 (60%) patients, with a more evident efficacy in cancer patients (11/14 [79%]). CONCLUSION: This study confirms previous clinical data showing the efficacy of acupressure in the treatment of sleep disorders, particularly in cancer-related insomnia.

2052- gera: 152962/di/ra

PLACE DE L'ACUPUNCTURE DANS LE CANCER DU SEIN TRAITÉ EN MÉDECINE OCCIDENTALE. JEANNIN P, REGARD PG, PIQUEMAL M, SAUTREUIL P, TRIADOU P. acupuncture & moxibustion. 2008;7(4):316-321 (fra). L'acupuncture a un rôle très important dans la neutralisation de la plupart des effets secondaires des chimiothérapies et de la radiothérapie, dans la tolérance de l'acte chirurgical quand il a lieu. L'action que nous obtenons sur l'immunité et sur le bilan hépatique nous permet de penser que nous optimisons l'efficacité du traitement occidental et donc les chances de guérison.

2053- gera: 157296/di/re

NON-PHARMACOLOGICAL INTERVENTIONS FOR BREATHLESSNESS MANAGEMENT IN PATIENTS WITH LUNG CANCER: A SYSTEMATIC REVIEW. ZHAO I, YATES P. palliat med. 2008;22(6):693-701 (eng).

The aim is to review the published scientific literature for studies evaluating non-pharmacological interventions for breathlessness management in patients with lung cancer. The following selection criteria were used to systematically search the literature: studies were to be published research or systematic reviews; they were to be published in English and from 1990 to 2007; the targeted populations were adult patients with dyspnoea/breathlessness associated with lung cancer; and the study reported on the outcomes from use of non-pharmacological strategies for breathlessness. This review retrieved five studies that met all inclusion criteria. All the studies reported the benefits of non-pharmacological interventions in improving breathlessness regardless of differences in clinical contexts, components of programmes and methods for delivery. Analysis of the available evidence suggests that tailored instructions delivered by nurses with sufficient training and supervision may have some benefits over other delivery approaches. Based on the results, nonpharmacological interventions are recommended as effective adjunctive strategies in managing breathlessness for patients with lung cancer. In order to refine such interventions, future research should seek to explore the core components of such approaches that are critical to achieving optimal outcomes, the contexts in which the interventions are most effective, and to evaluate the relative benefits of different methods for delivering such interventions.

2054- gera: 159369/di/re

REVIEW OF ACUPRESSURE STUDIES FOR CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING CONTROL. LEE J, DODD M, DIBBLE S, ABRAMS D.. j pain symptom manage. 2008;36(5):529-44 (eng).

The purpose of this review was to evaluate the effects of a noninvasive intervention, acupressure, when combined with antiemetics for the control of chemotherapy-induced nausea and vomiting (CINV). Ten controlled acupressure studies were included in this review. The review evaluated one quasiexperimental and nine randomized clinical trials, which included two specific acupressure modalities, that is, acupressure band and finger acupressure. The effects of the acupressure modalities were compared study by study. Four of seven acupressure band trials supported the positive effects of acupressure, whereas three acupressure band trials yielded negative results regarding the possible effects of acupressure; however, all the studies with negative results had methodological issues. In contrast, one guasi- experimental and two randomized finger acupressure trials all supported the positive effects of acupressure on CINV control. The reported effects of the two acupressure modalities in each phase of CINV produced variable results. Acupressure bands were effective in controlling acute nausea, whereas finger acupressure controlled delayed nausea and vomiting. The overall effect of acupressure was strongly suggestive but not conclusive. Differences in the acupressure modality, the emetic potential of chemotherapeutic agents, antiemetic use, and sample characteristics of each study made study-to-study comparisons difficult. Suggestive effects of acupressure, costeffectiveness, and the noninvasiveness of the interventions encourage researchers to further investigate the efficacy of this modality. Acupressure should be strongly recommended as an effective, nonpharmacologic adjuvant intervention for CINV control if its positive effects are reproduced in future acupressure clinical trials.

2055- gera: 150366/di/re

A COCHRANE SYSTEMATIC REVIEW OF TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION FOR CANCER PAIN. ROBB K, OXBERRY SG, BENNETT MI, JOHNSON MI, SIMPSON KH, SEARLE RD. j pain symptom manage. 2009;37(4):746-53 (eng).

Cancer-related pain is complex and multi-dimensional; yet, the mainstay of cancer pain management has been the biomedical approach. There is a need for nonpharmacological and innovative pain management strategies. Transcutaneous electrical nerve stimulation (TENS) may have a role. The aim of this systematic review was to determine the effectiveness of TENS for cancer-related pain in adults. The Cochrane Library, MEDLINE, EMBASE, CINAHL, Psychinfo, AMED, and PEDro databases were searched for randomized controlled trials (RCTs) investigating the use of TENS for the management of cancer-related pain in adults. Once relevant studies were identified, two pairs of reviewers assessed eligibility for inclusion in the review based on a study eligibility form and using the 5-point Oxford Quality Scale. Two RCTs met the study eligibility criteria (these involved 64 patients). These studies were heterogeneous with respect to study population, methodology, and outcome measures. This prevented meta-analysis. In one RCT, there were no significant differences between TENS and placebo in women with chronic pain secondary to breast cancer treatment. In the other RCT, there were no significant differences between acupuncture-like TENS (AL-TENS) and sham in palliative care patients; this study was significantly underpowered. There is insufficient available evidence to determine the effectiveness of TENS in treating cancer-related pain. Further research is needed to help guide clinical practice, and large multi-center RCTs are required to assess the value of TENS in the management of cancer-related pain in adults.

2056- gera: 152306/di/ra

A SYSTEMATIC REVIEW OF THE EFFECTIVENESS OF CHINESE HERBAL MEDICATION IN SYMPTOM MANAGEMENT AND IMPROVEMENT OF QUALITY OF LIFE IN ADULT CANCER PATIENTS. MOLASSIOTIS A, POTRATA B, CHENG KK.. complementary therapies in

medicine. 2009;17(2):92-120 (eng).

The aim of this systematic review was to assess the effectiveness of Chinese medicinal herbs used concurrently with cancer treatments in terms primarily of toxicity management but also quality of life and survival in adult cancer patients. Forty-nine trials met the inclusion criteria and were reviewed according to standard processes of systematic reviews. These trials included 3992 patients. All studies with the exception of one were of low methodological quality. The vast majority of the studies have shown that Chinese medicinal herbs improved treatment side effects, quality of life, and performance status, and some have provided evidence of tumour regression and increased survival. While no clinical recommendations can derive from such low quality studies, the number of studies reporting positive results is high enough to suggest that Chinese medicinal herbs may have a role in cancer care. However, more methodologically rigorous studies need to be developed as a priority before any firm conclusions

2057- gera: 152395/di/ra

[THERAPEUTIC EFFECT OF ACUPUNCTURE ON CISPLATIN-INDUCED NAUSEA AND VOMITING]. SIMA L, WANG X. chinese acupuncture and moxibustion. 2009;29(1):3-6 (chi).

OBJECTIVE: To observe therapeutic effect of acupuncture combined with antiemetic on cisplatin-induced nausea and vomiting. METHODS: By using paired, cross-controlled trial design, 66 cases of chemotherapy were divided into group A and B, 33 cases in each group. For the group A, chemotherapy, tropisetron and acupuncture therapy were adopted in the first chemotherapy cycle and the same chemotherapy program, tropisetron and sham acupuncture were used in the next cycle. For the group B, chemotherapy, tropisetron and sham acupuncture were given in the first chemotherapy cycle and the same chemotherapy program, tropisetron and acupuncture therapy were applied in the next cycle. Zusanli (ST 36), Neiguan (PC 6) and Gongsun (SP 4) and auricular point Wei (stomach) were selected for

acupuncture therapy, and the points at 3 cm lateral to Zusanli (ST 36), Neiguan (PC 6) and Gongaun (SP 4) and auricular point corresponding to scapha level were selected for sham acupuncture. Acupuncture treatment or sham-acupuncture was given for 6 consecutive days, once each day and antiemetic tropisetron 5 mg was given to the two groups as basic antiemetic prophylaxis for 6 days, once daily. The therapeutic effects on nausea and vomiting in the 6 days were compared between the acupuncture group and the shamacupuncture group in the two chemotherapeutic cycles. RESULTS: The effective rates for nausea in the 2nd day and the 4th day were 87.1% and 79.0% in acupuncture group, which were superior to 59.4% and 57.8% in the shamacupuncture group, respectively (both P < 0.05); and the therapeutic effects on vomiting in the 3rd-6th day in the acupuncture group were better than those in the shamacupuncture group (P < 0.05). CONCLUSION: Acupuncture combined with antiemetic can effectively decrease the incidence and degree of cisplatin- induced delayed nausea and vomiting. The effect of acupuncture is better than that of sham acupuncture.

2058- gera: 152445/di/ra

ANXIOLYTIC EFFECTS OF A YOGA PROGRAM IN EARLY **BREAST CANCER PATIENTS UNDERGOING CONVENTIONAL TREATMENT: A RANDOMIZED** CONTROLLED TRIAL. RAO MR, RAGHURAM N, NAGENDRA HR, GOPINATH KS, SRINATH BS, DIWAKAR RB, PATIL S, BILIMAGGA SR, RAO N, VARAMBALLY S. complementary therapies in medicine. 2009;17(1):1-8 (eng). OBJECTIVES: This study compares the anxiolytic effects of a yoga program and supportive therapy in breast cancer outpatients undergoing conventional treatment at a cancer centre. METHODS: Ninety-eight stage II and III breast cancer outpatients were randomly assigned to receive yoga (n=45) or brief supportive therapy (n=53) prior to their primary treatment i.e., surgery. Only those subjects who received surgery followed by adjuvant radiotherapy and six cycles of chemotherapy were chosen for analysis following intervention (yoga, n=18, control, n=20). Intervention consisted of yoga sessions lasting 60min daily while the control group was imparted supportive therapy during their hospital visits as a part of routine care. Assessments included Speilberger's State Trait Anxiety Inventory and symptom checklist. Assessments were done at baseline, after surgery, before, during, and after radiotherapy and chemotherapy. RESULTS: A GLM-repeated measures ANOVA showed overall decrease in both selfreported state anxiety (p<0.001) and trait anxiety (p=0.005) in yoga group as compared to controls. There was a positive correlation between anxiety states and traits with symptom severity and distress during conventional treatment intervals. CONCLUSION: The results suggest that yoga can be used for managing treatment-related symptoms and anxiety in breast cancer outpatients.

2059- gera: 152530/di/re

ACUPUNCTURE FOR TREATING HOT FLUSHES IN MEN WITH PROSTATE CANCER: A SYSTEMATIC REVIEW. LEE MS, KIM KH, SHIN BC, CHOI SM, ERNST E.. support care cancer. 2009;17(7):763-70 (eng).

GOALS OF WORK: The goal of the study was to assess the effects of acupuncture as a treatment for hot flushes in prostate cancer (PC) patients. MATERIALS AND METHODS: The literature was searched using 14 databases with dates ranging from their inceptions to December 2008 and without language restrictions. All clinical studies of any type of acupuncture in PC patients were included. Their main outcome measures had to be vasomotor symptoms. Their methodological quality was assessed using the modified Jadad score. RESULTS: Six studies met all the inclusion criteria. One randomised clinical trial compared the effects of manual acupuncture with acupuncture plus electro- acupuncture. The other five studies were uncontrolled observational studies and therefore had limitations. CONCLUSION: The evidence is not convincing to suggest acupuncture is an effective treatment for hot flush in patients with PC. Further research is required to investigate whether acupuncture has hot-flush-specific effects.

2060- gera: 152946/di/ra

DIÉTOTHÉRAPIE CHINOISE ET TUMEURS. GATINEAUD M-E,. acupuncture & moxibustion. 2009;8(1):18-24 (fra). La diététique préventive des tumeurs est aujourd'hui relativement bien connue en Occident. Elle présente cependant un caractère standard que lève la diététique chinoise, plus adaptée aux tempéraments individuels. Quant à la diétothérapie des tumeurs et d'accompagnement des traitements des tumeurs, elle n'est encore pas développée en Occident, alors que la MTC permet d'en ériger les principes et d'en déduire les applications que l'on trouve dans la littérature chinoise. Mots-clés: tumeur -diététique préventive - MTC diétothérapie chinoise.

2061- gera: 153144/di/re ACUPUNCTURE FOR TREATING HOT FLASHES IN BREAST CANCER PATIENTS: A SYSTEMATIC REVIEW. LEE MS, KIM KH, CHOI SM, ERNST E. breast cancer res treat. 2009;115(3):497-503 (eng).

The objective of this review was to assess the effectiveness of acupuncture as a treatment option for hot flashes in patients with breast cancer. We searched the literature using 14 databases from their inceptions to August 2008, without language restrictions. We included randomised clinical trials (RCTs) comparing real with sham acupuncture or another active treatment or no treatment. Their methodological quality was assessed using the modified Jadad score. Three RCTs compared the effects of manual acupuncture with sham acupuncture. One RCT showed favourable effects of acupuncture in reducing hot flash frequency, while other two RCTs failed to do so. The meta-analysis show significant effects of acupuncture compared with sham acupuncture (n = 189, weight mean difference, 3.09, 95% confidence intervals -0.04 to 6.23, P = 0.05) but marked heterogeneity was observed in this model (chi (2) = 8.32, P = 0.02, I (2) = 76%). One RCT compared the effects of electroacupuncture (EA) with hormone replacement therapy. Hormone therapy was more effective than EA. Another RCT compared acupuncture with venlafaxine and reported no significant intergroup difference. A further RCT compared acupuncture with applied relaxation and failed to show a significant intergroup difference. In conclusion, the evidence is not convincing to suggest acupuncture is an effective treatment of hot flash in patients with breast cancer. Further research is required to investigate whether there are specific effects of acupuncture for treating hot flash in patients with breast cancer.

2062- gera: 153307/nd/re

VITAMIN B6 POINTS PC6 INJECTION DURING **ACUPUNCTURE CAN RELIEVE NAUSEA AND VOMITING** IN PATIENTS WITH OVARIAN CANCER. YOU Q, YU H, WU D, ZHANG Y, ZHENG J, PENG C. int j gynecol cancer. 2009;19(4):567-71 (eng).

The impact of chemotherapy-induced nausea and vomiting on the quality of life of ovarian cancer patients is well known. The purpose of this study was to compare the effectiveness of acupuncture plus vitamin B6 PC6 points injection with acupuncture or vitamin B6 alone in controlling emesis of 142 patients undergoing a highly emetogenic chemotherapy regimen between March 1, 2006, and June 30, 2008. The patients were divided into 3 groups randomly and were given different antiemesis treatments accordingly. All patients received the same concurrent antiemetic pharmacotherapy and high-dose chemotherapy. We compared the total number of emesis episodes and the proportion of emesis-free days among the 3 groups during the study period. The acupuncture plus vitamin B6 PC6 points injection group had significantly fewer emesis episodes and a greater proportion of emesis-free days than the acupuncture group or the vitamin B6 alone group. We conclude that acupuncture plus vitamin B6 PC6 point injection is a quite useful method against emesis in cancer patients undergoing chemotherapy.

2063- gera: 153657/di/ra

SAFETY AND EFFICACY OF QINGRE BUYI DECOCTION () IN THE TREATMENT OF ACUTE RADIATION PROCTITIS: A PROSPECTIVE, RANDOMIZED AND CONTROLLED TRIAL. WANG L, ZHANG ZZ, TU XH, ZOU ZD, LIU JH, WANG Y. chin j integr med. 2009;15(4):272-8 (eng). To investigate the efficiency, safety, and possible mechanisms

of Qingre Buyi Decoction (, QBD) in the treatment of acute radiation proctitis (ARP). METHODS: This study was a single center, prospective, single blind, randomized, and placebocontrolled clinical trial. A total of 60 patients with ARP was equally and randomly distributed into the control group (conventional treatment) and the combination group (conventional treatment plus QBD). The changes of main Chinese medicine clinical symptoms and signs, including stomachache, diarrhea, mucous or bloody stool before and after treatment, and their adverse reactions were observed after the two-week treatment. Also, D-lactate and diamine oxidase (DAO) levels, hepatic and renal function were measured. Cure rates, effective rates, and recurrence rates were compared between the two groups. RESULTS: The blood levels of both DAO and D-lactate were significantly decreased in the combination group as compared with those in the control group (P<0.05 or P<0.01). All main clinical symptoms and signs were alleviated more significantly in the combination group (P<0.01). The main symptom scores also were significantly decreased after treatment in the control group (P<0.01), except those for mucous or bloody stool (P>0.05). Compared to the control group, the improvements of stomachache, diarrhea, defecation dysfunction, and stool blood in the combination group were significantly better (P<0.05 or P<0.01). For the combination group, the curative rate, effective rate, and recurrence rate was 76.67%, 16.67%, and 6.67%, respectively. On the other hand, for the control group, the rate was 53.33%, 16.67%, and 30.00%, respectively. The total curative effect was significantly better in the combination group than in the control group (P<0.05). However, the recurrence rate was similar between the two groups (P>0.05). The hepatic and renal function remained normal in both groups (P>0.05). In addition, no severe adverse event was found in both groups. CONCLUSIONS: Addition of QBD to the conventional treatment can effectively alleviate the damage of intestinal mucosal barrier function and improve all main clinical symptoms and signs of the ARP. The combination of conventional treatment with Chinese herbal medicine QBD

2064- gera: 153745/di/ra

is effective and safe for ARP.

PRIMARY RESEARCH ON CHINESE MEDICINE TREATMENT OF ANDROGEN-INDEPENDENT PROSTATE CANCER. ZHANG SW, ZHOU SY, SHAO JC, QU XW. chin j integr med. 2009;15(3):168-9 (eng).

2065- gera: 153746/di/ra

TO EXPLORE THE CHINESE MEDICINE SYNDROME TYPES AND INTEGRATIVE THERAPY FROM CLINICAL RELATIVE FACTORS OF PATIENTS WITH ADVANCED PROSTATE CANCER. WANG YG. chin j integr med. 2009;15(3):166-7 (eng).

2066- gera: 153747/di/ra

CLINICAL CHARACTERISTICS OF PROSTATE CANCER IN ADVANCED STAGE AND ITS TREATMENT BY CHINESE AND WESTERN MEDICINE. ZHANG YQ, SONG SQ. chin j integr med. 2009;15(3):163-5 (eng).

2067- gera: 154625/di/ra

[ELECTROACUPUNCTURE AT ZUSANLI (ST 36) FOR TREATMENT OF NAUSEA AND VOMITING CAUSED BY THE CHEMOTHERAPY OF THE MALIGNANT TUMOR: A MULTICENTRAL RANDOMIZED CONTROLLED TRIAL]. YANG Y, ZHANG Y, JING NC, LU Y, XIAO HY, XU GL WANG XG, WANG LM, ZHANG YM, ZHANG DJ, DUAN QL.. chinese acupuncture and moxibustion. 2009;29(12):955-8 (chi)

OBJECTIVE: To compare the clinical effects between electroacupuncture at Zusanli (ST 36) combined with intravenous drip of Granisetron and intravenous drip of Granisetron only for treatment of nausea and vomiting caused by the chemotherapy of the malignant tumor.METHODS: The methods of multicentral, randomized controlled trial were used, the observation group (127 cases) was treated with electroacupuncture at Zusanli (ST 36) combined with intravenous drip of Granisetron, and the control group (119 cases) was treated with intravenous drip of Granisetron only.RESULTS: The total effective rate of 90.5% in observation group was superior to that of 84.0% in control group (P < 0.01); the nausea and vomiting scores of two groups were obviously decreased after treatment (both P < 0.001), and the decreased degree of the observation group was superior to that of control group (P < 0.001).CONCLUSION: Electroacupuncture at Zusanli (ST 36) can significantly alleviate the symptoms such as nausea and vomiting caused by

2068- gera: 154680/di/ra

[EFFECTS OF ACUPUNCTURE AND MOXIBUSTION ON DNA EXCISION REPAIR-RELATED PROTEINS OF BONE MARROW CELL IN CYCLOPHOSPHAMIDE-INDUCED MICE]. LU M, CAO DM, LI DM, ZHAO XX, LI JW, LI HX, ZHANG HH, ZHANG HF.. chinese acupuncture and moxibustion. 2009;29(10):821-4 (chi). OBJECTIVE: To explore the molecular biological mechanism of acupuncture and moxibustion for relieving myelosuppression and increasing white blood cells.METHODS: Two hundred and twenty-four clean male Kunming mice were randomly divided into a control group, a model group, an acupuncture group and a moxibustion group, 56 mice in each group. The model of myelosuppression was made with Cyclophosphamide. In the acupuncture group and the moxibustion group, acupoints "Dazhui" (GV 14), "Geshu" (BL 17), "Shenshu" (BL 23) and "Zusanli" (ST 36) were used for treatment with acupuncture and moxibustion, respectively, while, in the control group and the model group, there were no treatment carried out except catching and fixing. The changes of bone marrow cell DNA pol beta and XPD between the 2nd and 7th day were examined with immunohistochemical method.RESULTS: Acupuncture and moxibustion markedly up-regulated the expression of bone marrow cell DNA pol beta and XPD, and promoted the base excision repair and nucleotide excision repair, which leads to the relieving Cyclophosphamide-induced myelosuppression and increasing the number of white blood cells.CONCLUSION: For acupuncture and moxibustion, one of the bone major mechanisms in relieving post-chemotherapy myelosuppression, protecting hemopoietic function and increasing the white blood cells is that it can promote the repair of the bone marrow cell DNA excision and protect hemopoietic cells from injury by chemical drugs.

2069- gera: 154782/di/ra

ICLINICAL STUDY ON ACUPUNCTURE COMBINED WITH MEDICATION IN RESTORATION OF GASTROINTESTINAL **FUNCTIONS FOR POSTOPERATIVE PATIENTS WITH** GASTRIC CANCER]. YIN SH, DU YQ, LIU B., chinese acupuncture and moxibustion. 2009;29(6):459-62 (chi). OBJECTIVE: To observe clinical therapeutic effects of acupuncture combined with medication in restoration of gastrointestinal functions for postoperative patients with gastric cancer.METHODS: Ninety patients undergoing radical surgeries for gastric cancer were randomly, according to the sequence of their operations, divided into three groups: a control group treated conventionally after their surgeries (group CONT, 30 cases), a Chinese medicine group treated by Simo Decoction administered by way of a nutrient canal in addition to the conventional treatment (group CM, 30 cases), and an acupuncture plus Chinese medicine group treated by warming needling in addition to those given in the Chinese medicine group (group ACUP+CM, 30 cases). Therapeutic effects were estimated 10 days after their operations.RESULTS: The time for restoration of gastrointestinal functions was obviously shortened, and the problems of poor appetite and difficulty in defecation were more markedly improved in group ACUP+CM than those in both group CONT and group CM (P < 0.01, P < 0.05). Ten days after operations, the number of patients with normal lymphocytes and normal percentage rate of lymphocytes to neutrophile granulocytes was obviously more in group ACUP+CM than those in both group CONT and group CM (P < 0.01, P < 0.05).CONCLUSION: Acupuncture combined with Chinese medicine is favorable in accelerating early air exhaustion and defecation, improving clinical symptoms, as well as in bi-directional regulating peripheral white blood cells.

2070- gera: 154903/di/ra

[CLINICAL STUDY ON ACUPUNCTURE COMBINED WITH MEDICATION IN RESTORATION OF GASTROINTESTINAL **FUNCTIONS FOR POSTOPERATIVE PATIENTS WITH** GASTRIC CANCER]. Yin SH, Du YQ, Liu B.. chinese acupuncture and moxibustion. 2009;29(6):455-8 (chi). OBJECTIVE: To observe clinical therapeutic effects of acupuncture combined with medication in restoration of gastrointestinal functions for postoperative patients with gastric cancer.METHODS: Ninety patients undergoing radical surgeries for gastric cancer were randomly, according to the sequence of their operations, divided into three groups: a control group treated conventionally after their surgeries (group CONT, 30 cases), a Chinese medicine group treated by Simo Decoction administered by way of a nutrient canal in addition to the conventional treatment (group CM, 30 cases), and an acupuncture plus Chinese medicine group treated by warming needling in addition to those given in the Chinese medicine group (group ACUP+CM, 30 cases). Therapeutic effects were estimated 10 days after their operations.RESULTS: The time for restoration of gastrointestinal functions was obviously shortened, and the problems of poor appetite and difficulty in defecation were more markedly improved in group ACUP+CM than those in both group CONT and group CM (P < 0.01, P < 0.05). Ten days after operations, the number of patients with normal lymphocytes and normal percentage rate of lymphocytes to neutrophile granulocytes was obviously more in group ACUP+CM than those in both group CONT and group CM (P < 0.01, P < 0.05). CONCLUSION: Acupuncture combined with Chinese medicine is favorable in accelerating early air exhaustion and defecation, improving clinical symptoms, as well as in bi- directional regulating peripheral white blood cells.

2071- gera: 154996/di/ra

[THERAPEUTIC EFFECT OF ACUPUNCTURE ON CISPLATIN-INDUCED NAUSEA AND VOMITING]. SIMA L, WANG X.. chinese acupuncture and moxibustion. 2009:29(1):3-6 (chi).

OBJECTIVE: To observe therapeutic effect of acupuncture combined with antiemetic on cisplatin-induced nausea and vomiting.METHODS: By using paired, cross-controlled trial design, 66 cases of chemotherapy were divided into group A and B, 33 cases in each group. For the group A, chemotherapy, tropisetron and acupuncture therapy were adopted in the first chemotherapy cycle and the same chemotherapy program, tropisetron and sham acupuncture were used in the next cycle. For the group B, chemotherapy, tropisetron and sham acupuncture were given in the first chemotherapy cycle and the same chemotherapy program, tropisetron and acupuncture therapy were applied in the next cycle. Zusanli (ST 36), Neiguan (PC 6) and Gongsun (SP 4) and auricular point Wei (stomach) were selected for acupuncture therapy, and the points at 3 cm lateral to Zusanli (ST 36), Neiguan (PC 6) and Gongaun (SP 4) and auricular point corresponding to scapha level were selected for sham acupuncture. Acupuncture treatment or sham-acupuncture was given for 6 consecutive days, once each day and antiemetic tropisetron 5 mg was given to the two groups as basic antiemetic prophylaxis for 6 days, once daily. The therapeutic effects on nausea and vomiting in the 6 days were compared between the acupuncture group and the shamacupuncture group in the two chemotherapeutic cycles.RESULTS: The effective rates for nausea in the 2nd day and the 4th day were 87.1% and 79.0% in acupuncture group, which were superior to 59.4% and 57.8% in the shamacupuncture group, respectively (both P < 0.05); and the therapeutic effects on vomiting in the 3rd-6th day in the acupuncture group were better than those in the shamacupuncture group (P < 0.05).CONCLUSION: Acupuncture combined with antiemetic can effectively decrease the incidence and degree of cisplatin-induced delayed nausea and vomiting. The effect of acupuncture is better than that of sham acupuncture.

2072- gera: 155143/nd/re

Acupuncture Versus Venlafaxine for the Management of Vasomotor Symptoms in Patients With Hormone Receptor- Positive Breast Cancer: A Randomized Controlled Trial. Walker EM, Rodriguez AI, Kohn B, Ball RM,

Pegg J, Pocock JR, Nunez R, Peterson E, Jakary S, Levine RA. j clin oncol. 2009;28: (eng).

PURPOSE: Vasomotor symptoms are common adverse effects of antiestrogen hormone treatment in conventional breast cancer care. Hormone replacement therapy is contraindicated in patients with breast cancer. Venlafaxine (Effexor), the therapy of choice for these symptoms, has numerous adverse effects. Recent studies suggest acupuncture may be effective in reducing vasomotor symptoms in menopausal women. This randomized controlled trial tested whether acupuncture reduces vasomotor symptoms and produces fewer adverse effects than venlafaxine PATIENTS AND METHODS: Fifty patients were randomly assigned to receive 12 weeks of acupuncture (n = 25) or venlafaxine (n = 25) treatment. Health outcomes were measured for up to 1 year post-treatment. RESULTS: Both groups exhibited significant decreases in hot flashes. depressive symptoms, and other quality-of-life symptoms, including significant improvements in mental health from preto post-treatment. These changes were similar in both groups, indicating that acupuncture was as effective as venlafaxine. By 2 weeks post-treatment, the venlafaxine group experienced significant increases in hot flashes, whereas hot flashes in the acupuncture group remained at low levels. The venlafaxine group experienced 18 incidences of adverse effects (eg, nausea, dry mouth, dizziness, anxiety), whereas the acupuncture group experienced no negative adverse effects. Acupuncture had the additional benefit of increased sex drive in some women, and most reported an improvement in their energy, clarity of thought, and sense of well-being. CONCLUSION: Acupuncture appears to be equivalent to drug therapy in these patients. It is a safe, effective and durable treatment for vasomotor symptoms secondary to long-term antiestrogen hormone use in patients with breast cancer.

2073- gera: 155150/di/re
ACUPUNCTURE FOR RADIATION-INDUCED XEROSTOMIA IN PATIENTS WITH CANCER: A PILOT STUDY. GARCIA MK, CHIANG JS, COHEN L, LIU M, PALMER JL ROSENTHAL DI, WEI Q, TUNG S, WANG C, RAHLFS T, CHAMBERS MS. head neck. 2009;31(10):1360-8 (eng). BACKGROUND: This pilot study evaluated if acupuncture can alleviate radiation-induced xerostomia among patients with cancer. Secondary objectives were to assess the effects of acupuncture on salivary flow and quality of life (QOL). METHODS: Nineteen patients received acupuncture twice a week for 4 weeks. RESULTS: Xerostomia inventory (XI) and patient benefit questionnaire (PBQ) scores were significantly better after acupuncture on weeks 4 and 8 than at baseline (XI: p = .0004 and .0001; PBQ: p = .0004 and .0011, respectively). For QOL at weeks 4 and 8, there was a significant difference for questions related to head/neck cancer (p = .04 and .006, respectively). At week 8, there was a significant difference in physical well-being (p = .04). At weeks 5 and 8, there were significant differences in the total score (p = .04 and .03, respectively). CONCLUSIONS: Acupuncture was effective for radiation-induced xerostomia in this small pilot study. Further research is needed. (c) 2009 Wiley Periodicals, Inc.

2074- gera: 155510/nd/re PROPORTION OF GYNECOLOGIC CANCER PATIENTS USING COMPLEMENTARY AND ALTERNATIVE MEDICINE. SUPOKEN A, CHAISRISAWATSUK T, CHUMWORATHAYI B. asian pac j cancer prev. 2009;10(5):779-82 (eng). BACKGROUND AND OBJECTIVES: Complementary and alternative medicine (CAM) for treatment of cancer and for supportive care of cancer patients must be clearly separated. There is encouraging evidence for CAM in the latter area, such as acupuncture and progressive muscle relaxation for chemotherapy-related nausea and vomiting, and aromatherapy for decreasing anxiety and increasing quality of life. However, there are limited data about CAM used by gynecologic cancer patients, especially in Thai women. Therefore, the authors aimed to investigate the proportion and types of CAM using in our gynecologic cancer patients. METHODS: This crosssectional survey was conducted between October to December, 2008. Totals of 50 admitted and 50 walk-in gynecologic cancer patients 1 month after diagnosis, aged

more than 20 years and able to give informed consent, were selected for one-by-one interview by random walking survey. RESULTS: Among the 100 interviewed patients, aged 21-69 (mean=50.12), there were 46 cases of cervical cancers, 35 of ovarian cancers, 18 of endometrial cancers (two of these also had ovarian cancers), 2 of malignant gestational trophoblastic diseases, 1 of vulvar cancer, and 1 liver cancer (in a patient with ovarian cancer). Some 67% (95% CI, 57.8-76.2%) of them used CAM. As diet modifications, 11 used Chinese vegetarian, 8 common vegetarian, 5 Cheewajit, and 1 macrobiotics. Five of them used dietary supplements while colonic detoxification was emplyed in three. As herbal medicines, 27 used Thai herbs, 4 Chinese herbs, and 1 a herbal sauna. Twelve were receiving Thai massage. As exercises, 23 used aerobics and 5 stretching. Interestingly, 62 of them used Buddhist praying while only 3 employed native magic. CONCLUSIONS: The three most common forms of CAM used by our gynecologic cancer patients were Buddhist praying (62/67, 92.5%), followed by herbal medicines (27/67, 40.3%) and exercises (25/67, 37.3%).

2075- gera: 156517/di/ra

[INFLUENCE OF ELECTROACUPUNCTURE AND MOXIBUSTION AND THEIR TREATED MOUSE SERUM ON THE PROLIFERATION OF THE CULTURED SPLENETIC CD4+ CD25+ REGULATORY T CELLS OF TUMOR-BEARING MICE]. LIU ZD, PEI J, FU QH, LI HY, YU QW, ZHANG JY, ZHANG DQ.. acupuncture research. 2009;34(4):219-24 (chi).

OBJECTIVE: To observe the effect of electroacupuncture (EA) and moxibustion of "Dazhui" (GV 14) on the proliferation levels of the splenetic CD4+ CD25+ regulatory T cells (Tregs) of H22 tumor-bearing mice in vitro. METHODS: Forty eight Balb/c mice were randomized into control, model, moxibustion and EA groups, with 12 cases in each. H22 tumor- bearing model was set up by hypodermic injection of H22 tumor cells (0.2 ml, 1 x 10(7) cells/ml). EA (2 Hz, 2 mA) was applied to "Dazhui" (GV 14) and left "Huantiao" (GB 30) for 20 min, and moxibustion was applied to "Dazhui" (GV 14) 2 moxa-cones every time. The treatment was given from the 2nd day on after innoculation of tumor cells, once every other day, 6 times altogether. After the treatment, the mice were killed by peeling off the eyeball and blood samples were collected to be separated into serum. Then, Tregs of the spleen tissues of Balb/c mice in different groups were isolated by using megnetic activated cell sorting (MACS) system to be cultured independently, and co-cultured with EA-treated serum and moxibustion-treated serum separately in culture fluid for 96 h, added with 3H-tritiate thymidine (TdR) in the culture-fluid 12 h before the end of culture, followed by collecting the cells and detecting their proliferation levels (count per minute, cpm) by using a lipid scintillation device. RESULTS: The proliferation level of Tregs in model group was elevated significantly compared to normal control group (P < 0.05), while in comparison with model group, those of Tregs of EA and moxibustion groups decreased considerably (P < 0.01). After separate application of the diluted acupuncture-treated serum and moxibustion-treated serum at 1:1 and 1:8 (not 1:16 and 1:32) to the cultured Tregs, their proliferation levels (cpm) in EA and moxibustion groups were obviously upregulated in comparison to those of normal control group (P < 0.05), and the cpm in EA group was significantly higher than that in model group (P < 0.05), suggesting a different action mechanism between acupuncture-moxibustion treatment and serum stimulation.CONCLUSION: EA of "Dazhui" (GV 14) and "Huantiao" (GB 30) and moxibustion of "Dazhui" (GV 14) can effectively downregulate the proliferation level of the cultured splenetic Tregs of the tumor bearing mice. EA-treated serum and moxibustion-treated serum diluted at 1:1 and 1:8 can evidently upregulate the proliferation level of Tregs in vitro.

2076- gera: 157026/nd/re

[EFFECTS OF FEITAI CAPSULE ON QUALITY OF LIFE IN PATIENTS WITH ADVANCED NON-SMALL-CELL LUNG CANCER: A RANDOMIZED CONTROLLED TRIAL]. LIU ZZ, YU ZY, OUYANG XN, DAI XH, CHEN X, ZHAO ZQ, WANG WW, LI J, TU H, YE L, YAN Y. zhong xi yi jie he xue bao. 2009;7(7):611-5 (chi).

BACKGROUND: Recently the maintenance therapy of non-

small-cell lung cancer (NSCLC) patients who completed required treatment cycles has caused widespread interests in the medical field. Traditional Chinese medicine may be a useful complement in maintenance treatment of mid-to-late stage NSCLC. OBJECTIVE: To observe the effects of Feitai Capsule, a compound traditional Chinese herbal medicine for expelling blood stasis and phlegm, on the quality of life of the NSCLC patients as a maintenance treatment. DESIGN, SETTING, PARTICIPANTS AND INTERVENTIONS: A total of 62 mid-to-late stage NSCLC patients from Fuzhou General Hospital of Nanjing Military Region were included and randomly divided into treatment group (31 cases) and control group (31 cases). Patients in the treatment group were treated with Feitai Capsule, and patients in the control group did not accept any intervention. Regular observations and follow-up were performed for patients in the two groups. MAIN OUTCOME MEASURES: Analysis of variance, nonparametric test, and analysis of covariance were used to compare clinical features, amelioration of clinical symptoms, physical constitution and energy, and quality of life. RESULTS: There were two dropouts and 60 valid cases. The baseline characteristics of the two groups were similar. In the treatment group, symptom response and physical energy level were improved by 36.6% (Z=-2.632, P=0.008) and 26.7%(Z=-2.182, P=0.029), respectively. There was a positive correlation between these two factors (r=0.917, P<0.001). The patients in treatment group had a significantly improved quality of life after treatment. No serious adverse events were observed. CONCLUSION: Feitai Capsule as maintenance treatment can improve the quality of life of the patients with mild-to-late stage NSCLC.

2077- gera: 157310/nd/re

INHIBITORY EFFECT OF EXTRACT OF FUNGI OF HUAIER ON HEPATOCELLULAR CARCINOMA CELLS. REN J, ZHENG C, FENG G, LIANG H, XIA X, FANG J, DUAN X, ZHAO H. j huazhong univ sci technolog med sci. 2009;29(2):198-201 (eng).

This study investigated the inhibitory effect of the extract of fungi of Huaier (EFH) on the growth of hepatocellular carcinoma (HCC) cells. Hep-G2 cells, a human HCC cell line, were cultured in DMEM containing 10% fetal bovine serum and treated with EFH of different concentrations (1, 2, 4, 8 mg/mL) for 24, 48 and 72 h respectively. The apoptosis rate of the cells was flow cytometrically measured. Thirty-six tumor-bearing New Zealand rabbits were randomly divided into 3 groups: group A (control group), in which the rabbits were infused with 0.2 mL/kg normal saline via the hepatic artery; group B (transhepatic artery chemoembolization [TACE] group), in which the rabbits were given lipiodol at 0.2 mL/kg plus MMC at 0.5 mg/kg via the hepatic artery; group C (TACE+EFH group), in which EFH (500 mg/kg) were orally administered after TACE. Two weeks after TACE, the rabbits were sacrificed and the implanted tumors were sampled. The tumor volume and the necrosis rate were determined. The tumor tissues were immunohistochemically detected for the expressions of factor VIII, VEGF, P53, Bax and Bcl-2. The microvessel density (MVD) was calculated by counting the factor VIII-positive endothelial cells. Our results showed that after treatment with EFH, the apoptosis rate of Hep-G2 cells was enhanced in a concentration- and time-dependent manner. Two weeks after the treatment, the average tumor volume, the necrosis rate and the growth rate of the implanted tumor in group C were significantly different from those in groups A and B (P<0.05). MVD and VEGF expressions were significantly decreased in the group C when compared with those in groups B (P<0.05 for all). The Bax expression was weakest in group A and strongest in group C. The expressions of P53 and Bcl-2 were minimal in group C and maximal in group A. There were significant differences in the expressions of P53, Bax and Bcl-2 among the 3 groups (P<0.05 for all) and there was significant difference between group B and group C (P<0.05). It was concluded that EFH could suppress not only the growth of HCC cells but also tumor angiogenesis and it can induce the apoptosis of HCC cells. EFH serves as an alternative for the treatment of HCC.

2078- gera: 158028/nd/re

[STUDIES ON THE EFFECTS OF QI-BOOSTING TOXIN-

RESOLVING DECOCTION ON PROLIFERATION OF NASOPHARYNGEAL CARCINOMA CELL]. HU B, TIAN D, HE Y. lin chung er bi yan hou tou jing wai ke za zhi. 2009;23(12):558-60 (chi).

OBJECTIVE: To investigate the effect of several traditional Chinese medicine formula therapies on proliferation of nasopharyngeal carcinoma cell line HNE1. METHOD: The inhibition effect of medicine serums of Qi-Boosting Toxin-Resolving granule on proliferation of NPC cell line HNE1 in vitro was observed by MTT assay. RESULT: The rates of survival cells in Qi-Boosting Toxin-Resolving decoction group and Toxin-Resolving group were the lowest after 48 hours treatment, while Qi-Boosting group, yin-nourishing group, residual-component group medicine serums had the most obvious effects on the rates of survival cells at 72 hours. The inhibition ratio of 15% Qi-Boosting Toxin-Resolving granule medicine serums was 67.68%. CONCLUSION: The result of MTT assay showed that cell proliferation was significantly inhibited by Qi-Boosting Toxin-Resolving granule and its separate composes medicine serums. Qi-Boosting Toxin-Resolving granule had the most significantly specific effects. The effects were correlated with serum concentration and treatment time of Qi-Boosting Toxin-Resolving granule and its separate composes medicine.

2079- gera: 158452/di/ra

GROUP ACUPUNCTURE TO RELIEVE RADIATION INDUCED XEROSTOMIA: A FEASIBILITY STUDY. SIMCOCK R, FALLOWFIELD L, JENKINS V. acupuncture in medicine. 2009;27(3):109-13 (eng).

BACKGROUND: a distressing complication of radiotherapy treatment for head and neck cancer is xerostomia (chronic oral dryness). Xerostomia is difficult to treat conventionally but there are reports that acupuncture can help. We conducted a feasibility study to examine the acceptability of a standardised group acupuncture technique and adherence to group sessions, together with acceptability of the objective and subjective measurements of xerostomia. METHODS: 12 males with established radiation induced xerostomia were treated in three groups of four. Each received eight weekly sessions of acupuncture using four bilateral acupuncture points (Salivary Gland 2; Modified Point Zero; Shen Men and one point in the distal radial aspect of each index finger (LI1)). Sialometry and quality of life assessments were performed at baseline and at the end of treatment. A semi-structured interview was conducted a week after completing the intervention. RESULTS: adherence to and acceptability of the treatment and assessments was 100%. There were objective increases in the amounts of saliva produced for 6/12 patients post intervention and the majority also reported subjective improvements. Mean quality of life scores for domains related to salivation and xerostomia also showed improvement. At baseline 92% (11/12) patients reported experiencing a dry mouth "quite a bit/very much" as compared to 42% (5/12) after the treatment. Qualitative data revealed that the patients enjoyed the sessions.CONCLUSION: the pilot study shows that a standardised group technique is deliverable and effective. The tools for objective and subjective assessment are appropriate and acceptable. Further examination in a randomised trial is now warranted.

2080- gera: 158759/di/ra

EFFECT OF YANGYIN HUMO DECOCTION ON ORAL MUCOMEMBRANOUS REACTION TO RADIOTHERAPY. DAI AW, LI ZY, WANG LH, LI SY, YANG H. chinese journal of integrated medicine. 2009;15(4):303-6 (eng). OBJECTIVE: To observe the effect of Yangyin Humo Decoction (YHD) on oral mucomembranous reaction in patients with head-neck tumor undergoing radiotherapy. METHODS: Forty-Forty-two patients with head-neck tumor undergoing radiotherapy were randomized equally into two groups. The two conventional Western medical treatment was administered to all, including intravenous dripping of 2% lidocaine 20 mL, dexamethasone 5 mg, gentamycin 80,000 units, vitamin B(12) 5 mg, dissolved in saline 250 mL, and 5% sodium bicarbonate solution for gargling, but to the patients in the tested group, YHD was given additionally. The medication was started simultaneously all through the whole course of the radiotherapy. Patients were examined every day to observe

and compare the degree, initiating time, and repairing time of their oral lesions; the dosage of radiation they received was recorded as well. RESULTS: The degree of mucomembranous reaction that appeared in most patients in the test group was of grade 1-2, while in the control group, it was grade 2-3. The average time for oral lesion of 1, 2, 3 grades to be initiated in the test group was 12.0+/-1.1, 11.0+/-1.3 and 10.0+/-0.8 days, respectively, after radiation started, which was later than that in the control group (P<0.01). Moreover, the average repairing time for the lesions of grades 1, 2, and 3 in the test group was 3.0+/-0.7, 10.0+/-1.3 and 19.0+/-0.8 days, which were shorter than those in the control group respectively (P<0.01). The radiation applied on the primary tumor of patients with oral lesion of grade 1-3 in the test group was 24.2+/-2.2, 42.0+/-2.6 and 58.0+/-1.6 Gy on the average, respectively, which were higher than that applied on patients in the control group (P<0.05 or P<0.01). CONCLUSION: The Chinese herbal preparation YHD could alleviate oral mucomembranous reaction to radiation applied in patients with head-neck tumor.

2081- gera: 158787/di/ra

SAFETY AND EFFICACY OF QINGRE BUYI DECOCTION IN THE TREATMENT OF ACUTE RADIATION PROCTITIS: A PROSPECTIVE, RANDOMIZED AND CONTROLLED TRIAL. WANG L, ZHANG ZZ, TU XH, ZOU ZD, LIU JH, WANG Y chinese journal of integrated medicine. 2009;15(4):272-8 (eng).

OBJECTIVE: To investigate the efficiency, safety, and possible mechanisms of Qingre Buyi Decoction (QBD) in the treatment of acute radiation proctitis (ARP). METHODS: This study was a single center, prospective, single blind, randomized, and placebo-controlled clinical trial. A total of 60 patients with ARP was equally and randomly distributed into the control group (conventional treatment) and the combination group (conventional treatment plus QBD). The changes of main Chinese medicine clinical symptoms and signs, including stomachache, diarrhea, mucous or bloody stool before and after treatment, and their adverse reactions were observed after the two-week treatment. Also, D-lactate and diamine oxidase (DAO) levels, hepatic and renal function were measured. Cure rates, effective rates, and recurrence rates were compared between the two groups. RESULTS: The blood levels of both DAO and D-lactate were significantly decreased in the combination group as compared with those in the control group (P<0.05 or P<0.01). All main clinical symptoms and signs were alleviated more significantly in the combination group (P<0.01). The main symptom scores also were significantly decreased after treatment in the control group (P<0.01), except those for mucous or bloody stool (P>0.05). Compared to the control group, the improvements of stomachache, diarrhea, defecation dysfunction, and stool blood in the combination group were significantly better (P<0.05 or P<0.01). For the combination group, the curative rate, effective rate, and recurrence rate was 76.67%, 16.67%, and 6.67%, respectively. On the other hand, for the control group, the rate was 53.33%, 16.67%, and 30.00%, respectively. The total curative effect was significantly better in the combination group than in the control group (P<0.05). However, the recurrence rate was similar between the two groups (P>0.05). The hepatic and renal function remained normal in both groups (P>0.05). In addition, no severe adverse event was found in both groups. CONCLUSIONS: Addition of QBD to the conventional treatment can effectively alleviate the damage of intestinal mucosal barrier function and improve all main clinical symptoms and signs of the ARP. The combination $% \left(1\right) =\left(1\right) \left(1\right)$ of conventional treatment with Chinese herbal medicine QBD is effective and safe for ARP.

2082- gera: 158794/di/ra

YOGA AND PHYSIOTHERAPY: A SPECULATIVE REVIEW AND CONCEPTUAL SYNTHESIS. POSADZKI P, PAREKH S. chinese journal of integrated medicine. 2009;15(1):66-72

This article presents the potential integration of yoga and physiotherapy when considering the essence of their underlying concepts. Within the scope of this article the existence of several similarities between these two 'concepts' has been suggested. Researchers, physiotherapists and their patients as well as yoga practitioners can obtain valuable and additional arguments through the cross-fertilization of ideas across presented studies united by shared, underlying concepts. The practice of yoga is based on the following assumptions: complexity and multidimensionality, various positive influences on an individual's wholeness through the mind, body, and the relationships between them. These assumptions may have the potential to contribute towards the practice of physiotherapy and its underlying principles. The essence of physiotherapy as a multifaceted process requires teamwork and efforts of various specialists like psychologists, sociologists, occupational therapists and nurses if patients are to benefit. Ideally, the physiotherapist should possess knowledge from these areas of science in order to professionally care about patients. Therefore, it can be suggested that basic similarities exist between yoga and physiotherapy in terms of mutidisciplinarity and complexity of holistic care. Such conceptual enrichment may be a useful source of inspiration for physiotherapists concerned about their patients' overall health on a daily basis. The authors emphasize the usefulness of yoga practice in clinical units and explain how the essence of Ayurvedic knowledge might be extrapolated and incorporated into theoretical principles of physiotherapy process. The justification of the studies included is also presented.

2083- gera: 158796/di/ra

INFLUENCE OF TCM THERAPY FOR SUPPLEMENTING PI AND NOURISHING SHEN ON DENDRITIC CELL FUNCTION IN PATIENTS WITH CHRONIC HEPATITIS B TREATED BY LAMIVUDINE. ZHANG YH, LIU YH. chinese journal of integrated medicine. 2009;15(1):60-2 (eng).

OBJECTIVE: To observe the influence of traditional Chinese medicine (TCM) therapy for supplementing Pi () and nourishing Shen (, SPNS) on dendritic cell function in patients with chronic hepatitis B (CHB) treated by lamivudine. METHODS: Sixty CHB patients with positive HBeAg were equally randomized by digital table into two groups: the observation group and the control group. Patients in the control group were treated with lamivudine only, while patients in the observation group were treated with lamivudine combined with SPNS fomula, for 12 weeks. The phenotype and function of dendritic cell, as well as its secretion factor interleukin 12 (IL-12) in all patients were determined after termination of therapy and the impacts on alanine transaminase (ALT) and HBVDNA were observed. RESULTS: The phenotypes of dendritic cells such as CD1a, CD80, CD86, human leukocyte antigen (HLA-DR) and intercellular adhesion molecule-1, as well as the levels of stimulation index (SI) and IL-12 were higher in the observation group than those in the control group (P<0.05 or P<0.01). Meanwhile, signififi cant difference between the two groups was also shown in the normalizing rates of ALT and HBV-DNA (P<0.05). CONCLUSION: TCM therapy for SPNS can signifificantly improve the function of dendritic cells in patients with CHB treated by lamivudine and enhance the early stage response of patients to the treatment.

2084- gera: 158798/di/ra

EFFECTS OF PROPYL GALLATE ON ADHESION OF POLYMORPHONUCLEAR LEUKOCYTES TO HUMAN **ENDOTHELIAL CELLS INDUCED BY TUMOR NECROSIS** FACTOR ALPHA. JIANG YR, CHEN KJ, XU YG, YANG XH, YIN HJ. chinese journal of integrated medicine. 2009;15(1):47-53 (eng).

OBJECTIVE: To investigate the effects of Propyl Gallate (PrG) on cellular adhesion between human To investigate the effects of Propyl Gallate (PrG) on cellular adhesion between human umbilical vein endothelial cells (HUVEC) and polymorphonuclear leukocytes (PMN) as well as the expression umbilical vein endothelial cells (HUVEC) and polymorphonuclear leukocytes (PMN) as well as the expression of intercellular adhesion molecule-1 (ICAM-1, CD54) and E-selectin (CD62E) on the VEC surface. of intercellular adhesion molecule-1 (ICAM-1, CD54) and Eselectin (CD62E) on the VEC surface. METHODS: A human VEC inflammation model was induced by tumor necrosis factor alpha (TNF-alpha). VECs were pre- A human VEC inflammation model was induced by tumor necrosis factor alpha (TNF-alpha). VECs were preincubated with varying concentrations of PrG (0.001-5 mmol/L) or 1 per thousand

DMSO (v:v) or 10 mmol/L acetylsalicylic incubated with varying concentrations of PrG (0.001-5 mmol/L) or 1 per thousand DMSO (v:v) or 10 mmol/L acetylsalicylic acid (ASA) for 1 h, and then were stimulated with 10 ng/mL TNF-alpha for 6 h. Rose bengal vital staining method acid (ASA) for 1 h, and then were stimulated with 10 ng/mL TNF-alpha for 6 h. Rose bengal vital staining method was used to measure the adherence rate of PMN to VEC, while flow cytometry was used to determine the was used to measure the adherence rate of PMN to VEC, while flow cytometry was used to determine the expression of CD54 and CD62E on the VEC surface. expression of CD54 and CD62E on the VEC surface. RESULTS: After 6 h of incubation with TNF-alpha, the adherence After 6 h of incubation with TNF-alpha, the adherence of PMN to HUVECs as well as the percentage of fluorescence-positive cells and mean fluorescence intensity of PMN to HUVECs as well as the percentage of fluorescence-positive cells and mean fluorescence intensity (MFI) of surface CD54 and CD62E in HUVECs increased significantly ((MFI) of surface CD54 and CD62E in HUVECs increased significantly (P<0.01). Pretreatment of HUVECs with <0.01). Pre-treatment of HUVECs with PrG (0.1-5 mmol/L) significantly suppressed the adherence of PMN to VECs induced by TNF-alpha (PrG (0.1-5 mmol/L) significantly suppressed the adherence of PMN to VECs induced by TNF-alpha (P<0.05). PrG <0.05). PrG (1-5 mmol/L) inhibited the VEC surface expression of CD62E and CD54 in a dose-dependent way ((1-5 mmol/L) inhibited the VEC surface expression of CD62E and CD54 in a dosedependent way (P<0.05). PrG <0.05). PrG at lower concentrations (0.001-0.1 mmol/L) showed no effect on CD54 expression, while it showed a slightly at lower concentrations (0.001-0.1 mmol/L) showed no effect on CD54 expression. while it showed a slightly increasing trend in CD62E expression (increasing trend in CD62E expression (P>0.05) ASA at 10 mmol/L had no obvious effect on the positive rate of >0.05). ASA at 10 mmol/L had no obvious effect on the positive rate of CD62E and CD54. CD62E and CD54. CONCLUSIONS: High concentrations of PrG (0.1-5 mmol/L) exert its inhibitory effect on cellular High concentrations of PrG (0.1-5 mmol/L) exert its inhibitory effect on cellular adherence of PMN to HUVECs, and its mechanism may be related to inhibiting surface expression of CD54 and adherence of PMN to HUVECs, and its mechanism may be related to inhibiting surface expression of CD54 and CD62E in HUVECs. Its action concentration was lower than that of ASA. CD62E in HUVECs. Its action concentration was lower than that of ASA.

2085- gera: 158805/di/ra

THE EFFECT OF A NOVEL CYTOKINE, HIGH MOBILITY GROUP BOX 1 PROTEIN, ON THE DEVELOPMENT OF TRAUMATIC SEPSIS. YAO YM, SHENG ZY, HUANG LF. chinese journal of integrated medicine. 2009;15(1):13-5 (eng).

2086- gera: 158811/di/ra

EFFECT OF JIANPI HUOXUE DECOCTION-CONTAINING SERUM ON TUMOR NECROSIS FACTOR-ALPHA SECRETION AND GENE EXPRESSION OF ENDOTOXIN **RECEPTORS IN RAW264.7 CELLS INDUCED BY** LIPOPOLYSACCHARIDE. PENG JH, HU YY, FENG Q, CHENG Y, XU LL, CHEN SD, TAO Q, LI FH. chinese journal of integrated medicine. 2009;15(3):198-203 (eng). OBJECTIVE: To evaluate the effect of Jianpi Huoxue decoction (JHD)-containing serum on tumor necrosis factoralpha (TNF-alpha) secretion and endotoxin receptor gene expression in RAW264.7 cells induced by lipopolysaccharide (LPS). METHODS: The cytotoxicity of blank-control serum and JHD-containing serum at different concentrations were evaluated through the lactate dehydrogenase (LDH) assay in RAW264.7 cells. RAW264.7 cells were divided into six groups: 5% blank-control serum group (C1, n=3), 5% blank-control serum plus LPS group (L1, n=4), 5% JHD-containing serum plus LPS group (J1, n=4), 10% blank-control serum group (C2, n=3), 10% blank-control serum plus LPS group (L2, n=4), and 10% JHD-containing serum plus LPS group (J2, n=4). After cultured with the corresponding serum for 1 h, cells in L1, L2, J1 and J2 were treated with LPS (0.1 microg/mL) for 12 h without rinse. The supernate, cells, protein and RNA were collected for assay. TNF-alpha in the culture supernate was

assayed by the enzyme linked immunosorbent assay (ELISA). Protein expression of TNF-alpha in RAW cells was detected by Western-blot. TNF-alpha, Toll-like receptor 2 (TLR2), TLR4 and CD14 mRNA expression in RAW cells were detected by real-time RT-PCR. RESULTS: The LDH assay supported that cultured for 24 h or less with the JHD-containing serum at the concentration of 10% or lower, RAW264.7 cells showed no cytotoxicity. After stimulation with LPS for 2 h, TNF-alpha in the culture supernate of the 5% blank-control serum plus LPS group (L1, P=0.03), 10% blank-control serum plus LPS group (L2, P=0.002) and in the cell layer (P=0.01) of these groups increased remarkably. After stimulation with LPS for 1 h, the mRNA expression of TNF-alpha (P=0.004), TLR (P=0.03), CD14 (P=0.004) was up-regulated obviously. In the 10% JHDcontaining serum plus LPS group (J2), the protein expression of TNF-alpha in both supernate (P=0.04) and cell layer (P=0.04), gene expression of TNF-alpha (P=0.03), TLR4 (P=0.001), CD14 (P=0.001) were all inhibited. On the other hand, the TLR2 mRNA expression was not up-regulated after LPS stimulation in the 10% blank-control serum plus LPS group (L2). CONCLUSION: JHD-containing serum inhibited the LPS-induced cytokines expression in RAW264.7 which was probably associated with its inhibitory effect on the mRNA expression of LPS receptors TLR and CD14.

2087- gera: 158820/di/ra

EFFECT OF SERUM FROM OVERFATIGUE RATS ON JNK/C-JUN/HO-1 PATHWAY IN HUMAN UMBILICAL VEIN ENDOTHELIAL CELLS AND THE INTERVENING EFFECT OF TONGXINLUO SUPERFINE POWDER. LIANG JQ, XU HB, WU YL, SUN SR, JIA ZH, WEI C, YOU JH. chinese journal of integrated medicine. 2009;15(2):121-7 (eng). OBJECTIVE: To cultivate human umbilical vein endothelial cells (HUVECs) in the serum of overfatigue rats with the intervention of Tongxinluo superfine powder (TXLSP). By examining the variation of the activity of JNK/c-Jun/HO-1 pathway, the possible mechanisms of vascular endothelial dysfunction under overfatique conditions and the intervening effect of TXLSP were explored. METHODS: The HUVECs were randomly divided into the normal control group, the model group, the SP600125 (a specific antagonist of JNK) group, the TXLSP group and the TXLSP + SP600125 group. The content of carboyhemoglobin (COHb) and the leak rate of lactic dehydrogenase (LDH) in different groups were measured. The mRNA and protein expression of JNK, c-Jun, HO-1 and the phosphorylation level of c-Jun (P-c-Jun) were detected using Western blot and PCR methods. RESULTS: Compared with the normal control group, the COHb level in supernatant was increased significantly in the model group, and the expression of HO-1, JNK, c-Jun mRNA and corresponding proteins and P-c-Jun were also increased remarkably. The increases in these parameters were significantly decreased by SP600125. TXLSP showed remarkable up-regulation on the expression of JNK, c-Jun, Pc- Jun and HO-1 mRNA and their protein expression. Compared with the SP600125 group, the expressions of JNK, c-Jun, P-c-Jun and HO-1 mRNA and its protein in the TXLSP+SP600125 group were significantly increased at different time points (P<0.05, P<0.01). CONCLUSIONS: The vascular endothelial dysfunction under overfatigue conditions is related to the activity of the JNK/c-Jun/HO-1 pathway. One of the mechanisms of TXLSP in improving the vascular endothelial function is to adjust the activity of the JNK/c-Jun/HO-1 pathway at gene and protein levels.

2088- gera: 158822/di/ra

EXPLORATION OF THE EFFECT AND MECHANISM OF ACTIVATING BLOOD CIRCULATION AND STASIS-REMOVING THERAPY ON TUMOR METASTASIS. LU X, LI B. chinese journal of integrated medicine. 2009;15(5):395-400 (eng).

Metastasis is one of the specificities of late stage tumor and also a lethal factor often encountered. The study of tumor metastasis has important meaning for prolonging patients' survival and elevating their quality of life, but no really ideal prevention and treatment method has been found so far. Recent researches showed that tumor metastasis is correlated with platelet aggregation and blood hyperviscosity manner. Therefore, the early application of surgery, radiotherapy,

chemotherapy and biological therapies, in combination with Chinese medicine therapy for activating blood circulation and removing stasis (ABCRS) may be, after all, an effective approach. ABCRS therapy is an important therapy of Chinese medicine, which, composed of several methods like smoothening blood flow in vessels, promoting blood circulation and dispersing stagnant blood, could influence tumor metastasis to different extents, and could coordinate with some other Chinese medicine therapeutic methods like supplementing qi, promoting qi, clearing heat, removing toxic substances, warming meridian, dispelling wind, eliminating dampness, nourishing yin, dissolving sputum, relieving stagnancy, emptying viscerals, etc. The effect and acting mechanism of ABCRS on tumor metastasis is summarized in this paper and its bi-directional

2089- gera: 159042/di/ra
TREATMENT WITH YIQI BUSHEN KOUFUYE COMBINED WITH CHEMOTHERAPY FOR PREVENTING POSTOPERATIVE METASTASIS OF STOMACH CANCER--A CLINICAL OBSERVATION OF 28 CASES. LIU YX, JIANG SJ, KUANG TH, YAO YW, YANG JW, WANG YQ. journal of tcm. 2009;29(4):263-7 (eng).

OBJECTIVE: To study the effect of yiqi bushen koufiuye (oral liquid for invigorating qi and tonifying the kidney) combined with chemotherapy on postoperative metastasis of stomach cancer. METHODS: The 47 cases of postoperative stomach cancer with the syndrome of deficiency of both the spleen and kidney were divided randomly into the treatment group (28 cases), and the control group (19 cases). The control group was treated simply by chemotherapy; while the treatment group, was treated with Yiqi Bushen Koufuye in addition to chemotherapy. The effect was observed 12 months later on local relapse and distal metastasis, the life quality, peripheral hemogram, and immunologic function. RESULTS: The rates of postoperative relapse and metastasis of the treatment group were obviously lower than those of the control group (P < 0.05). The Karnofasky scores, peripheral hemogram and immunologic function of the treatment group were obviously improved in comparison with the control group (P < 0.01 or P < 0.05).CONCLUSION: Yiqi bushen koufuye combined with chemotherapy is effective in preventing postoperative metastasis of stomach cancer, increasing sensitivity and decreasing toxins, and improving the life quality and immunologic function of the patient.

2090- gera: 159302/nd/re

ACUPUNCTURE FOR RADIATION-INDUCED XEROSTOMIA IN PATIENTS WITH CANCER: A PILOT STUDY. GARCIA MK, CHIANG JS, COHEN L, LIU M, PALMER JL, ROSENTHAL DI, WEI Q, TUNG S, WANG C, RAHLFS T, CHAMBERS MS.. head neck.. 2009;31(10):1360-8 (eng). BACKGROUND: This pilot study evaluated if acupuncture can alleviate radiation-induced xerostomia among patients with cancer. Secondary objectives were to assess the effects of acupuncture on salivary flow and quality of life (QOL). METHODS: Nineteen patients received acupuncture twice a week for 4 weeks. RESULTS: Xerostomia inventory (XI) and patient benefit questionnaire (PBQ) scores were significantly better after acupuncture on weeks 4 and 8 than at baseline (XI: p = .0004 and .0001; PBQ: p = .0004 and .0011, respectively). For QOL at weeks 4 and 8, there was a significant difference for questions related to head/neck cancer (p = .04 and .006, respectively). At week 8, there was a significant difference in physical well-being (p = .04). At weeks 5 and 8, there were significant differences in the total score (p = .04 and .03, respectively). CONCLUSIONS: Acupuncture was effective for radiation-induced xerostomia in this small pilot study. Further research is needed.

2091- gera: 159303/di/re

ACUPRESSURE AND ACUPUNCTURE FOR SIDE EFFECTS OF RADIOTHERAPY. PINKOWISH MD. ca cancer j clin.. 2009;59(5):277-80 (eng).

2092- gera: 159367/di/re

THE EFFICACY OF ACUPOINT STIMULATION FOR THE MANAGEMENT OF THERAPY-RELATED ADVERSE **EVENTS IN PATIENTS WITH BREAST CANCER: A**

SYSTEMATIC REVIEW. CHAO LF, ZHANG AL, LIU HE, CHENG MH, LAM HB, LO SK.. breast cancer res treat. 2009;118(2):255-67 (eng).

The aim of the present study was to scrutinize the evidence on the use of acupoint stimulation for managing therapy- related adverse events in breast cancer. A comprehensive search was conducted on eight English and Chinese databases to identify clinical trials designed to examine the efficacy of acupressure, acupuncture, or acupoint stimulation (APS) for the management of adverse events due to treatments of breast cancer. Methodological quality of the trials was assessed using a modified Jadad scale. Using pre-determined keywords, 843 possibly relevant titles were identified. Eventually 26 papers. 18 in English and eight in Chinese, satisfied the inclusion criteria and entered the quality assessment stage. The 26 articles were published between 1999 and 2008. They assessed the application of acupoint stimulation on six disparate conditions related to anticancer therapies including vasomotor syndrome, chemotherapy-induced nausea and vomiting, lymphedema, post-operation pain, aromatase inhibitors-related joint pain and leukopenia. Modalities of acupoint stimulation used included traditional acupuncture, acupressure, electroacupuncture, and the use of magnetic device on acupuncture points. Overall, 23 trials (88%) reported positive outcomes on at least one of the conditions examined. However, only nine trials (35%) were of high quality; they had a modified Jadad score of 3 or above. Three high quality trials revealed that acupoint stimulation on P6 (NeiGuang) was beneficial to chemotherapy-induced nausea and vomiting. For other adverse events, the quality of many of the trials identified was poor; no conclusive remarks can be made. Very few minor adverse events were observed, and only in five trials. APS, in particular acupressure on the P6 acupoint, appears beneficial in the management of chemotherapy- induced nausea and vomiting, especially in the acute phase. More well-designed trials using rigorous methodology are required to evaluate the effectiveness of acupoint stimulation interventions on managing other distress symptoms.

2093- gera: 159926/di/re

PILOT, RANDOMIZED, MODIFIED, DOUBLE-BLIND, PLACEBO-CONTROLLED TRIAL OF ACUPUNCTURE FOR CANCER- RELATED FATIGUE, BALK J, DAY R,

ROSENZWEIG M, BERIWAL S.. j soc integr oncol. 2009;7:4-

Cancer-related fatigue is a substantial problem for cancer patients and their caregivers, but no effective treatment exists. Acupuncture has been suggested to improve cancer-related fatique, but no randomized clinical trials have been conducted. We hypothesized that true acupuncture, compared with sham acupuncture, would reduce cancer-related fatigue in cancer patients receiving external radiation therapy. The aim of this study was to determine effect size and feasibility. A modified, double-blind, randomized, placebocontrolled trial was conducted. The subject, clinical staff, and assessor were blinded, but the acupuncturist was not. Subjects received acupuncture once to twice per week during the 6-week course of radiation therapy. Data were collected at baseline, 3 weeks, 6 weeks, and 10 weeks, which was 4 weeks after that last radiation session. Twenty-seven subjects enrolled, and 23 completed the last data collection. Both true and sham acupuncture groups had improved fatigue, fatigue distress, quality of life, and depression from baseline to 10 weeks, but the differences between the groups were not statistically significant. The true acupuncture group improved 5.50 (SE, ± 1.48) points on the Functional Assessment of Chronic Illness Therapy-Fatigue Subscale (FACIT-F), whereas the sham acupuncture group improved by 3.73 (SE ± 1.92) points. This difference was not statistically significant (p = .37). All subjects guessed that they were in the true acupuncture group. Our study was underpowered to find a statistically significant difference. To demonstrate a statistically significant improvement between true and sham acupuncture would require 75 subjects per group in a future study. Owing to poor recruitment, the feasibility of a larger trial using the same methodology is low. Despite being underpowered, it appears that subjects receiving true acupuncture may benefit more than subjects receiving sham acupuncture. In the discussion section, we review our experience with using a sham-needle

controlled study.

2094- gera: 160032/di/re

[NON PHARMACOLOGICAL INTERVENTIONS FOR CHEMOTHERAPY INDUCED NAUSEAS AND VOMITS: INTEGRATIVE REVIEW], SILVA DRF ET AL. online brazilian journal of nursing. 2009;8(1):9p (por).

Nausea and vomiting are one of the most common gastrointestinal toxicities of antineoplastic treatment; it may affect negatively patient's nutritional condition, hidroeletrolitic balance and quality of life. This study aimed to identify evidences in medical literature regarding non-pharmacologic interventions to prevent and treat chemotherapy induced nausea and vomiting. We performed an integrative review on online databases for that purpose. We elected 9 articles from this research, which presented the following possible non-pharmacological interventions for chemotherapy emesis: accupressure, acupuncture, electroacupuncture, relaxing techniques and yoga. The authors concluded that the results suggested that these interventions should be recommended for cancer patients, mainly those presenting chemotherapy emesis in consecutive cycles.

2095- gera: 160331/di/ra

EFFECT OF HAISHENGSU AS AN ADJUNCT THERAPY FOR PATIENTS WITH ADVANCED RENAL CELL CANCER: A RANDOMIZED AND PLACEBO-CONTROLLED CLINICAL TRIAL. LIU JZ, CHEN SG, ZHANG B, WANG CB, ZHAO XW, LI GY, WANG LX. j altern complement med. 2009;15(10):1127-30 (eng).

OBJECTIVE: The purpose of this study was to investigate the effect of Haishengsu, an extract from Tegillarca L. granosa, on the effects and side-effects of immunotherapy in patients with advanced renal cell cancer. METHODS: Fifty- five (55) patients with renal cell cancer were randomly divided into a Haishengsu group (n = 27, 2.4 mg, intravenously for 15 days) and a control group (n = 28). All patients were also treated with interleukin-2, interferon-alpha, and fluorouracil. RESULTS: In the Haishengsu group, the prevalence of gastrointestinal reactions to the immunotherapy was lower than in the control group (18.5% versus 64.3%, p < 0.01). In comparison with the control group, more patients from the Haishengsu group had increased food intake (74.1% versus 14.3%, p < 0.01), weight gain (77.8% versus 10.7%, p < 0.01) or an increase in Karnofsky Performance Status score (55.6% versus 17.9%, p < 0.01). The remission rate of cancer in the Haishengsu group was higher than in the control group (51.9% and 21.4%, p < 0.01). CONCLUSIONS: Addition of Haishengsu to the conventional immunotherapy is associated with an increased remission rate in patients with advanced renal cell cancer. Haishengsu was also associated with a reduced rate of gastrointestinal side-effects from the immunotherapeutic agents, and an improvement in the physical functionality of the patients.

2096- gera: 160345/di/ra

ENDOCRINOLOGICAL EVALUATIONS OF BRIEF HAND MASSAGES IN PALLIATIVE CARE. OSAKA I, KURIHARA Y, TANAKA K, NISHIZAKI H, AOKI S, ADACHI I. j altern complement med. 2009;15(9):981-5 (eng). BACKGROUND AND OBJECTIVES: Some patients with advanced cancer make use of complementary therapies for the reduction of anxiety and stress. These patients can suffer distressing end-of-life symptoms, which conventional treatments might not relieve satisfactorily. Although previous studies have suggested that complementary therapies could be useful for reducing distress in patients with cancer, it has remained unclear whether these benefits are applicable at the end-of-life stage. The current study examined to validate salivary chromogranin A (CgA) as a biomarker for relieving stress by hand massage in terminally ill patients. METHODS: The study group comprised 34 inpatients in palliative care units. Each of these patients received a 5-minute massage to the upper extremity. Before and after the massage, saliva samples were collected in order to measure the CgA levels. RESULTS: The brief hand massage appears to reduce levels of stress according to the salivary CgA (p < 0.05). In addition, we found statistically significant changes in patient satisfaction with hand massage. CONCLUSIONS: Salivary CgA could

potentially be used as a biomarker to measure relieving stress by hand massage in a palliative-care setting.

2097- gera: 160379/di/ra

ACUPUNCTURE FOR CHEMOTHERAPY-INDUCED NEUTROPENIA IN PATIENTS WITH GYNECOLOGIC MALIGNANCIES: A PILOT RANDOMIZED, SHAM-CONTROLLED CLINICAL TRIAL. LU W, MATULONIS UA, DOHERTY-GILMAN A, LEE H, DEAN-CLOWER E, ROSULEK A, GIBSON C, GOODMAN A, DAVIS RB, BURING JE, WAYNE PM, ROSENTHAL DS, PENSON RT. j altern complement med. 2009;15(7):745-53 (eng). OBJECTIVES: The objective of this study was to investigate the effect of acupuncture administered during myelosuppressive chemotherapy on white blood cell (WBC) count and absolute neutrophil count (ANC) in patients with ovarian cancer. DESIGN: This study is a pilot, randomized, sham-controlled clinical trial. Patients received active acupuncture versus sham acupuncture while undergoing chemotherapy. A standardized acupuncture protocol was employed with manual and electrostimulation. The frequency of treatment was 2-3 times per week for a total of 10 sessions, starting 1 week before the second cycle of chemotherapy. SETTING: The setting was two outpatient academic centers for patients with cancer. SUBJECTS: Twenty-one (21) newly diagnosed and recurrent ovarian cancer patients were the subjects. OUTCOME MEASURES: WBC count, ANC, and plasma granulocyte colony-stimulating factor (G-CSF) were assessed weekly. RESULTS: The median leukocyte value in the acupuncture arm at the first day of the third cycle of chemotherapy was significantly higher than in the control arm after adjusting for baseline value (8600 cells/microL, range: 4800-12,000 versus 4400 cell/microL, range: 2300-10,000) (p = 0.046). The incidence of grade 2-4 leukopenia was less in the acupuncture arm than in the sham arm (30% versus 90%; p = 0.02). However, the median leukocyte nadir, neutrophil nadir, and recovering ANC were all higher but not statistically significantly different (p = 0.116- 0.16), after adjusting for baseline differences. There were no statistically significant differences in plasma G-CSF between the two groups. CONCLUSIONS: We observed clinically relevant trends of higher WBC values during one cycle of chemotherapy in patients with ovarian cancer, which suggests a potential myeloprotective effect of acupuncture. A larger trial is warranted to more definitively determine the efficacy of acupuncture on clinically important outcomes of chemotherapy-induced neutropenia.

2098- gera: 160386/di/ra

EFFECT OF EXTRACTS FROM INDIGOWOOD ROOT (ISATIS INDIGOTICA FORT.) ON IMMUNE RESPONSES IN RADIATION- INDUCED MUCOSITIS. YOU WC, HSIEH CC, HUANG JT. j altern complement med. 2009;15(7):771-8 (eng).

OBJECTIVES: To evaluate the effect of indigowood root (Isatis indigotica Fort.) on acute mucositis induced by radiation. DESIGN: The objective severity of mucositis, anorexia, and swallowing difficulty were measured before and after the treatment. SETTINGS: Patients with head and neck cancer receiving radiotherapy at Tian Sheng Memorial Hospital, Taiwan were recruited for this trial. SUBJECTS: Twenty (20) patients were randomized into two groups. Group 1 served as controls with only normal saline, and group 2 as the indigowood root (IR) group. INTERVENTIONS: Prophylactic application of IR consisted of gargling and then swallowing the IR preparation on the irradiated oral mucosa. OUTCOME MEASURES: Patients' characteristic distribution of gender, age, diagnosis, and mean radiation dose between the two arms were calculated by Fisher's exact test. We compared the mean of grade 1-4 mucositis, anorexia, difficulty in swallowing, and body weight change with the Mann-Whitney U test. p values less than 0.05 indicated statistical significance RESULTS: The clinical trial showed that application of IR can reduce the severity of radiation mucositis (p = 0.01), anorexia (p = 0.002), and swallowing difficulty (p = 0.002). Although patients' resting days did not show a significant difference (p = 0.06), complete radiotherapy was done without rest for 4 of 11 patients in the IR group versus 2 of 9 in controls. Hemoglobin level between both groups showed no significant difference.

Serum interleukin-6 was significantly lower in the IR group during the first, fifth, and seventh weeks. CONCLUSIONS: We confirmed that indigowood root has anti-inflammatory ability to reduce the mucosal damage caused by radiation. We postulate that indirubin may play a pharmaceutical role in improvement of radiation mucositis, anorexia, and difficulty in swallowing in our clinical trial. However, the exact mechanisms and pathways still need further analysis.

2099- gera: 160487/di/ra

SEVERITY OF YIN DEFICIENCY SYNDROME AND **AUTONOMIC NERVOUS SYSTEM FUNCTION IN CANCER** PATIENTS. LIN SC, HUANG ML, LIU SJ, HUANG YF, CHIANG SC, CHEN MF. j altern complement med. 2009;15(1):87-91 (eng).

OBJECTIVE: To evaluate the distribution of symptoms related to Yin deficiency syndrome (YDS), and to analyze the relationship between the severity of YDS and the function of the autonomic nervous system (ANS) in cancer patients. SETTING: Outpatient clinic in a teaching hospital in central Taiwan. SUBJECTS: Eighty (80) patients had been diagnosed with cancer by pathologic and clinical findings. METHOD: The severity of YDS in each subject was evaluated by a questionnaire consisting of 12 items concerning symptoms and signs related to YDS, scored from 1 to 4 points. OUTCOME MEASURES: The total score for all 12 items represented the severity of YDS. ANS function in each subject was evaluated by measuring heart rate variability (HRV), including timefrequency analysis. We coded the collected questionnaire material and performed statistical analysis (description analysis, ANOVA, and Pearson's correlation coefficients) using SPSS v.12.0 software. RESULTS: The highest total YDS score was 36 points and the lowest was 10 points. The 3 most common YDS signs were dry mouth (58.8%), sleeplessness with annoyance (56.3%), and flush over face in the afternoon (22.5%). The total YDS scores had a significantly positive correlation with heart rate (HR), but had significantly negative correlation with the standard deviation of the 5-minute mean R-R intervals (SDANN), total HRV power, power in the very low frequency band, and in the low frequency band. CONCLUSIONS: The above results suggest that the severity of YDS in cancer patients was associated with increased HR and decreased ANS activity. There is a possibility that the disturbance of ANS function may contribute to the occurrence of YDS in cancer patients.

2100- gera: 160493/di/ra

MINDFUL EXERCISE, QUALITY OF LIFE, AND SURVIVAL: A MINDFULNESS-BASED EXERCISE PROGRAM FOR WOMEN WITH BREAST CANCER. TACÓN AM, MCCOMB J. j altern complement med. 2009;15(1):41-6 (eng). BACKGROUND: The purpose of this article is to describe the rationale and protocol for a pilot study in women with breast cancer that integrates the two complementary therapies of mindfulness and exercise. DESIGN: A sample of 30 women diagnosed with breast cancer within the previous 12 months who have completed initial treatment for their disease will be recruited from oncology physicians' offices. The pilot will be a pre-post design, and the study will occur within a hospital counseling center for 2 h one day/week for 8 weeks. Participants will complete pre-and post- questionnaires on anxiety, depression, quality of life, and the post-traumatic stress disorder (PTSD) checklist. Patients will receive audiotapes and pedometers and will keep detailed logs of their weekly homework assignments. OUTCOME: Appropriate statistical analyses will be carried out to arrive at data-driven results. If results show significant benefit for the participants, the program will be revised as needed for improvement. DIRECTIONS: Future directions will be based on findings of the proposed pilot, which will dictate how to proceed after completion of the pilot study. A future goal, if preliminary findings and a replication study are encouraging, will be the development of a Mindfulness-based Exercise Program Manual for dissemination and use by researchers and clinicians to help empower patients with cancer.

2101- gera: 160500/di/ra

ADJUVANT PHYTOTHERAPY IN THE TREATMENT OF **CERVICAL CANCER: A SYSTEMATIC REVIEW AND META-** ANALYSIS. XU M, DENG PX, QI C, DENG B, ZHAO ZZ, WONG V, NGAN T, KAN V, TIAN XY, XU DY, AU D. j altern complement med. 2009;15(12):1347-53 (eng). OBJECTIVE: Clinical trials have investigated phytotherapy (PT) in the treatment of cervical cancer. This study aimed to assess the quality and data of current available trials, to compare the efficacy and safety of conventional therapies (CT) including surgical therapy, radiotherapy, and chemotherapy with that of CT plus PT (CT-PT), and to identify herbs used commonly in clinical trials. METHODS: Forty-three (43) electronic databases were searched. The quality of eligible trials was assessed by Jadad's scale, and Revman 5.0 software was used for data syntheses and analyses. RESULT: (1) Of the 48 potential trials retrieved, 18 trials involving 1657 patients met the inclusion criteria, and two trials were graded as high-quality trials; (2) CT-PT achieved a higher 1-year survival rate (SR, p = 0.0002) and tumor remission rate (TRR, p < 0.0001) than CT alone; (3) PT showed therapeutic effects comparable to those of Western medications in diminishing vesical complications (VC, p < 0.0001) and rectal complications (RC, p = 0.08) caused by CT; (4) top 15 herbs used frequently to improve SR or TRR and to treat VC or RC in the retrieved trials were identified. CONCLUSIONS: Adjuvant PT may improve the efficacy and safety of CT in clinical treatments of cervical cancer, although this result needs to be further verified by more high-quality trials.

2102- gera: 160530/di/ra
EFFECT OF HAISHENGSU AS AN ADJUNCT THERAPY FOR PATIENTS WITH ADVANCED RENAL CELL CANCER: A RANDOMIZED AND PLACEBO-CONTROLLED CLINICAL TRIAL. LIU JZ, CHEN SG, ZHANG B, WANG CB, ZHAO XW, LI GY, WANG LX. j altern complement med. 2009;15(10):1127-30 (eng).

OBJECTIVE: The purpose of this study was to investigate the effect of Haishengsu, an extract from Tegillarca L. granosa, on the effects and side-effects of immunotherapy in patients with advanced renal cell cancer. METHODS: Fifty- five (55) patients with renal cell cancer were randomly divided into a Haishengsu group (n = 27, 2.4 mg, intravenously for 15 days) and a control group (n = 28). All patients were also treated with interleukin-2, interferon-alpha, and fluorouracil. RESULTS: In the Haishengsu group, the prevalence of gastrointestinal reactions to the immunotherapy was lower than in the control group (18.5% versus 64.3%, p < 0.01). In comparison with the control group, more patients from the Haishengsu group had increased food intake (74.1% versus 14.3%, p < 0.01), weight gain (77.8% versus 10.7%, p < 0.01) or an increase in Karnofsky Performance Status score (55.6% versus 17.9%, p < 0.01). The remission rate of cancer in the Haishengsu group was higher than in the control group (51.9% and 21.4%, p < 0.01). CONCLUSIONS: Addition of Haishengsu to the conventional immunotherapy is associated with an increased remission rate in patients with advanced renal cell cancer. Haishengsu was also associated with a reduced rate of gastrointestinal side-effects from the immunotherapeutic agents, and an improvement in the physical functionality of the patients.

2103- gera: 160578/di/ra

ACUPUNCTURE FOR CHEMOTHERAPY-INDUCED **NEUTROPENIA IN PATIENTS WITH GYNECOLOGIC** MALIGNANCIES: A PILOT RANDOMIZED, SHAM-CONTROLLED CLINICAL TRIAL. LU W, MATULONIS UA, DOHERTY-GILMAN A, LEE H, DEAN-CLOWER E, ROSULEK A, GIBSON C, GOODMAN A, DAVIS RB, BURING JE, WAYNE PM, ROSENTHAL DS, PENSON RT. j altern complement med. 2009;15(7):745-53 (eng). OBJECTIVES: The objective of this study was to investigate the effect of acupuncture administered during myelosuppressive chemotherapy on white blood cell (WBC) count and absolute neutrophil count (ANC) in patients with ovarian cancer. DESIGN: This study is a pilot, randomized, sham-controlled clinical trial. Patients received active acupuncture versus sham acupuncture while undergoing chemotherapy. A standardized acupuncture protocol was employed with manual and electrostimulation. The frequency of treatment was 2-3 times per week for a total of 10 sessions, starting 1 week before the second cycle of chemotherapy.

SETTING: The setting was two outpatient academic centers for patients with cancer. SUBJECTS: Twenty-one (21) newly diagnosed and recurrent ovarian cancer patients were the subjects. OUTCOME MEASURES: WBC count, ANC, and plasma granulocyte colony-stimulating factor (G-CSF) were assessed weekly. RESULTS: The median leukocyte value in the acupuncture arm at the first day of the third cycle of chemotherapy was significantly higher than in the control arm after adjusting for baseline value (8600 cells/microL, range: 4800-12,000 versus 4400 cell/microL, range: 2300-10,000) (p = 0.046). The incidence of grade 2-4 leukopenia was less in the acupuncture arm than in the sham arm (30% versus 90%; p = 0.02). However, the median leukocyte nadir, neutrophil nadir, and recovering ANC were all higher but not statistically significantly different (p = 0.116- 0.16), after adjusting for baseline differences. There were no statistically significant differences in plasma G-CSF between the two groups. CONCLUSIONS: We observed clinically relevant trends of higher WBC values during one cycle of chemotherapy in patients with ovarian cancer, which suggests a potential myeloprotective effect of acupuncture. A larger trial is warranted to more definitively determine the efficacy of acupuncture on clinically important outcomes of chemotherapy-induced neutropenia.

2104- gera: 160585/di/ra

EFFECT OF EXTRACTS FROM INDIGOWOOD ROOT (ISATIS INDIGOTICA FORT.) ON IMMUNE RESPONSES IN RADIATION- INDUCED MUCOSITIS. YOU WC, HSIEH CC, HUANG JT. j altern complement med. 2009;15(7):771-8 (eng).

OBJECTIVES: To evaluate the effect of indigowood root (Isatis indigotica Fort.) on acute mucositis induced by radiation. DESIGN: The objective severity of mucositis, anorexia, and swallowing difficulty were measured before and after the treatment. SETTINGS: Patients with head and neck cancer receiving radiotherapy at Tian Sheng Memorial Hospital, Taiwan were recruited for this trial. SUBJECTS: Twenty (20) patients were randomized into two groups. Group 1 served as controls with only normal saline, and group 2 as the indigowood root (IR) group. INTERVENTIONS: Prophylactic application of IR consisted of gargling and then swallowing the IR preparation on the irradiated oral mucosa. OUTCOME MEASURES: Patients' characteristic distribution of gender, age, diagnosis, and mean radiation dose between the two arms were calculated by Fisher's exact test. We compared the mean of grade 1-4 mucositis, anorexia, difficulty in swallowing, and body weight change with the Mann-Whitney U test. p values less than 0.05 indicated statistical significance. RESULTS: The clinical trial showed that application of IR can reduce the severity of radiation mucositis (p = 0.01), anorexia (p = 0.002), and swallowing difficulty (p = 0.002). Although patients' resting days did not show a significant difference (p = 0.06), complete radiotherapy was done without rest for 4 of 11 patients in the IR group versus 2 of 9 in controls. Hemoglobin level between both groups showed no significant difference. Serum interleukin-6 was significantly lower in the IR group during the first, fifth, and seventh weeks. CONCLUSIONS: We confirmed that indigowood root has anti-inflammatory ability to reduce the mucosal damage caused by radiation. We postulate that indirubin may play a pharmaceutical role in improvement of radiation mucositis, anorexia, and difficulty in swallowing

2105- gera: 160686/di/ra

SEVERITY OF YIN DEFICIENCY SYNDROME AND **AUTONOMIC NERVOUS SYSTEM FUNCTION IN CANCER** PATIENTS. LIN SC, HUANG ML, LIU SJ, HUANG YF, CHIANG SC, CHEN MF. j altern complement med. 2009;15(1):87-91 (eng).

OBJECTIVE: To evaluate the distribution of symptoms related to Yin deficiency syndrome (YDS), and to analyze the relationship between the severity of YDS and the function of the autonomic nervous system (ANS) in cancer patients. SETTING: Outpatient clinic in a teaching hospital in central Taiwan. SUBJECTS: Eighty (80) patients had been diagnosed with cancer by pathologic and clinical findings. METHOD: The severity of YDS in each subject was evaluated by a questionnaire consisting of 12 items concerning symptoms and signs related to YDS, scored from 1 to 4 points. OUTCOME MEASURES: The total score for all 12 items represented the severity of YDS. ANS function in each subject was evaluated by measuring heart rate variability (HRV), including timefrequency analysis. We coded the collected questionnaire material and performed statistical analysis (description analysis, ANOVA, and Pearson's correlation coefficients) using SPSS v.12.0 software. RESULTS: The highest total YDS score was 36 points and the lowest was 10 points. The 3 most common YDS signs were dry mouth (58.8%), sleeplessness with annoyance (56.3%), and flush over face in the afternoon (22.5%). The total YDS scores had a significantly positive correlation with heart rate (HR), but had significantly negative correlation with the standard deviation of the 5-minute mean R-R intervals (SDANN), total HRV power, power in the very low frequency band, and in the low frequency band. CONCLUSIONS: The above results suggest that the severity of YDS in cancer patients was associated with increased HR and decreased ANS activity. There is a possibility that the disturbance of ANS function may contribute to the occurrence of YDS in cancer patients.

2106- gera: 160692/di/ra

MINDFUL EXERCISE, QUALITY OF LIFE, AND SURVIVAL: A MINDFULNESS-BASED EXERCISE PROGRAM FOR WOMEN WITH BREAST CANCER. TACÓN AM, MCCOMB J.

j altern complement med. 2009;15(1):41-6 (eng). BACKGROUND: The purpose of this article is to describe the rationale and protocol for a pilot study in women with breast cancer that integrates the two complementary therapies of mindfulness and exercise. DESIGN: A sample of 30 women diagnosed with breast cancer within the previous 12 months who have completed initial treatment for their disease will be recruited from oncology physicians' offices. The pilot will be a pre-post design, and the study will occur within a hospital counseling center for 2 h one day/week for 8 weeks. Participants will complete pre-and post- questionnaires on anxiety, depression, quality of life, and the post-traumatic stress disorder (PTSD) checklist. Patients will receive audiotapes and pedometers and will keep detailed logs of their weekly homework assignments. OUTCOME: Appropriate statistical analyses will be carried out to arrive at data-driven results. If results show significant benefit for the participants, the program will be revised as needed for improvement. DIRECTIONS: Future directions will be based on findings of the proposed pilot, which will dictate how to proceed after completion of the pilot study. A future goal, if preliminary findings and a replication study are encouraging, will be the development of a Mindfulness-based Exercise Program Manual for dissemination and use by researchers and clinicians to help empower patients with cancer.

2107- gera: 160833/di/ra
EFFECTS OF BLOOD-ACTIVATING AND STASIS-RESOLVING DRUGS ON TUMOR FORMATION AND METASTASIS. QIAN YF, WANG XJ. j tradit chin med. 2009;29(4):301-10 (eng).

2108- gera: 160844/di/ra

TREATMENT WITH YIQI BUSHEN KOUFUYE COMBINED WITH CHEMOTHERAPY FOR PREVENTING POSTOPERATIVE METASTASIS OF STOMACH CANCER--A CLINICAL OBSERVATION OF 28 CASES. LIU YX, JIANG SJ, KUANG TH, YAO YW, YANG JW, WANG YQ. j tradit chin med. 2009;29(4):263-7 (eng).

OBJECTIVE: To study the effect of yiqi bushen koufiuye (oral liquid for invigorating qi and tonifying the kidney) combined with chemotherapy on postoperative metastasis of stomach cancer. METHODS: The 47 cases of postoperative stomach cancer with the syndrome of deficiency of both the spleen and kidney were divided randomly into the treatment group (28 cases), and the control group (19 cases). The control group was treated simply by chemotherapy; while the treatment group, was treated with Yigi Bushen Koufuye in addition to chemotherapy. The effect was observed 12 months later on local relapse and distal metastasis, the life quality, peripheral hemogram, and immunologic function. RESULTS: The rates of postoperative relapse and metastasis of the treatment group were obviously lower than those of the control group (P <

0.05). The Karnofasky scores, peripheral hemogram and immunologic function of the treatment group were obviously improved in comparison with the control group (P < 0.01 or P < 0.05). CONCLUSION: Yiqi bushen koufuye combined with chemotherapy is effective in preventing postoperative metastasis of stomach cancer, increasing sensitivity and decreasing toxins, and improving the life quality and immunologic function of the patient.

2109- gera: 160859/di/ra

CLINICAL RESEARCH OF COMPOUND ZHEBEI GRANULES FOR INCREASING THE THERAPEUTIC EFFECT OF CHEMOTHERAPY IN REFRACTORY ACUTE LEUKEMIA PATIENTS. LU DR, LI DY, CHEN XY, YE PZ, TIAN SD. j tradit chin med. 2009;29(3):190-4 (eng). OBJECTIVE: To observe the effects of Compound Zhebei Granules (CZG) in chemotherapy for refractory acute leukemia. METHOD: Using a randomized, double-blind and multi-central concurrent control clinical research project, the patients conformed with the diagnostic criteria, according to the drug randomized method, were divided into a CZG group and a control group. The patients of the two groups respectively took the observation drug or a placebo 3 days before chemotherapy, and the therapeutic effects were evaluated after one course of chemotherapy. According to the clinical research project, 137 patients were enrolled, including 71 cases in the CZG group and 66 cases in the control group. RESULTS: The clinical complete remission (CR) rate was 42.3% in the CZG group with a total effective rate of 73.2% and it was 25.8% in the control group with a total effective rate of 53.0%, showing a statistically significant difference between the two groups (P < 0.05). CONCLUSION: CZG can increase the clinical remission rate for refractory acute leukemia during chemotherapy.

2110- gera: 154140/di/re

SCIENTIFIC EVIDENCE ON THE SUPPORTIVE CANCER CARE WITH CHINESE MEDICINE. CHO WC. zhongguo fei ai za zhi. 2010;13(3):190-4 (eng*).

Complementary and alternative medicine has been increasingly utilized by cancer patients in developed countries. Among the various forms of complementary and alternative medicine, Traditional Chinese Medicine is one of the few that has a well constructed theoretical framework and established treatment approaches for diseases including cancer. Recent research has revealed growing evidence suggesting that Traditional Chinese Medicine is effective in the supportive care of cancer patients during and after major conventional cancer treatments. This paper succinctly summarizes some published clinical evidence and meta-analyses which support the usage of various Traditional Chinese Medicine treatment strategies including Chinese herbal medicine, acupuncture and Qigong in supportive

2111- gera: 154169/di/re

TAI CHI FOR BREAST CANCER PATIENTS: A SYSTEMATIC REVIEW. LEE MS, CHOI TY, ERNST E. breast cancer res treat. 2010;120(2):309-16 (eng).

The objective of this review was to assess the effectiveness of tai chi for supportive breast cancer care. Eleven databases were searched from inception through December 2009. Controlled trials testing tai chi in patients with breast cancer that assessed clinical outcome measures were considered. The selection of studies, data extraction, and validations were performed independently by two reviewers. Risk of bias was assessed using Cochrane criteria. Three randomized clinical trials (RCTs) and four non-randomized controlled clinical trials (CCTs) met our inclusion criteria. The three RCTs tested the effects of tai chi on breast cancer care compared with walking exercise, psychological support therapy, or spiritual growth or standard health care and showed no significant differences between tai chi and these control procedures in quality of life and psychological and physical outcome measures. The metaanalysis also failed to demonstrate significant effects of tai chi compared with control interventions (n = 38, SMD, 0.45, 95% CI -0.25 to 1.14, P = 0.21; heterogeneity: chi(2) = 0.23, P = 0.63; I (2) = 0%). All of the four CCTs showed favorable effects of tai chi. Three trials suggested effectiveness in psychological and physical outcome measures, whereas one study was too

poorly reported to be evaluated in detail. All of the CCTs had a high risk of bias. Collectively, the existing trial evidence does not show convincingly that tai chi is effective for supportive breast cancer care. Future studies should be of high methodological quality, with a particular emphasis on including an adequate control intervention.

2112- gera: 154584/di/ra

[JUZENTAIHOTO (TJ-48) MAY BE AN IMPORTANT AND EFFECTIVE ANTI-INFLAMMATORY AGENT FOR INTRACTABLE CASES OF PATIENTS WITH HCV-ASSOCIATED CHRONIC LIVER DISEASES]. Kazuo TARAO, Yasunari SAKAMOTO, Kazuo TARAO, Yasunari SAKAMOTO, Kazuo TARAO, YASUNARI SAKAMOTO, kampo medicine. 2010;61(1):1-8 (jap).

Although glycyrrhizin (SNMC), and ursodeoxycholic acid (UDCA), alone or in combination have been administered in patients with active HCV-associated chronic hepatitis (HCV-CH) or liver cirrhosis (HCV-LC), there are many patients who do not respond well to these anti-inflammatory treatments. In this study, we examined retrospectively the possibility for juzentaihoto to alleviate inflammation in such patients. We calculated average ALT levels every 6 months for all 67 patients. If we assume an improvement in average serum ALT levels of more than 25% after juzentaihoto administration to be significantly effective, as compared with average ALT levels before juzentaihoto administration, 23 out of 40 patients (57.5%) showed significant improvement within one year. In the 32 patients with HCV-associated liver disease who were treated with combination SNMC and UDCA therapy, and whose average ALT levels did not decline to less than 80 IU/L, 18 (56.3%) showed significant improvement when juzentaihoto was added. Juzentaihoto was effective in 62.5% of patients with CH, and 54.2% of those with LC. Moreover, juzentaihoto was effective in 41.2% of male, and 69.6% of female patients. And in about 40% of patients, average ALT levels lowered increasingly over time, out to 2 years. Juzentaihoto may be an effective anti-inflammatory agent for intractable cases of active HCV-CH, or HCV-LC.

2113- gera: 155065/di/ra

[CLINICAL STUDY ON ACUPUNCTURE FOR LEUKOPENIA INDUCED BY CHEMOTHERAPY]. HAN YF, GONG Z, HUANG LQ, XIA X, ZHAO WJ.. chinese acupuncture and moxibustion. 2010;30(10):802-5 (chi).

OBJECTIVE: To explore the adjunctive therapeutic effects of acupuncture for leukopenia induced by chemotherapy. METHODS Eighty six cases with leukopenia after chemotherapy treatment were randomly divided into a granulocyte colony-stimulating factor (G-CSF) plus acupuncture (A) group and a G-CSF group, 43 cases in each group. After chemotherapy treatments, the patients of both groups were treated with G-CSF for 4 times, with acupuncture at Zhigou (TE 6), Quchi (LI 11), Hegu (LI 4), etc. added in the G-CSF plus A group, for an observaion cycle of 45 days. Their therapeutic effects on the 10th and 31st day and peripheral white blood cell (WBC) counts and neutrophilic granulocyte classification on the 10th, 17th, 24th, 45th day after treatment were compared RESULTS: After they were treated on the 10th day, the effective rates were both 100.0% (both 43/43), and on the 31st day, the effective rate of 98.9% (42/43) in the G-CSF plus A group was higher than 91.1% (35/43) in the G-CSF group (P < 0.05). The WBC counts in the G-CSF plus acupuncture group were both higher than those in the G-CSF group on the 10th, 17th and 24th day after treatment (all P < 0.05). The ratios of mature neutrophilic granulocyte in the G-CSF plus A group were all higher than those in the G-CSF group at the same time (all P < 0.01).CONCLUSION: Acupuncture can increase the therapeutic effect of G-CSF, delay the decrease of WBC after discontinuing G-CSF, promote the neutrophilic granulocyte differentiating forward to mature and it is better for improving leukopenia induced by chemotherapy.

2114- gera: 155095/di/ra

[EFFECT OF ELECTROACUPUNCTURE ON SEVOFLURANE ANESTHESIA IN PATIENTS UNDERGOING RESECTION OF SUPRATENTORIAL

TUMOR]. AN LX, HE Y, REN XJ, LI SQ, HAN RQ, WANG BG.. chinese acupuncture and moxibustion. 2010;30(8):669-73 (chi).

OBJECTIVE: To observe the supplementary analgesic effect of electroacupuncture and its influence on the maintenance of anesthesia and the speed of recovery of patients undergoing craniotomy.METHODS: Eighty cases of supratentorial tumor resection were randomly divided into group A and group S, 40 cases in each group. All the patients were anesthetized with 2% Sevoflurane. The patients in group A received electroacupuncture at Hegu (LI 4) and Waiguan (TE 5), Jinmen (BL 63) and Taichong (LR 3), Zusanli (ST 36) and Qiuxu (GB 40) from anesthesia beginning to the end of operation, and in group S without electroacupuncture. The end-tidal Sevoflurane concentration, minimum alveolar concentration (MAC) bispectral index (BIS) and the information during anesthesia recovery stage were recorded, respectively.RESULTS: The end-tidal concentration and MAC of Sevoflurane in group A at all times were significant lower than those in group S (P<0.05, P<0.01) with a Sevoflurane saving of 9.62% on average. The BIS in group A during a few phases were higher than that in group S (all P<0.05). During anesthesia recovery stage, the time of each phase in group A was significantly shorter than that in group S (all P<0.01). No dysphoria and one case with nausea and vomiting were shown in group A, but in group S, 2 patients had dysphoria and 3 patients had nausea and vomiting.CONCLUSION: Electroacupuncture combined with Sevoflurane anesthesia can decrease the dosage of Sevoflurane, shorten the recovery time of anesthesia and improve the quality of anesthesia recovery of the patients undergoing resection of supratentorial tumor.

2115- gera: 155148/nd/re

Optimizing emetic control in children receiving antineoplastic therapy: beyond the guidelines. Dupuis LL, Nathan PC. paediatr drugs. 2010;12(1):51-61 (eng). Existing guidelines for the prevention of antineoplastic chemotherapy-induced nausea and vomiting (CINV) in children are constrained by the lack of robust evidence. Current guidelines recommend the use of a serotonin 5-HT(3) receptor antagonist plus a corticosteroid to prevent acute CINV. Consequently, antiemetic agents that are recommended for use in adult cancer patients do not appear in the current pediatric guidelines. In addition, there is no information to guide the selection of alternative antiemetic agents for children who either cannot receive the recommended agents or who do not respond adequately to the treatment. Possible barriers to adherence to the pediatric antiemetic selection guidelines that are currently available are discussed, and published pediatric experience with antiemetic agents recommended in the current adult antiemetic selection guidelines (dolasetron, tropisetron, palonosetron, aprepitant) is summarized in this review. The use of novel and emerging antiemetic therapeutic interventions {metopimazine, diphenhydramine (Benadryl)-lorazepam (Avitan)-dexamethasone (Decadron) [BAD], nabilone, acupuncture, midazolam, olanzapine, mirtazapine, gabapentin, droperidol} in children are explored.

2116- gera: 155210/di/re

ACUPUNCTURE VERSUS VENLAFAXINE FOR THE MANAGEMENT OF VASOMOTOR SYMPTOMS IN PATIENTS WITH HORMONE RECEPTOR-POSITIVE **BREAST CANCER: A RANDOMIZED CONTROLLED TRIAL.** WALKER EM, RODRIGUEZ AI, KOHN B, BALL RM, PEGG J, POCOCK JR, NUNEZ R, PETERSON E, JAKARY S, LEVINE RA. j clin oncol. 2010;28(4):634-40 (eng). PURPOSE: Vasomotor symptoms are common adverse effects of antiestrogen hormone treatment in conventional breast cancer care. Hormone replacement therapy is contraindicated in patients with breast cancer. Venlafaxine (Effexor), the therapy of choice for these symptoms, has numerous adverse effects. Recent studies suggest acupuncture may be effective in reducing vasomotor symptoms in menopausal women. This randomized controlled trial tested whether acupuncture reduces vasomotor symptoms and produces fewer adverse effects than venlafaxine. PATIENTS AND METHODS: Fifty patients were randomly assigned to receive 12 weeks of acupuncture (n = 25) or venlafaxine (n = 25) treatment. Health outcomes were

measured for up to 1 year post-treatment. RESULTS: Both groups exhibited significant decreases in hot flashes, depressive symptoms, and other quality-of-life symptoms, including significant improvements in mental health from preto post-treatment. These changes were similar in both groups, indicating that acupuncture was as effective as venlafaxine. By 2 weeks post-treatment, the venlafaxine group experienced significant increases in hot flashes, whereas hot flashes in the acupuncture group remained at low levels. The venlafaxine group experienced 18 incidences of adverse effects (eg, nausea, dry mouth, dizziness, anxiety), whereas the acupuncture group experienced no negative adverse effects. Acupuncture had the additional benefit of increased sex drive in some women, and most reported an improvement in their energy, clarity of thought, and sense of well-being CONCLUSION: Acupuncture appears to be equivalent to drug therapy in these patients. It is a safe, effective and durable treatment for vasomotor symptoms secondary to long-term antiestrogen hormone use in patients with breast cancer

2117- gera: 155232/nd/re

OPTIMIZING EMETIC CONTROL IN CHILDREN RECEIVING ANTINEOPLASTIC THERAPY: BEYOND THE GUIDELINES. DUPUIS LL, NATHAN PC. paediatr drugs. 2010;12(1:51-61 (eng).

Existing guidelines for the prevention of antineoplastic chemotherapy-induced nausea and vomiting (CINV) in children are constrained by the lack of robust evidence. Current guidelines recommend the use of a serotonin 5-HT(3) receptor antagonist plus a corticosteroid to prevent acute CINV. Consequently, antiemetic agents that are recommended for use in adult cancer patients do not appear in the current pediatric guidelines. In addition, there is no information to guide the selection of alternative antiemetic agents for children who either cannot receive the recommended agents or who do not respond adequately to the treatment. Possible barriers to adherence to the pediatric antiemetic selection guidelines that are currently available are discussed, and published pediatric experience with antiemetic agents recommended in the current adult antiemetic selection guidelines (dolasetron, tropisetron, palonosetron, aprepitant) is summarized in this review. The use of novel and emerging antiemetic therapeutic interventions {metopimazine, diphenhydramine (Benadryl)-lorazepam (Avitan)-dexamethasone (Decadron) [BAD], nabilone, acupuncture, midazolam, olanzapine, mirtazapine, gabapentin, droperidol) in children are explored.

2118- gera: 155233/di/re

MANAGING HOT FLUSHES IN MEN AFTER PROSTATE CANCER, A SYSTEMATIC REVIEW. FRISK J. maturitas. 2010;65(1):15-22 (eng).

CONTEXT AND OBJECTIVE: The aim of this study was to describe hot flushes in men with prostate cancer, and their treatment methods. METHOD: A systematic review was conducted of the literature indexed between 1966 and 2009 on the MEDLINE, the ISI Web of Knowledge, Cinahl and PsycINFO. Of 252 articles identified, 32 were selected for consideration of their complete texts, of which five were subject to detailed analysis. RESULTS: Diethylstilbestrol, megestrol acetate and cyproterone acetate have the strongest effect, giving a 75% or larger decrease of the number of hot flushes, but they may have severe or bothersome side-effects. Gabapentin has an uncertain effect. Clonidine is not proven effective for hot flushes. Long-term effects were not evaluated in any of the studies. SSRI/SNRI and acupuncture may have a moderate effect on hot flushes but are not proven in any RCTs. CONCLUSION: Hot flushes are common and bothersome symptoms in men with prostate cancer and those taking antiandrogen treatment, and reduce quality of life. Few treatments are available and some are avoided for these patients Additional prospective treatment studies are needed, with longterm follow-up, in order to evaluate the effects and risks of treatments. Treatments with few or no severe side-effects should be prioritised in future investigations. Experimental studies are also needed to elucidate the mechanism behind hot flushes in men and to suggest routes for the development of new treatments.

2119- gera: 155308/di/re

A SYSTEMATIC REVIEW OF SALIVARY GLAND HYPOFUNCTION AND XEROSTOMIA INDUCED BY **CANCER THERAPIES: MANAGEMENT STRATEGIES AND** ECONOMIC IMPACT. JENSEN SB, PEDERSEN AM, VISSINK A, ANDERSEN E, BROWN CG, DAVIES AN DUTILH J, FULTON JS, JANKOVIC L, LOPES NN, MELLO AL, MUNIZ LV. support care cancer. 2010;25: (eng). PURPOSE: This systematic review aimed to assess the literature for management strategies and economic impact of salivary gland hypofunction and xerostomia induced by cancer therapies and to determine the quality of evidence-based management recommendations. METHODS: The electronic databases of MEDLINE/PubMed and EMBASE were searched for articles published in English since the 1989 NIH Development Consensus Conference on the Oral Complications of Cancer Therapies until 2008 inclusive. For each article, two independent reviewers extracted information regarding study design, study population, interventions, outcome measures, results, and conclusions. RESULTS: Seventy-two interventional studies met the inclusion criteria. In addition, 49 intensity-modulated radiation therapy (IMRT) studies were included as a management strategy aiming for less salivary gland damage. Management guideline recommendations were drawn up for IMRT, amifostine, muscarinic agonist stimulation, oral mucosal lubricants, acupuncture, and submandibular gland transfer. CONCLUSIONS: There is evidence that salivary gland hypofunction and xerostomia induced by cancer therapies can be prevented or symptoms be minimized to some degree, depending on the type of cancer treatment. Management quideline recommendations are provided for IMRT, amifostine, muscarinic agonist stimulation, oral mucosal lubricants, acupuncture, and submandibular gland transfer. Fields of sparse literature identified included effects of gustatory and masticatory stimulation, specific oral mucosal lubricant formulas, submandibular gland transfer, acupuncture, hyperbaric oxygen treatment, management strategies in pediatric cancer populations, and the economic consequences of salivary gland hypofunction and xerostomia.

2120- gera: 155311/nd/re

PREVĂLENCE, PATTERNS, AND COSTS OF CHINESE MEDICINE USE AMONG PROSTATE CANCER PATIENTS: A POPULATION-BASED STUDY IN TAIWAN. LIN YH, CHEN KK, CHIU JH. integr cancer ther. 2010;9(1):16-23 (eng). Background. Taiwan's National Health Insurance (NHI) is a comprehensive and universal program, providing Western medicine (WM) and Chinese medicine (CM). This study aims to explore CM use among prostate cancer patients in NHI. METHODS: A cross-section retrospective analysis was conducted using registration and claim data sets from the NHI Research Database. In 2007, 22 352 prostate cancer patients with 265 497 visits of CM and WM ambulatory services were identified. Patient demographics, patterns of therapies, and costs were analyzed. RESULTS: In 2007, 592 prostate cancer patients (2.6%) had 4141 CM outpatient visits (7.0 on average). The median age was 73.9. The majority (90.5%) of CM users also used WM ambulatory services. About one third of CM outpatient services were provided by private clinics. The most frequently used CM therapies were Chinese herbal medication (93.6%), followed by acupuncture/traumatology manipulative therapies (7.0%). CM accounted for 0.2% expenditure (\$87 500) and 1.6% visits of ambulatory services. The average cost per visit for WM was 6.3 times higher than that for CM (\$133.6 vs \$21). CONCLUSIONS: The prevalence and costs of insurance-covered CM among prostate cancer patients were low. Most prostate cancer patients did not use insurance-covered CM. The majority of CM users also used WM. CM appeared to play a complementary rather than an alternative role.

2121- gera: 155312/nd/re

ORAL CANCER PAIN. DIOS PD, LESTÓN JS. oral oncol. 2010; 20: (eng).

Pain may be the initial symptom in oral cancer, and is a common complaint both in patients awaiting treatment and in those already in treatment. However, little has been published in the literature on the management of oral cancer pain. Effective pain control requires a multimodal approach in which pharmacological management based on the World Health Organization (WHO) analgesic ladder continues to play an essential role. Although different routes are available for the administration of analgesics, oral delivery continues to be the principal route for pain control in the first instance. Interventional approaches include blockade of a peripheral nerve or of the relevant ganglion, and the use of central neuraxial blockade. The intraventricular or intrathecal administration of opioids, with or without local anaesthetics, has been indicated for severe intractable pain. The development of new treatment modalities provides additional options, though further clinical research is required. There is no evidence of the efficacy of non-pharmacological methods such as acupuncture or transcutaneous nerve stimulation in the management of oral cancer pain. Surgery, radiation therapy, and chemotherapy have also been suggested, but their results have not been quantified.

2122- gera: 155321/di/re RANDOMIZED, BLINDED, SHAM-CONTROLLED TRIAL OF ACUPUNCTURE FOR THE MANAGEMENT OF AROMATASE INHIBITOR-ASSOCIATED JOINT SYMPTOMS IN WOMEN WITH EARLY-STAGE BREAST CANCER. CREW KD, CAPODICE JL, GREENLEE H, BRAFMAN L, FUENTES D, AWAD D, YANN TSAI W, HERSHMAN DL. clin oncol. 2010;28(7):1154-60 (eng). PURPOSE Women with breast cancer (BC) treated with aromatase inhibitors (Als) may experience joint symptoms that can lead to discontinuation of effective therapy. We examined whether acupuncture improves Al-induced arthralgias in women with early-stage BC. METHODS We conducted a randomized, controlled, blinded study comparing true acupuncture (TA) versus sham acupuncture (SA) twice weekly for 6 weeks in postmenopuasal women with BC who had selfreported musculoskeletal pain related to Als. TA included full body/auricular acupuncture and joint-specific point prescriptions, whereas SA involved superficial needle insertion at nonacupoint locations. Outcome measures included the Brief Pain Inventory-Short Form (BPI-SF), Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC), and Modified Score for the Assessment of Chronic Rheumatoid Affections of the Hands (M-SACRAH) obtained at baseline and at 3 and 6 weeks. Results Of 51 women enrolled, 43 women were randomly assigned and 38 were evaluable. Baseline characteristics were comparable between the two groups. Our primary end point was the difference in mean BPI-SF worst pain scores at 6 weeks, which was lower for TA compared with SA (3.0 v 5.5; P < .001). We also found differences between TA and SA in pain severity (2.6 v 4.5; P = .003) and painrelated interference (2.5 v 4.5; P = .002) at 6 weeks. Similar findings were seen for the WOMAC and M-SACRAH scores. The acupuncture intervention was well-tolerated. CONCLUSION Women with Al-induced arthralgias treated with TA had significant improvement of joint pain and stiffness, which was not seen with SA. Acupuncture is an effective and well-tolerated strategy for managing this common treatmentrelated side effect.

2123- gera: 155351/di/re

MOXIBUSTION FOR CANCER CARE: A SYSTEMATIC REVIEW AND META-ANALYSIS. LEE MS, CHOI TY, PARK JE, LEE SS, ERNST E. bmc cancer. 2010;10(1):130 (eng). ABSTRACT: BACKGROUND: Moxibustion is a traditional Chinese method that uses the heat generated by burning herbal preparations containing Artemisia vulgaris to stimulate acupuncture points. Considering moxibustion is closely related to acupuncture, it seems pertinent to evaluate the effectiveness of moxibustion as a treatment of symptoms of cancer. The objective of this review was to systematically assess the effectiveness of moxibustion for supportive cancer care. METHODS: We searched the literature using 11 databases from their inceptions to February 2010, without language restrictions. We included randomised clinical trials (RCTs) in which moxibustion was employed as an adjuvant treatment for conventional medicine in patients with any type of cancer. The selection of studies, data extraction, and validations were performed independently by two reviewers. RESULTS: Five RCTs compared the effects of moxibustion with conventional therapy. Four RCTs failed to show

favourable effects of moxibustion for response rate compared with chemotherapy (n=229, RR, 1.04, 95% CI 0.94 to 1.15, P=0.43). Two RCTs assessed the occurrence of side effects of chemotherapy and showed favourable effects of moxibustion. A meta-analysis showed significant less frequency of nausea and vomiting from chemotherapy for moxibustion group (n=80, RR, 0.38, 95% CIs 0.22 to 0.65, P=0.0005, heterogeneity:tau2=0.00; chi2=0.18, P=0.67, I2=0%). CONCLUSION: The evidence is limited to suggest moxibustion is an effective supportive cancer care in nausea and vomiting. However, all studies have a high risk of bias so effectively there is not enough evidence to draw any conclusion. Further research is required to investigate whether there are specific benefits of moxibustion for supportive cancer care.

2124- gera: 155371/di/re

PHASE II RANDOMIZED TRIAL OF ACUPUNCTURE-LIKE TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION TO PREVENT RADIATION-INDUCED XEROSTOMIA IN HEAD AND NECK CANCER PATIENTS. WONG RK, SAGAR SM, CHEN BJ, YI GY, COOK R. j soc integr oncol. 2010;8(2):35-42 (eng).

Current evidence indicates that acupuncture-like transcutaneous electrical nerve stimulation (ALTENS) can provide sustained benefit for established radiation-induced xerostomia (RIX) symptoms. This is further being evaluated by comparing it with standard treatment (pilocarpine) in a randomized controlled trial. This report studies the potential effectiveness of xerostomia prevention using ALTENS delivered concomitantly with radiotherapy administered to head and neck cancer patients. Sixty patients were randomized to either the treatment group (n = 30) that received ALTENS daily with radiotherapy or the control group (n = 26) that had standard mouth care only. Stimulated and basal unstimulated whole saliva production (WSP) plus RIX symptoms visual analogue score (RIXVAS) were assessed at specific time points. Generalized linear models and generalized estimating equations were used for analysis. RIXVAS at 3 months follow-up after therapy completion was used as the primary study endpoint. The mean RIXVAS for the ALTENS intervention at 3 months was 39.8, which was not significantly different from the control arm value of 40.5. There were no statistically significant differences between the two groups for their mean RIXVAS and WSP at all assessment time points. In conclusion, there was no significant difference in mean WSP and RIXVAS between the two groups, so ALTENS is not recommended as a prophylactic intervention.

2125- gera: 155522/di/re

EFFECT OF ACUPRESSURE ON CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING IN GYNECOLOGIC CANCER PATIENTS IN TURKEY. TASPINAR A, SIRIN A.

eur j oncol nurs. 2010;14(1):49-54 (eng). PURPOSE: The aim of the current study was to assess the effect of acupressure applied to the pericardium 6 (P6 or Neiguan) acupuncture point with a wristband (Sea-Band) on nausea-vomiting in addition to the standard antiemetic medications used to prevent nausea-vomiting due to chemotherapy in gynecologic cancer patients. METHOD: In this prospective research we used pre- and posttests. The study consisted of 34 patients with gynecologic cancer. RESULTS: We found a significant decrease in the patients' mean scores of nausea and the use of antiemetic medications following acupressure applied to the patients with a wristband, when compared with their mean scores of nausea and the use of antiemetic medications prior to the application (p<0.05), and we also observed a decline in their mean scores of vomiting and retching episodes; however, this decline was not found to be statistically significant (p>0.05). CONCLUSIONS: The findings from this study suggest that the acupressure applied to P6 acupuncture point with wristbands may be effective in reducing chemotherapy-related nausea and may decrease the antiemetic use after chemotherapy. Further research with more subjects is needed.

2126- gera: 155528/nd/re

INTEGRATIVE AND BEHAVIORAL APPROACHES TO THE TREATMENT OF CANCER-RELATED NEUROPATHIC PAIN. CASSILETH BR, KEEFE FJ. oncologist. 2010;15:19-

Integrative oncology is the synthesis of mainstream cancer care and evidence-based complementary therapies Complementary strategies include massage therapies, acupuncture, fitness, and mind-body techniques, which take advantage of the reciprocal relationship between the mind and body. Neuropathic pain--and pain more generally--is part of a complex process involving the whole physical and psychosocial being, therefore requiring an integrative management approach. Several studies have demonstrated, for example, that social context plays an important role in the perception of pain and that a patient's coping strategies can influence the persistence of pain. In this article, we briefly describe research illustrating the promise of integrative approaches for the treatment of cancer-related

2127- gera: 155536/nd/re
ACUPUNCTURE FOR HOT FLASHES IN PATIENTS WITH PROSTATE CANCER. BEER TM, BENAVIDES M, EMMONS SL, HAYES M, LIU G, GARZOTTO M, DONOVAN D, KATOVIC N, REEDER C, EILERS K. urology. 2010;20: (eng). OBJECTIVES: To determine the effect of acupuncture on hot flash frequency and intensity, quality of life, and sleep quality in patients undergoing hormonal therapy for prostate cancer. Hot flashes are a common adverse effect of hormonal therapy for prostate cancer. METHODS: Men who had a hot flash score . >4 who were receiving androgen deprivation therapy for prostate cancer underwent acupuncture with electrostimulation biweekly for 4 weeks, then weekly for 6 weeks, using a predefined treatment plan. The primary endpoint was a 50% reduction in the hot flash score after 4 weeks of therapy, calculated from the patients' daily hot flash diaries. The hot flash-related quality of life and sleep quality and biomarkers potentially related to hot flashes, including serotonin, calcitonin gene-related peptide, and urinary 5-hydroxyindoleacetic acid, were examined. RESULTS: A total of 25 men were enrolled from September 2003 to April 2007. Of these, 22 were eligible and evaluable. After 4 weeks, 9 (41%, 95% confidence interval 21%-64%) of 22 patients had had a >50% reduction in the hot flash score. Of the 22 patients, 12 (55%, 95% confidence interval 32%-76%) met this response definition at any point during the therapy course. No patient had a significant increase in hot flash score during therapy. A reduced hot flash score was associated with improvement in the hot flash-related quality of life and sleep quality. CONCLUSIONS: Multiple placebo-controlled trials have demonstrated a 25% response rate to placebo treatment for hot flashes. Of the 22 patients, 41% had responded by week 4 and 55% overall in the present pilot study, providing evidence of a potentially meaningful benefit. Additional studies of acupuncture for hot flashes in this population are warranted.

2128- gera: 155580/nd/re

THE SAFETY OF ACUPUNCTURE IN CHILDREN AND ADOLESCENTS WITH CANCER THERAPY-RELATED THROMBOCYTOPENIA. LADAS EJ, ROONEY D, TAROMINA K, NDAO DH, KELLY KM. support care cancer. 2010;18: (eng).

PURPOSE: Acupuncture is frequently used to manage the side effects associated with cancer therapy. In acupuncture practice, the presence of thrombocytopenia is a relative contraindication to acupuncture use among patients with cancer. However, the safety of acupuncture in patients with cancer treatment-related thrombocytopenia has not been previously investigated. METHODS: Medical records of 32 patients receiving acupuncture at an academic medical center with an established acupuncture program during treatment for cancer or during stem cell transplantation were reviewed. RESULTS: Of 237 acupuncture sessions, 20%, 8%, and 19% of the sessions were administered to patients with severe, moderate, and mild thrombocytopenia, respectively. No bleeding side effects were observed. CONCLUSIONS: This retrospective case series provides descriptive data on the safety of acupuncture using Japanese J-type Seirin needles, with mild manual stimulation administered at 0.5-cun depth in patients with cancer with and without thrombocytopenia. Prospective trials are needed to confirm these initial observations.

2129- gera: 155606/nd/re

THE OUTCOMES OF VISUALIZATION AND ACUPUNCTURE ON THE QUALITY OF LIFE OF ADULT CANCER PATIENTS RECEIVING CHEMOTHERAPY. SAWADA NO, ZAGO MM, GALVÃO CM, CARDOZO FM, ZANDONAI AP, OKINO L, NICOLUSSI AC. cancer nurs. 2010;17: (eng).

BACKGROUND:: The use of complementary and alternative medicine (CAM) to treat cancer patients has increased around the world, and its benefits have been described. These therapies represent an important theme in oncology and have been used in parallel with conventional therapies. OBJECTIVES:: This study aimed to assess the outcomes of using relaxation with visualization and acupuncture on the quality of life of cancer patients undergoing chemotherapy treatment and to compare these outcomes with patients who did not choose to receive the intervention. METHODS:: Participants chose to be in either the intervention group (IG) or control group (CG). They completed the Quality of Life Questionnaire-Core 30 at the start and end of chemotherapy. The IG was chosen by 38 patients with different types of cancer who completed weekly relaxation with visualization and acupuncture sessions, whereas the CG was composed of 37 patients who did not receive the intervention. RESULTS: Statistically significant results evidenced an increase in global health and emotional and social functions and a decrease in fatigue and loss of appetite for the IG, and an increase in global health for the CG (P </= .05). A highly significant difference was found when comparing the post- chemotherapy scores of the Quality of Life Questionnaire-Core 30 in the global health domain between the CG and the IG (P </= .001), indicating positive outcomes of the CAM intervention. CONCLUSION:: Adults with cancer are able to choose between involvement or not with this kind of CAM intervention. Global health could be improved by participating in this type of intervention. IMPLICATIONS FOR PRACTICE:: Choosing whether to be involved may be assisted by knowing the positive outcomes for some patients.

2130- gera: 155609/nd/re

PREVALENCE, PATTERNS, AND COSTS OF CHINESE **MEDICINE USE AMONG PROSTATE CANCER PATIENTS:** A POPULATION-BASED STUDY IN TAIWAN. LIN YH, CHEN KK, CHIU JH. integr cancer ther. 2010;9(1):16-23 (eng). BACKGROUND: Taiwan's National Health Insurance (NHI) is a comprehensive and universal program, providing Western medicine (WM) and Chinese medicine (CM). This study aims to explore CM use among prostate cancer patients in NHI METHODS: A cross-section retrospective analysis was conducted using registration and claim data sets from the NHI Research Database. In 2007, 22,352 prostate cancer patients with 265,497 visits of CM and WM ambulatory services were identified. Patient demographics, patterns of therapies, and costs were analyzed. RESULTS: In 2007, 592 prostate cancer patients (2.6%) had 4141 CM outpatient visits (7.0 on average). The median age was 73.9. The majority (90.5%) of CM users also used WM ambulatory services. About one third of CM outpatient services were provided by private clinics. The most frequently used CM therapies were Chinese herbal medication (93.6%), followed by acupuncture/traumatology manipulative therapies (7.0%). CM accounted for 0.2% expenditure (\$87,500) and 1.6% visits of ambulatory services. The average cost per visit for WM was 6.3 times higher than that for CM (\$133.6 vs \$21). CONCLUSIONS: The prevalence and costs of insurance-covered CM among prostate cancer patients were low. Most prostate cancer patients did not use insurance-covered CM. The majority of CM users also used WM. CM appeared to play a complementary rather than an alternative role.

2131- gera: 155664/di/ra

[CLINICAL RANDOMIZED CONTROLLED STUDY ON ACUPUNCTURE FOR TREATMENT OF PERIPHERAL NEUROPATHY INDUCED BY CHEMOTHERAPEUTIC DRUGS]. XU WR, HUA BJ, HOU W, BAO YJ.. chinese acupuncture and moxibustion. 2010;30(6):457-60 (chi). OBJECTIVE: To seek the effective treatment for peripheral neuropathy induced by chemotherapeutic drugs.METHODS: Sixty-four cases of peripheral neuropathy induced by Paclitaxel

or Oxaliplatin were randomly divided into an acupuncture group and a medication group, 32 cases in each group. The acupuncture group was treated with therapeutic principle of dredging meridians and collaterals, tonifying qi and eliminating blood stasis, supplementing liver and kidney, nourishing blood and tendon. Hegu (LI 4), Taichong (LR 3), Zusanli (ST 36), Qihai (CV 6) and Quchi (LI 11) etc. were selected. The medication group was treated with intramuscular injection of Cobamamide. The neurotoxicity of two groups was compared with questionnaire of peripheral neuropathy induced by chemotherapeutic drugs before and after treatment.RESULTS: The total effective rate for sensory nerve disorder of acupuncture group was 66.7% (20/30), which was superior to that of 40.0% (12/30) in medication group (P < 0.05). CONCLUSION: Acupuncture is more effective than Cobamamide for treatment of peripheral neuropathy induced by chemotherapeutic drugs, especially for moderate and severe sensory nerve disorder induced by paclitaxel.

2132- gera: 155764/di/ra

[EFFECT OF ACUPUNCTURE ON THE ACTIVITY OF THE PERIPHERAL BLOOD T LYMPHOCYTE SUBSETS AND NK CELLS IN PATIENTS WITH COLORECTAL CANCER LIVER METASTASIS]. ZHAO CL, PENG LJ, ZHANG ZL, ZHANG T, LI HM.. chinese acupuncture and moxibustion. 2010;30(1):10-2 (chi).

OBJECTIVE: To study the effect of acupuncture on the immune function of patients with colorectal cancer liver metastasis.METHODS: Sixty cases with colorectal cancer liver metastasis confirmed by pathology and mageology diagnosis were treated with acupuncture. Zusanli (ST 36), Sanyinjiao (SP 6), Neiguan (PC 6), Shangjuxu (ST 37), Hegu (LI 4), Taixi (KI 3), Taichong (LR 3), Yinlingquan (SP 9), Yanglingquan (GB 34), etc. were selected for acupuncture, and Shenque (CV 8), Guanyuan (CV 4), Qihai (CV 6), Zusanli (ST 36) were selected for moxibustion. The changes of CD(3), CD(4), CD(8) T cells and NK cells in value were examined with flow cytometry before and after treatment.RESULTS: The value of T lymphocyte subsets such as CD(3), CD(4), and CD(8), as well as NK cells were obviously increased after treatment, and there were significant differences between them before and after treatment.CONCLUSION: Acupuncture can improve the immune function of patients with colorectal cancer liver metastasis

2133- gera: 155978/nd/re

THE SAFETY OF ACUPUNCTURE IN CHILDREN AND ADOLESCENTS WITH CANCER THERAPY-RELATED THROMBOCYTOPENIA. LADAS EJ, ROONEY D, TAROMINA K, NDAO DH, KELLY KM. support care cancer. 2010;18(11):1487-90 (eng).

PURPOSE: Acupuncture is frequently used to manage the side effects associated with cancer therapy. In acupuncture practice, the presence of thrombocytopenia is a relative contraindication to acupuncture use among patients with cancer. However, the safety of acupuncture in patients with cancer treatment-related thrombocytopenia has not been previously investigated. METHODS: Medical records of 32 patients receiving acupuncture at an academic medical center with an established acupuncture program during treatment for cancer or during stem cell transplantation were reviewed RESULTS: Of 237 acupuncture sessions, 20%, 8%, and 19% of the sessions were administered to patients with severe, moderate, and mild thrombocytopenia, respectively. No bleeding side effects were observed. CONCLUSIONS: This retrospective case series provides descriptive data on the safety of acupuncture using Japanese J-type Seirin needles, with mild manual stimulation administered at 0.5-cun depth in patients with cancer with and without thrombocytopenia. Prospective trials are needed to confirm these initial observations.

2134- gera: 156054/di/re

ACUPUNCTURE AND CANCER. O'REGAN D, FILSHIE J. auton neurosci. 2010;157(1-2):96-100 (eng). Acupuncture has become a popular complementary treatment in oncology, particularly as patients seek non-pharmacological alternatives to provide symptom control. A considerable body of evidence suggests that acupuncture modulates neurological

processes to bring about its effects. This basic research is supported by an increasing number of positive clinical studies of varying quality. Lower quality studies have hampered the widespread acceptability of acupuncture, with some deeming the inter-personal skills of the practitioner to be more powerful than the needle or its equivalent. More recent randomised control trials (RCTs) have sought to settle this controversy, with mixed results. The literature was searched to identify, where possible, RCTs involving acupuncture and various common cancer symptoms. A potential role for acupuncture was found in the following cancer symptoms: pain, nausea and vomiting, xerostomia, hot flushes, fatigue, anxiety, depression and insomnia. Acupuncture is safe with minimal side-effects, and is clinically effective for the management of these symptoms. Continuing research using validated methodology is essential. In the interim, health professionals should be open to explore the use of acupuncture with their cancer

2135- gera: 156103/nd/re

COCHRANE REVIEW SUMMARY FOR CANCER NURSING: **ACUPUNCTURE-POINT STIMULATIO N FOR** CHEMOTHERAPY- INDUCED NAUSEA OR VOMITING.

KONNO R. cancer nurs. 2010;33(6):479-80 (eng).

2136- gera: 156186/nd/re
ACUPUNCTURE FOR DYSPHAGIA AFTER CHEMORADIATION THERAPY IN HEAD AND NECK CANCER: A CASE SERIES REPORT. WEIDONG LU, POSNER MR, WAYNE P, ROSENTHAL DS, HADDAD RI. integr cancer ther. 2010;9(3):284-90 (eng). BACKGROUND: Dysphagia is a common side effect following chemoradiation therapy (CRT) in patients with head and neck cancer (HNC). METHODS: In this retrospective case series, 10 patients with HNC were treated with acupuncture for radiationinduced dysphagia and xerostomia. All patients were diagnosed with stage III/IV squamous cell carcinoma. In all, 7 of 10 patients were percutaneous endoscopic gastrostomy (PEG) tube dependent when they began acupuncture. Manual acupuncture and electroacupuncture were used once a week. RESULTS: A total of 9 of 10 patients reported various degrees of subjective improvement in swallowing functions, xerostomia, pain, and fatigue levels. Overall, 6 (86%) of 7 PEG tubedependent patients had their feeding tubes removed after acupuncture, with a median duration of 114 days (range 49 to 368 days) post CRT. One typical case is described in detail. CONCLUSIONS: A relatively short PEG tube duration and reduced symptom severity following CRT were observed in these patients. Formal clinical trials are required to determine the causality of the observations.

2137- gera: 156263/nd/re

ORAL CANCER PAIN. DIOS PD, LESTÓN JS. oral oncol. 2010;46(6):448-51 (eng).

Pain may be the initial symptom in oral cancer, and is a common complaint both in patients awaiting treatment and in those already in treatment. However, little has been published in the literature on the management of oral cancer pain. Effective pain control requires a multimodal approach in which pharmacological management based on the World Health Organization (WHO) analgesic ladder continues to play an essential role. Although different routes are available for the administration of analgesics, oral delivery continues to be the principal route for pain control in the first instance. Interventional approaches include blockade of a peripheral nerve or of the relevant ganglion, and the use of central neuraxial blockade. The intraventricular or intrathecal administration of opioids, with or without local anaesthetics, has been indicated for severe intractable pain. The development of new treatment modalities provides additional options, though further clinical research is required. There is no evidence of the efficacy of non-pharmacological methods such as acupuncture or transcutaneous nerve stimulation in the management of oral cancer pain. Surgery, radiation therapy, and chemotherapy have also been suggested, but their results have not been quantified.

2138- gera: 156435/nd/re

RECENT ADVANCES IN ONCOLOGY ACUPUNCTURE AND SAFETY CONSIDERATIONS IN PRACTICE. LU W,

ROSENTHAL DS. curr treat options oncol. 2010;11(3-4):141-6 (eng).

Oncology acupuncture is a new and emerging field of research. Recent advances from published clinical trials have added evidence to support the use of acupuncture for symptom management in cancer patients. Recent new developments include (1) pain and dysfunction after neck dissection; (2) radiation-induced xerostomia in head and neck cancer; (3) aromatase inhibitor-associated arthralgia in breast cancer; (4) hot flashes in breast cancer and prostate cancer; and (5) chemotherapy-induced neutropenia in ovarian cancer. Some interventions are becoming a non-pharmaceutical option for cancer patients, while others still require further validation and confirmation. Meanwhile, owing to the rapid development of the field and increased demands from cancer patients, safety issues concerning oncology acupuncture practice have become imperative. Patients with cancer may be at higher risk developing adverse reactions from acupuncture. Practical strategies for enhancing safety measures are discussed and recommended.

2139- gera: 156539/di/ra

[EFFECTS OF ELECTROACUPUNCTURE OF DIFFERENT ACUPOINT GROUPS ON SEVOFLURANE ANESTHESIA IN PATIENTS UNDERGOING RESECTION OF SUPRATENTORIAL TUMORS]. AN LX, LI J, REN XJ, LIU YN, WANG BG.. acupuncture research. 2010;35(5):368/74 (chi)

OBJECTIVE: To observe the effect of electroacupuncture (EA) of different acupoint groups on the sevoflurane anesthetic requirement for resection of supratentorial tumors and the speed of post-operation recovery. METHODS: A total of 120 cases of supratentorial tumor resection patients were randomly and equally allocated into general anesthesia (GA) group, EAproximal acupoints group (EA-PA group) and EA-distant acupoints group (EA-DA group). The supratentorial tumor patients were anesthetized with sevoflurane for surgery. Proximal acupoints used were Fengchi (GB 20), Tianzhu (BL 10), Cuanzhu (BL 2) and Yuyao (EX-HN 4) that the former 2 acupoints and the latter 2 acupoints were for penetrative needling; and distant acupoints used were Hegu (LI 4), Waiguan (TE 5), Jinmen (BL 63), Taichong (LR 3), Zusanli (ST 36) and Qiuxu (GB 40) on the craniotomy side, and stimulated with EA (2 Hz/100 Hz, a tolerable electric stimulating strength), beginning from the anesthesia induction till the end of surgical operation. All patients were anesthetized by inhalation of propofol (2 mg/kg), sufentanil (0.3 microg/kg) and vecuronium bromide (0.1 mg/kg) and maintained with sevoflurane. The end-tidal sevoflurane concentration, minimum alveolar concentration (MAC), bispectral index (BIS), and the speed of recovery were recorded.RESULTS: In comparison with the GA group, the end-tidal concentrations during anesthesia maintenance at the time-points of post skull drilling, dura incising, intracranial operation in EA-PA group, the time-points of post skull drilling, skull opening, dura incising, and intracranial operation in EA-DA group, and the MAC of sevoflurane at the time-points of skull drilling in EA-DA group, and skull opening, dura incising, intracranial operation and dura suturing in both EA-PA and EA-DA groups were significantly lower (P < 0.05, P < 0.01). Compared to the GA group, the BIS values of EA-DA group at the time-points of skull drilling and opening, and dura incising were significantly higher (P < 0.05), while during the recovery stage of anesthesia, in comparison with the GA group, the autonomous respiration recovery time, tracheo-tube removing time, eyeopening time, voluntary motion recovery time, orientation force recovery time, and operating room-departure time of both EA-PA and EA-DA groups were significantly shorter (P < 0.05, P < 0.01). No significant differences were found between the EA-PA and EA-DA groups in the aforementioned indexes (P > 0.05).CONCLUSION: EA of both proximal and distant acupoints can reduce the expired concentration and MAC of sevoflurane during anesthesia maintenance, and accelerate the recovery after cease of anesthesia in supratentorial tumor resection patients.

2140- gera: 156594/di/re

EXTERNAL QIGONG THERAPY FOR WOMEN WITH BREAST CANCER PRIOR TO SURGERY. COHEN L, CHEN Z, ARUN B, SHAO Z, DRYDEN M, XU L, LE-PETROSS C, DOGAN B, MCKENNA BJ, MARKMAN M, BABIERA G.. integr cancer ther. 2010;9(4):348-53. (eng).

The majority of patients with cancer use some form of complementary or alternative medicine. External gigong treatment (EQT), classified as a bioenergy therapy, is one such approach that patients combine with conventional medicine or, in some cases, use in place of conventional medicine. This study aimed to determine whether EQT could shrink breast cancer tumors and improve quality of life (QOL) in women with pathologically confirmed breast cancer awaiting surgery. A total of 9 women with pathologically confirmed breast cancer were recruited from large cancer centers in the United States (n = 5) and China (n = 4). A single-arm pre/post design was used. Each patient underwent 5 consecutive days of EQT, with each treatment lasting from 2 to 5 minutes. All treatments were performed by the same qigong master. Tumor measurements were made before and after the EQT sessions. Tumor assessments were conducted prior to study initiation and following the last EQT. Patients underwent both an ultrasound and mammogram (United States) or an ultrasound and magnetic resonance imaging (China). All patients also underwent physical breast examinations (PBEs) and completed QOL questionnaires before and after the last EQT. No clinical changes in tumor measurements from pre- to post-EQT were noted. There was also no suggestion of change in tumor size by PBE or change in QOL. Using the current STUDY DESIGN: EQT also does not appear to have any effect on patient QOL. Because of the small sample size and working with only one gigong practitioner, to definitively determine the efficacy or lack of efficacy of EQT, a larger study with multiple gigong practitioners would need to be conducted.

2141- gera: 156851/nd/re

TRIPTOLIDE INACTIVATES AKT AND INDUCES CASPASE-DEPENDENT DEATH IN CERVICAL CANCER CELLS VIA THE MITOCHONDRIAL PAT HWAY. KIM MJ, LEE TH, KIM SH, CHOI YJ, HEO J, KIM YH. int j oncol. 2010;37(5):1177-85 (eng).

Triptolide, the main active component of the traditional Chinese herbal medicine Tripterygium wilfordii Hook F, has been shown to have potent immunosuppressive and antiinflammatory properties. Here, we investigated the proapoptotic effect of triptolide in human cervical cancer cells and its underlying mechanisms. Exposure of cervical cancer cells to triptolide induced apoptosis, which was accompanied by loss of mitochondrial membrane potential, caspase processing (caspase-8, -9 and -3), and cleavage of the caspase substrate, poly(ADP-ribose) polymerase. The cytotoxic effects of triptolide were significantly inhibited by the caspase inhibitor, z-VADfmk. Triptolide-induced apoptosis was associated with a marked reduction in Akt phosphorylation and was exacerbated by LY294002 (phosphatidylinositol-3'- kinase inhibitor). Conversely, it was attenuated by Akt overexpression. Triptolide-induced apoptosis was also associated with downregulation of Mcl-1 and was significantly inhibited by Mcl-1 overexpression. These findings show that triptolide induces caspase-dependent, mitochondria-mediated apoptosis in cervical cancer cells, in part, by

2142- gera: 157071/nd/re

ISSUES AND CONTROVERSIES OF HEPATOCELLULAR **CARCINOMA-TARGETED THERAPY CLINICAL TRIALS IN** ASIA: EXPERTS' OPINION. CHEN PJ, FURUSE J, HAN KH, HSU C, LIM HY, MOON H, QIN S, YE SL, YEOH EM, YEO W. liver int. 2010;30(10):1427-38 (eng).

Asia has a disproportionate share of the world's burden of hepatocellular carcinoma (HCC). However, the highly regarded clinical practice guidelines and recommendations for the design and conduct of clinical trials for HCC largely reflect Western practice. In order to design mutually beneficial international clinical trials of promising targeted therapies, it is imperative to understand how the aetiology, staging and treatment of HCC differ between Asian and Western countries. Our group, comprising experts in oncology and hepatology from countries that constitute the Eastern Asian region, convened to compare and contrast our current practices, evaluate potential compliance with the clinical trial recommendations, and offer suggestions for modifications that

would enhance international collaboration. Here, we describe the results of our discussions, including recommendations for appropriate patient stratification based on potentially important differences in HCC aetiology, identification of practices that may confound interpretation of clinical trial outcomes (traditional Chinese medicine; antivirals that target hepatitis B virus: heterogeneous embolization procedures), suggestions for utilizing a common staging system in study protocols, recognition that sorafenib usage is limited by financial constraints and potentially increased toxicity in Asian patients, and expansion of patient populations that should be eligible for initial clinical trials with new agents.

2143- gera: 157104/nd/re
NOVEL MEDICINAL MUSHROOM BLEND SUPPRESSES **GROWTH AND INVASIVENESS OF HUMAN BREAST** CANCER CELLS. JIANG J, SLIVA D. int j oncol. 2010;37(6):1529-36 (eng).

Mushrooms are an integral part of Traditional Chinese Medicine (TCM), and have been used for millennia to prevent or treat a variety of diseases. Currently mushrooms or their extracts are used globally in the form of dietary supplements. In the present study we have evaluated the anticancer effects of the dietary supplement, MycoPhyto® Complex (MC), a novel medicinal mushroom blend which consists of a blend of mushroom mycelia from the species Agaricus blazei, Cordyceps sinensis, Coriolus versicolor, Ganoderma lucidum, Grifola frondosa and Polyporus umbellatus, and β-1,3- glucan isolated from the yeast, Saccharomyces cerevisiae. Here, we show that MC demonstrates cytostatic effects through the inhibition of cell proliferation and cell cycle arrest at the G2/M phase of highly invasive human breast cancer cells MDA-MB-231. DNA-microarray analysis revealed that MC inhibits expression of cell cycle regulatory genes (ANAPC2, ANAPC2, BIRC5, Cyclin B1, Cyclin H, CDC20, CDK2, CKS1B, Cullin 1, E2F1, KPNA2, PKMYT1 and TFDP1). Moreover, MC also suppresses the metastatic behavior of MDA-MB-231 by the inhibition of cell adhesion, cell migration and cell invasion. The potency of MC to inhibit invasiveness of breast cancer cells is linked to the suppression of secretion of the urokinase plasminogen activator (uPA) from MDA-MB-231 cells. In conclusion, the MC dietary supplement could have potential therapeutic value in the treatment of invasive human breast cancer

2144- gera: 157111/nd/re

PHARMACOKINETICS AND ITS RELATION TO TOXICITY OF PEGYLATED-LIPOSOMAL DOXORUBICIN IN CHINESE PATIENTS WITH BREAST TUMOURS. XU L, WANG W, SHENG YC, ZHENG QS. j clin pharm ther. 2010;35(5):593-601 (eng).

OBJECTIVES: Pegylated liposomal doxorubicin (PLD) is a formulation of doxorubicin encapsulated with polyethylene glycol-coated liposomes, which has prolonged circulation time and unique toxicity profile. This study deals with the pharmacokinetics and its relation to toxicity in Chinese patients with breast tumours. METHODS: Twenty-two Chinese female patients with breast tumours were received two PLD products in single dose of 50 mg/m2 with a randomized, two-period and cross-over design. Blood was sampled immediately before and at 15, 30, 60 min, 1•17, 2, 5, 13, 25, 49, 73, 97, 121, 145 and 241 h after the PLD infusion. The plasma level of doxorubicin was determined with LC-MS. RESULTS: The pharmacokinetics of PLD was best described by a onecompartment linear structural model with a long elimination T(1/2) (64 h), a slow clearance (0.025 L/h/m2) and a small volume of distribution (2.310 L/m2). The main toxicities were neutropenia (22/44), nausea (22/44), vomiting (8/44) and pigmentation (4/44). The nausea and neutropenia were positively correlated with AUC while negatively correlated with CI (P<0•05). CONCLUSIONS: The study confirms the different pharmacokinetic and toxicity profiles of PLD compared with non-liposomal doxorubicin. The pharmacokinetic profiles in Chinese patients with breast tumours is different from those reported for European patients with metastatic breast cancer. The correlation between toxicities, neutropenia grade and nausea and two of the pharmacokinetic parameters, AUC and CI, may be useful for guiding the dosing of the agent.

2145- gera: 157203/nd/re

BOJUNGIKKI-TANG FOR CANCER-RELATED FATIGUE: A PILOT RANDOMIZED CLINICAL TRIAL. JEONG JS, RYU BH, KIM JS, PARK JW, CHOI WC, YOON SW. integr cancer ther. 2010;9(4):331-8 (eng).

BACKGROUND: Bojungikki-tang (Bu-Zhong-Yi-Qi-Tang in Chinese or Hochu-ekki-to in Japanese) is a widely used herbal prescription in traditional medicine in China, Japan, and Korea. The aim of this study was to investigate the effectiveness of Bojungikki-tang for cancer-related fatigue. METHODS: A total of 40 patients with cancer-related fatigue were randomized into an experimental or a waiting list control group. Patients in the experimental group were treated with Bojungikki-tang (TJ-41) and patients in the waiting list group remained without any intervention for 2 weeks. RESULTS: The experimental group showed statistically significant improvements in fatigue level assessed by the Visual Analogue Scale of Global Fatigue (VAS-F) measuring the severity of fatigue (experimental vs control: $-1.1 \pm 2.1 \text{ vs } 0.1 \pm 0.9, P < .05$) and results of Functional Assessment of Cancer Therapy-General (FACT-G), Functional Assessment of Cancer Therapy-Fatigue (FACT-F), and Trial Outcome Index-Fatigue (TOI-F) also showed significant improvements (FACT-G, 3.7 ± 9.9 vs -2.4 ± 9.5, P < .05; FACT-F,F, 8.0 ± 13.6 vs -2.2 ± 14.1 , P < .05; TOI-F, 6.5 ± 1.0 9.2 vs -0.5 ± 10.9 , P < .05). CONCLUSIONS: The results of this study indicate that Bojungikki-tang may have beneficial effects on cancer- related fatigue and quality of lives in cancer patients. More rigorous trials are needed to confirm the efficacy of Bojungikki-tang.

2146- gera: 157223/nd/re

THE FOUR-HERB CHINESE MEDICINE PHY906 REDUCES CHEMOTHERAPY-INDUCED GASTROINTESTINAL TOXICITY. LAM W, BUSSOM S, GUAN F, JIANG Z, ZHANG W, GULLEN EA, LIU SH, CHENG YC. sci transl med. 2010;2(45): (eng).

PHY906, a four-herb Chinese medicine formula first described 1800 years ago, decreases gastrointestinal toxicity induced by the chemotherapeutic drug CPT-11 (irinotecan), as shown in a phase I/II clinical study. Similarly, in a murine colon 38 allograft model, PHY906 increased the antitumor activity of CPT-11 while decreasing animal weight loss caused by CPT-11. Here, we have further examined the effect of PHY906 on the intestinal toxicity caused by CPT-11 in mice. PHY906 did not protect against the initial DNA damage and apoptosis triggered by CPT-11 in the intestine, but by 4 days after CPT-11 treatment, PHY906 had restored the intestinal epithelium by promoting the regeneration of intestinal progenitor or stem cells and several Wnt signaling components. PHY906 also potentiated Wnt3a activity in human embryonic kidney-293 cells. Furthermore, PHY906 exhibited anti-inflammatory effects in mice by decreasing the infiltration of neutrophils or macrophages, tumor necrosis factor-alpha expression in the intestine, and proinflammatory cytokine concentrations in plasma. Chemical constituents of PHY906 potently inhibited nuclear factor kappaB, cyclooxygenase-2, and inducible nitric oxide synthase. Our results show that the herbal medicine PHY906 can counteract the toxicity of CPT-11 via several mechanisms that act simultaneously.

2147- gera: 157259/nd/re

THE MECHANIS MS OF ACTION OF TIANHUA ON ANTITUMOR ACTIVITY IN LUNG CANCER CELLS. LI CT, LIN CH, KAO TY, WU MF, YEH CS, YEH KT, KO JL. pharm biol. 2010;48(11):1302-9 (eng).

CONTEXT: Tianhua (TH-R) is extracted from Trichosanthes kirilowii Maxim (Cucurbitaceae) containing trichosanthin, a traditional Chinese medicine, which has been locally reported to have good anticancer effects in vivo in both animal and human models. However, there have been several reports that trichosanthin has an anticancer effect involving apoptosis. OBJECTIVE: To investigate other anticancer effects of TH-R, various tumorigenesis parameters were verified. MATERIALS AND METHODS: Telomerase activity, anti-apoptosis, anti-migration and immunomodulatory activity were estimated by telomeric repeat amplification protocol assay (TRAP), flow cytometry, Boyden chamber assay and ELISA assay, respectively. Results: In our studies, we are the first to find that TH-R had a cytotoxic effect on lung cancer cells in MTS

assays; it could change the cell cycle distribution of human lung cancer cells (A549 cell line) and induce apoptosis. Further anti-telomerase effects in human lung adenocarcinoma A549 cells using the TRAP assay were noted. TH-R also had an aggregation effect on peripheral blood lymphocytes, but no effect on stimulating peripheral lymphocytes to produce human interferon-y(IFN-y). TH-R could inhibit the migration, or metastatic ability, of A549 cells by Boyden chamber assay. In the oral feeding therapy of an in vivo mouse model, there was an initial inhibition of A549 cancer cell growth, but no statistical difference after one month of therapy. DISCUSSION AND CONCLUSION: It has been proven that medicinal herbs such as Tianhua have positive effects against cancer through preventing or inhibiting the process of lung tumorigenesis.

2148- gera: 157302/nd/re

COMPLEMENTARY AND ALTERNATIVE MEDICINE PRACTICES AMONG ASIAN RADIOTHERAPY PATIENTS. WONG LC, CHAN E, TAY S, LEE KM, BACK M. asia pac j clin oncol. 2010;6(4):357-63 (eng).

AIM: To describe the prevalence, expectations and factors associated with the use of complementary and alternative medicine (CAM) in Asian radiotherapy patients. METHODS: Overall 65 consecutive patients in an Asian oncology department were surveyed from December 2004 to January 2005, using a modified and translated instrument capturing information on patients' characteristics, CAM use, treatment refusal and satisfaction. RESULTS: Some basic characteristics were: 86% Chinese; median age 56 years (range: 31-87 years); 57% women; cancer types - breast 42%, lung 20%, nasopharyngeal 11%. All had received prior radiotherapy (54%), chemotherapy (51%) or surgery (45%). The median diagnosis-to-survey time was 7.1 months (range 1-168 months). Fifty-six patients (86%) used CAM for cancer treatment. The two commonest categories were spiritual practices (48%) and traditional Chinese medicine (TCM) (37%). Significant factors in TCM use were being male (P = 0.007) and having advanced disease (P = 0.045). Overall 60% of patients using herbal treatment and 97% of patients using spiritual practices expected a cure, a longer life, symptomatic relief, improved immunity or a better quality of life. Satisfaction with western treatment correlated positively with satisfaction with CAM (Spearman's rank correlation coefficient = 0.4). Forty-six patients (71%) did not discuss their CAM use with their oncologists and 64% obtained advice from their friends or families. Fourteen patients refused previous western treatments (11 feared its side effects (79%), five preferred CAM (36%)). CONCLUSION: This study highlights the prevalence of CAM practices among Asian radiotherapy patients, their high expectations of the outcome and the need for better doctor-patient communication.

2149- gera: 157306/nd/re

DISCOVERY OF NOVEL OSTHOLE DERIVATIVES AS POTENTIAL ANTI-BREAST CANCER TREATMENT. YOU L, AN R, WANG X, LI Y. bioorg med chem lett. 2010;20(24):7426-8 (eng).

Osthole, an ingredient of Traditional Chinese Medicine (TCM) from natural product Cnidium monnieri (L.) Cusson, was used as a lead compound for structural modification. A series of osthole derivatives bearing aryl substituents at 3- position of coumarin, has been prepared and evaluated for their growth inhibitory activity against human breast cancer cell lines MCF-7 and MDA-MB-231. Interestingly, some derivatives exhibited good inhibition, among them compound 8e was found to be the most potent compound with IC(50) values of 0.24 μM , 0.31 μM against MCF-7 and MDA-MB-231, respectively, which was improved more than 100-folds compared with its parent compound osthole.

2150- gera: 157309/nd/re

THE STUDY OF EFFECT OF TEA POLYPHENOLS ON MICROSATELLITE INSTABILITY COLORECTAL CANCER AND ITS MOLECULAR MECHANISM. JIN H, TAN X, LIU X, DING Y. int j colorectal dis. 2010;25(12):1407-15 (eng). INTRODUCTION: Tea polyphenol has been shown to have anti-colorectal cancer and anti-gene mutation effects, although the mechanism of inhibition of microsatellite instability (MSI) colorectal cancer is not known. MATERIALS AND METHODS:

Using LoVo, HCT-116, HT-29, and SW480 cells treated with an aqueous solution of tea polyphenol, cell proliferation was detected by the methyl thiazolyl tetrazolium method, changes in microsatellite sequences by the Genescan method and changes in the gene expression of LoVo cells using Illumina expression arrays. RESULTS: The proliferation inhibition rate of LoVo, HCT-116, HT-29, and SW480 cells treated with tea polyphenol increased with increasing drug concentration and showed an increasing tendency with time. The proliferation inhibition rate of LoVo and HCT-116 cells with tea polyphenols was higher than that of HT-29 and SW480 cells, and there was a significant difference in the proliferation inhibition rate at 24, 72 h and 1 week. The microsatellite sequence of LoVo cells treated with tea polyphenols remained stable. DISCUSSION: The gene expression arrays and quantitative RT-PCR suggested that tea polyphenol inhibited the gene expression of metallothionein 2A (MT2A), transcription factor (MAFA), hairy and enhancer of split 1 (HES1), and jagged1 (JAG1) nearly twofold over controls. It was also found that tea polyphenol inhibited the BAX and p38 genes with a more than twofold difference but did not significantly inhibited the NFkB pathway. CONCLUSION: Tea polyphenol significantly inhibited the proliferation of MSI colorectal cancer signals maintained stable at the microsatellite state in MSI colorectal cancer. Tea polyphenol inhibited the gene expression of HES1, JAG1. MT2A, and MAFA but upregulated the gene expression of BAX and downregulated that of (P)38. Further research is required to investigate how these pathways are interrelated.

2151- gera: 157433/nd/re

ANTI-TUMOR ACTIVITY OF SANN-JOONG-KUEY-JIAN-TANG ALONE AND IN COMBINATION WITH 5-FLUOROURACIL IN A HUMAN COLON CANCER COLO 205 CELL XE NOGRAFT MODEL. CHENG CY, LIN YH, SU CC. mol med report. 2010;3(2):227-31 (eng).

Malignant tumors are the leading cause of death in Taiwan; among these, colon cancer ranks third as a cause of cancerrelated death. Sann-Joong-Kuey-Jian-Tang (SJKJT), a traditional Chinese medicinal prescription, has been used to treat lymph node diseases and infectious lesions, and exhibits cytotoxic activity in many cancer cell lines. Our previous studies demonstrated that SJKJT inhibits the proliferation of human colon cancer colo 205 cells in vitro. The aim of this study was to evaluate the anti-tumor activity of SJKJT alone and in combination with 5-fluorouracil (5-FU) in vivo. SCID mice bearing human colon cancer colo 205 cell xenografts were administered SJKJT alone (30 mg/kg daily, p.o.), SJKJT (30 mg/kg daily, p.o.) in combination with 5-FU (30 mg/kg weekly, i.p.), or vehicle alone. At the end of the 4- week dosing schedule, the tumor and animal body weights were individually measured. The SCID mice were sacrificed with CO2 inhalation, the xenograft tumors were dissected, and the protein expression of microtubule-associated protein light chain 3 (MAP-LC3-II) in colo 205 xenograft tumors was measured by Western blotting. In the control, SJKJT-, and SJKJT plus 5-FU-treated mice, the tumor weights were 6.37±2.57, 0.43±0.35 and 1.63±0.46 g, and the mice body weights were 29±0.55, 29±2.71 and 27±0.77 g, respectively. Treatment with SJKJT resulted in a reduction in tumor weight compared with the control group, indicating that SJKJT inhibits tumor growth in a colo 205 xenograft model. SJKJT also increased LC3-II protein expression as compared to the controls. The present study shows that SJKJT alone or in combination with 5-FU has a positive effect on the treatment of SCID mice bearing human colon cancer colo 205 cell xenografts. This suggests that SJKJT has therapeutic potential in the treatment of human colon cancer.

2152- gera: 157610/nd/re

[EFFECTS OF GENISTEIN ON COLON CANCER CELLS IN VITRO AND IN VIVO AND ITS MECHANISM OF ACTION]. FAN YZ, LI GH, WANG YH, REN QY, SHI HJ. zhonghua zhong liu za zhi. 2010;32(1):4-9 (chi).

OBJECTIVE: To study the effects of genistein on the proliferation, apoptosis induction and expression of related gene proteins of human colon cancer cells in vitro and in vivo, and its mechanisms of action. METHODS: MTT colorimetric assay was used to detect the effects of genistein on the proliferation of human colon adenocarcinoma SW480 cells.

Light and transmission electron microscopy were used to study the histological and ultrastructural changes. Flow cytometry was used to determine the effects of genistein on cell cycle and apoptosis. Flow cytometry and immunohistochemistry were used to determine the effects of genistein on apoptosis induction and expression of related gene proteins of colon cancer cells. RESULTS: The MTT colorimetric assay showed that genistein inhibited the proliferation of SW480 cells in a dose-dependent and time-dependent manner, and the highest inhibition rate was 60.2% after 80 microg/ml genistein treatment for 72 h. The light microscopy revealed that many genistein-treated cancer cells were shrunken, disrupted, or showing cytoplasmic vacuolization. The electron microscopic examination showed cell shrinkage, nuclear fragmentation and pronounced chromatin condensation, sometimes formed crescent chromatin condensation attached to the nuclear membrane. The results of flow cytometry showed that: after SW480 cells were treated with 0, 20, 40, 80 microg/ml genistein for 48 h, the FI values of PCNA were 1.49 +/- 0.02, 1.28 +/- 0.04, 1.14 +/- 0.03, and 0.93 +/- 0.08; the FI values of VEGF were 1.75 +/- 0.02, 1.34 +/- 0.06, 1.32 +/- 0.04, and 1.23 +/- 0.04; the fluorescence index (FI) values of p21 were 1.26 +/- 0.05, 1.36 +/- 0.06, 1.61 +/- 0.03, and 1.73 +/- 0.03, respectively. There were statistically significant differences between the control group and each treatment group (P < 0.05 or P < 0.01). The scores of immunohistochemical staining of PCNA and VEGF proteins were decreased, while p21 increased. There were statistically significant differences between the control group and each treatment group (P < 0.05 or P < 0.01). CONCLUSION: Genistein can inhibit the growth of colon cancer cells via apoptosis induction and cell cycle arrest at G(2)/M phase. The anti-tumor mechanisms of genistein may be related with the down-regulation of expression of VEGF and PCNA, and up-regulation of the expression of p21.

2153- gera: 157646/nd/re

CHINESE HERBAL MEDICINES AS ADJUVANT TREATMENT DURING CHEMO- OR RADIO-THERAPY FOR CANCER. QIF, LIA, INAGAKIY, GAOJ, LIJ, KOKUDON, LI XK, TANG W. biosci trends. 2010;4(6):297-307 (eng). Numerous studies have indicated that in cancer treatment Chinese herbal medicines in combination with chemo- or radiotherapy can be used to enhance the efficacy of and diminish the side effects and complications caused by chemo- and radio-therapy. Therefore, an understanding of Chinese herbal medicines is needed by physicians and other health care providers. This review provides evidence for use of Chinese herbal medicines as adjuvant cancer treatment during chemoor radio-therapy. First, Chinese herbal medicines (e.g. Astragalus, Turmeric, Ginseng, TJ-41, PHY906, Huachansu injection, and Kanglaite injection) that are commonly used by cancer patients for treating the cancer and/or reducing the toxicity induced by chemo- or radio-therapy are discussed. Preclinical and clinical studies have shown that these Chinese herbal medicines possess great advantages in terms of suppressing tumor progression, increasing the sensitivity of chemo- and radio-therapeutics, improving an organism's immune system function, and lessening the damage caused by chemo- and radio-therapeutics. Second, clinical trials of Chinese herbal medicines as adjuvant cancer treatment are reviewed. By reducing side effects and complications during chemo- and radio-therapy, these Chinese herbal medicines have a significant effect on reducing cancer-related fatigue and pain, improving respiratory tract infections and gastrointestinal side effects including diarrhea, nausea, and vomiting, protecting liver function, and even ameliorating the symptoms of cachexia. This review should contribute to an understanding of Chinese herbal medicines as adjuvant treatment for cancer and provide useful information for the development of more effective anti- cancer drugs. Free Article

2154- gera: 157685/nd/re

MODIFIED APPLE POLYSACCHARIDES COULD INDUCE APOPTOSIS IN COLORECTAL CANCER CELLS. LI Y, NIU Y, WU H, SUN Y, LI Q, KONG X, LIU L, MEI Q. j food sci. 2010;75(8): (eng).

Multiple studies have pointed out that dietary components could inhibit cancer progression and metastasis, and it has

been proven that many ingredients of apple have benefits for cancer prevention. We, therefore, extracted modified apple polysaccharides (MAP) from apple and hypothesized that MAP have a cancer-preventive effect as do other ingredients of apple. Three human colorectal cancer cell lines: SW-1116, HT-29. and Caco-2 were exposed to different concentrations of MAP (0% to 0.1%). Inhibition of cell proliferation was measured by 3-(4,5-Dimethylthiazol-2-yl)-2,5diphenyltetrazolium bromide assay. DNA fragmentation was visualized by agarose-gel electrophoresis. The amount of apoptotic cells was assessed by flow cytometry, and protein level of caspase 3, 8, 9, Bax, and Bcl-2 was evaluated by Western blot. At the concentrations of 0.01% to 0.1%, MAP showed growth-inhibiting and apoptosis-inducing effects on cancer cells. It increased the expression of caspase 3, 8, 9, and Bax, while decreased of Bcl-2, which denoted that MAP may induce apoptosis through both the mitochondrial-mediated and death receptor-mediated apoptotic ways. These data indicate that MAP has the potential for clinical prevention and treatment for colon cancer.

2155- gera: 157707/nd/re

[EFFECT OF SPATHOLOBUS SUBERCTUS ON ADHESION, INVASION, MIGRATION AND METASTASIS OF MELANOMA CELLS]. XU JY, GU Q, XIA WJ. zhong yao cai. 2010;33(10):1595-9 (chi).

OBJECTIVE: To study the effect of Spatholobus suberctus, a kind of Chinese Traditional Medicine which can dissolve the stasis by activating the blood circulation, on invasion, adhesion, migration and metastasis of B16-BL6 metastatic mouse melanoma cells and its mechanism. METHODS: The proliferation, adhesion, invasion and migration capacity of B16-BL6 metastatic cells was evaluated by MTP assay, adhesion assay and reconstituted basement membrane invasion and migration assay in vitro respectively. Mouse spontaneous motility melanoma model was used to study the effect of Spatholobus suberctus on metastasis in vivo. RESULTS: At the highest innoxious concentration, the extracts of Spatholobus suberctus inhibited the adhesion and invasion capacity of B16-BL6 metastatic cells significantly. In the mouse spontaneous melanoma model, the lung metastatic nodes number and its volume were significantly decreased after continuously treated with the extracts of Spatholobus suberctu. CONCLUSION: The extracts of Spatholobus suberctu can inhibit the metastasis of of B16-BI6 metastatic mouse melanoma cells and its mechanism may be inhibiting the capability of B16-BL6 cells in adhering to the ECM and invading the basement membrane.

2156- gera: 157788/nd/re

[FACTORS ASSOCIATED WITH RECURRENCE AND PROGNOSIS IN PATIENTS WITH GASTRIC GASTROINTESTINAL STROMAL TUMORS]. YANG C, KONG Y, WANG P, DONG B. zhonghua wei chang wai ke za zhi. 2010;13(10):755-7 (chi).

OBJECTIVE: To investigate factors associated with postoperative recurrence and prognosis in gastric gastrointestinal stromal tumors(gastric GIST). METHODS: Clinical data of 107 patients with gastric GIST who underwent surgical resection at the Zhejiang Province Hospital of the Integrated Traditional Chinese and Western Medicine between January 1987 and December 2008 were analyzed retrospectively. Factors associated with recurrence were explored. RESULTS: Surgery was radical in 83 patients(radical group) and palliative in 24 patients(palliative group). Thirty-one patients developed recurrence in the radical group. Tumor size greater than 5 cm, incompleteness of tumor envelope, and local invasion were associated with tumor recurrence(P<0.05), while gender, age, tumor location, and mitosis were not. The median survival time was 13 months in patients with recurrence and 78 month in those without recurrence, and the difference was statistically significant(P<0.05). The median survival was 54(range, 7-246) months in the radical group and 6 (range, 1-25) in the palliative group, and the difference was also statistically significant(P<0.05). CONCLUSION: Tumor size, integrity of tumor envelope, and local invasion are predictive for recurrence in GIST.

2157- gera: 157982/nd/re

PHOTO-ACTIVATED PHEOPHORBIDE-A, AN ACTIVE COMPONENT OF SCUTELLARIA BARBATA, ENHANCES APOPTOSIS VIA THE SUPPRESSION OF ERK-MEDIATED AUTOPHAGY IN THE ESTROGEN RECEPTOR-NEGATIVE HUMAN BREAST ADENOCARCINO BUI-XUAN NH, TANG PM, WONG CK, FUNG KP. j ethnopharmacol. 2010;131(1):95-103 (eng).

AIM OF THE STUDY: Scutellaria barbata is a traditional Chinese medicine for cancer treatments. Pheophorbide-a (Pa), one of the active components isolated from this herbal medicine has been proposed to be a potential natural photosensitizer for photodynamic therapy. The anti-tumor effect of pheophorbide-a based photodynamic therapy (Pa-PDT) has been successfully demonstrated in a wide range of human malignant cell lines. However, the effectiveness of Pa-PDT has not yet been evaluated on human breast cancer, which is documented as the second common and the fifth most lethal cancer worldwide. MATERIALS AND METHODS: The cytotoxicity of Pa-PDT was evaluated by using an estrogen receptor (ER)-negative human breast adenocarcinoma cell line MDA-MB-231. The involvement of mitochondria was revealed by the change of mitochondrial membrane potential and the increase of intracellular reactive oxygen species (ROS). The hallmarks of apoptosis, ER stress and autophagy were also assessed by DNA fragmentation, Western blotting, and immunostaining assays. RESULTS: Pa-PDT showed inhibitory effect on the growth of MDA-MB- 231 cells with an IC(50) value of 0.5 microM at 24h. Mitogen-activated protein kinase (MAPK) pathway was found to be triggered, where activation of c-Jun N-terminal kinase (JNK) and inhibition of extracellular signal-regulated kinase (ERK) were occurred in the Pa-PDTtreated cells. Our findings suggested that Pa-PDT exhibited its anti-tumor effects by the activation of mitochondria-mediated apoptosis and the ERK-mediated autophagy in MDA-MB-231 cells. CONCLUSION: The present study suggested Pa-PDT is a potential protocol for the late phase human breast cancer, and it is the first study to demonstrate the Pa-PDT induced autophagy contributed to the anti-tumor effects of Pa-PDT on human cancer cells.

2158- gera: 158385/di/ra

CLINICAL EFFECTIVENESS AND SAFETY OF ACUPUNCTURE IN THE TREATMENT OF IRRADIATION-INDUCED XEROSTOMIA IN PATIENTS WITH HEAD AND NECK CANCER: A SYSTEMATIC REVIEW. O'SULLIVAN EM, HIGGINSON IJ. acupuncture in medicine. 2010;28(4):191-9 (eng).

BACKGROUND: Irradiation-induced xerostomia seriously reduces quality of life for patients with head and neck cancer (HNC). Anecdotal evidence suggests that acupuncture may be beneficial. OBJECTIVE: To systematically review evidence on clinical effectiveness and safety of acupuncture in irradiationinduced xerostomia in patients with HNC. METHODS: A detailed search was performed to identify randomised controlled trials (RCTs) and systematic reviews of RCTs on acupuncture in irradiation-induced xerostomia, using AMED, BNIA, CINAHL, Cochrane, Embase, HPSI, PsycInfo and Medline. Grey literature was explored and 11 journals hand searched. Search terms included: acupuncture, xerostomia, salivary hypofunction, hyposalivation, dry mouth, radiotherapy, irradiation, brachytherapy, external beam. Two authors independently extracted data for analysis using predefined selection criteria and quality indicators. RESULTS: 43 of the 61 articles identified were excluded on title/abstract. 18 articles underwent full-text review; three were deemed eligible for inclusion. Two trials had moderate risk of bias; one had high risk. Two trials compared acupuncture with sham acupuncture; one control arm received 'usual care'. Outcome measurements included salivary flow rates (SFRs) in two trials and subjective questionnaires in three. All three trials reported significant reduction in xerostomia versus baseline SFR (p<0.05); one reported greater effect in the intervention group for stimulated SFR (p<0.01). Subjective assessment reported significant differences between real acupuncture and control in two trials (p<0.02-0.05). Insufficient evidence was presented to undertake risk/benefit assessment. CONCLUSIONS: Limited evidence suggests that acupuncture is beneficial for irradiation-induced xerostomia. Although current evidence is insufficient to recommend this intervention, it is sufficient to

justify further studies. Highlighted methodological limitations must be dealt with.

2159- gera: 158579/di/ra

ALLEVIATION OF CANCEROUS PAIN BY EXTERNAL COMPRESS WITH XIAOZHENG ZHITONG PASTE, BAO YJ. HUA BJ, HOU W, LIN HS, ZHANG XB, YANG GX. chinese journal of integrated medicine. 2010;16(4):309-14 (eng). OBJECTIVE: To observe the clinical effectiveness of a topical application of Xiaozheng Zhitong: Paste (, XZP)in alleviating the cancerous pain of patients with middle/late stage cancer METHODS: By: adopting a random number table, 124 patients enrolled were randomized into the treatment group (64 patients) and the control group (60 patients). In addition to the basic therapy [including the three-ladder (3L) analgesia] used in both groups, topical application of XZP was given to patients in the treatment group for pain alleviation. The analgesic efficacy was recorded in terms of pain intensity, analgesia initiating time and sustaining time, and the optimal analgesic effect revealing time. Meanwhile, the quality of life (QOL) and adverse reactions that occurred in patients were recorded as well. RESULTS: The total effective rate in the treatment group was: 84.38% (54/64), and in the control group it was 88.33% (53/60), showing no significant difference between them (P>0.05), but the analgesia initiating time and the optimal analgesia effect revealing time in the treatment group were significantly shorter (both P<0.01). Moreover, XZP was better in improving patients' QOL, showing more significant improvements in the treatment group than those in the control group in aspects of mental condition, walking capacity, working capacity, social acceptability, sleep and joy of living (P<0.05 or P<0.01). Lower incidence of adverse reactions, such as nausea, vomiting, mouth dryness, dizziness, etc., especially constipation, was noted in the treatment group (P<0.05 or P<0.01). CONCLUSION: Applying an external compress: of XZP showed a synergistic action with 3L analgesia for shortening the initiating time and the optimal effect revealing time, and could evidently enhance

2160- gera: 158670/di/ra

TUMOR INTERSTITIAL FLUID AND POSTOPERATIVE RECURRENCE OF TUMORS: AN EXPERIMENTAL STUDY FOR VERIFYING HYPOTHESIS OF "TUMOR-PHLEGM MICROENVIRONMENT". SUN DZ, JU DW, HE J, LU Y, WU F, LI C, WEI PK. chinese journal of integrated medicine. 2010;16(5):435-41 (eng).

OBJECTIVE: To explore a method of extracting tumor interstitial fluid (TIF) which is similar to muddy phlegm in Chinese medicine (CM), interleukin-8 (IL-8) in concentration was taken as the representative of the content of TIF, analyzed in the extracted TIF and the original tumor tissue, and examined to see whether TIF has an interfering effect on tumor recurrence. METHODS: Tumor tissue was ground, centrifuged, and filtered for intercellular substances. Tumor-bearing Kunming S180 mice were raised for 21 days and then the tumors were removed to observe the influence of intervention with TIF, normal saline (NS) and a blank control on tumor recurrence. RESULTS: The content of IL-8 in the filtered and unfiltered tumor tissue was not significantly different (P>0.05). Postoperative tumor recurrence in TIF intervention group was significantly higher than that in the NS intervention and control groups (60%, 12/20 vs. 20%, 4/20. vs. 15%, 3/20, χ(2) =11.058, P<0.01). Tumor cells grew vigorously and infiltrated to muscular tissue in TIF intervention group. Large numbers of tumor cells were seen necrotic in the NS intervention group, and small numbers of tumor cells were seen necrotic in the blank control group. CONCLUSIONS: TIF can be effectively extracted by the means described. It does not contain tumor cells, but its contents such as IL-8 may stimulate tumor cell growth and promote postoperative tumor recurrence, which provided preliminary experimental basis for hypothesis of "tumor-phlegm microenvironment".

2161- gera: 158715/di/ra

SHORT-TERM EFFECT OF COMBINED THERAPY WITH JINLONG CAPSULE AND TRANSCATHETER ARTERIAL CHEMOEMBOLIZATION ON PATIENTS WITH PRIMARY HEPATIC CARCINOMA AND ITS INFLUENCE ON SERUM OSTEOPONTIN EXPRESSION. WU GL, ZHANG L, LI TY,

CHEN J, YU GY, LI JP. chinese journal of integrated medicine. 2010;16(2):109-13 (eng).

OBJECTIVE: To observe the clinical combination effect of Jinlong Capsule (JLC) and transcatheter arterial chemoembolization (TACE) on the patients with primary hepatic carcinoma (PHC) and JLC's influence on serum osteopontin (OPN) expression and elucidate the correlation between the serum OPN level and curative effect of JLC and TACE. METHODS: A total of 98 patients with PHC were observed in a randomized controlled trial (RCT). They were assigned to the Chinese medicine (CM) group (53 patients who were treated with TACE and JLC) and the intervention group (45 patients who were treated with TACE only). The serum OPN levels were measured before and after treatment by quantitative sandwich enzyme-linked immunosorbent assay (ELISA). Forty healthy people were assigned to the control group. The clinical efficacy was observed and Karnofsky score (KPS) was graded. RESULTS: The clinical efficacy of the CM group (60.38%) was better than that of the intervention group (40.00 %), and the KPS (84.35+/-12.19) was higher than the intervention group (69.86+/- 11.58) (P<0.05). The serum OPN levels before and after treatment in the patients with PHC were significantly elevated compared with those in the control group (P<0.01). After treatment, the OPN levels in CM group (117.69 <+/-78.50) were significantly lower compared with those in intervention group (151.09+/-83.90, P<0.05). The OPN levels of responders were remarkably lowered than the nonresponders after treatment, and the level of OPN in the CM group was lower than the intervention group (P<0.05). CONCLUSIONS: The short-term clinical efficacy and the quality of life of patients with PHC can be improved by combining JLC with TACE. The serum OPN levels in PHC patients can reflect the curative effect of treatment and the prognosis of the disease.

2162- gera: 158716/di/ra

TREATMENT OF MIDDLE/LATE STAGE PRIMARY HEPATIC CARCINOMA BY CHINESE MEDICINE **COMPREHENSIVE THERAPY: A PROSPECTIVE** RANDOMIZED CONTROLLED STUDY. TIAN HQ, LI HL, WANG B, LIANG GW, HUANG XQ, HUANG ZQ, LANG JM, ZHANG YP, CHEN XZ, CHEN YS. chinese journal of integrated medicine. 2010;16(2):102-8 (eng). OBJECTIVE: To observe the efficacy of Chinese medicine comprehensive therapeutic project in treating the middle/late stage primary hepatic carcinoma (PHC). METHODS: With prospective randomized controlled design, 97 patients with PHC were assigned to the test group (49 cases) treated with Chinese medicine comprehensive therapy using Oleum fructus bruceas intervention combining oral intake of Ganji Decoction and external application of Ailitong, and the control group (48 cases) treated with chemotherapeutic agents combining iodized oil chemo-embolization and analgesics. The immediate and long-term efficacy, adverse reaction, pain-relieving initial time (PRIT) and pain-relieving sustained time (PRST) of the treatment, as well as the change in relieving patients' quality of life (QOL) were observed. RESULTS: The difference between the two groups in illness control rate was statistically insignificant (P>0.05), but the adverse reaction occurrence rate in the test group was lesser than that in the control group (P<0.05). PRIT was insignificantly different in the two groups (P>0.05), but the PRST was significantly superior in the test group than that in the control group (10.37+/- 2.18 h vs 7.78+/-1.95 h, P<0.01). After treatment, the increased Karnofsky scores in the test group indicated that the patients' somatic activity, symptoms and QOL were improved significantly, which were significantly superior to those in the control group (P<0.05). The survival rate in the two groups was similar at the 3rd month after treatment, but the test group did show superiority in terms of half- and 1-year survival rate (65.9% vs 42.5% and 38.6% vs 18.1%, respectively, P<0.05). The median survival time in the test group was 8.9 months and that in the control group was 5.3 months. CONCLUSION: Chinese medicine comprehensive therapy is an effective treatment for the middle/late stage patients of PHC, and it could extend the PRST, improve the patients' QOL and long-term survival with less adverse reaction.

2163- gera: 158733/di/ra

THE IMPORTANCE OF THE DIFFERENTIATING SYNDROMES FOR THE EFFICACY ASSESSMENT OF CHINESE MEDICINE IN THE TREATMENT OF CANCER. WU WY. chinese journal of integrated medicine. 2010;16(1):6-8 (eng).

2164- gera: 158982/di/ra

STUDY ON THE MECHANISM OF XIAOTAN SANJIE RECIPE FOR INHIBITING PROLIFERATION OF GASTRIC CANCER CELLS. LI CJ, WEI PK, YUE BL. journal of tcm. 2010;30(4):249-53 (eng).

OBJECTIVE: To explore the mechanism of Xiaotan Sanjie Recipe (XtSiR, Recipe for dissolving phlegm to eliminate stagnation) in inhibiting proliferation of gastric cancer cells. METHODS: The nude mouse human gastric cancer MKN- 45 in situ transplantation tumor model was established by use of OB glue, and 40 model mice were randomized into 5 groups, model group, low-dose XtSjR group, middle-dose XtSjR group, high-dose XtSjR group, and 5-Fu group, 8 rats in each group. Human gastric cancer MKN-45 telomerase reverse transcriptase (hTERT) protein and mRNA expressions were assayed by immunohistochemical method and real-time fluorescence quantitative RT-PCR, and influences of XtSjR on the expressions of hTERT protein and mRNA were investigated in the nude mouse human gastric cancer MKN-45 in situ tumor transplantation model. RESULTS: 1) There were significant differences in the mean tumor weight between the low-, middle-, high-dose XtSjR groups and the model group (all P < 0.01); 2) There were significant differences in the hTERT positive expression rate between the middle- and high-dose XtSiR groups and the model group (P < 0.05 or P < 0.01); 3) There were significant differences in the hTERT mRNA content between the middle- and high-dose XtSjR groups and the model group (P < 0.05 or P < 0.01). CONCLUSION: 1) XtSjR has a marked inhibitory effect on the growth of gastric cancer cells; 2) XtSjR inhibits telomerase activity by down-regulating the expressions of hTERT protein and mRNA, shortening the length of cancer cell telomeres gradually, losing the ability to infinitely proliferate, and finally inhibiting the growth and proliferation of tumor cells.

2165- gera: 159068/di/ra

EFFECTS OF THE AIDI DRIPPING PILLS ON IMMUNE FUNCTIONS OF THE TUMOR-BEARING MOUSE. QU YZ, GUAN JZ, PAN H, SONG Y. journal of tcm. 2010;30(2):122-5

OBJECTIVE: To study the effects of Aidi Dripping Pills on immune functions of the tumor-bearing mouse on the basis of the previous experimental studies on its tumor-inhibiting and life-prolonging effects. METHODS: By using the transplantation tumor mouse models, the effects of Aidi Dripping Pills on the lymphocyte transformation rate and the hemolysin formation in the S180 tumor-bearing mice, and on the phagocytic function of macrophages in the abdominal cavity of H22 tumor-bearing mice were investigated. RESULTS: In the 2.25 g/kg and 1.125 g/kg Aidi Dripping Pills groups, the lymphocyte transformation rates in the \$180 tumor-bearing mice were significantly higher than that of the control group (P<0.01). In all the Aidi Dripping Pills groups, HC50 significantly increased (P<0.01 or P<0.05), carbon granular clearance significantly raised, and both the phagocytic index and phagocytic coefficient were significantly higher than those in the control group (P<0.01 or P<0.05). CONCLUSION: The Aidi Dripping Pills can significantly increase the cellular immune function, the humoral immune function and the phagocytic function of the mononuclear-macrophages, so it may show anti-tumor effects by enhancing the function of the reticuloendothelial system.

2166- gera: 159301/di/re

ACUPUNCTURE FOR DYSPHAGIA AFTER CHEMORADIATION THERAPY IN HEAD AND NECK CANCER: A CASE SERIES REPORT. LU W, POSNER MR, WAYNE P, ROSENTHAL DS, HADDAD RI.. integr cancer ther. 2010;9(3):284-90 (eng).

BACKGROUND: Dysphagia is a common side effect following chemoradiation therapy (CRT) in patients with head and neck cancer (HNC). METHODS: In this retrospective case series, 10 patients with HNC were treated with acupuncture for radiationinduced dysphagia and xerostomia. All patients were diagnosed with stage III/IV squamous cell carcinoma. In all, 7 of 10 patients were percutaneous endoscopic gastrostomy (PEG) tube dependent when they began acupuncture. Manual acupuncture and electroacupuncture were used once a week. RESULTS: A total of 9 of 10 patients reported various degrees of subjective improvement in swallowing functions, xerostomia, pain, and fatigue levels. Overall, 6 (86%) of 7 PEG tubedependent patients had their feeding tubes removed after acupuncture, with a median duration of 114 days (range 49 to 368 days) post CRT. One typical case is described in detail. CONCLUSIONS: A relatively short PEG tube duration and reduced symptom severity following CRT were observed in these patients. Formal clinical trials are required to determine the causality of the observations.

2167- gera: 159368/di/re
ACUPUNCTURE FOR PALLIATIVE AND SUPPORTIVE **CANCER CARE: A SYSTEMATIC REVIEW OF** SYSTEMATIC REVIEWS. ERNST E, LEE MS.. j pain symptom manage. 2010;40(1):3-5 (eng).

2168- gera: 159374/di/re

ACUPUNCTURE AS A TREATMENT MODALITY FOR THE MANAGEMENT OF CANCER PAIN: THE STATE OF THE SCIENCE. HOPKINS HOLLIS AS.. oncol nurs forum. 2010;37(5):344-8 (eng).

PURPOSE/OBJECTIVES: To explore the current state of the science regarding acupuncture as a treatment modality for cancer pain. DATA SOURCES: PubMed and CINAHL databases were searched, as were Web sites from the National Cancer Institute, the National Institute of Health's Complementary and Alternative Medicine Program, and the American Cancer Society. DATA SYNTHESIS: This article synthesizes nine years of published research on the use of acupuncture as an adjunct treatment for the management of cancer pain. CONCLUSIONS: Findings suggest a lack of level I evidence regarding the use of acupuncture as a cancer pain treatment modality. The majority of evidence is level III or higher; therefore, causality cannot be inferred. IMPLICATIONS FOR NURSING: Future research should focus on level I and level II evidence, controlling for variables to strengthen validity, and addressing sample size to enhance the generalizability of results. Nurses should be knowledgeable about the state of the science evidence available to assist patients in making educated decisions.

2169- gera: 159384/di/re

ACUPUNCTURE-POINT STIMULATION FOR CHEMOTHERAPY-INDUCED NAUSEA OR VOMITING.

EZZO J, RICHARDSON M, VICKERS A, ALLEN C, DIBBLE S, ISSELL B, LAO L, PEARL M, RAMIREZ G, ROSCOE J, SHEN J, SHIVNAN J, STREITBERGER K, TREISH I, ZHANG G. cochrane database syst rev. 2010;CD002285.: (eng). Background There have been recent advances in chemotherapy-induced nausea and vomiting using 5-HT3 inhibitors and dexamethasone. However, many still experience these symptoms, and expert panels encourage additional methods to reduce these symptoms. Objectives The objective was to assess the effectiveness of acupuncture-point stimulation on acute and delayed chemotherapy-induced nausea and vomiting in cancer patients. Search methods We searched MEDLINE, EMBASE, PsycLIT, MANTIS, Science Citation Index, CCTR (Cochrane Controlled Trials Registry), Cochrane Complementary Medicine Field Trials Register, Cochrane Pain, Palliative Care and Supportive Care Specialized Register, Cochrane Cancer Specialized Register, and conference abstracts. Selection criteria Randomized trials of acupuncture-point stimulation by any method (needles, electrical stimulation, magnets, or acupressure) and assessing chemotherapy-induced nausea or vomiting, or both. Data collection and analysis Data were provided by investigators of the original trials and pooled using a fixed effect model. Relative risks were calculated on dichotomous data. Standardized mean differences were calculated for nausea severity. Weighted mean differences were calculated for number of emetic episodes. Main results Eleven studies (N = 1247) were pooled. Overall, acupuncture-point stimulation of all methods combined reduced the incidence of acute vomiting

(RR = 0.82; 95% confidence interval (CI) 0.69 to 0.99; P = 0.04), but not acute or delayed nausea severity compared to control. By modality, stimulation with needles reduced proportion of acute vomiting (RR = 0.74; 95% CI 0.58 to 0.94; P = 0.01), but not acute nausea severity. Electroacupuncture reduced the proportion of acute vomiting (RR = 0.76; 95% CI 0.60 to 0.97; P = 0.02), but manual acupuncture did not; delayed symptoms for acupuncture were not reported. Acupressure reduced mean acute nausea severity (SMD = -0.19; 95% CI -0.37 to -0.01; P = 0.04) but not acute vomiting or delayed symptoms. Noninvasive electrostimulation showed no benefit for any outcome. All trials used concomitant pharmacologic antiemetics, and all, except electroacupuncture trials, used state-of-the-art antiemetics. Authors' conclusions This review complements data on post-operative nausea and vomiting suggesting a biologic effect of acupuncture-point stimulation. Electroacupuncture has demonstrated benefit for chemotherapy-induced acute vomiting, but studies combining electroacupuncture with state-of-the-art antiemetics and in patients with refractory symptoms are needed to determine clinical relevance. Self-administered acupressure appears to have a protective effect for acute nausea and can readily be taught to patients though studies did not involve placebo control. Noninvasive electrostimulation appears unlikely to have a clinically relevant impact when patients are given stateof-the-art pharmacologic antiemetic therapy.

2170- gera: 159486/di/ra
CLINICAL EFFECTIVENESS AND SAFETY OF ACUPUNCTURE IN THE TREATMENT OF IRRADIATION-INDUCED XEROSTOMIA IN PATIENTS WITH HEAD AND NECK CANCER: A SYSTEMATIC REVIEW. O'SULLIVAN EM, HIGGINSON IJ. acupunct med. 2010;28(4):191-9 (eng). BACKGROUND: Irradiation-induced xerostomia seriously reduces quality of life for patients with head and neck cancer (HNC). Anecdotal evidence suggests that acupuncture may be beneficial. OBJECTIVE: To systematically review evidence on clinical effectiveness and safety of acupuncture in irradiationinduced xerostomia in patients with HNC. METHODS: A detailed search was performed to identify randomised controlled trials (RCTs) and systematic reviews of RCTs on acupuncture in irradiation-induced xerostomia, using AMED, BNIA, CINAHL, Cochrane, Embase, HPSI, PsycInfo and Medline. Grey literature was explored and 11 journals hand searched. Search terms included: acupuncture, xerostomia, salivary hypofunction, hyposalivation, dry mouth, radiotherapy, irradiation, brachytherapy, external beam. Two authors independently extracted data for analysis using predefined selection criteria and quality indicators. RESULTS: 43 of the 61 articles identified were excluded on title/abstract. 18 articles underwent full-text review; three were deemed eligible for inclusion. Two trials had moderate risk of bias; one had high risk. Two trials compared acupuncture with sham acupuncture; one control arm received 'usual care'. Outcome measurements included salivary flow rates (SFRs) in two trials and subjective questionnaires in three. All three trials reported significant reduction in xerostomia versus baseline SFR (p<0.05); one reported greater effect in the intervention group for stimulated SFR (p<0.01). Subjective assessment reported significant differences between real acupuncture and control in two trials (p<0.02-0.05). Insufficient evidence was presented to undertake risk/benefit assessment. CONCLUSIONS: Limited evidence suggests that acupuncture is beneficial for irradiation-induced xerostomia. Although current evidence is insufficient to recommend this intervention, it is sufficient to justify further studies. Highlighted methodological limitations must be dealt with.

2171- gera: 159520/di/ra

A 54-YEAR-OLD WOMAN WITH DEGENERATIVE BACK PAIN. TUCK CM. acupunct med. 2010;28(1):46-8 (eng). Back pain is a common symptom: up to 70% of UK adults experience this symptom by the age of 60 and most have moderate to severe pain. Back pain accounted for 12% of consultations to traditional acupuncturists in 2001 and is one of the most common reasons for consultation with an acupuncturist. This case report concerns a 54-year-old woman with metastatic breast cancer and degenerative lower back pain, which remained painful despite intensive pharmaceutical

management and facet joint injection and was ultimately successfully managed with two 30 min acupuncture treatments 2 weeks apart, using eight points on the BL meridians. Acupuncture treatment using tender points was later trialled for neuropathic pain secondary to local recurrence in her mastectomy scar, however this was unsuccessful and inpatient hospice admission for further intensive pharmaceutical management was required.

2172- gera: 159828/di/ra

APPLICATION OF AIDI INJECTION (艾迪注射液) IN THE **BRONCHIAL ARTERY INFUSED NEO-ADJUVANT** CHEMOTHERAPY FOR STAGE III A NON-SMALL CELL LUNG CANCER BEFORE SURGICAL OPERATION. SUN XF, PEI YT, YIN QW, WU MS, YANG GT. chin j integr med. 2010;16(6):537-41 (eng).

OBJECTIVE: To study the effect of Aidi Injection

(艾迪注射液,ADI) applied in the bronchial artery, applied in the bronchial artery infused (BAI) neo-adjuvant chemotherapy for stage III A non-small cell lung cancer (NSCLC) before surgical operation.METHODS: The 60 patients with NSCLC stage III A underwent two courses BAI chemotherapy before tumor incision were assigned to two groups, the treatment and the control groups, using a random number table, 30 in each group. ADI (100 mL) was given to the patients in the treatment group by adding into 500 mL of 5% glucose injection for intravenous dripping once daily, starting from 3 days before each course of chemotherapy, and it lasted for 14 successive days, so a total of 28 days of administration was completed. The therapeutic effectiveness and the adverse reaction that occurred were observed, and the levels of T-lymphocyte subsets, natural killer cell activity, and interleukin-2 in peripheral blood were measured before and after the treatment. RESULTS: The effective rate in the treatment group was higher than that in the control group (70.0% vs. 56.7%, P<0.05). Moreover, as compared with the control group, the adverse reaction that occurred in the treatment group was less and mild, especially in terms of bone marrow suppression and liver function damage (P<0.05). Cellular immune function was suppressed in NSCLC patients, but after treatment, it ameliorated significantly in the treatment group, showing significant difference as compared with that in the control group (P<0.05). CONCLUSION: ADI was an ideal auxiliary drug for the patients in stage III A NSCLC received BAI neochemotherapy before surgical operation; it could enhance the effectiveness of chemotherapy, ameliorate the adverse reaction and elevate patients' cellular immune function; therefore, it is worthy for spreading in clinical practice.

2173- gera: 159842/di/ra

TUMOR INTERSTITIAL FLUID AND POSTOPERATIVE RECURRENCE OF TUMORS: AN EXPERIMENTAL STUDY FOR VERIFYING HYPOTHESIS OF "TUMOR-PHLEGM MICROENVIRONMENT". SUN DZ, JU DW, HE J, LU Y, WU F, LI C, WEI PK. chin j integr med. 2010;16(5):435-41 (eng). OBJECTIVE: To explore a method of extracting tumor interstitial fluid (TIF) which is similar to muddy phlegm in Chinese medicine (CM), interleukin-8 (IL-8) in concentration was taken as the representative of the content of TIF, analyzed in the extracted TIF and the original tumor tissue, and examined to see whether TIF has an interfering effect on tumor recurrence. METHODS: Tumor tissue was ground, centrifuged, and filtered for intercellular substances. Tumor-bearing Kunming S180 mice were raised for 21 days and then the tumors were removed to observe the influence of intervention with TIF, normal saline (NS) and a blank control on tumor recurrence. RESULTS: The content of IL-8 in the filtered and unfiltered tumor tissue was not significantly different (P>0.05). Postoperative tumor recurrence in TIF intervention group was significantly higher than that in the NS intervention and control groups (60%, 12/20 vs. 20%, 4/20. vs. 15%, 3/20, χ(2) =11.058, P<0.01). Tumor cells grew vigorously and infiltrated to muscular tissue in TIF intervention group. Large numbers of tumor cells were seen necrotic in the NS intervention group, and small numbers of tumor cells were seen necrotic in the blank control group. CONCLUSIONS: TIF can be effectively extracted by the means described. It does not contain tumor cells, but its contents such as IL-8 may stimulate tumor cell

growth and promote postoperative tumor recurrence, which provided preliminary experimental basis for hypothesis of "tumor-phlegm microenvironment".

2174- gera: 159845/di/ra

TREATMENT OF ADVANCED NON-SMALL CELL LUNG CANCER WITH EXTRACORPOREAL HIGH FREQUENCY THERMOTHERAPY COMBINED WITH CHINESE MEDICINE. WU WY, YANG XB, DENG H, LONG SQ, SUN LS, HE WF, ZHOU YS, LIAO GY, CHAN SM, SHAN SP. chin j integr med. 2010;16(5):406-10 (eng).

OBJECTIVE: To observe the clinical efficacy and benefit response of extracorporeal high frequency thermotherapy (EHFT) combined with Chinese medicine (CM) in the treatment of patients with advanced nonsmall cell lung cancer. METHODS: The study adopted a prospective, small sample and randomized controlled method, and the advanced nonsmall cell lung cancer patients were assigned to two groups according to the table of random digits, one having the treatment of EHFT combined with CM (the treatment group), the other only with CM (the control group). The patients in the treatment group were treated with EHFT one hour once per day, together with CM differentiation decoction, 250 mL orally taken, twice daily for 14 days as one cycle, and 3-4 cycles was performed. The patients in the control group were treated only with CM differentiation decoction using the same dose as the treatment group. The efficacies were evaluated after three to four cycles of treatment. Primary endpoints were disease control rate (DCR) and time to progression (TTP). Secondary endpoints were overall survival time and 1-year survival rate. RESULTS: Sixty-six patients accomplished the study. After the patients underwent different treatments, none of the patients got a complete response or partial response in both groups. In the treatment group, DCR was 72.2%, and 10 had progression of disease (28.8%), while the DCR of the control group was 63.3%, and 11 had progression of disease (36.7%); there was a significant statistical difference (P < 0.05), suggesting that the combined regimen had superiority on the DCR. As for longterm efficacy, the median survival time (MST) of the treatment group was 7.5 months, TTP was 5.5 months, and 1- year survival rate was 21.4 %; in the control group, the results were 6.8 months, 4.5 months and 16.6% respectively. There was significant statistical difference on TTP (P <0.05), but no difference on MST or 1-year survival rate. CONCLUSION: EHFT combined with CM differentiation has better tolerance and short-term efficacy in the treatment of patients with advanced NSCLC.

2175- gera: 159853/di/ra

THE STUDY OF EARLY APPLICATION WITH DIXIONG DECOCTION (地芎汤) FOR NON-SMALL CELL LUNG CANCER TO DECREASE THE INCIDENCE AND SEVERITY OF RADIATION PNEUMONITIS: A PROSPECTIVE, RANDOMIZED CLINICAL TRIAL. DOU YQ, YANG MH, WEI ZM, XIAO C, YANG XH. chin j integr med. 2010;16(5):411-6 (epg)

OBJECTIVE: To evaluate the efficacy of compound Dixiong Decoction (地芎汤, a Chinese herbal decoction) on early prevention of radiation pneumonitis. METHODS: Forty-six patients with non-small cell lung cancer who were planning to receive radiotherapy were randomly assigned to the treatment group treated with the compound Dixiong Decoction and the control group treated with a commonly used herbal decoction which has the effects of supplementing qi and nourishing yin, clearing heat and detoxifying at the time of radiotherapy. Primary measure was the incidence of radiation pneumonitis after radiotherapy. Secondary outcomes included Watters clinical radiographic physiologic (CRP) dyspnea score, the Radiation Therapy Oncology Group (RTOG) grading score, Karnofsky Performance Status (KPS) score, and the application of corticosteroids. RESULTS: The incidence of radiation pneumonitis in the treatment group was 10.0%, while that in the control group was 26.3% (P=0.0032). The Watters CRP dyspnea score and RTOG grading score in the treatment group were significantly =lower than those in the control group (P<0.05). The KPS score in the treatment group was significantly higher than that in the control group (P<0.01). The dosage of corticosteroids was smaller with a shorter duration

of therapy in the treatment group than that in the control group. CONCLUSION: The early application of the Chinese herbal decoction compound Dixiong Decoction can decrease the incidence of radiation pneumonitis, reduce the injury of the lung, and improve the life quality of the patients.

2176- gera: 159865/di/ra

ALLEVIATION OF CANCEROUS PAIN BY EXTERNAL COMPRESS WITH XIAOZHENG ZHITONG PASTE. BAO YJ, HUA BJ, HOU W, LIN HS, ZHANG XB, YANG GX. chin j integr med. 2010;16(4):309-14 (eng).

OBJECTIVE: To observe the clinical effectiveness of a topical application of Xiaozheng Zhitong: Paste (, XZP) in alleviating the cancerous pain of patients with middle/late stage cancer METHODS: By: adopting a random number table, 124 patients enrolled were randomized into the treatment group (64 patients) and the control group (60 patients). In addition to the basic therapy [including the three-ladder (3L) analgesia] used in both groups, topical application of XZP was given to patients in the treatment group for pain alleviation. The analgesic efficacy was recorded in terms of pain intensity, analgesia initiating time and sustaining time, and the optimal analgesic effect revealing time. Meanwhile, the quality of life (QOL) and adverse reactions that occurred in patients were recorded as well. RESULTS: The total effective rate in the treatment group was: 84.38% (54/64), and in the control group it was 88.33% (53/60), showing no significant difference between them (P>0.05), but the analgesia initiating time and the optimal analgesia effect revealing time in the treatment group were significantly shorter (both P<0.01). Moreover, XZP was better in improving patients' QOL, showing more significant improvements in the treatment group than those in the control group in aspects of mental condition, walking capacity, working capacity, social acceptability, sleep and joy of living (P<0.05 or P<0.01). Lower incidence of adverse reactions, such as nausea, vomiting, mouth dryness, dizziness, etc., especially constipation, was noted in the treatment group (P<0.05 or P<0.01). CONCLUSION: Applying an external compress: of XZP showed a synergistic action with 3L analgesia for shortening the initiating time and the optimal effect revealing time, and could evidently enhance patients' QOL with fewer adverse reactions.

2177- gera: 159878/di/ra

EFFECT OF ELECTROACUPUNCTURE PRECONDITIONING ON SERUM S100BETA AND NSE IN PATIENTS UNDERGOING CRANIOCEREBRAL TUMOR RESECTION. LU ZH, BAI XG, XIONG LZ, WANG YH, WANG Y, WANG Q. chin j integr med. 2010;16(3):229-33 (eng). OBJECTIVE: To investigate the effect of electroacupuncture preconditioning on the serum level of S100 calcium-binding protein beta (S100beta) and neuron-specific enolase (NSE) in patients undergoing craniocerebral tumor operation. METHODS: A total of 32 patients, who would go through craniocerebral tumor resection under general anesthesia, were randomly assigned to two groups, 16 in each group. Patients in the electroacupuncture (EA) group received electroacupuncture on Fengfu acupoint (Du16) and Fengchi acupoint (GB20) for 30 min, 2 h before operation. The stimulus is 1-4 mA with a density wave frequency of 2/15 Hz. Patients in the control group received no pretreatment. Anesthesia was maintained with remifentanil at the dose of 4-8 mg/kg per hour, pumped intravenous drip of vecuronium at 1.0-2.0 microg/kg each hour, and discontinuous intravenous dripped with vecuronium bromide at 0.5-1 mg. The serum levels of S100beta and NSE were measured with ELISA before operation, before skin incision, after tumor removal, at the end of operation, and at 24 h after operation. RESULTS: The serum level of S100beta and NSE did not change before skin incision. The serum level of NSE increased significantly and the level of S100beta increased insignificantly after the tumor resection. The serum levels of S100beta and NSE in the EA group and the control group were 1.16+/-0.28 microg/L vs 1.47+/- 0.33 microg/L, 24.7+/-13.3 microg/L vs 31.4+/-14.1 microg/L at the end of the operation, respectively. Twenty-four h after operation, the correspondence indices were 1.18+/-0.31 microg/L vs 1.55+/- 0.26 microg/L, and 25.5+/-12.4 microg/L vs 32.4+/- 11.7 microg/L. The two indices at these two time points were significantly increased than those before operation,

respectively (P<0.05). At the end of the operation and 24 h post- operation, the serum levels of S100beta and NSE in the EA group were significantly lower than those in the control group (P<0.05). CONCLUSION: Electroacupuncture Fengchi and Fengfu for 30 min before craniocerbral tumor operation could decrease the serum level of S100beta and NSE, thus may have potential protective effect on brain damage, which needs to be further studied.

2178- gera: 159919/di/re

QUALITY OF LIFE OF BREAST CANCER PATIENTS
MEDICATED WITH ANTI-ESTROGENS, 2 YEARS AFTER
ACUPUNCTURE TREATMENT: A QUALITATIVE STUDY,
HERVIK J, MJÅLAND O. int j womens health. 2010;2:319-25
(eng).

Objective The aim of this study was to examine the quality of life of breast cancer patients medicated with estrogen antagonists, 2 years after having acupuncture treatment for hot flashes. Methods and materials Our sample was taken from women who had recently participated in a randomized controlled trial investigating the effects of acupuncture on hot flashes, a side effect of estrogen-antagonist treatment. Fortyone women from the true acupuncture treatment group and 41 women from the control group (sham acupuncture), who had 2 years previously received a course of 15 acupuncture treatments over a period of 10 weeks, were asked to answer an open question. The question, "Would you like to share your thoughts and experiences related to your breast cancer diagnosis, treatments or anything else?" was by being open, broad, and nonspecific, intended to stimulate subjective information, which was not included in the original, or future quantitative studies. Qualitative data were analyzed using systematic text condensation. Results Most women were troubled by two or more side effects due to anti-estrogen medication, negatively affecting their life quality. Symptoms included hot flashes, sleep problems, muscle and joint pain, arm edema, fatigue, weight gain, depression, and lack of sexual desire. Women previously treated with sham acupuncture complained that hot flashes were still problematic, whilst those previously treated with traditional Chinese acupuncture found them less of a problem and generally had a more positive outlook on life. These results compare favorably with the findings from our original study that measured quantitatively health related quality of life. Conclusion Side effects due to anti-estrogen treatment seriously affect the quality of life of breast cancer operated patients. Patients who had previously been treated with traditional Chinese acupuncture complained less of hot flashes, and had a more positive outlook on life, than women who had previously been treated with sham acupuncture.

2179- gera: 160052/di/re

ACUPUNCTURE FOR CHEMOTHERAPY-INDUCED FATIGUE: A RANDOMIZED CONTROLLED TRIAL. DENG G, CHAN Y, YEUNG KS, VICKERS A, CASSILETH B. j soc integr oncol. 2010;8(4):171-2 (eng).

2180- gera: 160126/di/ra

USING TRADITIONAL ACUPUNCTURE FOR BREAST CANCER-RELATED HOT FLASHES AND NIGHT SWEATS. DE VALOIS BA, YOUNG TE, ROBINSON N, MCCOURT C, MAHER EJ. j altern complement med. 2010;16(10):1047-57 (eng).

OBJECTIVES: Women taking tamoxifen experience hot flashes and night sweats (HF&NS); acupuncture may offer a nonpharmaceutical method of management. This study explored whether traditional acupuncture (TA) could reduce HF&NS frequency, improve physical and emotional well-being, and improve perceptions of HF&NS.

DESIGN/SETTINGS/LOCATION: This was a single-arm observational study using before and after measurements, located in a National Health Service cancer treatment center in southern England. SUBJECTS: Fifty (50) participants with early breast cancer completed eight TA treatments. Eligible women were \geq 35 years old, \geq 6 months post active cancer treatment, taking tamoxifen \geq 6 months, and self-reporting \geq 4 HF&NS incidents/24 hours for \geq 3 months. INTERVENTIONS: Participants received weekly individualized TA treatment using a core standardized protocol for treating HF&NS in natural

menopause. OUTCOME MEASURES: Hot Flash Diaries recorded HF&NS frequency over 14- day periods; the Women's Health Questionnaire (WHQ) assessed physical and emotional well-being; the Hot Flashes and Night Sweats Questionnaire (HFNSQ) assessed HF&NS as a problem. Measurements taken at five points over 30 weeks included baseline, midtreatment, end of treatment (EOT), and 4 and 18 weeks after EOT. Results for the primary outcome: Mean frequency reduced by 49.8% (95% confidence interval 40.5-56.5, p < 0.0001, n = 48) at EOT over baseline. Trends indicated longer-term effects at 4 and 18 weeks after EOT. At EOT, seven WHQ domains showed significant statistical and clinical improvements, including Anxiety/Fears, Memory/Concentration, Menstrual Problems, Sexual Behavior, Sleep Problems, Somatic Symptoms, and Vasomotor Symptoms. Perceptions of HF&NS as a problem reduced by 2.2 points (standard deviation = 2.15, n = 48, t = 7.16, p < 0.0001). CONCLUSIONS: These results compare favorably with other studies using acupuncture to manage HF&NS, as well as research on nonhormonal pharmaceutical treatments. In addition to reduced HF&NS frequency, women enjoyed improved physical and emotional well-being, and few sideeffects were reported. Further research is warranted into this approach, which offers breast cancer survivors choice in managing a chronic condition.

2181- gera: 160137/di/ra

INCREASED YIN-DEFICIENT SYMPTOMS AND AGGRAVATED AUTONOMIC NERVOUS SYSTEM FUNCTION IN PATIENTS WITH METASTATIC CANCER. LIN SC, CHEN MF. j altern complement med. 2010;16(10):1059-63 (eng).

OBJECTIVES: The objectives of this study were to investigate the differences in severity of yin-deficiency syndrome (YDS) and function of the autonomic nervous system (ANS) between patients with cancer with metastasis and those without metastasis. SETTING: The setting was an outpatient clinic in a teaching hospital in central Taiwan. SUBJECTS: The subjects were a total of 124 patients who had been diagnosed with cancer on the basis of pathologic and clinical findings. Among them, 61 had distant metastasis, and the other 63 had no evidence of metastasis. The two groups were similar in terms of age and gender. INTERVENTIONS: The severity of YDS in each subject was evaluated using a questionnaire containing 12 items about symptoms and signs related to YDS. The severity of each symptom or sign was rated on a 4-point scale. OUTCOME MEASURES: The total score on the questionnaire represented the severity of YDS. ANS function in each subject was evaluated by measuring heart rate variability (HRV), including time and frequency domains. The questionnaire data were coded, and statistical analysis was performed using SPSS version 12.0. Data were analyzed using the Student's t test or the $\chi(2)$ test. RESULTS: The patients with metastasis had significantly higher average total YDS score and heart rate compared with the patients without metastasis. In contrast, they had significantly lower HRV, including standard deviation of the 5-minute average R-R interval, total power, very-lowfrequency power, and low frequency (LF) power, but not highfrequency (HF) power and LF/HF ratio. CONCLUSIONS: The results of this study indicate that patients with metastatic cancer have more severe YDS and impaired ANS function than those without metastasis.

2182- gera: 160185/di/ra

ACUPUNCTURE TREATMENT FOR PERSISTENT HICCUPS
IN PATIENTS WITH CANCER. GE AX, RYAN ME,
GIACCONE G, HUGHES MS, PAVLETIC SZ. j altern
complement med. 2010;16(7):811-6 (eng).
OBJECTIVE: The objective of this study was to investigate the
effects of acupuncture treatment for persistent hiccups in
cancer patients. DESIGN: The study design was a
retrospective case series. SETTINGS/LOCATION: The study
setting was the Clinical Research Center of the National
Institutes of Health. SUBJECTS: The subjects were 16 adult
male patients ages 27-71 with cancer, with persistent hiccups.
INTERVENTIONS: There were one to three acupuncture
sessions over a 1-7-day period. OUTCOME MEASURES:
Treatment efficacy was measured using a hiccup assessment
instrument pre- and post-treatment. The effects of acupuncture

on common symptoms reported by all patients were also evaluated. RESULTS: Thirteen (13) patients experienced complete remission of persistent hiccups (p < 0.0001); 3 patients experienced decreased hiccups severity. Significant improvement was observed in discomfort (p < 0.0001), distress (p < 0.0001), and fatigue (p = 0.0078). CONCLUSIONS: This case series demonstrates that acupuncture may be a clinically useful, safe, and low-cost therapy for persistent hiccups in patients with cancer.

2183- gera: 160209/di/ra

USE OF CHINESE MEDICINE AMONG PATIENTS WITH LIVER CANCER IN TAIWAN. LIN YH, CHIU JH. j altern

complement med. 2010;16(5):527-8 (eng).

2184- gera: 160212/di/ra

RADIOPROTECTIVE EFFECT OF AMERICAN GINSENG ON HUMAN LYMPHOCYTES AT 90 MINUTES POSTIRRADIATION: A STUDY OF 40 CASES. LEE TK, O'BRIEN KF, WANG W, JOHNKE RM, SHENG C, BENHABIB SM, WANG T, ALLISON RR. j altern complement med. 2010;16(5):561-7 (eng).

BACKGROUND: Ionizing radiation (IR) initiates intracellular oxidative stress through enhanced formation of reactive oxygen species (ROS) that attack DNA leading to cell death. Because of the diversity of IR applied in medicine, agriculture, industry, and the growing threats of global terrorism, the acquisition of radioprotectors is an urgent need for the nation. However, the applicability of radioprotectors currently under investigation is limited due to their inherent toxicity. OBJECTIVE: This study investigated the effect of a standardized North American ginseng extract (NAGE, total ginsenoside content: 11.7%) on DNA damage in human lymphocytes at 90 minutes postirradiation. DESIGN: With the application of NAGE (250-1000 microg mL(-1)) at 90 minutes postirradiation (1 and 2 Gy), DNA damage in lymphocytes obtained from 40 healthy individuals was evaluated by cytokinesis-block micronucleus assay. Similar experiments were also performed in lymphocytes treated with WR-1065 (1 mmol/L or 3 mmol/L). In addition, before and after irradiation, lymphocytes obtained from 10 individuals were measured for their total antioxidant capacity (TAC) and the reactive oxygen species (ROS). RESULTS: The significant effect of NAGE against (137)Cs-induced micronuclei (MN) in lymphocytes is concentration dependent. NAGE (750 microg mL(-1)) reduced MN yield by 50.7% after 1 Gy and 35.9% after 2 Gy exposures, respectively; these results were comparable to that of WR-1065. Furthermore, we also found that NAGE reduces MN yield and ROS but increases TAC in lymphocytes. CONCLUSIONS: Our results suggest that NAGE is a relatively nontoxic natural compound that holds radioprotective potential in human lymphocytes even when applied at 90 minutes postirradiation. One of the radioprotective mechanisms may be mediated through the scavenging of free radicals and enhancement of the intracellular TAC.

2185- gera: 160781/di/ra

STUDY ON THE MECHANISM OF XIAOTAN SANJIE RECIPE FOR INHIBITING PROLIFERATION OF GASTRIC CANCER CELLS. LI CJ, WEI PK, YUE BL. j tradit chin med. 2010;30(4):249-53 (eng).

OBJECTIVE: To explore the mechanism of Xiaotan Sanjie Recipe (XtSjR, Recipe for dissolving phlegm to eliminate stagnation) in inhibiting proliferation of gastric cancer cells. METHODS: The nude mouse human gastric cancer MKN- 45 in situ transplantation tumor model was established by use of OB glue, and 40 model mice were randomized into 5 groups, model group, low-dose XtSjR group, middle-dose XtSjR group, high-dose XtSjR group, and 5-Fu group, 8 rats in each group. Human gastric cancer MKN-45 telomerase reverse transcriptase (hTERT) protein and mRNA expressions were assayed by immunohistochemical method and real-time fluorescence quantitative RT-PCR, and influences of XtSjR on the expressions of hTERT protein and mRNA were investigated in the nude mouse human gastric cancer MKN-45 in situ tumor transplantation model. RESULTS: 1) There were significant differences in the mean tumor weight between the low-, middle-, high-dose XtSjR groups and the model group (all P < 0.01); 2) There were significant differences in the hTERT

positive expression rate between the middle- and high-dose XtSjR groups and the model group (P < 0.05 or P < 0.01); 3) There were significant differences in the hTERT mRNA content between the middle- and high-dose XtSjR groups and the model group (P < 0.05 or P < 0.01). CONCLUSION: 1) XtSjR has a marked inhibitory effect on the growth of gastric cancer cells; 2) XtSjR inhibits telomerase activity by down-regulating the expressions of hTERT protein and mRNA, shortening the length of cancer cell telomeres gradually, losing the ability to infinitely proliferate, and finally nhibiting the growth and proliferation of tumor cells.

2186- gera: 160805/di/ra

EFFECTS OF THE AIDI DRIPPING PILLS ON IMMUNE FUNCTIONS OF THE TUMOR-BEARING MOUSE. QU YZ, GUAN JZ, PAN H, SONG Y. j tradit chin med.

2010;30(2):122-5 (eng).

OBJECTIVE: To study the effects of Aidi Dripping Pills on immune functions of the tumor-bearing mouse on the basis of the previous experimental studies on its tumor-inhibiting and life-prolonging effects. METHODS: By using the transplantation tumor mouse models, the effects of Aidi Dripping Pills on the lymphocyte transformation rate and the hemolysin formation in the S180 tumor-bearing mice, and on the phagocytic function of macrophages in the abdominal cavity of H22 tumor-bearing mice were investigated RESULTS: In the 2.25 g/kg and 1.125 g/kg Aidi Dripping Pills groups, the lymphocyte transformation rates in the S180 tumor-bearing mice were significantly higher than that of the control group (P<0.01). In all the Aidi Dripping Pills groups, HC50 significantly increased (P<0.01 or P<0.05), carbon granular clearance significantly raised, and both the phagocytic index and phagocytic coefficient were significantly higher than those in the control group (P<0.01 or P<0.05). CONCLUSION: The Aidi Dripping Pills can significantly increase the cellular immune function, the humoral immune function and the phagocytic function of the mononuclear-macrophages, so it may show anti-tumor effects by enhancing the function of the reticuloendothelial system.

2187- gera: 161506/di/re

FEASIBILITY STUDY OF TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) FOR CANCER BONE PAIN. BENNETT MI, JOHNSON MI, BROWN SR, RADFORD H, BROWN JM, SEARLE RD. j pain.. 2010;11(4):351-9 (eng).

This multicenter study assessed the feasibility of conducting a phase III trial of transcutaneous electrical nerve stimulation (TENS) in patients with cancer bone pain recruited from palliative care services. Eligible patients received active and placebo TENS for 1 hour at site of pain in a randomized crossover design; median interval between applications 3 days. Responses assessed at 30 and 60 minutes included numerical and verbal ratings of pain at rest and on movement, and pain relief. Recruitment, tolerability, adverse events, and effectiveness of blinding were also evaluated. Twenty-four patients were randomised and 19 completed both applications. The intervention was well tolerated. Five patients withdrew: 3 due to deteriorating performance status, and 2 due to increased pain (1 each following active and placebo TENS). Confidence interval estimation around the differences in outcomes between active and placebo TENS suggests that TENS has the potential to decrease pain on movement more than pain on rest. Nine patients did not consider that a placebo was used; the remaining 10 correctly identified placebo TENS. Feasibility studies are important in palliative care prior to undertaking clinical trials. Our findings suggest that further work is required on recruitment strategies and refining the control arm before evaluating TENS in cancer bone pain. PERSPECTIVE: Cancer bone pain is common and severe, and partly mediated by hyperexcitability. Animal studies suggest that Transcutaneous Electrical Nerve Stimulation can reduce hyperalgesia. This study examined the feasibility of evaluating TENS in patients with cancer bone pain in order to optimize methods before a phase III trial.

2188- gera: 156071/di/re

THE ANALGESIC EFFECT OF MAGNETIC ACUPRESSURE IN CANCER PATIENTS UNDERGOING BONE MARROW

ASPIRATION AND BIOPSY: A RANDOMIZED, BLINDED, CONTROLLED TRIAL. BAO T, YE X, SKINNER J, CAO B, FISHER J, NESBIT S, GROSSMAN SA. j pain symptom manage. 2011;41(6):995-1002 (eng).

CONTEXT: Bone marrow aspiration and biopsy (BMAB) is a frequently performed and painful procedure. OBJECTIVE: To evaluate the efficacy of magnetic acupressure in reducing pain in cancer patients undergoing BMAB. METHODS: Cancer patients without previous acupuncture or acupressure were stratified by the number of prior BMAB and randomized to having magnetic acupressure delivered to either the large intestine 4 (LI4) acupoint or a sham site. The primary study endpoint was the patient's pain intensity rating during the procedure using a visual analog scale (VAS). RESULTS: Seventy-seven eligible patients received magnetic acupressure: 37 were randomized to treatment at the LI4 site arm and 40 at the designated sham site arm. There was no significant difference between the median pain scores of patients treated at the LI4 site and the sham site (P=0.87). However, severe pain (VAS≥7) was reported in only one patient (2.7%) treated at the LI4 site compared with eight patients (20%) at the sham site (P=0.03). No patients experienced significant magnetic acupressure-related toxicities. CONCLUSIONS: Magnetic acupressure at the LI4 acupoint requires minimal training and expense and is well tolerated. Although its use did not significantly reduce median pain scores in patients undergoing BMAB, it does appear to reduce the proportion of patients with severe pain associated with this invasive procedure.

2189- gera: 156155/nd/re

ACUPUNCTURE FOR CANCER PAIN IN ADULTS. PALEY CA, JOHNSON MI, TASHANI OA, BAGNALL AM. cochrane database syst rev. 2011;19: (eng).

BACKGROUND: Forty percent of individuals with early or intermediate stage cancer and 90% with advanced cancer have moderate to severe pain and up to 70% of patients with cancer pain do not receive adequate pain relief. It has been claimed that acupuncture has a role in management of cancer pain and guidelines exist for treatment of cancer pain with acupuncture. OBJECTIVES: To evaluate efficacy of acupuncture for relief of cancer-related pain in adults. SEARCH STRATEGY: CENTRAL, MEDLINE, EMBASE, PsycINFO, AMED, and SPORTDiscus were searched up to November 2010 including non-English language papers SELECTION CRITERIA: Randomised controlled trials (RCTs) evaluating any type of invasive acupuncture for pain directly related to cancer in adults of 18 years or over. DATA COLLECTION AND ANALYSIS: It was planned to pool data to provide an overall measure of effect and to calculate the number needed to treat to benefit, but this was not possible due to heterogeneity. Two review authors (CP, OT) independently extracted data adding it to data extraction sheets. Quality scores were given to studies. Data sheets were compared and discussed with a third review author (MJ) who acted as arbiter. Data analysis was conducted by CP, OT and MJ. MAIN RESULTS: Three RCTs (204 participants) were included. One high quality study investigated the effect of auricular acupuncture compared with auricular acupuncture at 'placebo' points and with non-invasive vaccaria ear seeds attached at 'placebo' points. Participants in two acupuncture groups were blinded but blinding wasn't possible in the ear seeds group because seeds were attached using tape. This may have biased results in favour of acupuncture groups. Participants in the real acupuncture group had lower pain scores at two month follow-up than either the placebo or ear seeds group. There was high risk of bias in two studies because of low methodological quality. One study comparing acupuncture with medication concluded that both methods were effective in controlling pain, although acupuncture was the most effective. The second study compared acupuncture, point-injection and medication in participants with stomach cancer. Long-term pain relief was reported for both acupuncture and point-injection compared with medication during the last 10 days of treatment. Although both studies have positive results in favour of acupuncture they should be viewed with caution due to methodological limitations, small sample sizes, poor reporting and inadequate analysis. AUTHORS' CONCLUSIONS: There is insufficient evidence to

judge whether acupuncture is effective in treating cancer pain in adults.

2190- gera: 156173/nd/re

TRENDS IN CHINESE MEDICINE USE AMONG PROSTATE CANCER PATIENTS UNDER NATIONAL HEALTH INSURANCE IN TAIWAN: 1996-2008. LIN YH, CHEN KK, CHIU JH. integr cancer ther. 2011;7: (eng). Background: Taiwan National Health Insurance (NHI) provides Western medicine and Chinese medicine (CM). This study aims to explore the trends of CM use among prostate cancer patients under NHI. METHODS: Claims of CM outpatient services from 1996 to 2008 were obtained from NHI Research Database. CM visits of prostate cancer patients were identified. Claims with diagnosis code of prostate cancer were defined as cancer-specific visits. RESULTS: Among 78 323 prostate cancer patients identified during 1996-2008, there were 30 383 (38.8%) CM users and 327 063 CM outpatient visits. The prevalence of CM use in each cross-sectional year increased slightly from 24.9% to 25.6%. Most CM visits (92.7%) were non-cancer-specific. There were greater increases in the proportion of cancer- specific CM visits (from 2.3% to 10.6%) and high-utility CM users (from 3.1% to 19.7%). Most CM services were provided by private clinics (68.1% to 79.2%). The most frequently used CM therapies were Chinese herbal medicine (72.8% to 78.8%), followed by acupuncture/traumatology manipulative therapies (28.1% to 36.8%). Total CM cost increased from \$122 247 to \$825 454. The average cost per CM visit increased from \$14.0 to \$19.6. The annual cost per CM user increased from \$88.0 to \$134.4. Copayment accounted for 6.6% to 11.7%. CONCLUSIONS: There was a trend of increased CM use among prostate cancer patients under NHI. Although prostate cancer patients used CM mostly for noncancer diseases, CM visits for prostate cancer increased remarkably. The utilization patterns of CM

2191- gera: 156196/nd/re

USE OF CHINESE MEDICINE AMONG PROSTATE
CANCER PATIE NTS IN TAIWAN: A RETROSPECTIVE
LONGITUDINAL COHORT STUDY. LIN YH, CHEN KK, CHIU
JH. int j urol. mar. 2011;9:1442-204 (eng).

visits for cancer and for noncancer diseases were distinctly

The National Health Insurance (NHI) covers Western medicine and Chinese medicine (CM) in Taiwan. The present study aimed to investigate the trends and characteristics of CM use among prostate cancer patients before and after diagnosis. A retrospective longitudinal cohort study was carried out using the NHI research database. The present study cohort consisted of 4720 prostate cancer patients diagnosed in 2004. Claims of CM services of these patients between 2003 and 2008 were analyzed. The prevalence of CM use of this cohort was 25.8%, 26.8%, 23.6%, 22.4%, 22.0% and 21.1% in 2003-2008, respectively. Overall, 52.6% of this cohort had ever used CM. In the first year of diagnosis, there was the greatest increase of new CM users (12.1%). The total number of CM users and visits reached the peak in 2004 and decreased in the subsequent years (2005-2008). The average number of CM visits per user was 6.7, 6.7, 7.0, 7.1, 7.3 and 7.2 in 2003-2008, respectively. The most frequently recorded principal diagnosis of CM visits was musculoskeletal diseases (21.4%), symptoms/signs (17.6%) and neoplasms (11.7%). Chinese herbal medicine (75.1%) was the most commonly used, followed by acupuncture/traumatological manipulative therapies (29.7%). Patients using CM before diagnosis tended to be CM users after diagnosis. The increase of CM use over the first year of prostate cancer diagnosis can be primarily attributed to an increase of new CM users, rather than of CM visits per users.

2192- gera: 156235/nd/re

GETTING THE GRIP ON NONSPECIFIC TREATMENT EFFECTS: EMESIS IN PATIENTS RANDOMIZED TO ACUPUNCTURE OR SHAM COMPARED TO PATIENTS RECEIVING STANDARD CARE. ENBLOM A, LEKANDER M, HAMMAR M, JOHNSSON A, ONELÖV E, INGVAR M, STEINECK G, BÖRJESON S. plos one. 2011;6(3): (eng). BACKGROUND: It is not known whether or not delivering acupuncture triggers mechanisms cited as placebo and if

acupuncture or sham reduces radiotherapy-induced emesis more than standard care. METHODOLOGY/PRINCIPAL FINDINGS: Cancer patients receiving radiotherapy over abdominal/pelvic regions were randomized to verum (penetrating) acupuncture (n = 109; 99 provided data) in the alleged antiemetic acupuncture point PC6 or sham acupuncture (n = 106; 101 provided data) performed with a telescopic non-penetrating needle at a sham point 2-3 times/week during the whole radiotherapy period. The acupuncture cohort was compared to a reference cohort receiving standard care (n = 62; 62 provided data). The occurrence of emesis in each group was compared after a mean dose of 27 Gray. Nausea and vomiting were experienced during the preceding week by 37 and 8% in the verum acupuncture group, 38 and 7% in the sham acupuncture group and 63 and 15% in the standard care group, respectively. The lower occurrence of nausea in the acupuncture cohort (verum and sham) compared to patients receiving standard care (37% versus 63%, relative risk (RR) 0.6, 95 % confidence interval (CI) 0.5-0.8) was also true after adjustment for potential confounding factors for nausea (RR 0.8, CI 0.6 to 0.9). Nausea intensity was lower in the acupuncture cohort (78% no nausea, 13% a little, 8% moderate, 1% much) compared to the standard care cohort (52% no nausea, 32% a little, 15% moderate, 2% much) (p = 0.002). The acupuncture cohort expected antiemetic effects from their treatment (95%). Patients who expected nausea had increased risk for nausea compared to patients who expected low risk for nausea (RR 1.6; Cl 1.2-2.4). CONCLUSIONS/SIGNIFICANCE: Patients treated with verum or sham acupuncture experienced less nausea and vomiting compared to patients receiving standard care, possibly through a general care effect or due to the high level of patient expectancy.

2193- gera: 156331/di/re

MANAGEMENT OF MENOPAUSAL SYMPTOMS IN BREAST CANCER PATIENTS. LOIBL S, LINTERMANS A, DIEUDONNÉ AS, NEVEN P. maturitas. 2011;68(2):148-54 (eng).

In breast cancer patients, menopausal symptoms such as hot flashes, urogenital problems, musculoskeletal symptoms and cognitive dysfunction are common, regardless of age at diagnosis. They affect quality of life and systemic therapy will worsen this. Endocrine and/or chemotherapy may induce temporary or permanent ovarian failure and can exacerbate these symptoms. Hormone therapy (HT) has been studied in breast cancer survivors, but safety has been questioned. The HABITS trial investigating estrogen-based HT, as well as the LIBERATE trial investigating tibolone, found a reduction in disease-free survival for those treated. Alternative strategies are needed, as menopause symptoms may reduce compliance with breast cancer treatments. This article reviews recently published strategies to tackle menopausal problems in breast cancer patients. Antidepressants may help with hot flashes. Acupuncture and hypnosis can also be used but the evidence is conflicting. For urogenital problems vaginal moisturizers or topical estrogens can be employed. A musculoskeletal syndrome induced by aromatase inhibitors (Als) is frequently encountered and currently there are no effective treatment strategies. Bisphosphonates reduce Al-induced bone resorption and can also increase disease-free and overall survival. Standard-dose endocrine and chemotherapy are associated with a decline in cognitive function.

2194- gera: 156343/di/re

ACUPUNCTURE FOR THE PREVENTION OF RADIATION-INDUCED XEROSTOMIA IN PATIENTS WITH HEAD AND NECK CANCER. BRAGA FDO P, LEMOS JUNIOR CA, ALVES FA, MIGLIARI DA. braz oral res. 2011;25(2):180-5 (eng).

The aim of this study was to evaluate the effectiveness of acupuncture in minimizing the severity of radiation-induced xerostomia in patients with head and neck cancer. A total of 24 consecutive patients receiving > 5000 cGy radiotherapy (RT) involving the major salivary glands bilaterally were assigned to either the preventive acupuncture group (PA, n = 12), treated with acupuncture before and during RT, or the control group (CT, n = 12), treated with RT and not receiving acupuncture.

After RT completion, clinical response was assessed in all patients by syalometry, measuring the resting (RSFR) and stimulated (SSFR) salivary flow rates, and by the visual analogue scale (VAS) regarding dry mouth-related symptoms. Statistical analyses were performed with repeated-measures using a mixed-effect modeling procedure and analysis of variance. An alpha level of 0.05 was accepted for statistical significance. Although all patients exhibited some degree of impairment in salivary gland functioning after RT, significant differences were found between the groups. Patients in the PA group showed improved salivary flow rates (RSFR, SSFR; p < 0.001) and decreased xerostomia- related symptoms (VAS, p < 0.05) compared with patients in the CT group. Although PA treatment did not prevent the oral sequelae of RT completely, it significantly minimized the severity of radiation-induced xerostomia. The results suggest that acupuncture focused in a preventive approach can be a useful therapy in the management of patients with head and neck cancer undergoing RT.

2195- gera: 156352/nd/re

AMELIORATIVE EFFECT OF PURPLE BAMBOO SALT-PHARMACEUTICAL ACUPUNCTURE ON CISPLATIN-INDUCED OTOTOXICITY. MYUNG NY, CHOI IH, JEONG HJ, KIM HM. acta otolaryngol. 2011;131(1):14-21 (eng). CONCLUSION: Our findings demonstrated that purple bamboo salt (PBS)-pharmaceutical acupuncture has an ameliorative effect on cisplatin-induced ototoxicity. OBJECTIVES: We have previously reported that PBS exhibited anti- allergic and antiinflammatory actions in vitro and in vivo. Pharmaceutical acupuncture is a traditional oriental therapeutic technique that combines acupuncture with herbal treatment. The aim of this study was to investigate the protective effect and mechanism of PBS-pharmaceutical acupuncture against cisplatin-induced ototoxicity in the auditory cell line, HEI- OC1, and in vivo. METHODS: The ELISA method, a caspase-3 assay, an MTT assay, Western blot analysis, and a luciferase assay were utilized to investigate the effect of PBS in vivo and in vitro. RESULTS: When it was acupunctured at the Ermen acupoint (triple energizer meridian 21) after an administration of cisplatin, PBS-pharmaceutical acupuncture significantly suppressed interleukin (IL)-6 production and caspase-3 activation induced by cisplatin in the cochlea. In addition, PBS significantly inhibited cisplatin-induced apoptosis and IL-6 production in HEI-OC1 cells. PBS also suppressed cytochrome c release and caspase-3 activation, and it inhibited extracellular signal-related kinase and nuclear factor-κB activation in HEI-OC1 cells.

2196- gera: 156447/nd/re

USE OF CHINESE MEDICINE BY CANCER PATIENTS: A REVIEW OF SURVEYS. CARMADY B, SMITH CA. chin med. 2011;6(1):22 (eng).

ABSTRACT: Chinese medicine has been used to treat a variety of cancer-related conditions. This study aims to examine the prevalence and patterns of Chinese medicine usage by cancer patients. We reviewed articles written in English and found only the Chinese medicine usage from the studies on complementary and alternative medicine (CAM). Seventy four (74) out of 81 articles reported rates of CAM usage ranging from 2.6 to 100%. Acupuncture was reported in 71 out of 81 studies. Other less commonly reported modalities included Qigong (n=17), Chinese herbal medicine (n=11), Taichi (n=10), acupressure (n=6), moxibustion (n=2), Chinese dietary therapy (n=1), Chinese massage (n=1), cupping (n=1) and other Chinese medicine modalities (n=19). This review also found important limitations of the English language articles on CAM usage in cancer patients. Our results show that Chinese medicine, in particular Chinese herbal medicine, is commonly used by cancer patients. Further research is warranted to include studies not written in English.

2197- gera: 156456/nd/re

THE MENOPAUSE-SPECIFIC QUALITY OF LIFE QUESTIONNAIRE: PSYCHOMETRIC EVALUATION AMONG BREAST CANCER SUR VIVORS. RADTKE JV, TERHORST L, COHEN SM. menopause. 2011;18(3):289-95 (eng). OBJECTIVE: The aim of this study was to evaluate the psychometric properties of the Menopause-Specific Quality of

Life Questionnaire (MENQOL) in a sample of breast cancer survivors experiencing menopausal symptoms. METHODS: This was a secondary analysis of MENQOL psychometric data from two larger parent studies investigating acupuncture for the relief of menopausal symptoms among breast cancer survivors. Reliability was assessed for each subscale of the MENQOL via (1) internal consistency reliability with Cronbach α and (2) test-retest reliability at multiple follow-up points with intraclass correlation coefficients and r. Convergent and discriminant validities were assessed via correlations of the vasomotor and psychosocial MENQOL subscales with select items in the Kupperman index and daily symptom diary. A principal components analysis was performed to determine construct validity. RESULTS: For each subscale, Cronbach α was 0.70 or greater. All subscale test-retest reliabilities at first follow-up were significant and at least moderately correlated (≥ 0.450; r's and intraclass correlation coefficients). Convergent validity was moderate between the vasomotor and psychosocial subscales and the symptom diary (r ≥ 0.410, P < 0.001) and larger between these domains and the Kupperman index ($r \ge 0.614$, P < 0.001). In the same subscales discriminant validity was supported by low, nonsignificant correlations (r ≤ 0.176, P > 0.05). The principal components analysis revealed a latent structure nearly identical to the prespecified instrument domains, with the exception of the physical domain. CONCLUSIONS: With results comparable with those obtained in previous psychometric work, the MENQOL seems to be a reliable and valid instrument to assess quality of life in postmenopausal breast cancer

2198- gera: 156624/di/ra

ACUPUNCTURE FOR CHEMOTHERAPY-INDUCED PERIPHERAL NEUROPATHY (CIPN): A PILOT STUDY USING NEUROGRAPHY SCHROEDER S, MEYER-HAMME G, EPPLÉE S.. acupunct med. 2011;dec 5: (eng). OBJECTIVES: Chemotherapy-induced peripheral neuropathy (CIPN) can produce severe neurological deficits and neuropathic pain and is a potential reason for terminating or suspending chemotherapy treatments. Specific and effective curative treatments are lacking. METHODS: A pilot study was conducted to evaluate the therapeutic effect of acupuncture on CIPN as measured by changes in nerve conduction studies (NCS) in six patients treated with acupuncture for 10 weeks in addition to best medical care and five control patients who received the best medical care but no specific treatment for CIPN. RESULTS: In five of the six patients treated with acupuncture, NCS improved after treatment. In the control group, three of five patients did not show any difference in NCS, one patient improved and one showed impaired NCS.CONCLUSION: The data suggest that acupuncture has a positive effect on CIPN. The encouraging results of this pilot study justify a randomised controlled trial of acupuncture in CIPN on the basis of NCS.

2199- gera: 156659/nd/re

META-ANALYSIS: TRADITIONAL CHINESE MEDICINE FOR IMPROVING IMMUNE RESPONSE IN PATIENTS WITH UNRESECTABLE HEPATOCELLULAR CARCINOMA AFTER TRANSCATHETER ARTERIAL

CHEMOEMBOLIZATION. MENG MB, WEN QL, CUI YL, SHE B, ZHANG RM. explore (ny). 2011;7(1):37-43 (eng). OBJECTIVE: The aim of this study was to evaluate whether Traditional Chinese Medicine (TCM) improves immune response for unresectable hepatocellular carcinoma (UHCC) after transcatheter arterial chemoembolization (TACE) by using meta-analysis of data from the literature involving available randomized controlled trials of TCM in combination with TACE compared with that of TACE alone. METHODS: Literature retrieval was conducted through the Cochrane Library, MEDLINE, CENTRAL, Embase, CBMdisc, and CNKI, without language limitations. RESULTS: Based on our search criteria, we found 12 trials involving 1,008 patients. Our results showed that the differences of pooled weighted mean difference before and after treatment and 95% confidence intervals (CIs) were 13.63 (8.96-18.69; P = .0001) for the proportion of CD3(+) T cells, 10.56 (6.91-14.21; P = .0001) for the proportion of CD4(+) T cells, -3.40 (-6.83 to 0.03; P = .052) for the proportion of CD8(+) T cells, 0.54 (0.42-0.66; P =

.0001) for the ratio of CD4(+)/CD8(+), and 12.34 (7.26- 17.41; P = .0001) for the proportion of natural killer cells. No serious adverse events were reported. CONCLUSIONS: Traditional Chinese Medicine in combination with TACE improves the immune response of patients with UHCC. However, considering the strength of the evidence, additional randomized controlled trials are needed before TCM plus TACE can be recommended routinely.

2200- gera: 156689/nd/re

[PROTECTIVE EFFECTS OF CHINESE HERBAL MEDICINE HUQI EXTRACTUM ON SALIVARY GLANDS AGAINST RADIATION IN WISTAR RATS.] ZHANG YL, QIN LP, WANG KL, LI B. zhong xi yi jie he xue bao. 2011;9(1):70-76 (chi). Objective: To explore the protective effects of Huqi extractum, a compound Chinese herbal medicine, on salivary glands against radiation in Wistar rats. Methods: One hundred Wistar rats were randomly divided into sham-exposure group, untreated group, and low-, medium- and high-dose Huqi groups. Local irradiation of 60Co gamma-rays with a single dose of 15 Gy was applied to the salivary glands of the Wistar rats except the sham-exposure group. After 3- and 40-day treatment, saliva was collected. Colorimetric method, iodineamylase colorimetric method and enzyme-linked immunosorbent assay were used to detect concentrations of sodium (Na(+)), potassium (K(+)) and secretory immunoglobulin A (slgA) and activity of salivary amylase. Pathological changes of salivary gland tissues were observed by hematoxylin-eosin straining. Results: After 3-day administration, radiation-induced salivary gland injuries were obvious and prevalent in irradiated rats. Comparing with the sham-exposure group, saliva concentration of slgA and body weight were reduced in other irradiated groups, except those in the high-dose Huqi group, while salivary amylase level was increased. At 3-day phase, pathologic changes of the salivary glands were featured as swelling acinus plasm and vacuolation. At 40-day phase, atrophy of gland cells was dominant. After 40-day administration, there were no significant differences between the high-dose Huqi group and sham-exposure group in slgA and amylase levels and body weight, and according to the histological examination, no significant difference was revealed under the optical microscope. Conclusion: Chinese herbal medicine is helpful for the recovery of the salivary glands from the radiation injury, morphologically and functionally in rats.

2201- gera: 156696/di/re

[CLINICAL EVALUATION OF THE EFFICACY OF EXTERNAL THERAPIES OF TRADITIONAL CHINESE MEDICINE IN TREATMENT OF CANCER PAIN.] ZHU SJ, JIA LQ, LI PW. zhong xi yi jie he xue bao. 2011;9(1):11-14 (chi). There lack scientific methods for evaluating the treatment of cancer pain with external therapies of traditional Chinese medicine (TCM). The level of clinical study in this field needs to be improved. The authors assert that when external therapies of TCM are applied to treat cancer pain, different types of cancer pain should be distinguished and treatment should be applied according to such a differentiation. Under this framework scientific evaluation can be conducted. The authors also assert that the findings of randomized, blinded and controlled trials should be given particular attention, and it is necessary to include titration of morphine into clinical trails of external therapies for the treatment of cancer pain, not only complying with the three-ladder principle for treating cancer pain suggested by the World Health Organization, but also not influencing the effect evaluation of external therapies of TCM on cancer pain. Patient diaries recording pain were revised as observation indexes. The primary indicator of efficacy was the pain intensity score and the secondary indicators were the equivalent of morphine and the remission rate of pain. The time to onset, remission duration and comparison of assessment of pain influence can mirror the characteristics of external therapies of TCM on cancer pain.

2202- gera: 156898/nd/re [EFFECT OF BUSHENHUOXUE YIN ON CEREBRAL LEVELS OF NITRIC OXIDE, TUMOR NECROSIS FACTOR-A AND INTERFERON-F IN A MOUSE MODEL OF PARKINSON DISEASE.] LI SD, LIU Y, YANG MH. nan fang

yi ke da xue xue bao. 2011;31(1):90-92 (chi). OBJECTIVE: To observe the effects of Bushenhuoxue Yin (BSHXY), a compound traditional Chinese herbal medicine, on nitric oxide (NO), tumor necrosis factor- α (TNF- α) and interferon-y (IFN-y) levels in the brain of a mouse model of Parkinson disease (PD). METHODS: Forty-five C57BL/6 mice were randomized into MPTP-induced PD model group, BSHXY treatment group and normal control group. The contents of NO and the two cytokines in the brain tissue of the mice were determined by spectroscopy and enzyme-linked immunosorbent assay, respectively. RESULTS: The concentration of NO in the brain tissue of the PD model group was 5.93 0.79 µmol/g.protein, significantly higher than that in BSHXY group (P<0.01) and normal control group (P<0.01). The levels of TNF- α and IFN- γ in the PD model group were 0.36 0.11 ng/L and 0.83 0.25 ng/L, respectively, also higher than those in the other two groups (P<0.01 or 0.001). But BSHXY group and the normal control group showed no significant differences in the levels of NO, TNF-α and IFN-γ (P>0.05). CONCLUSION: The therapeutic effect of BSHXY on PD is partially attributed to decreased content of NO, TNF-α

2203- gera: 157124/nd/re

POSSIBLE MECHANISM OF GROWTH INHIBITION BY SCUTELLARIA BAICALENSIS IN AN ESTROGEN-RESPONSIVE MOUSE TUMOR CELL LINE. MURASHIMA T, KATAYAMA H, SHOJIRO K, NISHIZAWA Y. oncol rep. 2011; 1: (eng).

We have studied the effects of Saiboku-to, a traditional Chinese medicine having suppressive activities for leukotriene production and release, on the proliferation of the estrogenresponsive mouse Leydig tumor cell line B-1F. In our previous reports, it is shown that Saiboku-to promotes, but Scutellaria baicalensis, one of the components (herbs) of Saiboku-to, significantly inhibits the proliferation of B-1F cells in vitro and in vivo, and induces DNA fragmentation and morphological changes such as nuclear aggregation and fragmentation. In this study, we examined telomerase activity, cell cycle, polyunsaturated fatty acid metabolism and expression of nuclear factor κB (NF-κB) in order to determine the mechanism of growth inhibition in B-1F cells treated with Scutellaria baicalensis. Telomerase activity was decreased in a dose-dependent manner in treated B-1F cells. Cellular populations in the sub-G0/G1 and G2/M phases were increased, but those in M phase had no change. Although cyclin D1 mRNA was highly expressed in the presence of estradiol (E2), cyclin A and E mRNA levels did not significantly change. When B-1F cells were treated with Scutellaria baicalensis, expression of cyclin D1 was suppressed and that of p21 was inversely increased. Moreover, Scutellaria baicalensis influenced arachidonic and linoleic acid metabolism, and increased production of 13(S)-HODE. In the presence of E2 Scutellaria baicalensis decreased expression of NF-kB p65 to 0.71-fold in B-1F cells. These results show that Scutellaria baicalensis might induce cell cycle arrest at G1 phase and apoptosis via inhibition of telomerase activity, changes of enzymatic activities in polyunsaturated fatty acid metabolism and suppression of NFκB.

2204- gera: 157144/nd/re

THE USE OF CHINESE HERBAL MEDICINE TO IMPROVE QUALITY OF LIFE IN WOMEN UNDERGOING CHEMOTHERAPY FOR OVARIAN CANCER: A DOUBLE-**BLIND PLACEBO-CONTROLLED RANDOMIZED TRIAL** WITH IMMUNOLOGICAL MONITORING. HAN KK, YAO TJ, JONES B, ZHAO JF, MA FK, LEUNG CY, LAU SK, YIP MW, NGAN HYC. ann oncol. 2011;25: (eng). BACKGROUND: This study aimed to evaluate traditional Chinese medicine (TCM) in improving quality of life (QOL), reducing chemotoxicity and modulating immune function in patients undergoing chemotherapy. PATIENTS AND METHODS: Patients with ovarian cancer were randomized to receive either TCM or placebo in addition to standard chemotherapy. The primary outcome was global health status (GHS) score, assessed by European Organization for Research and Treatment of Cancer questionnaire, while the secondary outcomes were other QOL items, chemotoxicity according to World Health Organization criteria and alterations in immune function as measured by immune cells count and

the numbers of cytokines-secreting cells. RESULTS: There was no significant difference in the GHS between the two groups. With adjustment for stage, chemotherapy type, disease status, age and baseline value, emotional function, cognitive function and nausea and vomiting were found to be worse or less improved in the TCM group compared with placebo group after six cycles of chemotherapy. The TCM group had less neutropenia after three cycles (0% grade 4 neutropenia versus 28.6%). There were no other significant differences in terms of chemotoxicity. Lymphocyte counts and cytokine activities decreased less in the TCM group. CONCLUSIONS: TCM did not improve QOL but did have some effects in terms of maintaining immune function.

2205- gera: 157176/nd/re

AQUEOUS EXTRACT OF CURCUMA AROMATICA INDUCES APOP TOSIS AND G2/M ARREST IN HUMAN COLON CARCINOMA LS-174-T CELLS INDEPENDENT OF P53. HU B, SHEN KP, AN HM, WU Y, DU Q. cancer biother radiopharm. 2011;26(1):97-104 (eng).

Abstract Curcuma aromatica is a common Chinese herb for treating diseases with blood stasis and has been regarded as an anticancer herb in modern clinical practice. However, the anticancer effects and related molecular mechanisms of Curcuma aromatica remain unclear. In the present study, human colon carcinoma LS-174-T cell line with wild-type p53 was used as a model cell to evaluate the anticancer effects of aqueous extract of Curcuma aromatica (AECA). AECA inhibits LS-174-T cell proliferation in a dose- and time-dependent manner and colony formation in a dose-dependent manner. AECA treatment induces apoptosis accompanied by caspase-8. -9. and -3 activation in LS-174-T cells. Moreover, blocking the activities of these caspases with a specific inhibitor significantly protected LS-174-T cells from AECA-induced apoptosis. AECA treatment also induces G2/M phase arrest in LS-174-T cells. Expression of p53 was unchanged after AECA treatment; specific silence of p53 did not influence AECAinduced apoptosis and G2/M phase arrest. Further, the expression of cyclin B1 and CDK1 was reduced by AECA. This study suggests that AECA might be effective as an antiproliferative herb for colon carcinoma, the antitumor activity of AECA may involve both extrinsic and intrinsic apoptosis. and AECA induces G2/M phase arrest via downregulation of cyclin B1 and CDK1 and without the participation of p53.

2206- gera: 157265/nd/re

MATRINE INHIBITS MATRIX METALLOPROTEI NASE-9 EXPRESSION AND INVASION OF HUMAN HEPATOCELLULAR CARCINOMA CELLS. YU HB, ZHANG HF, LI DY, ZHANG X, XUE HZ, ZHAO SH. j asian nat prod res. 2011;13(3):242-50 (eng).

Matrine is the major active component of the traditional Chinese medicine Sophora flavescens, but the molecular mechanisms of matrine on tumor invasion inhibition remain unclear. The aim of this study is to elucidate the effects of matrine on invasion ability of human hepatocellular carcinoma (HCC) cells, matrix metalloproteinase-9 (MMP-9), and nuclear factor (NF)-kappa B expression. The expression activity of MMP-9 was measured by reverse transcription polymerase chain reaction, Western blot, and gelatin zymography analysis. The expression of NF-kappa B was measured by the Western blot analysis. Matrine significantly inhibited MMP-9 expression of SMMC-7721 cells. NF-kappa B inhibitor PTDC induced a marked reduction in MMP-9 expression, and it suggested that NF-kappa B could play an important role in MMP-9 expression. Furthermore, matrine significantly suppressed NF-kappa B expression and the invasion of SMMC-7721 cells. Our results showed that matrine inhibited MMP-9 expression and the invasion of human HCC cells. The inhibitory effects are partly associated with the downregulation of the NF-kappa B signaling pathway.

2207- gera: 157285/nd/re

PAEOŇIA LACTIFLORA PALL INHIBITS BLADDER CANCER GROWTH INVOLVING PHOSPHORYLATION OF CHK2 IN VITRO AND IN VIVO. OU TT, WU CH, HSU JD, CHYAU CC, LEE HJ, WANG CJ. j ethnopharmacol. 2011; 9: (eng).

Ethnopharmacological relevance: Extracts of Paeonia lactiflora

Pall (RPA), a traditional Chinese medicines has been shown to treat cancers. AIM OF THE STUDY: The purpose of this study is to evaluate the anticancer effect of RPA in urinary bladder carcinoma in vitro and in vivo. MATERIALS AND METHODS: The cell viability was analyzed with DAPI. Flow cytometry and western blot were used to study the apoptosis and cell cycle related mechanism. A rat model of bladder cancer was induced by N-butyl-N-(4-hydroxybutyl) nitrosamine (OH-BBN). Tumors were analyzed with immunohistochemical analysis. RESULTS: Our data suggested that RPA inhibits growth of bladder cancer via induction of apoptosis and cell cycle arrest. Treatment of TSGH-8301 cells with RPA resulted in G2-M phase arrest that was associated with a marked decline in protein levels of cdc2, cyclin B1, cell division cycle 25B (Cdc25B) and Cdc25C. We also reported that RPA-mediated growth inhibition of TSGH-8301 cells was correlated with activation of checkpoint kinase 2 (Chk2). Herein, we further evaluated urinary bladder cancer using a model of bladder cancer induced by OH- BBN. Analysis of tumors from RPAtreated rats showed significant decrease in the expression of Bcl2, cyclin D1, and PCNA, and increase in the expression of p-Chk2 (Thr-68), Bax, and Cip1/p21. CONCLUSION: Our data provide the experimental evidence that RPA could modulate apoptosis in models of bladder cancer.

2208- gera: 157288/nd/re

USE OF CHINESE MEDICINE AMONG PROSTATE CANCER PATIENTS IN TAIWAN: A RETROSPECTIVE LONGITUDINAL COHORT STUDY. LIN YH, CHEN KK, CHIU JH. int j urol. 2011; 9: (eng).

The National Health Insurance (NHI) covers Western medicine and Chinese medicine (CM) in Taiwan. The present study aimed to investigate the trends and characteristics of CM use among prostate cancer patients before and after diagnosis. A retrospective longitudinal cohort study was carried out using the NHI research database. The present study cohort consisted of 4720 prostate cancer patients diagnosed in 2004. Claims of CM services of these patients between 2003 and 2008 were analyzed. The prevalence of CM use of this cohort was 25.8%, 26.8%, 23.6%, 22.4%, 22.0% and 21.1% in 2003-2008, respectively. Overall, 52.6% of this cohort had ever used CM. In the first year of diagnosis, there was the greatest increase of new CM users (12.1%). The total number of CM users and visits reached the peak in 2004 and decreased in the subsequent years (2005-2008). The average number of CM visits per user was 6.7, 6.7, 7.0, 7.1, 7.3 and 7.2 in 2003-2008, respectively. The most frequently recorded principal diagnosis of CM visits was musculoskeletal diseases (21.4%), symptoms/signs (17.6%) and neoplasms (11.7%). Chinese herbal medicine (75.1%) was the most commonly used, followed by acupuncture/traumatological manipulative therapies (29.7%). Patients using CM before diagnosis tended to be CM users after diagnosis. The increase of CM use over the first year of prostate cancer diagnosis can be primarily attributed to an increase of new CM users, rather than of CM visits per users.

2209- gera: 157346/nd/re

[IDENTIFICATION OF SALIVARY BIOMARKERS IN BREAST CANCER PATIENTS WITH THICK WHITE OR THICK YELLOW TONGUE FUR USING ISOBARIC TAGS FOR RELATIVE AND ABSOLUTE QUANTITATIVE PROTEOMICS.] CAO MQ, WU ZZ, WU WK. zhong xi yi jie he xue bao. 2011;9(3):275-280 (chi).

Objective: To explore the presence of informative protein biomarkers in the salivary proteome of breast cancer patients with thick white or thick yellow tongue fur. Methods: Salivia samples were collected from 20 breast cancer patients with thick white or yellow tongue fur and 10 healthy controls. The samples were profiled by using isobaric tags for relative and absolute quantitation (iTRAQ) technology coupled with liquid chromatography-tandem mass spectrometry (LC- MS/MS). The analyzed map and data were assessed with Mascott 2.2 and Scaffold software. Ratio of proteins between groups of less than 0.6 or more than 1.5 could confirm that there was difference between groups. Results: A total of 464 proteins were identified and 125 proteins met strict quantitative criteria. There were 9 proteins associated with breast cancer, expression levels of which were up- or down-regulated more

than 1.5 folds compared with healthy people. There were 16 proteins associated with tongue coating, of which 10 proteins expressed in breast cancer patients with thick white fur were lower than in patients with thick yellow fur, and the expressions of the other 6 proteins were increased. Conclusion: This study demonstrates that iTRAQ combined with LC-MS/MS quantitative proteomics is a powerful tool for biomarker discovery and the identification of proteins associated with breast cancer and tongue coating.

2210- gera: 157352/nd/re

FANGCHINOLINE INDU CES AUTOPHAGIC CELL DEATH VIA P53/SESTRIN2/AMPK SIGNALING IN HUMAN HEPATOCELLULAR CARCINOMA CELLS. WANG N, PAN W, ZHU M, ZHANG M, HAO X, LIANG G, FENG Y. br j pharmacol. 2011;21: (eng).

Background and Purpose: Fangchinoline is a novel anti-tumor agent with few investigations on the cellular and molecular mechanism of its activity. The aim of this study is to investigate the mode of cell death induced by fangchinoline and its underlying mechanism in human hepatocellular carcinoma cells HepG2 and PLC/PRF/5. Experimental approach: Apoptosis and autophagy were monitored in fangchinolinetreated human hepatocellular carcinoma cells HepG2 and PLC/PRF/5. The signal transduction in autophagy activation was detected. Key Results: fangchinoline does not induce apoptosis in HepG2 and PLC/PRF/5 cells. Instead, excessive autophagy is triggered by fangchinoline in a dose-dependent manner, initiating an alternative mode of cell death which may contribute to fangchinoline's anti-tumor action. P53 translocation is involved in autophagy induction by fangchinoline, which selectively transactivates the autophagyrelated sestrin2 and initiates the autophagy process. The activation of AMPK signaling is involved as downstream target of sestrin2 and induces mTOR-independent autophagic cell death in both HepG2 and PLC/PRF/5 cells. Genetic inhibition on atg5 and pharmacological inactivation on p53 abolish the autophagy induction by fangchinoline, and inhibition of autophagy switches it to apoptosis in hepatocellular carcinoma cells, suggesting that cell death is irreversible once autophagy is induced by fangchinoline. Conclusions and Implications: These results show here for the first time that fangchinoline is a high specific agent to induce autophagic cell death in hepatocellular carcinoma cells with novel mechanism, which shed light on the potential of fangchinoline in cancer therapy in potentiating cancer cell death.

2211- gera: 157444/nd/re

CELASTROL INDUCES APOPTOSIS IN NON-SMALL-CELL LUNG CANCER A549 CELLS THROUGH ACTIVA TION OF MITOCHONDRIA- AND FAS/FASL-MEDIATED PATHWAYS. MOU H, ZHENG Y, ZHAO P, BAO H, FANG W, XU N. toxicol in vitro. 2011; 2: (eng).

Celastrol is a natural compound extracted from the traditional Chinese medicinal herb, Trypterygium Wilfordii Hook. It has attracted interests for its potential anti-inflammatory and antitumor effects. However, the molecular mechanisms of celastrol-induced apoptosis in cancer cells remain unclear. In this study, we investigated the effects of celastrol on the human non-small-cell lung cancer (NSCLC) cell line A549 in vitro. Celastrol caused a dose- and time-dependent growth inhibition of A549 cells with an IC(50) of 2.12 µM at 48 h treatment. Celastrol induced A549 cells apoptosis as confirmed by annexin V/propidium iodide staining and DNA fragmentation. Celastrol-induced apoptosis was characterized by cleavage of caspase-9, caspase-8, caspase-3, and PARP protein, increased Fas and FasL expression, and a reduction in the mitochondrial membrane potential. Furthermore, celastrol induced the release of cytochrome c. Celastrol also up-regulated the expression of pro-apoptotic Bax, downregulated anti-apoptotic Bcl-2, and inhibited Akt phosphorylation. These results demonstrate that celastrol can induce apoptosis of human NSCLC A549 cells through activation of both mitochondria- and FasL-mediated pathways.

2212- gera: 157463/nd/re

THE ETHANOL EXTRACT OF SCUTELLARIA
BAICALENSIS AND IT ACTIVE COMPOUNDS IND UCE
CELL CYCLE ARREST AND APOPTOSIS INCLUDING

UPREGULATION OF P53 AND BAX IN HUMAN LUNG CANCER CELLS. GAO J, MORGAN WA, SANCHEZ-MEDINA A, CORCORAN O. toxicol appl pharmacol. 2011;29: (eng). Despite a lack of scientific authentication, Scutellaria baicalensis is clinically used in Chinese medicine as a traditional adjuvant to chemotherapy of lung cancer. In this study, cytotoxicity assays demonstrated that crude ethanolic extracts of S. baicalensis were selectively toxic to human lung cancer cell lines A549, SK-LU-1 and SK-MES-1 compared with normal human lung fibroblasts. The active compounds baicalin, baicalein and wogonin did not exhibit such selectivity. Following exposure to the crude extracts, cellular protein expression in the cancer cell lines was assessed using 2-D gel electrophoresis coupled with MALDI-TOF-MS/Protein Fingerprinting. The altered protein expression indicated cell growth arrest and apoptosis were potential mechanisms of cytotoxicity. These observations were supported by PI staining cell cycle analysis using flow cytometry and Annexin V apoptotic analysis by fluorescence microscopy of cancer cells treated with the crude extract and pure active compounds. Moreover, specific immunoblotting identification showed the decreased expression of cyclin A results in the S phase arrest of A549 whereas the G(0)/G(1) phase arrest in SK- MES-1 cells results from the decreased expression of cyclin D1. Following treatment, increased expression in the cancer cells of key proteins related to the enhancement of apoptosis was observed for p53 and Bax. These results provide further insight into the molecular mechanisms underlying the clinical use of this herb as an adjuvant to lung cancer therapy.

2213- gera: 157498/nd/re

IPREVENTIVE AND THERAPEUTIC EFFECTS OF CHINESE HERBAL MEDICINE COMPOUND ZHUYE SHIGAO **GRANULE IN RATS WITH RADIATION-INDUCED** ESOPHAGITIS.] LU JZ, ZHAO L, REN JP, CAO XT, LI HX, ZHAO H. zhong xi yi jie he xue bao. 2011;9(4):435-441 (chi). Objective: To explore the preventive and therapeutic effects of Compound Zhuye Shigao Granule (CZSG), a compound Chinese herbal medicine, on radiation-induced esophagitis in rats. Methods: Fifty-six Wistar rats were randomly divided into 5 groups: normal control group (8 rats), model group (12 rats), and high-, medium- and low-dose CZSG groups (12 rats in each group). The rats in the normal control and model groups were given normal saline 10 mL/kg body weight and those in the CZSG-treated groups were given solution of CZSG at doses of 1.15, 2.30, or 4.60 g/kg body weight respectively by intragastric administration once a day for 7 days. Then esophagitis was induced by local irradiation of (60)Co ray (490.25 cGy/min, totaled 30 Gy). The administration was continued for another 7 days or 14 days, meanwhile body weight and daily food intake of the rats were recorded. Seven days after the irradiation, 4 rats in each group were sacrificed under anesthesia, then, the esophageal tissue was obtained for histopathological examination and the degrees of esophageal tissue injury and neutrophil infiltration were scored. Fourteen days after the irradiation, all the survival rats were dealt in the same way. Results: (1) Seven days after the irradiation, the esophageal tissue sections in the model group showed typical histopathological changes of radiation-induced esophagitis, whereas in the CZSG groups the histopathological changes were lessened dose-dependently and in the highdose CZSG group the esophageal tissue remained basically intact. (2) The scores of esophageal tissue injury and cellular infiltration in the high- and medium-dose CZSG groups were both significantly less than in the model group (P<0.05). (3) The body weight of the rats increased in the normal control group, whereas it decreased obviously in the model group. In the medium- and high-dose CZSG groups, it did not decrease significantly. The decrease of body weight in the high-dose CZSG group was less than that in the model group (P<0.05). (4) Compared with the normal control group, the daily food intake was reduced in the other groups. However, it was significantly greater in the low, medium- and high-dose CZSG groups than in the model group (P<0.05). Conclusion: In rats with radiation-induced esophagitis, CZSG can effectively relieve the esophageal tissue injury and cellular infiltration, increase daily food intake, and prevent rats from lose of body weight dose-dependently, which show that CZSG has the preventive and therapeutic effects for radiation-induced

esophagitis in rats.

2214- gera: 157652/nd/re

META-ANALYSIS: TRADITIONAL CHINESE MEDICINE FOR IMPROVING IMMUNE RESPONSE IN PATIENTS WITH UNRESECTABLE HEPATOCELLULAR CARCINOMA AFTER TRANSCATHETER ARTERIAL

CHEMOEMBOLIZATION. MENG MB, WEN QL, CUI YL, SHE B, ZHANG RM. explore (ny). 2011;7(1):37-43 (eng). OBJECTIVE: The aim of this study was to evaluate whether Traditional Chinese Medicine (TCM) improves immune response for unresectable hepatocellular carcinoma (UHCC) after transcatheter arterial chemoembolization (TACE) by using meta-analysis of data from the literature involving available randomized controlled trials of TCM in combination with TACE compared with that of TACE alone. METHODS: Literature retrieval was conducted through the Cochrane Library, MEDLINE, CENTRAL, Embase, CBMdisc, and CNKI, without language limitations. RESULTS: Based on our search criteria, we found 12 trials involving 1,008 patients. Our results showed that the differences of pooled weighted mean difference before and after treatment and 95% confidence intervals (CIs) were 13.63 (8.96-18.69; P = .0001) for the proportion of CD3(+) T cells, 10.56 (6.91-14.21; P = .0001) for the proportion of CD4(+) T cells, -3.40 (-6.83 to 0.03; P = .052) for the proportion of CD8(+) T cells, 0.54 (0.42-0.66; P = .0001) for the ratio of CD4(+)/CD8(+), and 12.34 (7.26- 17.41; P = .0001) for the proportion of natural killer cells. No serious adverse events were reported. CONCLUSIONS: Traditional Chinese Medicine in combination with TACE improves the immune response of patients with UHCC. However, considering the strength of the evidence, additional randomized controlled trials are needed before TCM plus TACE can be recommended routinely.

2215- gera: 157672/nd/re
BERBERINE POTENTIZES APOPTOSIS INDUCED BY X-RAYS IRRADIATION PROBABLY THROUGH MODULATION OF GAP JUNCTIONS. LIU B, WANG Q, YUAN DD, HONG XT, TAO L. chin med j (engl). 2011;124(8):1221-8 (eng). BACKGROUND: Clinical combination of some traditional Chinese medical herbs, including berberine, with irradiation is demonstrated to improve efficacy of tumor radiotherapy, yet the mechanisms for such effect remain largely unknown. The present study investigated the effect of berberine on apoptosis induced by X-rays irradiation and the relation between this effect and gap junction intercellular communication (GJIC) METHODS: The role of gap junctions in the modulation of Xrays irradiation-induced apoptosis was explored by manipulation of connexin (Cx) expression, and gap junction function, using oleamide, a GJIC inhibitor, and berberine. RESULTS: In transfected HeLa cells, Cx32 expression increased apoptosis induced by X-rays irradiation, while inhibition of gap junction by oleamide reduced the irradiation responses, indicating the dependence of X-rays irradiationinduced apoptosis on GJIC. Berberine, at the concentrations without cytotoxicity, enhanced apoptosis induced by irradiation only in the presence of functional gap junctions. CONCLUSIONS: These results suggest that berberine potentizes cell apoptosis induced by X-rays irradiation, probably through enhancement of gap junction activity.

2216- gera: 157677/nd/re

ANALGESIC-ANTITUMOR PEPTIDE (AGAP) INHIBITS PROLIFERATION AND MIGRATION OF SHG-44 HUMAN MALIGNANT GLIOMA CELLS. ZHAO Y, CAI X, YE T, ZHANG S, CAO P. **j cell biochem**. 2011;2: (eng). Malignant gliomas, the most common subtype of primary brain tumors, are characterized by high proliferation, great invasion, and neurological destruction and considered to be the deadliest of human cancers. Analgesic-antitumor peptide (AGAP), one of scorpion toxic polypeptides, has been shown to have antitumor activity. Here we show that recombinant AGAP (rAGAP) not only inhibits the proliferation of gliomas cell SHG-44 and rat glioma cell C6, but also suppresses the migration of SHG-44 cells during wound healing. To explain these phenomena, we find that rAGAP leads to cell cycle of SHG-44 arrested in G1 phase accompanied by suppressing G1 cell cycle regulatory proteins CDK2, CDK6 and p-RB by

means of the down-regulated protein expression of p-AKT. Meanwhile, rAGAP significantly decreases the production of NF-kB, BCL-2, p-p38, p-c-Jun and p-Erk1/2 and further suppresses the activation of VEGF and MMP-9 in SHG-44 cells. These findings suggest rAGAP inhibit proliferation and migration of SHG-44 cells by arresting cell cycle and interfering p-AKT, NF-kB, BCL-2 and MAPK signaling pathways. J. Cell. Biochem.

2217- gera: 157847/nd/re

AIDI INJECTION ALTERS THE EXPRESSION PROFILES OF MICRORNAS IN HUMAN BREAST CANCER CELLS. ZHANG H, ZHOU QM, LU YY, DU J, SU SB. i tradit chin

med. 2011;31(1):10-6 (eng).

OBJECTIVE: To investigate the effects of Aidi Injection on the MicroRNAs (miRNA) expression profiles in human breast cancer cells and explore the potential targets of the cancer treatment. METHODS: MCF-7 breast cancer cells were grown in RPMI 1640 medium supplemented with different concentrations of ADI. The inhibition of cell proliferation was measured by MTT assay. MCF-7 cells were treated by ADI with above 50% inhibiting concentration (IC50) for 48 h. The expression profiles of miRNA in ADI-treated and ADI-untreated MCF-7 cells were detected with miRNA microarray chips and the array data were verified by quantitative RT-PCR. MCF-7 cells were transiently transfected with miRNA mimics by liposome method. Potential mRNA targets were predicted by informatics analysis with TargetScan and PicTar software. RESULTS: ADI significantly inhibited the proliferation of MCF-7 cells in a dose-dependent manner. The IC50 of ADI was 55.71 mg/mL after treatment for 48 h. The 60 mg/mL ADI was used as the therapeutic drug concentration. Microarray analysis identified 45 miRNAs that were up-regulated and 55 miRNAs that were down-regulated in response to ADI treatment. Many ADI-induced miRNAs were related to breast cancers. The microarray data were validated by qRT-PCR. Ectopic expression of 100 nmol/L mir-126 mimics significantly inhibited the proliferation of MCF-7 cells. The 12 potential target genes of mir-126 were predicted by both TargetScan and PicTar software. CONCLUSIONS: The miRNA may serve as therapeutic targets, and the modulation of miRNA expression is an important mechanism of ADI inhibiting breast cancer cell arowth.

2218- gera: 157854/nd/re

MATRINE INHIBITS MATRIX METALLOPROTEINASE-9 **EXPRESSION AND INVASION OF HUMAN** HEPATOCELLULAR CARCINOMA CELLS. YU HB, ZHANG HF, LI DY, ZHANG X, XUE HZ, ZHAO SH. j asian nat prod res. 2011;13(3):242-50 (eng).

Matrine is the major active component of the traditional Chinese medicine Sophora flavescens, but the molecular mechanisms of matrine on tumor invasion inhibition remain unclear. The aim of this study is to elucidate the effects of matrine on invasion ability of human hepatocellular carcinoma (HCC) cells, matrix metalloproteinase-9 (MMP-9), and nuclear factor (NF)-kappa B expression. The expression activity of MMP-9 was measured by reverse transcription polymerase chain reaction, Western blot, and gelatin zymography analysis. The expression of NF-kappa B was measured by the Western blot analysis. Matrine significantly inhibited MMP-9 expression of SMMC-7721 cells. NF-kappa B inhibitor PTDC induced a marked reduction in MMP-9 expression, and it suggested that NF-kappa B could play an important role in MMP-9 expression. Furthermore, matrine significantly suppressed NF-kappa B expression and the invasion of SMMC-7721 cells. Our results showed that matrine inhibited MMP-9 expression and the invasion of human HCC cells. The inhibitory effects are partly associated with the downregulation of the NF-kappa B signaling pathway.

2219- gera: 157998/nd/re

EFFECTS OF DIPHYLLIN AS A NOVEL V-ATPASE INHIBITOR ON GASTRIC ADENOCARCINOMA. SHEN W, ZOU X, CHEN M, LIU P, SHEN Y, HUANG S, GUO H, ZHANG L. eur j pharmacol. 2011;3: (eng).

The natural compound diphyllin, a cytostatic lignan isolated from Cleistanthus collinus, can dramatically inhibit the proliferation and induce the apoptosis of human gastric cancer cells, SGC7901. Our study found that diphyllin can inhibit the expression of V-ATPases in a dose-dependent manner, decrease the internal pH (pHi) and reverse the transmembrane pH gradient in SGC7901 cells. Changes of the pH gradient were positively correlated with diphyllin concentration. Further study found that diphyllin treatment caused a decrease in phospho-LRP6, but not in LRP6. β- catenin in Wnt/β-catenin signaling and its target genes, c-myc and cyclin-D1, were also decreased with the inhibition of V-ATPases. Therefore, diphyllin could be characterized as a new V-ATPase inhibitor in treating gastric cancer and inhibiting the phosphorylation of LRP6 in Wnt/β-catenin signaling.

2220- gera: 158023/nd/re
EXTRACTS FROM CITRUS UNSHIU PROMOTE IMMUNE-MEDIATED INHIBITION OF TUMOR GROWTH IN A MURINE RENAL CELL CARCINOMA MODEL. LEE S, RA J, SONG JY, GWAK C, KWON HJ, YIM SV, HONG SP, KIM J, LEE KH, CHO JJ, PARK YS, PARK CS, AHN HJ. j ethnopharmacol. 2011;133(3):973-9 (eng).

AIM OF THIS STUDY: Citrus unshiu (Satsuma mandarin, SM) is a citrus fruit the peel of which has been used as a traditional Chinese medicine to treat common cold, relieve exhaustion, and cancer. In this study, we examined how effectively the content and peel extracts of SM can suppress cancer growth. The mechanism underlying cancer- suppressing properties of SM was investigated in tumor-bearing mice with renal carcinoma cell, Renca. MATERIALS AND METHODS: Effectiveness of SM in tumor suppression was evaluated by measuring size of tumor mass in tumor- bearing mice treated with various doses of SM content and peel extracts Proliferation of tumor cells and splenocytes was determined by MTT assay and [3H]TdR uptake, respectively. Relevant immunological mechanisms were chased by assaying cytokines including TGF- β , IL-6, IFN- γ , and TNF- α by ELISA. RESULTS: The content and peel extracts of SM inhibited the growth of tumor cells in tumor-bearing mice. Especially average tumor volume of two groups treated with 3 and 30 mg peel extracts per mouse weight (kg) were significantly decreased to 52.32% (p<0.05) and 68.72% (p<0.01), respectively. To identify tumor regression mechanism, antitumor cytokines measured in Con A-activated splenocytes from tumor-bearing mice. IFN-y was increased in both of the peel extract-treated groups, while TNF-α, which had been decreased by tumor growth, was rescued to the normal level in SM content and peel extracts-treated groups. However, SM content and peel extracts did not inhibit proliferation and tumor-proliferative cytokines including TGF-β and IL-6 production of tumor cells. CONCLUSION: These results indicate that SM content and peel extracts have anti-tumor properties in the tumor-bearing murine model. The mechanism underlying the anti-tumor effects of SM extracts is strongly suggested to be via boosting cytokines such as IFN-γ and TNF- α , enhancing immune-mediated anti-tumor properties.

2221- gera: 158050/nd/re

ITHE PHLEGM THEORY OF GASTRIC CANCER.] SHI J. WEI PK. zhong xi yi jie he xue bao. 2011;9(6):581-587 (chi). Abstract: Based on years of ancient literature research and clinical experience, Professor Pin-kang Wei developed the phlegm theory of gastric cancer. In light of the properties of gastric cancer and the method of differentiating syndromes within the traditional Chinese medicine (TCM) paradigm, it is believed that gastric cancer is closely related with phlegm. Much ancient literature regarding the relationship between phlegm and gastric cancer was reviewed to explain the rationale and academic inheritance of the phlegm theory. In this theory, gastric cancer is regarded as a form of phleam stagnation and consists of phlegm core, phlegm collateral and phlegm contamination. In order to explain the mechanism of development, recurrence and metastasis of gastric cancer, phlegm contamination is regarded as the most fundamental cause and pathogenesis of gastric cancer. The therapy of resolving phlegm and dispersing nodules is suggested for the fundamental treatment of gastric cancer.

2222- gera: 158087/nd/re

MODULATING BCL-2 FAMILY PROTEINS AND CASPASE-3 IN INDUCTION OF APOPTOSIS BY PAEONIFLORIN IN

HUMAN CERVICAL CANCER CELLS. ZHANG L, ZHANG S. phytother res. 2011;23: (eng)

Paeoniflorin (PF), the principal bioactive component in the paeony root, has been used alone or combined with other herbs for many years in traditional Chinese medicine. New studies have shown that PF possesses an antitumor effect. However, the effect of PF on human cervical cancer cells has not been reported previously. This study determined the effect of PF on human cervical cancer cell line (HeLa) cells by the methyl thiazolyl tetrazolium (MTT) assay, flow cytometry with annexin V-fluorescein isothiocyanate (FITC)/propidium iodide (PI) technology, the transmission electron microscope (TEM) and immunocytochemical technique. After treatment with PF, the proliferation of HeLa cells was inhibited in a dose and timedependent manner (p < 0.05). The apoptosis rate of HeLa cells increased with ascending concentrations of PF (p < 0.05) and the proportion of HeLa cells in S phase showed an increasing trend also. Typical apoptotic changes of HeLa cells exposed to PF were seen under the TEM. Meanwhile, there was a decrease in the expression of Bcl-2 and an enhancement in the expression of Bax and caspase-3 genes compared with the control group (p < 0.05). In conclusion, PF can induce significantly the apoptosis of HeLa cells, which may be demonstrated by the down-regulation of anti-apoptosis gene Bcl-2 and the up-regulation of proapoptosis genes Bax and caspase-3.

2223- gera: 158333/di/ra

EVALUATION OF ACUPUNCTURE IN THE MANAGEMENT OF CHEMOTHERAPY-INDUCED PERIPHERAL NEUROPATHY. DONALD GK, TOBIN I, STRINGER J. acupuncture in medicine. 2011;29(3):230-3 (eng).

2224- gera: 158368/di/ra

ACUPUNCTURE FOR CANCER-INDUCED BONE PAIN: A PILOT STUDY. PALEY CA, JOHNSON MI. acupuncture in medicine. 2011;29(1):71-3 (eng).

2225- gera: 158483/di/ra
CLINICAL EVALUATION OF ORAL FRUCTUS BRUCEAE OIL COMBINED WITH RADIOTHERAPY FOR THE TREATMENT OF ESOPHAGEAL CANCER. SHAN GY, ZHANG S, LI GW, CHEN YS, LIU XA, WANG JK. chinese journal of integrated medicine. 2011;17(12):933-6 (eng). OBJECTIVE: To evaluate the therapeutic efficacy and side effects of oral Fructus bruceae oil combined with radiotherapy in the treatment of esophageal cancer. METHODS: A total of 80 patients with esophageal cancer were equally and randomly divided into two groups. The patients in Group A were treated with radiotherapy (60-65 Gy, 6-7 weeks) and oral Fructus bruceae oil (20 mL, 3 times per day for 12 weeks), while the patients in Group B were treated with radiotherapy alone. The short-term effect was evaluated by Response Evaluation Criteria in Solid Tumors (RECIST) and quality of life (QOL) was evaluated by the Karnofsky scoring (KFS). The outcome measures included complete remission (CR) rate, partial remission (PR) rate, effective rate as CR+PR, patients' QOL and adverse effects. RESULTS: After 12-week treatment, the CR and CR+PR were significantly higher in Group A than those in Group B (P < 0.05). There was an improvement in esophageal obstruction of 87.5% and 60.0%, respectively, and in KFS of 84.6% and 43.9%, respectively, in Groups A and B. CONCLUSION: Oral medication with oral Fructus bruceae oil could effectively improve the efficacy of radiotherapy in esophageal cancer, including a reduction in esophageal obstruction, and also reduce the side effects of radiotherapy; thus it would be very promising for clinical application.

2226- gera: 158520/di/ra

FUZHENG YILIU GRANULE INHIBITS THE GROWTH OF HEPATOCELLULAR CANCER BY REGULATING IMMUNE FUNCTION AND INDUCING APOPTOSIS IN VIVO AND IN VITRO. CAO ZY, CHEN XZ, LIAO LM, PENG J, HU HX, LIU ZZ, DU J. chinese journal of integrated medicine. 2011;17(9):691-7 (eng).

OBJECTIVE: To study the inhibitory effect of Fuzheng Yiliu Granule (FYG) on hepatocellular cancer (HCC) and investigate the mechanism mediating its bioactivity. METHODS: H22 tumor-bearing ICR mice were treated with FYG [3.6 g/(kg•d)]

for 5 days. Tumor volume and tumor weight, percentages of CD3(+), CD4(+), CD8(+), and natural killer (NK) cells in peripheral blood, tumor apoptosis and serum levels of interleukin-2 (IL-2), and tumor necrosis factor-α (TNF-α) were evaluated. FYG-containing serum was prepared from SD rats treated for 7 days [high dose 3.6 g/(kg•d); middle dose 1.8 g/(kg•d); low dose 0.9 g/(kg•d)]. Cell cycle, cell viability, and apoptosis were evaluated after HepG2 cell line was cultured in FYG-containing serum for 48 h. The levels of IL-2 and TNF-α in FYG-containing serum were also determined. RESULTS: FYG produced a potent antitumor effect (P<0.01) and induced marked apoptosis of the tumor tissue (P<0.05). Mice treated with FYG had higher percentages of CD3(+) and CD4(+) (P<0.05), and more NK cells (P<0.01) in the peripheral blood than those in the animals treated with normalsaline. Mice receiving FYG had the highest serum levels of IL-2 and TNF-α (P<0.01). High-dose FYG-containing serum significantly decreased HepG2 cell viability, inhibited cell proliferation (P<0.05), and induced apoptosis (P<0.01). In addition, the levels of IL-2 and TNF-α of high- dose-containing serum were higher than the blank serum (P<0.01). CONCLUSION: FYG could inhibit HCC growth by regulating immune function and inducing apoptosis of tumor cells in vivo and in vitro.

2227- gera: 158521/di/ra

PIEN TZE HUANG INDUCED APOPTOSIS IN HUMAN **COLON CANCER HT-29 CELLS IS ASSOCIATED WITH REGULATION OF THE BCL-2 FAMILY AND ACTIVATION** OF CASPASE 3. LIN JM, WEI LH, CHEN YQ, LIU XX, HONG ZF, SFERRA TJ, PENG J. chinese journal of integrated medicine. 2011;17(9):685-90 (eng)

OBJECTIVE: To investigate the cellular effects of Pien Tze Huang (PZH) in the HT-29 human colon carcinoma cell line. METHODS: The viability of HT-29 cells was determined by MTT assay. A fluorescence-activated cell sorting (FACS) analysis with annexin-V/propidium iodide (PI) and JC-1 staining were performed to determine cell apoptosis and the loss of mitochondrial membrane potential, respectively. Activation of caspase 3 was evaluated by a colorimetric assay. The mRNA expression levels of Bcl-2 and Bax were measured by reverse transcription polymerase chain reaction (RT-PCR). RESULTS: PZH, in a dose- and time-dependent manner, reduced viability and induced apoptosis of HT-29 cells. Moreover, PZH treatment resulted in the collapse of the mitochondrial membrane potential, activation of caspase 3, and an increase in the Bax/Bcl-2 ratio. CONCLUSION: PZH inhibits the growth of HT-29 cells by inducing cancer cell apoptosis via regulation of the Bcl-2 family and activation of caspase 3, which may, in part, explain its anticancer activity

2228- gera: 158537/di/ra

YIQI ZHUYU DECOCTION COMBINED WITH FOLFOX-4 AS FIRST-LINE THERAPY IN METASTATIC COLORECTAL CANCER. CAO B, LI ST, LI Z, DENG WL. chinese journal of integrated medicine. 2011;17(8):593-9 (eng). OBJECTIVE: To evaluate the efficacy and safety of vigi zhuyu decoction (YZD) combined with oxaliplatin plus 5flurouracil/leucovorin (FOLFOX-4) in the patients with metastatic colorectal cancer (MCRC). METHODS: A total of 120 patients with MCRC were randomly divided into the experimental group (FOLFOX-4 plus YZD, 60 cases) and the control group (FOLFOX-4 plus placebo, 60 cases), according to the sequence of hospitalization from January 2005 to December 2007. The treatment was supposed to be continued until disease progression (PD) or for 48 weeks (i.e., up to 24 cycles of FOLFOX-4). Response rate (RR), progression-free survival (PFS), overall survival (OS) and adverse events (AEs) were observed. RESULTS: RR was 41.5% in the experimental group and 34.0% in the control group [odds ratio (OR): 1.18, 95% CI: 0.77 to 1.82, P=0.432]. Median PFS were 9.0 months and 8.0 months, respectively [hazard ratio (HR): 0.78, 95% CI: 0.53 to 1.15, P=0.215]. Median OS were 21.0 months and 18.0 months (HR: 0.65, 95% CI: 0.43 to 0.99, P=0.043) and grade 3/4 AEs were 56.6% and 76.7% (OR: 0.61, 95% CI: 0.18 to 0.87, P=0.020), respectively. CONCLUSIONS: YZD combined with FOLFOX-4 chemotherapy significantly improved OS in this first-line trial in the patients with MCRC and significantly decreased grade 3/4 AEs. However, RR was not improved, and PFS did not reach statistical significance by the addition of YZD. The treatment of YZD combined with FOLFOX-4 may be necessary in order to optimize efficacy and safety.

2229- gera: 158547/di/ra

THE REGULATORY EFFECTS OF POLYPORUS POLYSACCHARIDE ON THE NUCLEAR FACTOR KAPPA B SIGNAL PATHWAY OF BLADDER CANCER CELLS STIMULATED BY BACILLUS CALMETTE-GUERIN. WEI JA, ZENG X, HAN L, HUANG Y. chinese journal of integrated medicine. 2011;17(7):531-6 (eng).

OBJECTIVE: To detect the effects of Polyporus polysaccharide (PPS), Bacillus Calmette-Guerin (BCG), and their combination on the nuclear factor kappa B (NF-kB) signaling pathway associated-gene expression and investigate the molecular mechanisms of the toxic-reducing effect of PPS in coordination with BCG against bladder cancer. METHODS: After T739 cells were treated with PPS, BCG and their combination, the changes in mRNA and protein expression of inhibitor of kappa B kinase beta (IKKβ), NF-κB subunit p65 (NF-kB p65), intracellular adhesion molecule 1 (ICAM1) and chemokine (C-c motif) ligand 2 (CCL2) in bladder cancer cell line T739 were determined by relative quantitative real-time PCR, Western blot, and flow cytometry (FCM). NF-kB p65 DNA-binding activity in T739 cell was detected by biotinylated probe-ELISA, and NF-κB p65 nuclear expression in T739 cell was observed by immunohistochemistry. RESULTS: Compared with the T739 control group, the mRNA expression of IKBKB (IKKβ), Rel A (NF-κB p65), ICAM1 and CCL2 in T739 cells treated with BCG were increased obviously (Ratio>2.0), as well as the expression of IKKβ, CCL2 and ICAM1 proteins. Meanwhile, NF-kB p65 DNA-binding activity and NF-kB p65 nuclear expression in T739 cells treated with BCG were up-regulated significantly (P<0.05). Compared with the control, the increased expression in T739 cells were simultaneously down-regulated after PPS treatment, except for ICAM1 protein expression. With cells treated with a combination of BCG and PPS, the expression of genes associated with the NF-kB signaling pathway, such as IKBKB, ICAM1 and CCL2, were all down-regulated compared to the BCG group, as well as Rel A mRNA expression, NF- кВ p65 DNA-binding activity and NF-κB p65 nuclear expression.CONCLUSIONS: PPS could inhibit the overactivation of the NF-kB signaling pathway induced by BCG in bladder cancer cells and accordingly attenuate the adverse reactions to BCG therapy.

2230- gera: 158549/di/ra

IN VITRO ANTIMETASTATIC EFFECT OF CHANGWEIQING THROUGH ANTIINVASION OF HYPOXIC COLORECTAL CARCINOMA LOVO CELLS. LI J, FAN ZZ, SUN J, XU JH. chinese journal of integrated medicine. 2011;17(7):517-24 (eng)

OBJECTIVE: To investigate the in vitro effects and the primary mechanisms of Changweiqing (, CWQ) on antimetastasis and antiinvasion of hypoxic colon carcinoma cells. In addition, to provide experimental evidence for the Chinese medicinal theory of "strengthening the body's resistance to eliminate pathogenic factors" in the treatment of colorectal cancer, including its invasion and metastasis.METHODS: First, CWQ sera were prepared with serum- pharmacology methods. Then, the modified hypoxic chamber was designed and flushed with 5% CO(2) and 95% N(2) at 37 °C to induce a hypoxic environment. The effect of CWQ serum on the viability of LoVo cells was tested with MTT cytotoxicity assay. The wound model and chamber model were established to estimate the effects of CWQ serum on migration and invasion of LoVo cells. The model for cell adhesion was established to evaluate the effect of CWQ serum on LoVo cells' adhesion. The gelatin zymography model was performed to determine the effects of CWQ serum on the activities of matrix metalloproteinase-2 (MMP-2) and matrix metalloproteinase-9 (MMP-9). The effects of CWQ serum on the hypoxia-inducible factor 1 lpha (HIF-1lpha) nuclear translocation and the mRNA level of vascular endothelial growth factor (VEGF) in LoVo cells were determined by Western blot and reverse transcriptionpolymerase chain reaction (RT-PCR) analyses, respectively.RESULTS: CWQ inhibited LoVo cells' migration based on wound healing assay. The inhibitive effect could reach about 68.00% under hypoxic culture and about 29.87%

under normoxic culture when cellswere treated with 10% CWQ serum for 24 h. The results from both cell invasion and adhesion assays showed that CWQ serum could dosedependently repress the invasion of LoVo cells and inhibit cells from adhering to extra cellular matrix (ECM). Under the hypoxic culture condition, RT-PCR analysis showed that 10% CWQ serum had down-regulated the expression of VEGF by 45.87%, and the result of Western blot analysis provided further evidence. The HIF-1α amount in the nucleus of the LoVo cells was also diminished in a dose-dependent manner. as shown by the Western blot. Gel zymogram assay revealed that CWQ serum could suppress the activities of MMP-2 and MMP-9. CONCLUSIONS: CWQ could effectively inhibit tumor metastasis in vitro The antimetastatic effects of CWQ were associated with the inhibition of cell motility, which was evidenced by inhibition of cell invasion and adhesion. The molecular mechanisms of the inhibition of tumor invasion by CWQ were due to the reduced expression of both HIF-1 α and VEGF and the suppression of MMP-2 and MMP-9 expression.

2231- gera: 158551/di/ra

EFFEČT OF ELECTRO-ACUPUNCTURE ON TUMOR NECROSIS FACTOR-A AND VASCULAR ENDOTHELIAL GROWTH FACTOR IN PERIPHERAL BLOOD AND JOINT SYNOVIA OF PATIENTS WITH RHEUMATOID ARTHRITIS. OUYANG BS, GAO J, CHE JL, ZHANG Y, LI J, YANG HZ, HU TY, YANG M, WU YJ, JI LL. chinese journal of integrated medicine. 2011;17(7):505-9 (eng).

OBJECTIVE: To observe the effect of electro-acupuncture (EA) on tumor necrosis factor-α (TNF-α) and vascular endothelial growth factor (VEGF) in peripheral blood and joint synovia in patients with rheumatoid arthritis (RA) to verify the clinical efficacy of EA. METHODS: Adopting randomized controlled principle, the 63 RA patients enrolled were assigned to two groups, the 32 patients in the EA group were treated with EA, and the 31 patients in the simple needling (SN) group treated with simple needling. According to the integral-local combining method, the acupoints were selected mainly from yang-meridian and local Ashi points (pain-point). EA or SN was applied every other day, 10 times as a course, and each patient received a total of 3 courses of treatment. RESULTS: Blood and synovial levels of TNF-α and VEGF were reduced significantly after treatment in both groups. The lowering (absolute value and difference value) of TNF-α as well as the absolute value of VEGF, either in blood or in synovia, were similar in the two groups (P>0.05); but the lowering of VEGF after treatment was more significant in the EA group than that in the SN group (P<0.05). CONCLUSION: EA could effectively lower the contents of TNF-α and VEGF in peripheral blood and joint synovia to improve the internal environment for genesis and development of RA, so as to enhance the clinical therapeutic effectiveness.

2232- gera: 158567/di/ra

PROTECTIVE EFFECT OF RENSHEN YANGRONG DECOCTION (人参养荣汤) ON BONE MARROW AGAINST RADIATION INJURY IN MOUSE. CHEN YZ, LIN F, ZHUANG GB, REN Y, LI PP. chinese journal of integrated medicine. 2011;17(6):453-8 (eng).

OBJECTIVE: To explore the effect of Renshen Yangrong Decoction (人参养荣汤, RYD) in protecting bone marrow from radiation injury. METHODS: One hundred and eighty Kuming mice were subjected to the three tests for anti-radiation injury effect evaluation, i.e. the test of peripheral white blood cell (WBC) count, the test of bone marrow nucleated cell count, and the bone marrow micronucleus test, using 60 mice for each test. The mice in each test were divided into 6 groups: the blank control group, the model control group, the positive control group treated by Shiyiwei Shengi Tablet (十一味参芪片, 1.0 g/kg), and three RYD groups treated with high (42.0 g/kg), moderate (21.0 g/kg), and low (10.5 g/kg) doses of crude drugs of RYD, with 10 mice in each group. The treatment was given by gastrogavage perfusion continuously for 7-14 days before mice received (60)Co-y ray radiation and continued until the end of the experiment. The body weights of the mice were monitored, the changes in peripheral WBC and bone marrow nucleated cells were counted, and the variation in bone

marrow micronucleated cells was observed on the respective appointed days. RESULTS: A significant decrease in body weight, peripheral WBC count, and bone marrow nucleated cell count, as well as marked changes in bone marrow micronucleated cells were observed in the mice after radiation, indicating that the radiation injury model was successfully established. As compared with the model control group, the decrease in body weight, peripheral WBC count, and bone marrow nucleated cell count, as well as the increase in bone marrow micronucleus cell count in the high dosage RYD treated group were obviously inhibited or lessened (P<0.05 or P<0.01). CONCLUSION: RYD showed obvious protective effect in mice with bone marrow injury induced by radiation.

2233- gera: 158592/di/ra

STUDY ON CANCERATION LAW OF GASTRIC MUCOSAL DYSPLASIA BASED ON SYNDROMES OF CHINESE MEDICINE. SHEN SW, HUI JP, YUWEN Y, WANG JH, CHEN LY, NIU Y, PENG N, YANG ZH, ZHAO Y. chinese journal of integrated medicine. 2011;17(5):346-50 (eng). OBJECTIVE: To study the syndrome evolution law of Chinese medicine (CM) in the patients with gastric mucosal dysplasia. METHODS: Three hundred and twenty four gastric mucosal dysplasia patients with deficiency and excess correlation syndromes were enrolled by a multi-center collaboration for two years' clinical follow-up to detect the levels of tumor supplied group of factors (TSGF) and carcino-embryonic antigen (CEA). RESULTS: Among the 324 cases, 29 cases turned cancer in the two years, and the canceration rate was 9.0%. The three syndromes with higher canceration rate were the damp-heat accumulating Wei syndrome concurring or combining with asthenia-cold in Pi and Wei syndrome for 16.7%; stagnation in Wei collaterals syndrome concurring or combining with asthenia of both qi and yin syndrome for 13.2%; stagnation of Gan and Wei qi syndrome concurring or combining with asthenia-cold in Pi and Wei syndrome for 8.0%, respectively. Among the three syndromes, the highest level of TSGF occurred in the former two syndromes. In the half year before carcinogenesis, the syndromes of the patients took on deficiency and excess concurrent syndromes, and the deficiency syndromes involving the qi and blood deficiency syndrome and the Shen deficiency syndrome accounting for 48.0%. CONCLUSIONS: Gastric mucosal dyspalsia canceration syndromes took on the polymorphism of excess and deficiency concurrent syndromes and had the characteristics of deficiency syndromes involving qi and blood deficiency syndrome and Shen-yin-yang deficiency syndrome.

2234- gera: 158596/di/ra

IMPROVING ACQUIRED IMMUNODEFICIENCY SYNDROME RELATED CANCER OUTCOMES THROUGH INTERNATIONAL COLLABORATION. NOKTA M. chinese journal of integrated medicine. 2011;17(5):326-8 (eng).

2235- gera: 158605/di/ra

OBJECTIFIED STUDY ON TONGUE IMAGES OF PATIENTS WITH LUNG CANCER OF DIFFERENT SYNDROMES. SU W, XU ZY, WANG ZQ, XU JT. chinese journal of integrated medicine. 2011;17(4):272-6 (eng).

OBJECTIVE: To describe the characteristic of tongue images of patients with lung cancer of different Chinese medicine (CM) syndromes and to reveal the elemental rule on the changes of the tongue images. METHODS: A total of 207 patients with lung cancer were divided into four syndrome groups according to the theory of CM: Fei and Shen deficiency syndrome (Group A, 72 cases), Pi deficiency and phlegm deficiency and phlegm) and Shen (deficiency and phlegm) deficiency syndrome (Group A, 72 cases), Pi (deficiency and phlegm) deficiency and phlegm dampness syndrome (Group B, 57 cases), phlegm-heat retention in Fei (Group C, 36 cases) and yin asthenia generating intrinsic heat syndrome (Group D, 42 cases). The tongue parameters were detected by tongue image digital analysis instrument, and the tongue images were described with qualitative, tongue color and quantitative analysis, respectively. The International Commission on Illumination (CIE) L-a-b (CIELAB) color model was used for the quantitative classification. RESULTS: There was a significant statistical difference between different syndrome groups of lung cancer on tongue color, coating color, and thickness of

tongue coating (P<0.01), and there was significant statistical difference between the four syndrome groups on Lab values of the tongue and coating (P<0.05). The correct identification rate of discriminant function on the raw data was 65.7%, including 72.2% for Group C, 69.4% for Group A, 69.0% for Group D and 54.4% for Group B. CONCLUSIONS: A tongue image digital analysis instrument can objectively describe the tongue features of patients with different syndromes of lung cancer. The tongue diagnosis is very important to syndrome differentiation in CM. Tongue diagnosis should be combined with some important characteristics of syndromes in the future to establish a "combination of four examination methods, including inspection, auscultation, interrogation, and pulse-feeling and palpation" in the tongue diagnostic system.

2236- gera: 158617/di/ra

MOXIBUSTION TREATMENT RESTORING THE INTESTINAL EPITHELIUM BARRIER IN RATS WITH CROHN'S DISEASE BY DOWN-REGULATING TUMOR NECROSIS FACTOR ALPHA, TUMOR NECROSIS FACTOR RECEPTOR 1, AND TUMOR NECROSIS FACT SHI Y, ZHOU EH, WU HG, ZHOU CL, WANG QY, QI L. chinese journal of integrated medicine. 2011;17(3):212-7 (eng). OBJECTIVE: To investigate whether moxibustion regulates tumor necrosis factor alpha (TNF-α), tumor necrosis factor receptor 1 (TNFR1), and TNFR2 in the intestinal mucosa and to explore whether moxibustion could be used by means of this mechanism, to repair the intestinal epithelium barrier disruption in Crohn's disease (CD). METHODS: The CD rat models were established by trinitrobenzene sulfonic acid (TNBs), randomly divided into a model control (MC) group, an herb-partition moxibustion (HPM) group, a mild-warm moxibustion (MWM) group, and a salicylazosulfapyridine (SASP) group, and all were compared with a normal control (NC) group. The HPM and MWM groups were treated by moxibustion at Tianshu (ST25) and Qihai (RN6) for 14 days, and the SASP group obtained the SASP solution orally for the same period of time. The intestinal epithelium morphology and TNF-a, TNFR1, and TNFR2 contents were observed by the transmission electron microscopy and enzyme linked immunosorbent assay RESULTS: The severity of morphological changes in CD intestinal epithelium was obviously improved, and the levels of TNF-α, TNFR1, and TNFR2 in the intestinal mucosa all significantly decreased in the HPM and MWM groups. However, there were no significant differences between the HPM and MWM groups. CONCLUSION: The moxibustion therapies (HPM and MWM) could reduce intestinal inflammation and restore intestinal epithelium barrier disruption in CD, which might be due to down-regulating TNF-α, TNFR1, and TNFR2 in intestinal mucosa and improving intestinal epithelium morphology.

2237- gera: 158640/di/ra

EVOLUTION OF THE MANAGEMENT OF COLORECTAL CANCER USING INTEGRATIVE MEDICINE. LI ST, CHI P. chinese journal of integrated medicine. 2011;17(1):73-9 (eng).

Colorectal cancer (CRC) remains one of the major causes of cancer death worldwide. In recent years, the development of new and effective management options, such as fluoro-2deoxy-D-glucose (FDG) positron emission tomography (PET), total mesorectal excision (TME) and monoclonal antibody novel "targeted" therapies has led to a considerable improvement in the outcome of this disease. In China, studies on CRC using integrative medicine (IM) have made remarkable progress. We therefore review the recent developments in CRC treatment through IM and Western medicine, including research studies such as the exploitation of Chinese herbs for the disruption of the tumor cell cycle or inhibition of tumor cell proliferation, induction of tumor cell apoptosis, improvement of the immune system, and the curative effect of chemotherapy. We also examine clinical studies such as those on special prescriptions and medicines and IM in anti-cancer therapy. Particularly, we analyze the advantages and disadvantages of management with IM, and propose a suggestion for the management of colorectal cancer with IM, such as screening for effective prescriptions. We also analyze Chinese medicine, studying the pharmacologic mechanism of its anti-cancer effect, further strengthening the

study of IM on CRC.

2238- gera: 158646/di/ra

EFFECT OF CHINESE DRUGS COMBINING WITH CHEMOTHERAPY ON QUALITY OF LIFE IN 146 CHILDREN WITH SOLID TUMOR. SHI X, TIAN L, ZHU XD, WANG HM, QIN H. chinese journal of integrated medicine.

2011;17(1):31-4 (eng).

OBJECTIVE: To explore the effect of Chinese drugs for supporting essence and strengthening Pi (SESP) combining with chemotherapy on the quality of life (QOL) in the children with solid tumor. METHODS: Using a digital table, 146 children with solid tumor were randomized into two groups, 77 in the control group and 69 in the treated group. They received conventional chemotherapy, but to the patients in the treated group, SESP were administered additionally. The patients' scores of QOL and adverse reaction occurred were compared. RESULTS: The states in the treated group were superior to those in the control group. Statistical analysis showed that in the first year, the two groups were different in terms of somatic function, systemic symptoms, and general status (P<0.05) and also in the occurrence of adverse reaction (P<0.01). In the second year, the difference was shown in aspects of somatic function and adverse reaction occurrence (P<0.05). CONCLUSION: Chinese drugs for SESP combining with chemotherapy could raise tumor patients' QOL by improving their somatic function and clinical symptoms.

2239- gera: 158915/di/ra

EFFECTS OF TONGMAI HUOXUE YIN (SEE TEXT) ON TUMOR NECROSIS FACTOR-ALPHA IN THE ACUTE CEREBRAL ISCHEMIA MODEL RAT. CUI SK, SUN Y, CHENG F, LIU CC. journal of tcm. 2011;31(3):228-31 (eng). OBJECTIVE: To observe the interfering action of Tongmai Huoxue Yin (see text) on the acute cerebral ischemia model rat. METHODS: Total 60 SD rats, 30 females and 30 males, were randomly divided into 4 groups, sham-operation group, model group, Nimodipine group and Tongmai Huoxue Yin group, 15 rats in each group. The acute cerebral ischemia rat model was duplicated, the middle cerebral artery (MCA) were ligated and the thread was inserted for the rats in the model group, Nimodipine group and Tongmai Huoxue Yin group, for the rats in the sham-operation group, the arteries were separated without ligature and the thread was not inserted. After the modeling has succeed, the water- decocted concentrated solution of 20-fold Tongmai Huoxue Yin clinical dosage was intragastrically administrated in a dose of 3 mL/100 g d divided into twice, 1.5 mL/100 g once. Distilled water 3 mL/100 g x d was intragastrically administrated, 1.5 mL/100 g once, for the rat in the model group, Nimodipne suspension 3 mL/100 g x d (0.6 mg / 100 g) for the Nimodipine group and 3 mL/100 g x d (5.4 g/100 g) for the Tongmai Huoxue Yin group, no drugs for the sham- operation group. And changes of tumor necrosis factor-alpha (TNF-alpha) contents in the serum and brain tissue were investigated. RESULTS: Compared with the model group, compared with the sham-operation group, serum TNF-alpha content at 5 h of focal cerebral ischemic ischemia in the model group started to increase and reached to the high peak at 12 h, but in both the Tongmai Huoxue Yin group and the Nimodipine group decreased in varying degrees at the same time; compared with the sham-operation group, brain TNF-alpha content at 6 h of focal cerebral ischemic ischemia in the model group started to increase and reached to the high peak at 12 h, but in both the Tongmai Huoxue Yin group and the Nimodipine group decreased in varying degrees, with the most obviously decreased at 24 h of ischemia Tongmai Huoxue Yin could significantly decrease TNF-alpha content in the brain tissue.CONCLUSION: Tongmai Huoxue Yin has a protective action on acute cerebral ischemia injury in the rat.

2240- gera: 158919/di/ra

ANALYSIS OF CLINICAL SYNDROMES IN 47 PATIENTS WITH PANCREATIC CANCER AT LATE STAGE. FANG L, SUN J, LI Q, LI CH, FAN ZZ. journal of tcm. 2011;31(3):182-4 (end)

OBJECTIVE: To analyze the law governing the distribution of traditional Chinese medicine (TCM) syndromes of pancreatic cancer. METHODS: The authors used retrospective study to

statistically analyze TCM syndromes of patients, separated complex syndromes and calculated the frequency of appearance of single syndromes. RESULTS: The patients mainly suffered from 4 syndromes: blood stasis syndrome, qi stagnation syndrome, qi (yang) deficiency syndrome, and phlegm dampness syndrome. The distribution of syndromes is rarely related to sex, age and morbid site of patients. CONCLUSION: Owing to complicated distribution of its syndromes, pancreatic cancer should be diagnosed and treated according to its characteristics of deficiency in origin and excess in superficiality.

2241- gera: 158944/di/ra

CLINICAL RESEARCH OF ACUPUNCTURE ON MALIGNANT TUMOR PATIENTS FOR IMPROVING DEPRESSION AND SLEEP QUALITY. FENG Y, WANG XY, LI SD, ZHANG Y, WANG HM, LI M, CAO K, YE YF, ZHANG Z. journal of tcm. 2011;31(3):199-202 (eng).

OBJECTIVE: To study the effect of acupuncture on depression and insomnia of malignant tumor patients. METHODS: Eighty cases of cancer related depression and sleep disorders were randomly divided into 2 groups: treatment 1 group (acupuncture n = 40) and control group (Fluoxetione n = 40). All patients were assessed by Self-rating Depression Scale (SDS), Hemilton Depression Rating Scale (HAMD) and Pittsburgh Sleep Quality Index (PSQI) after treatment for 30 days. RESULTS: Before treatment the SDS and HAMD scores of the trial group were 64.12 +/- 5.34 and 20.92 +/- 2.38, those of the control group were 64.24 +/- 4.98 and 20.72 +/- 2.74, after treatment the SDS and HAMD scores of the trial group were 43.64 +/- 5.28 and 9.88 +/- 1.27 respectively, significantly lower than those of the control group (50.76 +/- 5.42 and 13.72 +/- 2.05 respectively, both P < 0.05). Before treatment the PSQI score of the trial group and the control group were 14.48 +/- 1.71 and 13.92 +/- 2.59, after treatment the PSQI score of the trial group was 7.92 +/- 1.22 after treatment, significantly lower than those of the control group (11.44 +/- 1.89, P < 0.01). CONCLUSION: Acupuncture can effectively reduce malignant-related depression, improve sleep quality, and help to improve the quality of life of cancer

2242- gera: 158967/di/ra

AIDI INJECTION ALTERS THE EXPRESSION PROFILES OF MICRORNAS IN HUMAN BREAST CANCER CELLS. ZHANG H, ZHOU QM, LU YY, DU J, SU SB. journal of tcm. 2011;31(1):10-6 (eng).

OBJECTIVE: To investigate the effects of Aidi Injection on the MicroRNAs (miRNA) expression profiles in human breast cancer cells and explore the potential targets of the cancer treatment. METHODS: MCF-7 breast cancer cells were grown in RPMI 1640 medium supplemented with different concentrations of ADI. The inhibition of cell proliferation was measured by MTT assay. MCF-7 cells were treated by ADI with above 50% inhibiting concentration (IC50) for 48 h. The expression profiles of miRNA in ADI-treated and ADI-untreated MCF-7 cells were detected with miRNA microarray chips and the array data were verified by quantitative RT-PCR. MCF-7 cells were transiently transfected with miRNA mimics by liposome method. Potential mRNA targets were predicted by informatics analysis with TargetScan and PicTar software. RESULTS: ADI significantly inhibited the proliferation of MCF-7 cells in a dose-dependent manner. The IC50 of ADI was 55.71 mg/mL after treatment for 48 h. The 60 mg/mL ADI was used as the therapeutic drug concentration. Microarray analysis identified 45 miRNAs that were up-regulated and 55 miRNAs that were down-regulated in response to ADI treatment. Many ADI-induced miRNAs were related to breast cancers. The microarray data were validated by qRT-PCR. Ectopic expression of 100 nmol/L mir-126 mimics significantly inhibited the proliferation of MCF-7 cells. The 12 potential target genes of mir-126 were predicted by both TargetScan and PicTar software. CONCLUSIONS: The miRNA may serve as therapeutic targets, and the modulation of miRNA expression is an important mechanism of ADI inhibiting breast cancer cell arowth.

2243- gera: 159300/di/ra

[CASE OF RADIATION-INDUCED XEROSTOMIA]. QIAO B, ZHANG CH, XING H.. chinese acupuncture and

moxibustion. 2011;31(5):420 (chi).

2244- gera: 159433/di/ra

EVALUATION OF ACUPUNCTURE IN THE MANAGEMENT OF CHEMOTHERAPY-INDUCED PERIPHERAL **NEUROPATHY.** DONALD GK, TOBIN I, STRINGER J. acupunct med. 2011;29(3):230-3 (eng).

AIM: To clinically evaluate the effectiveness of acupuncture when used in the management of chemotherapy-induced peripheral neuropathy (PN). BACKGROUND: During cancer treatment, certain chemotherapies can cause varying degrees of PN. Patients' quality of life can be seriously impaired through loss of sensation, pain or mobility problems. Conventional medications routinely used to manage neuropathic symptoms have poor side-effect profiles and there is little or no evidence justifying their use to treat chemotherapy-related neurotoxicities. There are studies suggesting that acupuncture may be an effective therapy in treating PN across a number of different aetiologies. Design A retrospective service evaluation. METHOD: Patients (n=18) were referred for acupuncture by the medical staff and/ornurse specialists or they self-referred for treatment. A course of six weekly acupuncture sessions was offered to them, and their details were recorded on an evaluation form prior to session one. Points were selected by acupuncturists, based on patient presentation, and needles remained in situ for 30-45 min. Treatments took place in outpatient clinics, chemotherapy day case ward or a drop-in clinic based in a physiotherapy gym. The evaluation form was completed at the end of session 6 by a therapist who had not been involved in patient care. RESULTS: 82% (n=14) of patients reported an improvement in symptoms following their course of acupuncture; one patient with advanced disease died during the 6 weeks. Some patients derived additional benefits from the treatment including a reduction in analgesic use and improved sleeping patterns. The most common acupoints used were SP6 (n=18), ST36 (n=18) and LV3 (n=14). CONCLUSION: Although these results are encouraging, they are uncontrolled. They suggest that acupuncture could be an option for these patients and controlled trials using validated patient-reported outcome measures are justified.

2245- gera: 159452/di/ra

PILOT TESTING OF METHODS FOR EVALUATION OF **ACUPUNCTURE FOR EMESIS DURING RADIOTHERAPY:** A RANDOMISED SINGLE SUBJECT EXPERIMENTAL DESIGN. ENBLOM A, TOMASSON A, HAMMAR M, STEINECK G, BÖRJESON S. acupunct med. 2011;29(2):94-102 (eng)

BACKGROUND: Many acupuncture studies are of weak methodological quality, possibly due to lack of pilot testing. This pilot study tested design features, including test of feasibility, compliance to treatment and data collection, level of blinding success and the patients' potential perceived effects of the treatment, in preparation for an efficacy study. METHOD: A modified single subject experimental design was conducted. 10 cancer patients were randomised to verum penetrating acupuncture or non-penetrating sham needles for 30 min 2-3 times/week during radiotherapy over abdomen/pelvis. They answered test-retested emesis questions (r=0.527-1.0) covering nausea, vomiting, use of antiemetics, wellbeing and activities of daily living. RESULTS: Overall, the patients completed 98% of the 345 emesisquestionnaire days and 101 of the 115 offered treatments. All patients believed they received verum acupuncture. 10 patients experienced antiemetic effects, seven relaxation, five pain-reduction and five experienced sleep improvement. Two types of nausea questions showed absolute concordance (r=1.0) (n of observations=456). Nausea was experienced by one of five verum acupuncture treated patients (duration median 0% of the radiotherapy-days) and four of five sham acupuncture treated patients (duration median 24% of the radiotherapy-days). Patients experiencing nausea rated decreased wellbeing and performance of daily activities compared to patients free from nausea. CONCLUSIONS: All patients were blinded, complied with verum/sham treatments and data-collection, and believed they had effects of the received treatment. The methods for verum/sham treatment and data collection may thus be used in an adequately

powered randomised controlled study of the effect of acupuncture for radiotherapy-induced emesis.

2246- gera: 159469/di/ra

ACUPUNCTURE FOR CANCER-INDUCED BONE PAIN: A PILOT STUDY. PALEY CA, JOHNSON MI. acupunct med.

2011;29(1):71-3 (eng).

2247- gera: 159670/di/ra

CLINICAL EVALUATION OF ORAL FRUCTUS BRUCEAE OIL COMBINED WITH RADIOTHERAPY FOR THE TREATMENT OF ESOPHAGEAL CANCER. SHAN GY ZHANG S, LI GW, CHEN YS, LIU XA, WANG JK. chin j integr med. 2011;17(12):933-6 (eng).

OBJECTIVE: To evaluate the therapeutic efficacy and side effects of oral Fructus bruceae oil combined with radiotherapy in the treatment of esophageal cancer. METHODS: A total of 80 patients with esophageal cancer were equally and randomly divided into two groups. The patients in Group A were treated with radiotherapy (60-65 Gy, 6-7 weeks) and oral Fructus bruceae oil (20 mL, 3 times per day for 12 weeks), while the patients in Group B were treated with radiotherapy alone. The short-term effect was evaluated by Response Evaluation Criteria in Solid Tumors (RECIST) and quality of life (QOL) was evaluated by the Karnofsky scoring (KFS). The outcome measures included complete remission (CR) rate, partial remission (PR) rate, effective rate as CR+PR, patients' QOL and adverse effects. RESULTS: After 12-week treatment, the CR and CR+PR were significantly higher in Group A than those in Group B (P < 0.05). There was an improvement in esophageal obstruction of 87.5% and 60.0%, respectively, and in KFS of 84.6% and 43.9%, respectively, in Groups A and B. CONCLUSION: Oral medication with oral Fructus bruceae oil could effectively improve the efficacy of radiotherapy in esophageal cancer, including a reduction in esophageal obstruction, and also reduce the side effects of radiotherapy; thus it would be very promising for clinical application.

2248- gera: 159673/di/ra
IN VITRO AND IN VIVO INHIBITORY EFFECT OF THE COMBINATION OF WENXIA CHANGFU FORMULA [SEE TEXT] WITH CISPLATIN IN NON-SMALL CELL LUNG CANCER. JI XM, OUYANG B, LIU H, LIU GW, WU ZC, YU HY, WANG CY, WANG ZX, WANG WP. chin j integr med. 2011;17(12):908-16 (eng).

OBJECTIVE: To observe the effect of the combination of Wenxia Changfu Formula ([see text], WCF) with cisplatin (CDDP) on inhibiting non-small cell lung cancer (NSCLC) in vitro and In Vivo and explore its mechanism from its effect on cell cycle. METHODS: In vitro, WCF-containing serum was prepared and the rhubarb b1, emodin, and aconitine were detected qualitatively by high-performance liquid chromatogram (HPLC). A549 cell lines were treated with blank control (dimethyl sulfoxide), normal serum, normal serum with CDDP (1.25, 2.5, and 5.0 µg/mL, respectively), WCF containing serum plus different doses of CDDP (1.25, 2.5, and 5.0 µg/mL, respectively). The inhibitory effect was detected by 3- (4,5)-dimethylthiazo(-zy1)-3,5-diphenylterazolium bromide (MTT). The cell cycle was detected by flow cytometry. The protein and mRNA expressions of cyclin D1, proliferating cell nuclear antigen (PCNA), retinoblastoma (Rb), and p16 were observed with immunofluorescence and RT-PCR, respectively. In Vivo, nude mice xenograft model was established and grouped into the control, CDDP, WCF, and combination groups. The combination's inhibition of tumor growth and influence on the weight, spleen, and thymus gland were observed. RESULTS: The inhibitory rate of the combination against A549 cell lines excelled the CDDP alone significantly (P < 0.05); the combination showed a synergism inhibitory effect (Q=1.19). Compared with the monotherapy, the combination increased the cell percentage in G(0)/G(1) phase and decreased the cell percentage in S phase significantly (P <0.05); the protein and mRNA expressions of cyclin D1, PCNA, and Rb were significantly reduced; the protein and mRNA expressions of p16 were significantly enhanced Compared with the monotherapy, the combination inhibited the tumor growth significantly In Vivo and reduced the weight of tumor (P <0.05); compared with the CDDP group, the spleen and thymus gland index of the combination group were

enhanced significantly (P < 0.05). CONCLUSIONS: The combination of WCF with CDDP significantly inhibited the A549 cell lines proliferation in vitro and the growth of the tumor In Vivo; it inhibited effectively the atrophy of the immune organ caused by chemotherapy. The combination inhibited overproliferation of A549 cell lines by arresting the G(0) /G(1) phase of cell cycle and affecting the protein and mRNA expressions of cell cycle-related proteins, cyclin D1, etc.

2249- gera: 159708/di/ra
FUZHENG YILIU GRANULE INHIBITS THE GROWTH OF HEPATOCELLULAR CANCER BY REGULATING IMMUNE **FUNCTION AND INDUCING APOPTOSIS IN VIVO AND IN** VITRO. CAO ZY, CHEN XZ, LIAO LM, PENG J, HU HX, LIU ZZ, DU J. chin j integr med. 2011;17(9):691-7 (eng) OBJECTIVE: To study the inhibitory effect of Fuzheng Yiliu Granule (FYG) on hepatocellular cancer (HCC) and investigate the mechanism mediating its bioactivity. METHODS: H22 tumor-bearing ICR mice were treated with FYG [3.6 g/(kg•d)] for 5 days. Tumor volume and tumor weight, percentages of CD3(+), CD4(+), CD8(+), and natural killer (NK) cells in peripheral blood, tumor apoptosis and serum levels of interleukin-2 (IL-2), and tumor necrosis factor-α (TNF-α) were evaluated. FYG-containing serum was prepared from SD rats treated for 7 days [high dose .6 g/(kg•d); middle dose 1.8 g/(kg•d); low dose 0.9 g/(kg•d)]. Cell cycle, cell viability, and apoptosis were evaluated after HepG2 cell line was cultured in FYG-containing serum for 48 h. The levels of IL-2 and TNF-α in FYG-containing serum were also determined. RESULTS: FYG produced a potent antitumor effect (P<0.01) and induced marked apoptosis of the tumor tissue (P<0.05). Mice treated with FYG had higher percentages of CD3(+) and CD4(+ (P<0.05), and more NK cells (P<0.01) in the peripheral blood than those in the animals treated with normal saline. Mice receiving FYG had the highest serum levels of IL-2 and TNF-α (P<0.01). High-dose 3 FYG-containing serum significantly decreased HepG2 cell viability, inhibited cell proliferation (P<0.05), and induced apoptosis (P<0.01). In addition, the levels of IL-2 and TNF- α of high- dose-containing serum were higher than the blank serum (P<0.01). CONCLUSION: FYG could inhibit HCC growth by regulating immune function and inducing apoptosis of tumor cells in vivo and in vitro.

2250- gera: 159725/di/ra

YIQI ZHUYU DECOCTION COMBINED WITH FOLFOX-4 AS FIRST-LINE THERAPY IN METASTATIC COLORECTAL CANCER. CAO B, LI ST, LI Z, DENG WL. chin j integr med. 2011;17(8):593-9 (eng).

OBJECTIVE: To evaluate the efficacy and safety of yiqi zhuyu decoction (YZD) combined with oxaliplatin plus 5flurouracil/leucovorin (FOLFOX-4) in the patients with metastatic colorectal cancer (MCRC). METHODS: A total of 120 patients with MCRC were randomly divided into the experimental group (FOLFOX-4 plus YZD, 60 cases) and the control group (FOLFOX-4 plus placebo, 60 cases), according to the sequence of hospitalization from January 2005 to December 2007. The treatment was supposed to be continued until disease progression (PD) or for 48 weeks (i.e., up to 24 cycles of FOLFOX-4). Response rate (RR), progression-free survival (PFS), overall survival (OS) and adverse events (AEs) were observed. RESULTS: RR was 41.5% in the experimental group and 34.0% in the control group [odds ratio (OR): 1.18, 95% CI: 0.77 to 1.82, P=0.432]. Median PFS were 9.0 months and 8.0 months, respectively [hazard ratio (HR): 0.78, 95% CI: 0.53 to 1.15, P=0.215]. Median OS were 21.0 months and 18.0 months (HR: 0.65, 95% CI: 0.43 to 0.99, P=0.043) and grade 3/4 AEs were 56.6% and 76.7% (OR: 0.61, 95% CI: 0.18 to 0.87, P=0.020), respectively. CONCLUSIONS: YZD combined with FOLFOX-4 chemotherapy significantly improved OS in this first-line trial in the patients with MCRC and significantly decreased grade 3/4 AEs. However, RR was not improved, and PFS did not reach statistical significance by the addition of YZD. The treatment of YZD combined with FOLFOX-4 may be necessary in order to optimize efficacy and safety.

2251- gera: 159735/di/ra

THE REGULATORY EFFECTS OF POLYPORUS POLYSACCHARIDE ON THE NUCLEAR FACTOR KAPPA B SIGNAL PATHWAY OF BLADDER CANCER CELLS

STIMULATED BY BACILLUS CALMETTE-GUERIN. WEI JA, ZENG X, HAN L, HUANG Y. chin j integr med.

2011;17(7):531-6 (eng).

OBJECTIVE: To detect the effects of Polyporus polysaccharide (PPS), Bacillus Calmette-Guerin (BCG), and their combination on the nuclear factor kappa B (NF-kB) signaling pathway associated-gene expression and investigate the molecular mechanisms of the toxic-reducing effect of PPS in coordination with BCG against bladder cancer. METHODS: After T739 cells were treated with PPS, BCG and their combination, the changes in mRNA and protein expression of inhibitor of kappa B kinase beta (IKKβ), NF-κB subunit p65 (NF-kB p65), intracellular adhesion molecule 1 (ICAM1) and chemokine (C-c motif) ligand 2 (CCL2) in bladder cancer cell line T739 were determined by relative quantitative real-time PCR, Western blot, and flow cytometry (FCM). NF-kB p65 DNA-binding activity in T739 cell was detected by biotinylated probe-ELISA, and NF-kB p65 nuclear expression in T739 cell was observed by immunohistochemistry. RESULTS: Compared with the T739 control group, the mRNA expression of IKBKB (IKK β), Rel A (NF- κ B p65), ICAM1 and CCL2 in T739 cells treated with BCG were increased obviously (Ratio>2.0), as well as the expression of IKKβ, CCL2 and ICAM1 proteins. Meanwhile, NF-kB p65 DNA-binding activity and NF-kB p65 nuclear expression in T739 cells treated with BCG were up-regulated significantly (P<0.05). Compared with the control, the increased expression in T739 cells were simultaneously down-regulated after PPS treatment, except for ICAM1 protein expression. With cells treated with a combination of BCG and PPS, the expression of genes associated with the NF-kB signaling pathway, such as IKBKB, ICAM1 and CCL2, were all down-regulated compared to the BCG group, as well as Rel A mRNA expression, NF- кВ p65 DNA-binding activity and NF-kB p65 nuclear expression CONCLUSIONS: PPS could inhibit the over-activation of the NF-kB signaling pathway induced by BCG in bladder cancer cells and accordingly attenuate the adverse reactions to BCG therapy.

2252- gera: 159737/di/ra

IN VITRO ANTIMETASTATIC EFFECT OF CHANGWEIQING THROUGH ANTIINVASION OF HYPOXIC COLORECTAL CARCINOMA LOVO CELLS LI J, FAN ZZ, SUN J, XU JH. chin j integr med. 2011;17(7):517-24 (eng).

OBJECTIVE: To investigate the in vitro effects and the primary mechanisms of Changweiqing (, CWQ) on antimetastasis and antiinvasion of hypoxic colon carcinoma cells. In addition, to provide experimental evidence for the Chinese medicinal theory of "strengthening the body's resistance to eliminate pathogenic factors" in the treatment of colorectal cancer, including its invasion and metastasis. METHODS: First, CWQ sera were prepared with serum- pharmacology methods. Then, the modified hypoxic chamber was designed and flushed with 5% CO(2) and 95% N(2) at 37 °C to induce a hypoxic environment. The effect of CWQ serum on the viability of LoVo cells was tested with MTT cytotoxicity assay. The wound model and chamber model were established to estimate the effects of CWQ serum on migration and invasion of LoVo cells. The model for cell adhesion was established to evaluate the effect of CWQ serum on LoVo cells' adhesion. The gelatin zymography model was performed to determine the effects of CWQ serum on the activities of matrix metalloproteinase-2 (MMP-2) and matrix metalloproteinase-9 (MMP-9). The effects of CWQ serum on the hypoxia-inducible factor 1 α (HIF-1 α) nuclear translocation and the mRNA level of vascular endothelial growth factor (VEGF) in LoVo cells were determined by Western blot and reverse transcriptionpolymerase chain reaction (RT-PCR) analyses, respectively. RESULTS: CWQ inhibited LoVo cells' migration based on wound healing assay. The inhibitive effect could reach about 68.00% under hypoxic culture and about 29.87% under normoxic culture when cells were treated with 10% CWQ serum for 24 h. The results from both cell invasion and adhesion assays showed that CWQ serum could dosedependently repress the invasion of LoVo cells and inhibit cells from adhering to extra cellular matrix (ECM). Under the hypoxic culture condition, RT-PCR analysis showed that 10% CWQ serum had down-regulated the expression of VEGF by 45.87%, and the result of Western blot analysis provided

further evidence. The HIF-1 α amount in the nucleus of the LoVo cells was also diminished in a dose-dependent manner, as shown by the Western blot. Gel zymogram assay revealed that CWQ serum could suppress the activities of MMP-2 and MMP-9. CONCLUSIONS: CWQ could effectively inhibit tumor metastasis in vitro The antimetastatic effects of CWQ were associated with the inhibition of cell motility, which was evidenced by inhibition of cell invasion and adhesion. The molecular mechanisms of the inhibition of tumor invasion by CWQ were due to the reduced expression of both HIF-1 α and VEGF and the suppression of MMP-2 and MMP-9 expression.

2253- gera: 159739/di/ra

EFFECT OF ELECTRO-ACUPUNCTURE ON TUMOR NECROSIS FACTOR-A AND VASCULAR ENDOTHELIAL GROWTH FACTOR IN PERIPHERAL BLOOD AND JOINT SYNOVIA OF PATIENTS WITH RHEUMATOID ARTHRITIS. OUYANG BS, GAO J, CHE JL, ZHANG Y, LI J, YANG HZ, HU TY, YANG M, WU YJ, JI LL. chin j integr med. 2011;17(7):505-9 (eng).

OBJECTIVE: To observe the effect of electro-acupuncture (EA) on tumor necrosis factor- α (TNF- α) and vascular endothelial growth factor (VEGF) in peripheral blood and joint synovia in patients with rheumatoid arthritis (RA) to verify the clinical efficacy of EA. METHODS: Adopting randomized controlled principle, the 63 RA patients enrolled were assigned to two groups, the 32 patients in the EA group were treated with EA, and the 31 patients in the simple needling (SN) group treated with simple needling. According to the integral-local combining method, the acupoints were selected mainly from vang-meridian and local Ashi points (pain-point). EA or SN was applied every other day, 10 times as a course, and each patient received a total of 3 courses of treatment. RESULTS: Blood and synovial levels of TNF-α and VEGF were reduced significantly after treatment in both groups. The lowering (absolute value and difference value) of TNF- α as well as the absolute value of VEGF, either in blood or in synovia, were similar in the two groups (P>0.05); but the lowering of VEGF after treatment was more significant in the EA group than that in the SN group (P<0.05). CONCLUSION: EA could effectively lower the contents of TNF-α and VEGF in peripheral blood and joint synovia to improve the internal environment for genesis and development of RA, so as to enhance the clinical therapeutic effectiveness.

2254- gera: 159755/di/ra

PROTECTIVE EFFECT OF RENSHEN YANGRONG DECOCTION (人参养荣汤) ON BONE MARROW AGAINST RADIATION INJURY IN MOUSE. CHEN YZ, LIN F, ZHUANG GB, REN Y, LI PP. chin j integr med. 2011;17(6):453-8 (eng). OBJECTIVE: To explore the effect of Renshen Yangrong Decoction (人参养荣汤, RYD) in protecting bone marrow from radiation injury. METHODS: One hundred and eighty Kuming mice were subjected to the three tests for anti-radiation injury effect evaluation, i.e. the test of peripheral white blood cell (WBC) count, the test of bone marrow nucleated cell count, and the bone marrow micronucleus test, using 60 mice for each test. The mice in each test were divided into 6 groups: the blank control group, the model control group, the positive control group treated by Shiyiwei Shenqi Tablet (十一味参芪片, 1.0 g/kg), and three RYD groups treated with high (42.0 g/kg), moderate (21.0 g/kg), and low (10.5 g/kg) doses of crude drugs of RYD, with 10 mice in each group. The treatment was given by gastrogavage perfusion continuously for 7-14 days before mice received (60)Co-y ray radiation and continued until the end of the experiment. The body weights of the mice were monitored, the changes in peripheral WBC and bone marrow nucleated cells were counted, and the variation in bone marrow micronucleated cells was observed on the respective appointed days. RESULTS: A significant decrease in body weight, peripheral WBC count, and bone marrow nucleated cell count, as well as marked changes in bone marrow micronucleated cells were observed in the mice after radiation, indicating that the radiation injury model was successfully established. As compared with the model control group, the decrease in body weight, peripheral WBC count, and bone marrow nucleated cell count, as well as the increase in bone

marrow micronucleus cell count in the high dosage RYD treated group were obviously inhibited or lessened (P<0.05 or P<0.01). CONCLUSION: RYD showed obvious protective effect in mice with bone marrow injury induced by radiation.

2255- gera: 159764/di/ra

STUDY ON CANCERATION LAW OF GASTRIC MUCOSAL DYSPLASIA BASED ON SYNDROMES OF CHINESE MEDICINE. SHEN SW, HUI JP, YUWEN Y, WANG JH, CHEN LY, NIU Y, PENG N, YANG ZH, ZHAO Y. chin j integr med. 2011;17(5):346-50 (eng).

OBJECTIVE: To study the syndrome evolution law of Chinese medicine (CM) in the patients with gastric mucosal dysplasia. METHODS: Three hundred and twenty four gastric mucosal dysplasia patients with deficiency and excess correlation syndromes were enrolled by a multi-center collaboration for two years' clinical follow-up to detect the levels of tumor supplied group of factors (TSGF) and carcino-embryonic antigen (CEA). RESULTS: Among the 324 cases, 29 cases turned cancer in the two years, and the canceration rate was 9.0%. The three syndromes with higher canceration rate were the damp-heat accumulating Wei syndrome concurring or combining with asthenia-cold in Pi and Wei syndrome for 16.7%; stagnation in Wei collaterals syndrome concurring or combining with asthenia of both gi and yin syndrome for 13.2%; stagnation of Gan and Wei qi syndrome concurring or combining with asthenia-cold in Pi and Wei syndrome for 8.0%, respectively. Among the three syndromes, the highest level of TSGF occurred in the former two syndromes. In the half year before carcinogenesis, the syndromes of the patients took on deficiency and excess concurrent syndromes, and the deficiency syndromes involving the qi and blood deficiency syndrome and the Shen deficiency syndrome accounting for 48.0%. CONCLUSIONS: Gastric mucosal dyspalsia canceration syndromes took on the polymorphism of excess and deficiency concurrent syndromes and had the characteristics of deficiency syndromes involving qi and blood deficiency syndrome and Shen-yin-yang deficiency syndrome.

2256- gera: 159768/di/ra

IMPROVING ACQUIRED IMMUNODEFICIENCY SYNDROME RELATED CANCER OUTCOMES THROUGH INTERNATIONAL COLLABORATION. NOKTA M. chin j integr med. 2011;17(5):326-8 (eng).

2257- gera: 159777/di/ra

OBJECTIFIED STUDY ON TONGUE IMAGES OF PATIENTS WITH LUNG CANCER OF DIFFERENT SYNDROMES. SU W, XU ZY, WANG ZQ, XU JT. chin j integr med. 2011:17(4):272-6 (eng).

OBJECTIVE: To describe the characteristic of tongue images of patients with lung cancer of different Chinese medicine (CM) syndromes and to reveal the elemental rule on the changes of the tongue images. METHODS: A total of 207 patients with lung cancer were divided into four syndrome groups according to the theory of CM: Fei and Shen deficiency syndrome (Group A, 72 cases), Pi deficiency and phlegm deficiency and phlegm) and Shen (deficiency and phlegm) deficiency syndrome (Group A, 72 cases), Pi (deficiency and phlegm) deficiency and phlegm dampness syndrome (Group B, 57 cases), phlegm-heat retention in Fei (Group C, 36 cases) and yin asthenia generating intrinsic heat syndrome (Group D, 42 cases). The tongue parameters were detected by tongue image digital analysis instrument, and the tongue images were described with qualitative, tongue color and quantitative analysis, respectively. The International Commission on Illumination (CIE) L•a•b (CIELAB) color model was used for the quantitative classification. RESULTS: There was a significant statistical difference between different syndrome groups of lung cancer on tongue color, coating color, and thickness of tongue coating (P<0.01), and there was significant statistical difference between the four syndrome groups on Lab values of the tongue and coating (P<0.05). The correct identification rate of discriminant function on the raw data was 65.7%, including 72.2% for Group C, 69.4% for Group A, 69.0% for Group D and 54.4% for Group B. CONCLUSIONS: A tongue image digital analysis instrument can objectively describe the tongue features of patients with different syndromes of lung cancer. The tongue diagnosis is very important to syndrome

differentiation in CM. Tongue diagnosis should be combined with some important characteristics of syndromes in the future to establish a "combination of four examination methods, including inspection, auscultation, interrogation, and pulsefeeling and palpation" in the tongue diagnostic system

2258- gera: 159781/di/ra

AN OVERVIEW OF CURRENT ORIENTAL MEDICINE HERBAL CANCER RESEARCH IN KOREA. YOON J, YOO HS, LEE YW, CHO CK. chin j integr med. 2011;17(4):251-6

Cancer is the number one cause of death in Korea with annual mortalities of 69 780. Research suggests one in every four Koreans will end up getting cancer at some point in their life time. With these persistent threats, strive for cancer cure is continued. Ten years of Korea's oriental medicine herbal research on cancer have been reviewed. Researches between the years of 2000 and 2010 are analyzed in terms of their published year, study types, tested subjects, testing measures, cancer types, and institutions. In the past ten years, cancer researches have blossomed from null to full in Korean peninsula, and further development is much anticipated in the next ten years to come.

2259- gera: 159782/di/ra

INTEGRATIVE ONCOLOGY IN AUSTRALIA. WEBER D, WHEAT JM, CURRIE GM. chin j integr med. 2011;17(4):246-50 (eng).

The use of alternative medicine (AM) in Australia dates back to its earliest times, with the indigenous medicine of the aboriginal peoples and the folk medicine of the early English settlers. AM has until recently existed quite separately from Western biomedicine (WB) and there has been little integration of the two systems. Now, referred to as complementary medicine (CM), there has been a movement over the last 20 years to include CM in WB mainstream practices. Varying degrees of success have been reported but for the discipline of oncology. Medical oncology (MO) in Australia is demanding CM provide high levels of evidence for any inclusion in cancer protocols. There are just now the beginnings of this integration, particularly as CM is now being taught in the public university system to a PhD level as well as the public demand for their medical doctors to communicate with their CM practitioners. MO specialists are now open to a dialogue with their CM counterparts.

2260- gera: 159786/di/ra

CLINICAL BENEFITS AS ENDPOINTS IN ADVANCED NON-SMALL CELL LUNG CANCER TREATED WITH INTEGRATIVE MEDICINE. XUE D, LI PP. chin j integr med. 2011;17(3):228-31 (eng).

"Living with cancer" and symptom control are the features and advantages of integrative medicine in advanced non-small cell lung cancer (NSCLC) treatment. However, with the current concept of response evaluation criteria by the WHO and RECIST, it is difficult to exhibit the above characteristics. Clinical benefit (CB) is designed as an endpoint recently widely understood and accepted in oncology clinical trials. With the review of its definition and development, we suggest CB to be used as an endpoint in advanced NSCLC treatment with integrative medicine. CB should encompass two connotations: one is improved quality of life and symptom control and the other is disease control rate (DCR), including complete response (CR), partial response (PR), and stable disease (SD). We need to design randomized controlled trials (RCT) to investigate the interrelationship of CB rate and survival to provide high-grade evidence proving that advanced lung cancer patients could really benefit from integrative medicine treatment.

2261- gera: 159788/di/ra

EFFECTS OF INOTODIOL EXTRACTS FROM INONOTUS **OBLIQUUS ON PROLIFERATION CYCLE AND APOPTOTIC** GENE OF HUMAN LUNG ADENOCARCINOMA CELL LINE A549. ZHONG XH, WANG LB, SUN DZ. chin j integr med. 2011;17(3):218-23 (eng).

OBJECTIVE: To observe the proliferation inhibition, apoptosis, and cell proliferation cycle of human lung carcinoma cell line A549 treated with Inotodiol extracts from Inonotus obliquus

and explore the possibility of Inotodiol extracts from Inonotus obliquus as a new tumor chemopreventive drug. METHODS: Human lung cancer cell line A549 was treated with different concentrations of Inotodiol, the effects of Inotodiol on cell apoptosis, the expression of Ki-67, Bcl-2, Bax, and p53 and cell cycle were detected by TUNEL assay, immunohistochemistry, and flow cytometry assay respectively. RESULTS: Inotodiol extracts had antiproliferation effect on human lung carcinoma cell line A549. The expression of Ki- 67 decreased with the increase of Inotodiol concentration and exposure time (P<0.05), in a dose-dependent and timedependent manner. The typical characteristics of the apoptosis of A549 cells treated with Inotodiol were observed, and the apoptotic rate of A549 cell at 48 h was the highest by TUNEL assay. Inotodiol arrested A549 cells in the S phase, and apoptotic peak was observed by flow cytometry. Immunocytochemistry indicated that the expression of Bcl-2 protein decreased, while the expression of p53 and Bax proteins increased inA549 cells treated with Inotodiol, compared with the control cells (P<0.05). CONCLUSION: Inotodiol can inhibit proliferation and induce the apoptosis of A549 cells, and its molecular mechanism may be associated with the up-regulating expression of p53 and bax proteins and down- regulating expression of Bcl-2 protein, which arrested A549 cells in S phase.

2262- gera: 159789/di/ra

MOXIBUSTION TREATMENT RESTORING THE INTESTINAL EPITHELIUM BARRIER IN RATS WITH CROHN'S DISEASE BY DOWN-REGULATING TUMOR NECROSIS FACTOR ALPHA, TUMOR NECROSIS FACTOR RECEPTOR 1, AND TUMOR NECROSIS FACT SHI Y, ZHOU EH, WU HG, ZHOU CL, WANG QY, QI L. chin j integr med. 2011;17(3):212-7 (eng)

OBJECTIVE: To investigate whether moxibustion regulates tumor necrosis factor alpha (TNF-α), tumor necrosis factor receptor 1 (TNFR1), and TNFR2 in the intestinal mucosa and to explore whether moxibustion could be used by means of this mechanism, to repair the intestinal epithelium barrier disruption in Crohn's disease (CD).METHODS: The CD rat models were established by trinitrobenzene sulfonic acid (TNBs), randomly divided into a model control (MC) group, an herb-partition moxibustion (HPM) group, a mild-warm moxibustion (MWM) group, and a salicylazosulfapyridine (SASP) group, and all were compared with a normal control (NC) group. The HPM and MWM groups were treated by moxibustion at Tianshu (ST25) and Qihai (RN6) for 14 days, and the SASP group obtained the SASP solution orally for the same period of time. The intestinal epithelium morphology and TNF-a, TNFR1, and TNFR2 contents were observed by the transmission electron microscopy and enzyme linked immunosorbent assay RESULTS: The severity of morphological changes in CD intestinal epithelium was obviously improved, and the levels of TNF-α, TNFR1, and TNFR2 in the intestinal mucosa all significantly decreased in the HPM and MWM groups. However, there were no significant differences between the HPM and MWM groups. CONCLUSION: The moxibustion therapies (HPM and MWM) could reduce intestinal inflammation and restore intestinal epithelium barrier disruption in CD, which might be due to down-regulating TNF-α, TNFR1, and TNFR2 in intestinal mucosa and improving intestinal epithelium morphology.

2263- gera: 159812/di/ra
EVOLUTION OF THE MANAGEMENT OF COLORECTAL CANCER USING INTEGRATIVE MEDICINE. LI ST, CHI P. chin j integr med. 2011;17(1):73-9 (eng).

Colorectal cancer (CRC) remains one of the major causes of cancer death worldwide. In recent years, the development of new and effective management options, such as fluoro-2 deoxy-D-glucose (FDG) positron emission tomography (PET), total mesorectal excision (TME) and monoclonal antibody novel "targeted" therapies has led to a considerable improvement in the outcome of this disease. In China, studies on CRC using integrative medicine (IM) have made remarkable progress. We therefore review the recent developments in CRC treatment through IM and Western medicine, including research studies such as the exploitation of Chinese herbs for the disruption of the tumor cell cycle or

inhibition of tumor cell proliferation, induction of tumor cell apoptosis, improvement of the immune system, and the curative effect of chemotherapy. We also examine clinical studies such as those on special prescriptions and medicines and IM in anti-cancer therapy. Particularly, we analyze the advantages and disadvantages of management with IM, and propose a suggestion for the management of colorectal cancer with IM, such as screening for effective prescriptions. We also analyze Chinese medicine, studying the pharmacologic mechanism of its anti-cancer effect, further strengthening the study of IM on CRC.

2264- gera: 159818/di/ra

EFFECT OF CHINESE DRUGS COMBINING WITH **CHEMOTHERAPY ON QUALITY OF LIFE IN 146 CHILDREN** WITH SOLID TUMOR. SHI X, TIAN L, ZHU XD, WANG HM, QIN H. **chin j integr med.** 2011;17(1):31-4 (eng). OBJECTIVE: To explore the effect of Chinese drugs for supporting essence and strengthening Pi (SESP) combining with chemotherapy on the quality of life (QOL) in the children with solid tumor. METHODS: Using a digital table, 146 children with solid tumor were randomized into two groups, 77 in the control group and 69 in the treated group. They received conventional chemotherapy, but to the patients in the treated group, SESP were administered additionally. The patients' scores of QOL and adverse reaction occurred were compared. RESULTS: The states in the treated group were superior to those in the control group. Statistical analysis showed that in the first year, the two groups were different in terms of somatic function, systemic symptoms, and general status (P<0.05) and also in the occurrence of adverse reaction (P<0.01). In the second year, the difference was shown in aspects of somatic function and adverse reaction occurrence (P<0.05). CONCLUSION: Chinese drugs for SESP combining with chemotherapy could raise tumor patients' QOL by improving their somatic function and clinical symptoms.

2265- gera: 159904/di/ra

IMPACT OF RELAXATION TRAINING ACCORDING TO YOGA IN DAILY LIFE® SYSTEM ON SELF-ESTEEM AFTER BREAST CANCER SURGERY. x. j altern complement med. 2011;17(12):1157-64 (eng).

2011;17(12):1157-64 (eng).
OBJECTIVES: The purpose of this pilot study was to gather

information on the immediate and short-term effects of relaxation training according to the Yoga In Daily Life(®) system on the self-esteem of patients with breast cancer. DESIGN: This is a parallel-groups design. SETTINGS/LOCATION: Baseline interventions took place at the Institute for Oncology of Ljubljana (Slovenia). At discharge, the experimental group was issued with audiocassette recordings containing the instructions for relaxation training to be practiced individually at home for an additional 3 weeks. SUBJECTS: The convenience sample of 32 patients with breast cancer was recruited from an accessible population of hospitalized women. Patients were randomized to the experimental (n=16) and to the control group (n=16). Interventions: Both groups received the same standard physiotherapy for 1 week, while the experimental group additionally received a group relaxation training sessions according to the Yoga in Daily Life(®) system. At discharge, the experimental group was issued with audiocassette recordings containing similar instructions for relaxation training to be practiced individually at home for an additional 3 weeks. OUTCOME MEASURES: Outcome measures were obtained by blinded investigators (physiotherapists) using standardized questionnaires (Rosenberg Self-Esteem Scale) at baseline (after the surgery); at 1 week (1 week postattendance; at discharge); and at 4 weeks (4 weeks postattendance); prior the commencement of radiation. RESULTS: Analysis of variance showed that there were statistically significant differences between the experimental and control group in all measuring self-esteem scores over the study period (p<0.0005). At the same time, the control group's scores remained unchanged over the study period (p>0.05). CONCLUSIONS: The results indicate that relaxation training according to the Yoga in Daily Life system could be a useful clinical physiotherapy intervention for patients who have breast cancer and who are experiencing low self- esteem. Although this kind of relaxation training can be applied to clinical oncology in Slovenia, more

studies need to be done.

2266- gera: 159927/di/ra

A CASE OF AROMATASE INHIBITOR (ANASTROZOLE)-INDUCED SIDE-EFFECTS SUCCESSFULLY TREATED WITH KAMPO MEDICINES. CHINO A, OKAMOTO H, HIRASAKI Y, UEDA K, OGAWA K, NAMIKI T. j altern complement med. 2011;17(11):1075-7 (eng). OBJECTIVES: Breast cancer is the fourth most frequent cause of death, and it is currently the most frequent cause of death among Japanese women. As to breast cancer therapy, lengthy hormonal therapy is very important for the treatment and prevention of recurrence. Aromatase inhibitors (Als) are the initial drug of choice for postoperative adjuvant therapy of breast cancer in Japan. Als require long-term use and occasionally cause serious side-effects. In this report, the effects of Kampo medicines (Japanese traditional medicines) on Als-induced side-effects are described. SUBJECT: A 55year-old woman visited the Kampo outpatient department of Chiba University Hospital for atypical genital bleeding and arthralgia. At the age of 54, she suffered from left breast cancer and underwent left total mastectomy followed by chemotherapy for 6 months. Afterwards, 1 mg/day of anastrozole, one of the Als, was used for therapy. Three (3) months later, atypical genital bleeding from vaginal mucosa and joint pains of bilateral hands and knees occurred as sideeffects of anastrozole. Her attending doctor could only prescribe nonsteroidal external medicine for the inflammation of vaginal mucosa and do close follow-up. However, her symptoms showed no improvement. INTERVENTIONS AND OUTCOME: Her deficiency of both ki (qi) and ketsu (Blood) was diagnosed based on Kampo diagnostics. Juzentaihoto was used for treatment. After taking juzentaihoto for 5 weeks, the atypical genital bleeding disappeared, and she no longer need topical medicine. Because her arthralgia showed no improvement, powdered processed aconitine root was added. After taking 3.0 g/day of this medication, her arthralgia almost completely disappeared. CONCLUSIONS: Controlling the sideeffects is a clinical issue from the viewpoint of adherence to drug treatment. Kampo therapy should be considered one of the choices for side-effects in the process of cancer treatment.

2267- gera: 160014/di/re

PATIENT EDUCATION INTEGRATED WITH ACUPUNCTURE FOR RELIEF OF CANCER-RELATED FATIGUE RANDOMIZED CONTROLLED FEASIBILITY

STUDY. Johnston MF, Hays RD, Subramanian SK, ElashoffRM, Axe EK, Li JJ, Kim I, Vargas RB, Lee J, Yang L, Hui KK.. bmc complement altern med. 2011;11:49 (eng). Background: Cancer-related fatigue (CRF) is a prominent clinical problem. There are calls for multi-modal interventions. Methods: We assessed the feasibility of delivering patient education integrated with acupuncture for relief of CRF in a pilot randomized controlled trial (RCT) with breast cancer survivors using usual care as control. Social cognitive and integrative medicine theories guided integration of patient education with acupuncture into a coherent treatment protocol. The intervention consisted of two parts. First, patients were taught to improve self-care by optimizing exercise routines, improving nutrition, implementing some additional evidencebased cognitive behavioral techniques such as stress management in four weekly 50-minute sessions. Second, patients received eight weekly 50-minute acupuncture sessions. The pre-specified primary outcome, CRF, was assessed with the Brief Fatigue Inventory (BFI). Secondary outcomes included three dimensions of cognitive impairment assessed with the FACT-COGv2. Results: Due to difficulties in recruitment, we tried several methods that led to the development of a tailored recruitment strategy: we enlisted oncologists into the core research team and recruited patients completing treatment from oncology waiting rooms. Compared to usual care control, the intervention was associated with a 2.38-point decline in fatigue as measured by the BFI (90% Confidence Interval from 0.586 to 5.014; p < 0.10). Outcomes associated with cognitive dysfunction were not statistically significant. Conclusions: Patient education integrated with acupuncture had a very promising effect that warrants conducting a larger RCT to confirm findings. An effective recruitment strategy will be essential for the successful

execution of a larger-scale trial.

2268- gera: 160133/di/me

IS ACUPUNCTURE EFFECTIVE IN REDUCING NAUSEA AND VOMITING IN PATIENTS UNDERGOING CHEMOTHERAPY? MEEKINS K. physician assistant studies student scholarship. philadelphia college of osteopathic medicine. 2011; : (eng).

2269- gera: 160675/di/tp
ACUPUNCTURE AND ACUPRESSURE FOR CHEMOTHERAPY-ASSOCIATED NAUSEA AND VOMITING, FONNEBO V. cam-cancer consortium. 2011; :9p (eng).

2270- gera: 160723/di/ra

EFFECTS OF TONGMAI HUOXUE YIN (SEE TEXT) ON TUMOR NECROSIS FACTOR-ALPHA IN THE ACUTE CEREBRAL ISCHEMIA MODEL RAT. CUI SK, SUN Y, CHENG F, LIU CC. j tradit chin med. 2011;31(3):228-31

OBJECTIVE: To observe the interfering action of Tongmai Huoxue Yin (see text) on the acute cerebral ischemia model rat. METHODS: Total 60 SD rats, 30 females and 30 males, were randomly divided into 4 groups, sham-operation group,

model group, Nimodipine group and Tongmai Huoxue Yin group, 15 rats in each group. The acute cerebral ischemia rat model was duplicated, the middle cerebral artery (MCA) were ligated and the thread was inserted for the rats in the model group, Nimodipine group and Tongmai Huoxue Yin group, for the rats in the sham-operation group, the arteries were separated without ligature and the thread was not inserted. After the modeling has succeed, the water- decocted concentrated solution of 20-fold Tongmai Huoxue Yin clinical dosage was intragastrically administrated in a dose of 3 mL/100 g d divided into twice, 1.5 mL/100 g once. Distilled water 3 mL/100 g x d was intragastrically administrated, 1.5 mL/100 g once, for the rat in the model group, Nimodipne suspension 3 mL/100 g x d (0.6 mg / 100 g) for the Nimodipine group and 3 mL/100 g x d (5.4 g/100 g) for the Tongmai Huoxue Yin group, no drugs for the sham- operation group. And changes of tumor necrosis factor-alpha (TNF-alpha) contents in the serum and brain tissue were investigated. RESULTS: Compared with the model group, compared with the sham-operation group, serum TNF-alpha content at 5 h of focal cerebral ischemic ischemia in the model group started to increase and reached to the high peak at 12 h, but in both the Tongmai Huoxue Yin group and the Nimodipine group decreased in varying degrees at the same time; compared with the sham-operation group, brain TNF-alpha content at 6 h of focal cerebral ischemic ischemia in the model group started to increase and reached to the high peak at 12 h, but in both the Tongmai Huoxue Yin group and the Nimodipine group decreased in varying degrees, with the most obviously decreased at 24 h of ischemia. Tongmai Huoxue Yin could significantly decrease TNF-alpha content in the brain tissue. CONCLUSION: Tongmai Huoxue Yin has a protective action on acute cerebral ischemia injury in the rat.

2271- gera: 160727/di/ra

CLINICAL RESEARCH OF ACUPUNCTURE ON MALIGNANT TUMOR PATIENTS FOR IMPROVING **DEPRESSION AND SLEEP QUALITY. FENG Y, WANG XY,** LI SD, ZHANG Y, WANG HM, LI M, CAO K, YE YF, ZHANG Z. j tradit chin med. 2011;31(3):199-202 (eng). OBJECTIVE: To study the effect of acupuncture on depression and insomnia of malignant tumor patients. METHODS: Eighty cases of cancer related depression and sleep disorders were randomly divided into 2 groups: treatment 1 group (acupuncture n = 40) and control group (Fluoxetione n = 40). All patients were assessed by Self-rating Depression Scale (SDS), Hemilton Depression Rating Scale (HAMD) and Pittsburgh Sleep Quality Index (PSQI) after treatment for 30 days. RESULTS: Before treatment the SDS and HAMD scores of the trial group were 64.12 +/- 5.34 and 20.92 +/- 2.38, those of the control group were 64.24 +/- 4.98 and 20.72 +/- 2.74, after treatment the SDS and HAMD scores of the trial group were 43.64 +/- 5.28 and 9.88 +/- 1.27 respectively, significantly lower than those of the control group (50.76 +/- 5.42 and 13.72 +/- 2.05 respectively, both P < 0.05). Before treatment the

PSQI score of the trial group and the control group were 14.48 +/- 1.71 and 13.92 +/- 2.59, after treatment the PSQI score of the trial group was 7.92 +/- 1.22 after treatment, significantly lower than those of the control group (11.44 +/- 1.89, P < 0.01). CONCLUSION: Acupuncture can effectively reduce malignant-related depression, improve sleep quality, and help to improve the quality of life of cancer

2272- gera: 160732/di/ra

ANALYSIS OF CLINICAL SYNDROMES IN 47 PATIENTS WITH PANCREATIC CANCER AT LATE STAGE. FANG L, SUN J, LI Q, LI CH, FAN ZZ. j tradit chin med.

2011;31(3):182-4 (eng).

OBJECTIVE: To analyze the law governing the distribution of traditional Chinese medicine (TCM) syndromes of pancreatic cancer. METHODS: The authors used retrospective study to statistically analyze TCM syndromes of patients, separated complex syndromes and calculated the frequency of appearance of single syndromes. RESULTS: The patients mainly suffered from 4 syndromes: blood stasis syndrome, qi stagnation syndrome, qi (yang) deficiency syndrome, and phlegm dampness syndrome. The distribution of syndromes is rarely related to sex, age and morbid site of patients. CONCLUSION: Owing to complicated distribution of its syndromes, pancreatic cancer should be diagnosed and treated according to its characteristics of deficiency in origin and excess in superficiality.

2273- gera: 160737/di/ra

YIN-YANG BALANCE THERAPY ON REGULATING CANCER STEM CELLS. XU WR, LIN HS, CHEN XY, ZHANG Y. j tradit chin med. 2011;31(2):158-60 (eng).

Researches have shown that cancer stem cells, regulated by the niche where they reside, are the roots of oncogenesis, relapse and metastasis. To date, very few treatments have targeted on cancer stem cells. The authors study that the regulated factors in the niche share the characteristics of yinyang in the theory of traditional Chinese medicine, which has confirmed its therapeutic effects in the prevention and treatment of cancer. So the authors presume that the mechanisms of traditional Chinese medicine on the prevention and treatment of cancer may be related to the yin-yang balance of the niche of cancer stem cells.

2274- gera: 160766/di/ra

AIDI INJECTION ALTERS THE EXPRESSION PROFILES OF MICRORNAS IN HUMAN BREAST CANCER CELLS. ZHANG H, ZHOU QM, LU YY, DU J, SU SB. j tradit chin med. 2011;31(1):10-6 (eng).

OBJECTIVE: To investigate the effects of Aidi Injection on the MicroRNAs (miRNA) expression profiles in human breast cancer cells and explore the potential targets of the cancer treatment. METHODS: MCF-7 breast cancer cells were grown in RPMI 1640 medium supplemented with different concentrations of ADI. The inhibition of cell proliferation was measured by MTT assay. MCF-7 cells were treated by ADI with above 50% inhibiting concentration (IC50) for 48 h. The expression profiles of miRNA in ADI-treated and ADI-untreated MCF-7 cells were detected with miRNA microarray chips and the array data were verified by quantitative RT-PCR. MCF-7 cells were transiently transfected with miRNA mimics by liposome method. Potential mRNA targets were predicted by informatics analysis with TargetScan and PicTar software. RESULTS: ADI significantly inhibited the proliferation of MCF-7 cells in a dose-dependent manner. The IC50 of ADI was 55.71 mg/mL after treatment for 48 h. The 60 mg/mL ADI was used as the therapeutic drug concentration. Microarray analysis identified 45 miRNAs that were up-regulated and 55 miRNAs that were down-regulated in response to ADI treatment. Many ADI-induced miRNAs were related to breast cancers. The microarray data were validated by qRT-PCR. Ectopic expression of 100 nmol/L mir-126 mimics significantly inhibited the proliferation of MCF-7 cells. The 12 potential target genes of mir-126 were predicted by both TargetScan and PicTar software. CONCLUSIONS: The miRNA may serve as therapeutic targets, and the modulation of miRNA expression is an important mechanism of ADI inhibiting breast cancer cell arowth.

2275- gera: 161091/di/ra

EFFEČT OF ACUPUNCTURE-MOXIBUSTION ON BONE MARROW SUPPRESSION AND LEUKOCYTES AFTER CHEMOTHERAPY. XIXIN ZHAO 赵喜新, XIMEI HUANG

黄喜梅, HEPING WANG 王和平, MEI LU 路玫, KAIYU TIAN

田开宇. journal of acupuncture and tuina science. 2011;9(6):331-335 (eng).

Objective To observe the effect of acupuncture-moxibustion therapy on bone marrow suppression and the leukocytes count after chemotherapy, and to explore the mechanism. Methods Animal experiments and clinical studies were combined to observe the effect of acupuncture-moxibustion on the bone marrow and leukocytes during chemotherapy. The biological cultivation was used to detect the amount of the hematopoietic stem/progenitor cells and the activity of the serum colonystimulating factor (CSF). Results The peripheral leukocytes count in the acupuncture-moxibustion group began to rebound 1 d earlier than that in the model group. The effect of acupuncture-moxibustion on neutrophils proliferation was the most obvious. Conclusion The effect of acupuncturemoxibustion on resisting bone marrow suppression and rebounding the leukocytes count after chemotherapy may related to releasing the bone marrow cells to peripheral blood, extending the life of leukocyte, increasing the activity of serum CSF, promoting the hematopoietic stem/progenitor cell proliferation, and reducing the damage of chemotherapy on the hematopoietic stem/progenitor cell.

2276- gera: 161092/di/ra

EXPERIMENTAL RESEARCH ON THE ANTI-TUMOR EFFECT OF MOXIBUSTION SERUM. YUNFEI CHEN 陈云飞,

CUIYING ZHAO 赵粹英, QIYONG LV 吕琪泳, iournal of acupuncture and tuina science. 2011;9(6):336-339 (eng). Objective To observe the inhibiting tumor effect of moxibustion serum on the tumor-bearing mice. Methods The mice were transplanted with C57BL/6 mouse thymus cells to form solid tumor and were intraperitoneally injected with moxibustion serum. The tumor growth and survival time of tumor-bearing mice were recorded. Results The moxibustion serum could significantly postpone the formation of tumor nodules Compared with the tumor-bearing group, tumor nodules formation time of all treatment groups was delayed and the survival time of the tumor-bearing mice was prolonged. Besides, the inhibiting tumor effect of moxibustion serum in the pre-treatment group was better than that in the moxibustion serum treatment group. Moxibustion acts specifically on acupoints. Conclusion The moxibustion serum had obvious anti-tumor effects

2277- gera: 161093/di/ra

EFFECT AND MECHANISM OF CANTHARIDES VESICULATION MOXIBUSTION ON HEMATOPOIETIC FUNCTION IN MICE TREATED WITH

CYCLOPHOSPHAMIDE. DELI SUN 孙德利, HANPING CHEN 陈汉平, HUANGAN WU 吴焕淦, YAN ZHANG 张琰,

CHENGHAO NI 倪承浩, DALONG CHEN 陈大隆, JIAN PEI

裴建. journal of acupuncture and tuina science.

2011;9(6):340-345 (eng).

Objective To observe the effects of Cantharides vesiculation moxibustion on hematopoietic function and granulocytemacrophage colony-stimulating factor (GM-CSF) secreted by peritoneal macrophages in mice treated with chemotherapy. Methods The mice treated with Cyclophosphamide (CTX) were randomly divided into 6 groups. Ten mice in the control group were not treated. The mice in the vesiculation I-IV groups received moxibustion at Dazhui (GV 14), Shenshu (BL 23) and Zusanli (ST 36) with different concentrations of Cantharides tincture. The mice in the grain moxibustion group were treated with moxa cone of wheat-grain size at these points. The other 10 normal mice were adopted as control. The peripheral blood leukocytes count, bone marrow nucleated cells count, spleen index and the ability of peritoneal-macrophages-induced GM-CSF were detected at different stages. Results CTX could cause significant bone marrow suppression, significant

decrease of bone marrow nucleated cell counts, peripheral blood leukocytes and spleen index, and reduction of peritoneal macrophages induced GM-CSF in the mice. Vesiculation moxibustion at Dazhui (GV 14), Shenshu (BL 23) and Zusanli (ST 36), not only reduced the bone marrow suppression, promoted bone marrow hyperplasia, increased bone marrow nucleated cell count, enhanced the number of the peripheral blood white blood cell (WBC) and shorted low sustained period of WBC chemotherapy-induced, but also enhanced the ability of macrophage induced GM-CSF. Conclusion Cantharides vesiculation moxibustion has good resistance to the bone marrow suppression in mice treated with chemotherapy, and enhance the ability of the mouse peritoneal macrophages induced GM-CSF.

2278- gera: 161094/di/ra

EXPLORATION OF CLINICAL REGULARITIES IN ACUPUNCTURE-MOXIBUSTION TREATMENT FOR

CANCER PAIN. QINFENG HUANG 黄琴峰. journal of

acupuncture and tuina science. 2011;9(6):346-350 (eng). Objective To review acupuncture-moxibustion literature of year 1954–2009 and explore the regularities in point selection and therapeutic methods for acupuncture-moxibustion treatment of cancer pain. Methods A comprehensive analysis was made by a method of metrological analysis according to the data from China Modern Acupuncture-moxibustion Information Databank. Results Zusanli (ST 36), Ashi point and Sanyinjiao (SP 6) were most frequently used. Zusanli (ST 36) and Sanyinjiao (SP 6) were optimal points combination. Acupuncture and the combination of acupuncture and moxibustion were the major treatments. It proposed that Zusanli (ST 36), Ashi point and Sanyinjiao (SP 6) can be used as a basic prescription for acupuncture-moxibustion treatment for cancer pain, and acupoints selection according to the syndrome may be added. Conclusion The combination of acupuncture and moxibustion can improve the therapeutic effect on cancer pain.

2279- gera: 161095/di/ra

EFFECTS OF MOXIBUSTION THERAPY ON PREVENTING AND TREATING SIDE EFFECTS FROM CHEMOTHERAPY OF MALIGNANT TUMOR PATIENTS. YU FAN 范钰.

ZHAOMIN YANG 杨兆民, MING WAN 万铭, XUEFEI WU

吴学飞, JILI YAN 颜吉丽. journal of acupuncture and tuina science. 2011;9(6):351-353 (eng).

Objective To observe the clinical effects of moxibustion therapy on preventing and treating toxic and side effects of chemotherapy in malignant tumor patients. Methods A total of 63 cases were randomly divided into three groups. Twentythree cases in the moxibustion group were treated by moxibustion, and 22 cases in the hydro-acupuncture group were treated by acupoint injection, and 18 cases in the control group were treated by oral administration of Batilol tablets. The changes of the white blood cell count and the content of immunoglobulin before and after the treatments were observed. Results After treatments, the total leukocyte count and the content of immunoglobulin were all elevated in the moxibustion group and the hydro-acupuncture group, with statistical difference when compared with the control group (P<0.05, P<0.01). In the elevation of the white blood cell count, the hydro-acupuncture group was better than the moxibustion group (P<0.05). Conclusion Moxibustion and hydroacupuncture can be used to treat and prevent toxic and side effects of chemotherapy. From this aspect, the different needling techniques possess different effects.

2280- gera: 161096/di/ra

CLINICAL STUDY ON THE EFFECT OF ELECTROACUPUNCTURE ON CELLULAR IMMUNE FUNCTION IN PATIENTS WITH GASTROINTESTINAL

TUMOR. JUN WANG 汪军, JIANWEI JIANG 姜建伟, SANJUN

CAI 蔡三军, HUITING PENG 彭惠婷, YANQIN GAO 高艳琴,

XIAODING CAO 曹小定, GENCHENG WU 吴根诚. journal of acupuncture and tuina science. 2011;9(6):354-358 (eng). Objective To investigate the effect of electroacupuncture (EA)

on the T-lymphocyte subsets and lymphocyte transformation in patients with gastrointestinal tumor during peri-operative and peri-chemotherapy periods. Methods A total of 44 cases with gastrointestinal tumor were allocated into 4 groups of surgical removal (SR), SR + electroacupuncture (EA), SR + chemotherapy, and SR + chemotherapy + EA. Then changes of T-lymphocyte subsets in varying stages of gastrointestinal tumor were determined using a flow cytometer. Results On the 3rd day after operation, the patients' CD3+ cell percentage and lymphocyte transformation were significantly lower than that before operation (P<0.05, P<0.01); the CD3+ cell percentage and lymphocyte transformation of patients who received EA were not significantly reduced, showing a statistic difference when compared with the SR group (P<0.05). On the 10th day after operation, the patients' lymphocyte transformation was almost restored to the level before operation, the CD8+ cells in patients who received EA were significantly reduced (P<0.05) and their CD4+/CD8+ ratios were markedly elevated (P<0.05). On the 3rd day after operation coupled with chemotherapy, the CD3+ cell percentage and CD4+/CD8+ ratios were somewhat reduced, but not showing a statistic difference. Upon EA intervention, the CD3+ cell percentage and CD4+/CD8+ ratios on the third day after operation coupled with chemotherapy were significantly increased (P<0.05). The intra-group comparison before and after treatment has shown that EA can improve the lymphocyte transformation of patients after operation and chemotherapy (P<0.01). Conclusion EA can substantially improve the cellular immune function in patients with gastrointestinal tumor during peri-operative and perichemotherapy periods

2281- gera: 161097/di/ra

EFFECTS OF MOXIBUSTION ON HEMOGLOBIN AND IMMUNOGLOBULIN IN CERVICAL CANCER PATIENTS UNDERGOING RADIOTHERAPY. ZHICHONG YU 喻志冲.

HONGXIANG YUAN 袁红香, LANFENG XU 徐兰风, ZHEN ZHAN 詹臻, HUIZHEN CHENG 成慧贞, YAGUANG SONG

宋亚光. journal of acupuncture and tuina science.

2011;9(6):359-361 (eng).

Objective To observe the effects of moxibustion on hemoglobin and immunoglobulin in cervical cancer patients on radiotherapy. Methods Sixty-six patients with cervical cancer were randomized into a moxibustion group (n=36) and a control group (n=30), and underwent the same radiotherapy; during the radiotherapy period, the moxibustion group was given moxibustion at Shenque (CV 8) and Sanyinjiao (SP 6), and the control group was given no other treatment. Agar diffusion method was employed to detect the concentrations of hemoglobin and immunoglobulin in peripheral blood before and after treatment. Results After eight-week treatment, the concentrations of hemoglobin and immunoglobulin were higher in the moxibustion group than those in the control group, with a significant difference in the concentration of IgG between the two groups (P<0.01). Conclusion Moxibustion can increase the concentrations of hemoglobin and immunoglobulin in cervical cancer patients on radiotherapy to improve the immunity.

2282- gera: 161098/di/ra

ACUPUNCTURE AND MOXIBUSTION REGULATION FOR POST-CHEMOTHERAPY GASTRIC MOTILITY. GUOWEI

SHEN 沈国伟, JINGSHENG ZHAO 赵京生. journal of

acupuncture and tuina science. 2011;9(6):362-366 (eng). Objective To observe the regulation of acupuncture and moxibustion for gastric motility of patients who experienced vomiting following chemotherapy. Methods Apply warm needling, needling alone and suspended moxibustion to Zusanli (ST 36) and observe the changes in gastric electric frequency spectrum, waveform, frequency and wave amplitude. Results Acupuncture obtained better immediate effects than warm needling and moxibustion. However, warm needling obtained better lasting effects than needling and moxibustion. Conclusion Different acupuncture and moxibustion methods can produce different immediate and lasting effects. It is advisable to employ individualized methods in clinical practice. Regarding regulation for post-chemotherapy gastric motility, acupuncture and moxibustion in

early stage chemotherapy can produce better results than in late stage.

2283- gera: 161099/di/ra

OBSERVATION ON THE EFFECT OF AURICULAR POINT STICKING FOR VOMITING INDUCED BY

CHEMOTHERAPY. HONGDA BI 毕宏达. journal of

acupuncture and tuina science. 2011;9(6):367-369 (eng). Objective To explore the effect of auricular point sticking in relieving chemotherapy induced vomiting, and to observe its effect on the usage of Ondansetron hydrochlorid injection. Methods Fifty subjects were randomized into a control group and an observation group. The cases in the control group received Ondansetron hydrochlorid injection (i.v.) prior to chemotherapy; while those in the observation group received additional auricular point sticking a day before chemotherapy till the end of the chemotherapy. Results The dose of Ondansetron hydrochlorid used in the observation group was significantly lower than that in the control (P<0.05). Conclusion Auricular point sticking can reduce the dose of Ondansetron hydrochlorid in the patients with chemotherapy induced vomiting, and effectively attenuate vomiting.

2284- gera: 161614/di/ra

L'ACUPUNCTURE EST-ELLE EFFICACE DANS LE TRAITEMENT DU CANCER DU SEIN ? GUO ZHAO QI. acupuncture traditionnelle chinoise. 2011;25:51-56 (fra).

2285- gera: 72259/di/re

ACUPUNCTURE FOR CANCER PAIN IN ADULTS. LANG DSP. int j evid based healthc. 2012;10(1):86, (eng). Analyse de Paley CA, Johnson MI, Tashani OA, Bagnall AM., Acupuncture for cancer pain in adults. Cochrane Database Syst Rev. 2011 Jan 19;(1):CD007753. doi: 10.1002/14651858.CD007753,

2286- gera: 156270/di/re

ACUPUNCTURE IMPROVES HEALTH-RELATED QUALITY-OF-LIFE (HRQOL) AND SLEEP IN WOMEN WITH BREAST CANCER AND HOT FLUSHES. FRISK J, KÄLLSTRÖM AC, WALL N, FREDRIKSON M, HAMMAR M. support care

cancer. 2012;20:715-27 (eng).

PURPOSE: Evaluate effects of electro-acupuncture (EA) and hormone therapy (HT) on health-related quality-of-life (HRQoL) and sleep in breast cancer survivors with vasomotor symptoms. METHODS: Forty-five women, randomized to EA (n = 27) for 12 weeks or HT (n = 18) for 24 months, were followed for up to 2 years. Distress caused by, and numbers of, hot flushes, hours slept and times woken up/night, Psychological and General Well-being Index (PGWB) and Women's Health Questionnaire (WHQ) were registered before and during treatment and at 6, 9, 12, 18 and 24 months after start of treatment. RESULTS: After 12 weeks of EA (n = 19), WHQ improved from 0.32 (IQR 0.23-0.53) at baseline to 0.24 (IQR 0.12-0.39; p < 0.001) and PGWB from 78 (IQR 53-89) to 79 (IQR 68-93; p = 0.002). All sleep parameters improved and Hot Flush Score (HFS) decreased by 80%. At 12 months, WHQ, PGWB and all sleep parameters remained significantly improved (n = 14) and HFS decreased by 65%. After 12 weeks of HT (n = 18), WHQ improved from 0.29 (IQR 0.15-0.44) at baseline to 0.15 (IQR 0.05-0.22; p = 0.001), PGWB from 75 (IQR 59-88) to 90 (62-97; p = 0.102) and three of five sleep parameters improved. CONCLUSION: Both EA and HT increased HRQoL and sleep, probably through decreasing numbers of and distress by hot flushes. Although flushes decreased less in the EA group than in the HT group, HRQoL improved at least to the same extent maybe due to other effects of EA, not induced by HT, e.g. on anxiety, vitality and sleep, supported by subscale analyses. EA should be further evaluated as treatment for women with breast cancer and climacteric complaints, since HT no longer can be recommended for these women.

2287- gera: 157138/di/re

A SYSTEMATIC REVIEW OF THE EFFECTIVENESS OF QIGONG EXERCISE IN SUPPORTIVE CANCER CARE. Chan CL, Wang CW, Ho RT, Ng SM, Chan JS, Ziea ET, Wong VC. support care cancer.. 2012;20(6):1121-33 (eng).

PURPOSE: Qigong as a complementary and alternative modality of traditional Chinese medicine is often used by cancer patients to manage their symptoms. The aim of this systematic review is to critically evaluate the effectiveness of gigong exercise in cancer care. METHODS: Thirteen databases were searched from their inceptions through November 2010. All controlled clinical trials of gigong exercise among cancer patients were included. The strength of the evidence was evaluated for all included studies using the Oxford Centre for Evidence-based Medicine Levels of Evidence. The validity of randomized controlled trials (RCTs) was also evaluated using the Jadad Scale. RESULTS: Twentythree studies including eight RCTs and fifteen non-randomized controlled clinical trials (CCTs) were identified. The effects of qigong on physical and psychosocial outcomes were examined in 14 studies and the effects on biomedical outcomes were examined in 15 studies. For physical and psychosocial outcomes, it is difficult to draw a conclusion due to heterogeneity of outcome measures and variability of the results in the included studies. Among reviewed studies on biomedical outcomes, a consistent tendency appears to emerge which suggests that the patients treated with qigong exercise in combination with conventional methods had significant improvement in immune function than the patients treated with conventional methods alone. CONCLUSIONS: Due to high risk of bias and methodological problems in the majority of included studies, it is still too early to draw conclusive statements. Further vigorously designed large-scale RCTs with validated outcome measures are needed.

2288- gera: 157269/di/ra

YOGA BREATHING FOR CANCER CHEMOTHERAPY-ASSOCIATED SYMPTOMS AND QUALITY OF LIFE: **RESULTS OF A PILOT RANDOMIZED CONTROLLED** TRIAL. DHRUVA A, MIASKOWSKI C, ABRAMS D, ACREE M, COOPER B, GOODMAN S, HECHT FM. j altern complement med. 2012;18(5):473-9 (eng).

BACKGROUND: Many debilitating symptoms arise from cancer and its treatment that are often unrelieved by established methods. Pranayama, a series of yogic breathing techniques, may improve cancer-related symptoms and quality of life, but it has not been studied for this purpose. OBJECTIVES: A pilot study was performed to evaluate feasibility and to test the effects of pranayama on cancerassociated symptoms and quality of life. DESIGN: This was a randomized controlled clinical trial comparing pranayama to usual care. SETTING: The study was conducted at a university medical center. SUBJECTS: Patients receiving cancer chemotherapy were randomized to receive pranayama immediately or after a waiting period (control group) INTERVENTIONS: The pranayama intervention consisted of four breathing techniques taught in weekly classes and practiced at home. The treatment group received pranayama during two consecutive cycles of chemotherapy. The control group received usual care during their first cycle, and received pranayama during their second cycle of chemotherapy. OUTCOME MEASURES: Feasibility, cancer-associated symptoms (fatigue, sleep disturbance, anxiety, depression, stress), and quality of life were the outcomes. RESULTS: Class attendance was nearly 100% in both groups. Sixteen (16) participants were included in the final intent-to-treat analyses. The repeated-measures analyses demonstrated that any increase in pranayama dose, with dose measured in the number of hours practiced in class or at home, resulted in improved symptom and quality-of-life scores. Several of these associations--sleep disturbance (p=0.04), anxiety (p=0.04), and mental quality of life (p=0.05)--reached or approached statistical significance. CONCLUSIONS: Yoga breathing was a feasible intervention among patients with cancer receiving chemotherapy. Pranayama may improve sleep disturbance, anxiety, and mental quality of life. A dose- response relationship was found between pranayama use and improvements in chemotherapy-associated symptoms and quality of life. These findings need to be confirmed in a larger study.

2289- gera: 157363/di/re

USE OF MIND-BODY COMPLEMENTARY THERAPIES (MBCTS) IN PATIENTS WITH CANCER. FAROOQUI M, HASSALI MA, SHATAR AK, SHAFIE AA, FAROOQUI MA, SALEEM F. j altern complement med. 2012;18(8):727-8 (eng).

2290- gera: 157428/di/ra

EVALUATION OF ACUPUNCTURE FOR CANCER SYMPTOMS IN A CANCER INSTITUTE IN BRAZIL. D'ALESSANDRO E, DE BRITO C, CECATTO R, SAUL M, ATTA JA, LIN CA.. acupunct med. 2012;OCT 31: (eng). INTRODUCTION: Acupuncture has been progressively included in the practice of mainstream medicine in recent decades. The State of Sao Paulo Cancer Institute is a public hospital established in 2008 and its acupuncture service follows the experience and model of several oncology centres in the USA, aiming to optimise the treatment of symptoms such as postoperative pain, oncological pain, neuropathic pain, nausea, vomiting, xerostomia and fatigue induced by chemotherapy. This paper describes the population given acupuncture treatment and the effects of the intervention on symptom management. METHODS: One hundred and eightythree patients from our service were enrolled in the study. Baseline and final symptom intensity was recorded using a visual analogue score (VAS) ranging from 0 to 10 cm, with a higher score meaning higher symptom intensity. RESULTS: Fifty-four (29.50%) were receiving active treatment with chemotherapy and/or radiotherapy, 29 (15.85%) were receiving hormone therapy and 100 (54.65%) were considered to be in remission. The main symptoms were: oncological pain in 44 (24.04%), chemotoxicity in 34 (18.6%), lumbar pain in 53 (28.96%) and chronic postoperative pain in 54 (28.4%). The mean (SD) initial symptom score was 7.04 (1.8), which was reduced to 2.56 (2.75) after treatment (p<0.001), an improvement of 63.6% in control of the symptoms. Further analysis of the data showed that the effect was similar in different indications for acupuncture treatment. CONCLUSIONS: Use of acupuncture may have improved symptom control in patients enrolled in this study.

2291- gera: 157438/di/re
REGULAR TAI CHI EXERCISE DECREASES THE PERCENTAGE OF TYPE 2 CYTOKINE-PRODUCING CELLS IN POSTSURGICAL NON-SMALL CELL LUNG CANCER SURVIVORS. WANG R, LIU J, CHEN P, YU D. cancer nurs. 2012; oct 9: 1-8 (eng).

BACKGROUND:: Tai Chi combines aspects of meditation and aerobic exercise. Its effect on the balance between cellular and humoral immunity, which potentiates human immunity against tumors, remains to be determined. OBJECTIVE:: The objective was to investigate the effect of a 16-week Tai Chi exercise intervention on the recovery of postsurgical non-small cell lung cancer survivors. INTERVENTIONS/METHODS:: A controlled study was performed in 32 lung cancer survivors who practiced Tai Chi during a 16-week period. The percentages of interferon γ-producing CD3 T lymphocyte cells (T1) and interleukin 4producing CD3 T lymphocyte cells (T2) and CD3 T lymphocyte subsets (T helper cell type 1 [TH1], TH2; cytotoxic T cell type 1 [Tc1], Tc2) were determined as well as levels of hormones βendorphin, general catecholamines, and cortisol. RESULTS:: Whereas the T1/T2 and Tc1/Tc2 ratios in the control group decreased in the natural course of postsurgical non-small cell lung cancer recovery (both P < .01), no changes were observed in the Tai Chi group. The differences in changes in the T1/T2 and Tc1/Tc2 ratios (both P < .01) and in T2 and Tc2 levels (P < .01) between the 2 groups were significant. The cortisol level increased in the control group (P < .05) but not in Tai Chi group. CONCLUSIONS:: A 16-week Tai Chi exercise significantly diminished the magnitude of the decreased T1/T2 ratio in the natural course of recovery in a population of postsurgical non-small cell lung cancer survivors. IMPLICATIONS FOR PRACTICE:: Tai Chi may have a role in ameliorating the imbalance between humoral and cellular immunity, potentiating human immunity against tumors.

2292- gera: 157595/di/re

ARIX: A RANDOMISED TRIAL OF ACUPUNCTURE V ORAL CARE SESSIONS IN PATIENTS WITH CHRONIC XEROSTOMIA FOLLOWING TREATMENT OF HEAD AND NECK CANCER. SIMCOCK R, FALLOWFIELD L, MONSON K, SOLIS-TRAPALA I, PARLOUR L, LANGRIDGE C,

JENKINS V; ON BEHALF OF THE ARIX STEERING COMMITTEE. ann oncol. 2012;oct 25: (eng). BackgroundRadiation treatment of head and neck cancer can cause chronic xerostomia which impairs patients' quality of life. The study reported here examined the efficacy of acupuncture in alleviating xerostomia symptoms especially dry mouth.Patients and methodsA total of 145 patients with chronic radiation-induced xerostomia >18 months after treatments were recruited from seven UK cancer centres. The study employed a randomised crossover design with participants receiving two group sessions of oral care education and eight of acupuncture using standardised methods. Patient-reported outcome (PROs) measures were completed at baseline and weeks 5, 9, 13, 17, and 21. The primary outcome was improvement in dry mouth. Objective saliva measurements were also carried out.ResultsAcupuncture compared with oral care, produced significant reductions in patient reports of severe dry mouth (OR = 2.01, P = 0.031) sticky saliva (OR = 1.67, P = 0.048), needing to sip fluids to swallow food (OR = 2.08, P = 0.011) and in waking up at night to drink (OR = 1.71, P = 0.013). There were no significant changes in either stimulated or unstimulated saliva measurements over time. Conclusion Eight sessions of weekly group acupuncture compared with group oral care education provide significantly better relief of symptoms in patients suffering from chronic radiation-induced xerostomia.

2293- gera: 159293/di/re

THE PREVENTIVE AND THERAPEUTIC EFFECT OF ACUPUNCTURE FOR RADIATION-INDUCED XEROSTOMIA IN PATIENTS WITH HEAD AND NECK CANCER: A SYSTEMATIC REVIEW. ZHUANG L, YANG Z, ZENG X, ZHUA X, CHEN Z, LIU L, MENG Z... integr cancer ther. 2012;JUL 16: (eng).

Background. METHODS: Some studies suggest that acupuncture may be beneficial. Objectives. The authors evaluated the preventive and therapeutic effect of acupuncture for radiation-induced xerostomia among patients with head and neck cancer. Methods. PUBMED, EMBASE, Cochrane Library, CBM, CAJD, Wan Fang database, and VIP Database for Chinese Technical Periodicals were electronically searched, in conjunction with further manual search for relevant articles. Studies that met the inclusion criteria were systematically evaluated. RESULTS: Three randomized controlled trials (RCTs) investigating the therapeutic effect of acupuncture were included. One RCT on the preventive effect of acupuncture was found. Because of the considerable variation among included studies, meta-analysis was not possible. Two included RCTs used placebo controls, and both observed significant improvement in the salivary flow rates between acupuncture and control groups. However, no significant differences were found. Three included RCTs suggested that acupuncture for radiation-induced xerostomia can improve patients' subjective symptoms. The only study evaluating the preventive effect of acupuncture for radiation-induced xerostomia showed positive changes in salivary flow rates (both unstimulated and stimulated) and dry mouth -related symptoms. Acupuncture treatment was well tolerated by all patients and no severe adverse effects were seen. CONCLUSIONS: Insufficient evidence is available to judge whether acupuncture is safe and whether it is effective in preventing or treating radiation-induced xerostomia. Significant research remains to be done before acupuncture can be recommended for routine use in radiation-induced xerostomia.

2294- gera: 159295/di/ra

THE ROLE OF ACUPUNCTURE IN CANCER SUPPORTIVE CARE. LIN JG, CHEN YH.. am j chin med. 2012;40(2):219-29 (eng).

Acupuncture has many beneficial effects during cancer therapy and has proven efficacy in the management of side effects induced by chemotherapy and radiotherapy. In this review, we discussed the benefits of acupuncture on cancer patients. In cancer pain management, acupuncture is effective for head and neck pain, waist pain, abdominal and chest pain. Many studies confirm the excellent efficacy of acupuncture against symptoms of vomiting and nausea, including those induced by chemotherapy and radiotherapy. Head and neck cancer

patients receiving radiotherapy may develop xerostomia, which may be relieved by acupuncture. Acupuncture may also cause sedative and hypnotic effects in cancer patients for treating nervousness and insomnia.

2295- gera: 159296/di/re

SHAM-CONTROLLED, RANDOMISED, FEASIBILITY TRIAL OF ACUPUNCTURE FOR PREVENTION OF RADIATION-INDUCED XEROSTOMIA AMONG PATIENTS WITH NASOPHARYNGEAL CARCINOMA. MENG Z, KAY GARCIA M, HU C, CHIANG J, CHAMBERS M, ROSENTHAL DI, PENG H, WU C, ZHAO Q, ZHAO G, LIU L, SPELMAN A, LYNN PALMER J, WEI Q, COHEN L.. eur j cancer.. 2012;48(11):1692-9 (eng).

BACKGROUND: Xerostomia (dry mouth) after head/neck radiation is a common problem among cancer patients. Quality of life (QOL) is impaired, and available treatments are of little benefit. This trial determined the feasibility of conducting a sham-controlled trial of acupuncture and whether acupuncture could prevent xerostomia among head/neck patients undergoing radiotherapy. METHODS: A sham controlled, feasibility trial was conducted at Fudan University Shanghai Cancer Center, Shanghai, China among patients with nasopharyngeal carcinoma undergoing radiotherapy. To determine feasibility of a sham procedure, 23 patients were randomised to real acupuncture (N=11) or to sham acupuncture (N=12). Patients were treated three times/week during the course of radiotherapy. Subjective measures were the Xerostomia Questionnaire (XQ) and MD Anderson Symptom Inventory for Head and Neck Cancer (MDASI-HN). Objective measures were unstimulated whole salivary flow rates (UWSFR) and stimulated salivary flow rates (SSFR). Patients were followed for 1 month after radiotherapy RESULTS: XQ scores for acupuncture were significantly lower than sham controls starting in week 3 and lasted through the 1month follow-up (all P's <0.001 except for week 3, which was 0.006), with clinically significant differences as follows: week 6 - RR 0.28 [95% confidence interval, 0.10, 0.79]; week 11 - RR 0.17 [95%CI, 0.03, 1.07]. Similar findings were seen for MDASI-HN scores and MDASI-Intrusion scores. Group differences for UWSFR and SSFR were not found. CONCLUSIONS: In this small pilot study, true acupuncture given concurrently with radiotherapy significantly reduced xerostomia symptoms and improved QOL when compared with sham acupuncture. Large-scale, multi-centre, randomised and placebo-controlled trials are now needed.

2296- gera: 159297/nd/re

TRADITIONAL CHINESE MEDICINE FOR CANCER-RELATED SYMPTOMS. SMITH ME, BAUER-WU S.. semin oncol nurs. 2012;28(1):64-74 (eng).

OBJECTIVE: To familiarize oncology nurses about the theory and research related to Traditional Chinese Medicine (TCM) for management of cancer-related symptoms. DATA SOURCES: Peer-reviewed journal articles, TCM texts, professional experience. CONCLUSION: The increasing integration of TCM into mainstream medicine mandates that oncology professionals be familiar with the benefits as well as risks. Clinical research on acupuncture in cancer care is growing and demonstrates it is safe for cancer patients, although results on efficacy across symptoms have been mixed. IMPLICATIONS FOR NURSING PRACTICE: Informed oncology nurses can assist patients by making appropriate referrals to licensed acupuncturists and qualified TCM practitioners to help alleviate unpleasant symptoms associated with cancer and conventional cancer treatment.

2297- gera: 159298/nd/re

A PHASE 2/3 STUDY COMPARING ACUPUNCTURE-LIKE TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION VERSUS PILOCARPINE IN TREATING EARLY RADIATION-INDUCED XEROSTOMIA. WONG RK, JAMES JL, SAGAR S, WYATT G, NGUYEN-TÂN PF, SINGH AK, LUKASZCZYK B, CARDINALE F, YEH AM, BERK L.. cancer.

2012;118(17):4244-52 (eng).

BACKGROUND: In this phase 2 component of a multiinstitutional, phase 2/3, randomized trial, the authors assessed the feasibility and preliminary efficacy of acupuncture-like transcutaneous electrical nerve stimulation (ALTENS) in

reducing radiation-induced xerostomia. METHODS: Patients with cancer of the head and neck who were 3 to 24 months from completing radiotherapy with or without chemotherapy (RT ± C) and who were experiencing xerostomia symptoms with basal whole saliva production ≥0.1 mL per minute and were without recurrence were eligible. Patients received twice weekly ALTENS sessions (24 sessions over 12 weeks) using a proprietary electrical stimulation unit. The primary study objective was to assess the feasibility of ALTENS treatment. Patients were considered compliant if 19 of 24 ALTENS sessions were delivered, and the targeted compliance rate was 85%. Secondary objectives measured treatment-related toxicities and the effect of ALTENS on overall radiationinduced xerostomia burden using the University of Michigan Xerostomia-Related Quality of Life Scale (XeQOLS) RESULTS: Of 48 accrued patients, 47 were evaluable. The median age was 60 years, 84% of patients were men, 70% completed RT ± C for >12 months, and 21% had previously received pilocarpine. Thirty-four patients completed all 24 ALTENS sessions, 9 patients completed 20 to 23 sessions, and 1 patient completed 19 sessions, representing a 94% total compliance rate. Six-month XeQOLS scores were available for 35 patients and indicated that 30 patients (86%) achieved a positive treatment response with a mean ± standard deviation reduction of 35.9% ± 36.1%. Five patients developed grade 1 or 2 gastrointestinal toxicity, and 1 had a grade 1 pain event. CONCLUSIONS: The current results indicated that ALTENS treatment for radiation-induced xerostomia can be delivered uniformly in a cooperative, multicenter setting and produces possible beneficial treatment response. Given these results, the phase 3 component of this study was initiated.

2298- gera: 159299/di/re

RANDOMIZED CONTROLLED TRIAL OF ACUPUNCTURE FOR PREVENTION OF RADIATION-INDUCED **XEROSTOMIA AMONG PATIENTS WITH**

NASOPHARYNGEAL CARCINOMA. MENG Z, GARCIA MK, HU C, CHIANG J, CHAMBERS M, ROSENTHAL DI, PENG H, ZHANG Y, ZHAO Q, ZHAO G, LIU L, SPELMAN A, PALMER JL, WEI Q, COHEN L.. cancer.. 2012;118(13):3337-44 (eng). BACKGROUND: Xerostomia (dry mouth) after head/neck radiation is a common problem among cancer patients, and available treatments are of little benefit. The objective of this trial was to determine whether acupuncture can prevent xerostomia among head/neck patients undergoing radiotherapy. METHODS: A randomized, controlled trial among patients with nasopharyngeal carcinoma was conducted comparing acupuncture to standard care. Participants were treated at Fudan University Shanghai Cancer Center, Shanghai, China. Forty patients were randomized to acupuncture treatment and 46 to standard care. Patients were treated 3×/wk on the same days they received radiotherapy. Subjective measures included the Xerostomia Questionnaire and MD Anderson Symptom Inventory-Head and Neck (MDASI-HN). Objective measures were unstimulated and stimulated whole salivary flow rates. Patients were followed for 6 months after the end of radiotherapy. RESULTS: Xerostomia Questionnaire scores for acupuncture were statistically significantly lower than for controls starting in week 3 through the 6 months (P = .003 at week 3, all other P < .0001), with clinically significant differences as follows: week 11, relative risk (RR) 0.63 (95% confidence interval [CI], 0.45-0.87); 6 months, RR 0.38 (95% CI, 0.19-0.76). Similar findings were seen for MDASI-HN scores. Group differences emerged as early as 3 weeks into treatment for saliva (unstimulated whole salivary flow rate, P = .0004), with greater saliva flow in the acupuncture group at week 7 (unstimulated whole salivary flow rate, P < .0001; stimulated whole salivary flow rate, P = .002) and 11 (unstimulated whole salivary flow rate, P < .02; stimulated whole salivary flow rate, P < .03) and at 6 months (stimulated whole salivary flow rate, P < .003). CONCLUSIONS: Acupuncture given concurrently with radiotherapy significantly reduced xerostomia and improved quality of life.

2299- gera: 159344/di/re

ACUPUNCTURE FOR THE TREATMENT OF CANCER PAIN: A SYSTEMATIC REVIEW OF RANDOMISED CLINICAL TRIALS. CHOI TY, LEE MS, KIM TH, ZASLAWSKI C, ERNST E. support care cancer. 2012;20(6):1147-58 (eng)

PURPOSE: Controlling cancer-related pain is an important component in the palliative care of cancer patients. The objective of this review was to assess the effectiveness of acupuncture for treating cancer pain. METHODS: Fourteen databases were searched from their inception through April 2011. Randomised clinical trials (RCTs) were included if acupuncture was used as the sole treatment or as a part of a combination therapy for cancer pain. Studies were included if they were controlled with a placebo or controlled against a drug-therapy or no-treatment group. The Cochrane criteria were used to assess the risk of bias. RESULTS: A total of 15 RCTs met our inclusion criteria. All of the included RCTs were associated with a high risk of bias. The majority of acupuncture treatments or combination therapies with analgesics exhibited favourable effects compared with conventional treatments in individual studies. However, a meta- analysis suggested that acupuncture did not generate a better effect than drug therapy (n = 886; risk ratio (RR), 1.12; 95% CI 0.98 to 1.28; P = 0.09) The comparison between acupuncture plus drug therapy and drug therapy alone demonstrated a significant difference in favour of the combination therapy (n = 437; RR, 1.36; 95% CI 1.13 to 1.64; P = 0.003). The results of this systematic review provide no strong evidence for the effectiveness of acupuncture in the management of cancer pain. CONCLUSION: The total number of RCTs included in the analysis and their methodological quality were too low to draw firm conclusions. Future rigorous RCTs will be necessary to assess the clinical efficacy of acupuncture in this area.

2300- gera: 159346/di/tt

ACUPUNCTURE AND MOXIBUSTION AS AN EVIDENCE-BASED THERAPY FOR CANCER, CHO CS. dordrecht:

springer. 2012;:350p (eng).

Cancer is one of the leading killers in the world and the incidence is increasing, but most cancer patients and cancer survivors suffer much from the disease and its conventional treatments' side effects. In the past, clinical data showed that some complementary and alternative medicine (CAM) possessed anticancer abilities, but some clinicians and scientists have gueried about the scientific validity of CAM due to the lack of scientific evidence. There is great demand in narrowing the knowledge gap to explore the scientific and evidence-based knowledge of CAM in the anticancer field. With this aim, an unparalleled undertaking of a book series is launched to structurally consolidate this area. Although acupuncture and moxibustion have been practiced for millennia, they have come under scientific investigation only recently. Acupuncture and moxibustion have been used clinically to treat cancer-related symptoms (e.g. cancer pain, anxiety, depression and insomnia), manage treatment-induced side effects (e.g. hot flashes, nausea and vomiting) and enhance immunity (e.g. blood cell count, lymphocyte and natural killer cell activity). This is the first book manages to provide comprehensive and updated scientific evidence of the effectiveness of acupuncture and moxibustion intervention for cancer care. Laboratory and animal studies have uncovered the mechanisms of acupuncture and moxibustion for cancer therapy. Promising results of most clinical trials show the efficacy and safety of acupuncture and moxibustion in cancer management. This book consists of fifteen chapters which address a range of important aspects that will impact on the application of acupuncture and moxibustion. An overview of the safety and side effects of acupuncture and moxibustion for cancer care are also covered. In addition, the integration of acupuncture with Western medicine in cancer treatment and recent clinical trials are included as well. Opinion leaders around the world have teamed up to pursue a thorough and up-to-date review of the area, this volume will contribute great to the cancer, clinical and academic community by providing evidence-based information on the efficacy of acupuncture and moxibustion as an anticancer therapy.

2301- gera: 159347/di/el
AN OVERVIEW OF ACUPUNCTURE AND MOXIBUSTION FOR CANCER CARE, Choi TY, Lee MS and Ernst E. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer,, dordrecht: springer. 2012;:1-18 (eng). 2302- gera: 159348/di/el

THE MECHANISTIC STUDIES OF ACUPUNCTURE AND MOXIBUSTION, LIN JG, CHEN YH. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer,, dordrecht: springer. 2012;:19-50 (eng).

2303- gera: 159350/di/el

ACUPUNCTURE FOR THE TREATMENT OF HOT FLASHES IN CANCER PATIENTS, PELUSO FC, GRAVES PR, ASHAMALLA H. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer,, dordrecht: springer. 2012;:67-82 (eng).

2304- gera: 159351/di/el

ACUPUNCTURE AND MOXIBUSTION FOR CANCER-RELATED SYMPTOMS, WONG RK, SAGAR SM. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer,, dordrecht: springer. 2012;:83-120 (eng).

2305- gera: 159352/di/el

USE OF ACUPUNCTURE AND MOXIBUSTION IN THE CONTROL OF ANTICANCER THERAPY-INDUCED NAUSEA AND VOMITING, KONNO R, GYI AA. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer,, dordrecht: springer. 2012;:121-152 (eng).

2306- gera: 159353/di/el

ACUPUNCTURE AND MOXIBUSTION FOR SIDE EFFECTS OF CHEMOTHERAPY IN CANCER PATIENTS, CAPODICE JL,BENSON MC, HERSHMAN DL. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer,, dordrecht: springer. 2012;:153-182 (eng).

2307- gera: 159354/di/el

ACUPUNCTURE FOR THE TREATMENT OF SYMPTOMS ASSOCIATED WITH RADIATION THERAPY. STONE JA, GREENE SC AND JOHNSTONE p. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer., dordrecht: springer. 2012;:183-198 (eng).

2308- gera: 159355/di/el

QUALITY OF LIFE OF CANCER PATIENTS AFTER ACUPUNCTURE AND MOXIBUSTION TREATMENT. SAWADA NO, OKINO L AND NICOLUSSI AC. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer,, dordrecht: springer. 2012;:199-222 (eng).

2309- gera: 159356/di/el

ACUPUNCTURE AND MOXIBUSTION FOR PALLIATIVE AND SUPPORTIVE CANCER CARE, Aung SKH, Dennis DL and Lim JTW. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer,, dordrecht: springer. 2012;:223--48 (eng).

2310- gera: 159358/di/el

SAFETY AND SIDE EFFECTS OF ACUPUNCTURE AND MOXIBUSTION AS A THERAPY FOR CANCER, Sagar SM ANd .Wong RK. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer,, dordrecht: springer. 2012;:265-290 (eng).

2311- gera: 159362/di/el

RECENT CLINICAL TRIALS OF ACUPUNCTURE FOR CANCER PATIENTS, DENG G, SETO D AND CASSILETH B. in cho cs, acupuncture and moxibustion as an evidence-based therapy for cancer,, dordrecht: springer. 2012;:329-348 (eng).

2312- gera: 159366/di/ra

ACUPUNCTURE FOR CANCER PATIENTS SUFFERING FROM HICCUPS: A SYSTEMATIC REVIEW AND META-ANALYSIS. Choi TY, Lee MS, Ernst E.. complement ther med. 2012;20(6):447-55 (eng).

OBJECTIVE: The objective of this review was to assess the effectiveness of acupuncture for treating hiccups in patients

with cancer. METHOD: Thirteen databases were searched from their inception through July 2011 without language restrictions. Randomised clinical trials (RCTs) were included if acupuncture was used as the sole treatment or as a part of a combination therapy with conventional drugs for hiccups in cancer patients. Studies were included if they compared acupuncture to placebo, drug therapy or no treatment. Cochrane criteria were used to assess the risk of bias. RESULTS: A total of 5 RCTs met our inclusion criteria. All of the included RCTs were associated with a high risk of bias. The majority of studies suggested favourable effects of acupuncture compared with conventional treatments. A metaanalysis revealed superior response rates for acupuncture compared with intramuscular injections (n=162; RR, 1.87; 95% CI 1.26-2.78; P=0.002; heterogeneity: χ(2)=3.16, P=0. 21, I(2)=37%). CONCLUSIONS: This systematic review provides very limited evidence for the effectiveness of acupuncture compared with the conventional therapy (intramuscular injections) for treating hiccups. The total number, as well as was the methodological quality, of the RCTs included in this review was low. Rigorous RCTs will be necessary in the future to test the efficacy of acupuncture for treating hiccups in cancer patients

2313- gera: 159383/di/re

TRANSCUTANEOUS ELECTRIC NERVE STIMULATION (TENS) FOR CANCER PAIN IN ADULTS. HURLOW A, BENNETT MI, ROBB KA, JOHNSON MI, SIMPSON KH, OXBERRY SG. cochrane database syst rev.. 2012;CD006276.: (eng).

BACKGROUND: Cancer-related pain is complex and multidimensional but the mainstay of cancer pain management has predominantly used a biomedical approach. There is a need for non-pharmacological and innovative approaches Transcutaneous Electric Nerve Stimulation (TENS) may have a role in pain management but the effectiveness of TENS is currently unknown. This is an update of the original review published in Issue 3, 2008. OBJECTIVES: The aim of this systematic review was to determine the effectiveness of TENS for cancer-related pain in adults. SEARCH METHODS: The initial review searched The Cochrane Library, MEDLINE, EMBASE, CINAHL, Psychinfo, AMED and PEDRO databases in April 2008. We performed an updated search of CENTRAL, MEDLINE, EMBASE, CINAHL and PEDRO databases in November 2011. SELECTION CRITERIA: We included only randomised controlled trials (RCTS) investigating the use of TENS for the management of cancer-related pain in adults. DATA COLLECTION AND ANALYSIS: The search strategy identified a further two studies for possible inclusion. One of the review authors screened each abstract using a study eligibility tool. Where eligibility could not be determined, a second author assessed the full paper. One author used a standardised data extraction sheet to collect information on the studies and independently assess the quality of the studies using the validated five-point Oxford Quality Scale. The small sample sizes and differences in patient study populations of the three included studies (two from the original review and a third included in this update) prevented meta-analysis. For the original review the search strategy identified 37 possible published studies; we divided these between two pairs of review authors who decided on study selection; all four review authors discussed and agreed final scores. MAIN RESULTS: Only one additional RCT met the eligibility criteria (24 participants) for this updated review. Although this was a feasibility study, not designed to investigate intervention effect, it suggested that TENS may improve bone pain on movement in a cancer population. The initial review identified two RCTs (64 participants) therefore this review now includes a total of three RCTs (88 participants). These studies were heterogenous with respect to study population, sample size, study design, methodological quality, mode of TENS, treatment duration, method of administration and outcome measures used. In one RCT, there were no significant differences between TENS and placebo in women with chronic pain secondary to breast cancer treatment. In the other RCT, there were no significant differences between acupuncturetype TENS and sham in palliative care patients; this study was underpowered. AUTHORS' CONCLUSIONS: Despite the one additional RCT, the results of this updated systematic review

remain inconclusive due to a lack of suitable RCTs. Large multi-centre RCTs are required to assess the value of TENS in the management of cancer-related pain in adults

2314- gera: 159405/di/re

PHASE 2 RESULTS FROM RADIATION THERAPY ONCOLOGY GROUP STUDY 0537: WONG RK, JAMES JL, SAGAR S, WYATT G, NGUYEN-TÂN PF, SINGH AK, LUKASZCZYK B, CARDINALE F, YEH AM, BERK L... cancer.. 2012;118(17):4244-52 (eng).

Phase 2 results from Radiation Therapy Oncology Group Study 0537: a phase 2/3 study comparing acupuncture-like transcutaneous electrical nerve stimulation versus pilocarpine in treating early radiation-induced xerostomia. BACKGROUND: In this phase 2 component of a multiinstitutional, phase 2/3, randomized trial, the authors assessed the feasibility and preliminary efficacy of acupuncture-like transcutaneous electrical nerve stimulation (ALTENS) in reducing radiation-induced xerostomia. METHODS: Patients with cancer of the head and neck who were 3 to 24 months from completing radiotherapy with or without chemotherapy (RT \pm C) and who were experiencing xerostomia symptoms with basal whole saliva production ≥0.1 mL per minute and were without recurrence were eligible. Patients received twice weekly ALTENS sessions (24 sessions over 12 weeks) using a proprietary electrical stimulation unit. The primary study objective was to assess the feasibility of ALTENS treatment. Patients were considered compliant if 19 of 24 ALTENS sessions were delivered, and the targeted compliance rate was 85%. Secondary objectives measured treatment-related toxicities and the effect of ALTENS on overall radiationinduced xerostomia burden using the University of Michigan Xerostomia-Related Quality of Life Scale (XeQOLS). RESULTS: Of 48 accrued patients, 47 were evaluable. The median age was 60 years, 84% of patients were men, 70% completed RT ± C for >12 months, and 21% had previously received pilocarpine. Thirty-four patients completed all 24 ALTENS sessions, 9 patients completed 20 to 23 sessions, and 1 patient completed 19 sessions, representing a 94% total compliance rate. Six-month XeQOLS scores were available for 35 patients and indicated that 30 patients (86%) achieved a positive treatment response with a mean ± standard deviation reduction of 35.9% ± 36.1%. Five patients developed grade 1 or 2 gastrointestinal toxicity, and 1 had a grade 1 pain event. CONCLUSIONS: The current results indicated that ALTENS treatment for radiation-induced xerostomia can be delivered

2315- gera: 160012/di/re

EXAMINING THE RELATIONSHIP BETWEEN TCM AND CONVENTIONAL MEDICINE IN BREAST CANCER PATIENTS MEDICATED WITH ESTROGEN ANTAGONIST, HERVIK J, MJALAND O. alternative medicine studies. 2012;2(e11):52-8 (eng).

uniformly in a cooperative, multicenter setting and produces

possible beneficial treatment response. Given these results,

the phase 3 component of this study was initiated.

Breast cancer is the most common type of cancer among women, with a 10.4% incidence rate worldwide. It is the fifth most common cause of death. Treatment includes surgery, radiation and drugs. Conventional treatment of estrogen receptor positive types of tumors involves the use of hormone therapy. The sideeffects of these drugs, i.e. menopausal type symptoms, are an extra burden to women with breast cancer. Further use of drugs to treat such side-effects often provokes adverse symptoms, prompting a search for alternative types of treatment. This paper aims to review research into the use of traditional Chinese medical acupuncture to combat side-effects in breast cancer patients medicated with estrogen antagonists, and examine its complementary role.

2316- gera: 160055/di/re

ACUPUNCTURE FOR CANCER-RELATED FATIGUE IN PATIENTS WITH BREAST CANCER: A PRAGMATIC RANDOMIZED CONTROLLED TRIAL. MOLASSIOTIS A, BARDY J, FINNEGAN-JOHN J, MACKERETH P, RYDER DW, FILSHIE J, REAM E, RICHARDSON A.. j clin oncol.. 2012;30(36):4470-6 (eng).

PURPOSE: We aimed to assess the effectiveness of acupuncture for cancer-related fatigue (CRF) in patients with

breast cancer. PATIENTS AND METHODS: We conducted a pragmatic, randomized controlled trial comparing acupuncture with enhanced usual care. Three hundred two outpatients with breast cancer participated. We randomly assigned 75 patients to usual care and 227 patients to acupuncture plus usual care (random assignment of 1:3 respectively) with minimization controlling for baseline general fatigue and maintenance treatment. Treatment was delivered by acupuncturists once a week for 6 weeks through needling three pairs of acupoints. The usual care group received a booklet with information about fatigue and its management. Primary outcome was general fatigue at 6 weeks, measured with the Multidimensional Fatigue Inventory (MFI). Other measurements included the Hospital Anxiety and Depression Scale, Functional Assessment of Cancer Therapy-General quality-of-life scale, and expectation of acupuncture effect. Analyses were by intention to treat. RESULTS: Two hundred forty-six of 302 patients randomly assigned provided complete data at 6 weeks. The difference in the mean General Fatigue score, between those who received the intervention and those who did not, was -3.11 (95% CI, -3.97 to -2.25; P < .001). The intervention also improved all other fatigue aspects measured by MFI, including Physical Fatigue and Mental Fatigue (acupuncture effect, -2.36 and -1.94, respectively; both at P < .001), anxiety and depression (acupuncture effect, -1.83 and -2.13, respectively; both at P < .001), and quality of life (Physical Well-Being effect, 3.30; Functional Well-Being effect, 3.57; both at P < .001; Emotional Well-Being effect, 1.93; P = .001; and Social Functioning Well-Being effect, 1.05; P < .05). CONCLUSION: Acupuncture is an effective intervention for managing the symptom of CRF and improving patients' quality

2317- gera: 160068/di/ra

REDUCTION IN NAUSEA AND VOMITING IN CHILDREN UNDERGOING CANCER CHEMOTHERAPY BY EITHER APPROPRIATE OR SHAM AURICULAR ACUPUNCTURE POINTS WITH STANDARD CARE. YEH CH, CHIEN LC, CHIANG YC, LIN SW, HUANG CK, REN D.. j altern complement med.. 2012;18(4):334-40 (eng). BACKGROUND: Over 40% of children with cancer have reported that chemotherapy-induced nausea and vomiting (CINV) are the two most distressing side-effects of treatment even when antiemetic drugs have been used. OBJECTIVES: The purpose of this article is to report the findings from a feasibility and pilot study using auricular point acupressure point for CINV in a small group of children in Taiwan. METHODS: This was a crossover randomized design study. CINV symptoms were assessed on 10 patients just prior to and for 7 days following each of three rounds of chemotherapy drugs (CTX). They received standard care (SC) and were not entered into a test treatment group until they completed the baseline assessment, which was conducted during their first round of chemotherapy after entering the study. Just prior to receiving the second round of CTX, patients were randomized into one of two treatment conditions: auricular acupressure intervention, in addition to standard care (AAP) or auricular acupressure using sham auricular points (SAP) in addition to standard care. For the third round of CTX, they were switched to the other treatment group. RESULTS: The enrollment rate for this study was 77% of the children invited to participate and of those, 88% provided completed data sets for all three treatment conditions. Patients in the AAP group reported significantly lower occurrence and severity of nausea and vomiting than patients in the SC group (p<0.05). There were no significant differences of nausea and vomiting for patients between the AAP and SAP groups. All of the patients took antiemetic medication on the day they received CTX, and 80% of patients reported that the antiemetics did not help to treat CINV. CONCLUSIONS: These preliminary findings did show evidence that AAP is acceptable to the children and their parents to prevent/treat CINV. However, there were no statistically significant differences between the AAP and SAP groups in the prevention/treatment of CINV. There were clinical trend differences between the groups, which may due to the small sample size. In a larger study, it would be important to determine whether the effects of the AAP and SAP treatment are independent of any psychologic effects, such as the researcher's increased presence in both treatment groups.

2318- gera: 160088/di/re

EXERCISE INTERVENTIONS ON HEALTH-RELATED QUALITY OF LIFE FOR PEOPLE WITH CANCER DURING ACTIVE TREATMENT. MISHRA SI, SCHERER RW, SNYDER C, GEIGLE PM, BERLANSTEIN DR, TOPALOGLU O.. cochrane database syst rev. 2012; aug 15: (eng). BACKGROUND: People with cancer undergoing active treatment experience numerous disease- and treatmentrelated adverse outcomes and poorer health-related quality of life (HRQoL). Exercise interventions are hypothesized to alleviate these adverse outcomes. HRQoL and its domains are important measures of cancer survivorship, both during and after the end of active treatment for cancer. OBJECTIVES: To evaluate the effectiveness of exercise on overall HRQoL outcomes and specific HRQoL domains among adults with cancer during active treatment. SEARCH METHODS: We searched the Cochrane Central Register of Controlled Trials (CENTRAL), PubMed MEDLINE, EMBASE, CINAHL PsycINFO, PEDRO, LILACS, SIGLE, SportDiscus, OTSeeker, Sociological Abstracts from inception to November 2011 with no language or date restrictions. We also searched citations through Web of Science and Scopus, PubMed's related article feature, and several websites. We reviewed reference lists of included trials and other reviews in the field. SELECTION CRITERIA: We included all randomized controlled trials (RCTs) and quasi-randomized controlled clinical trials (CCTs) comparing exercise interventions with usual care or other type of non-exercise comparison intervention to maintain or enhance, or both, overall HRQoL or at least one distinct domain of HRQoL. Included trials tested exercise interventions that were initiated when adults with cancer were undergoing active cancer treatment or were scheduled to initiate treatment. DATA COLLECTION AND ANALYSIS: Five paired review authors independently extracted information on characteristics of included trials, data on effects of the intervention, and assessed risk of bias based on predefined criteria. Where possible, we performed meta-analyses for HRQoL and HRQoL domains for the reported difference between baseline values and follow-up values using standardized mean differences (SMDs) and a random-effects model by length of follow-up. We also reported the SMD at follow-up between the exercise and control groups. Because investigators used many different HRQoL and HRQoL domain instruments and often more than one for the same domain, we selected the more commonly used instrument to include in the SMD meta-analyses. We also report the mean difference for each type of instrument separately. MAIN RESULTS: We included 56 trials with 4826 participants randomized to an exercise (n = 2286) or comparison (n = 1985) group. Cancer diagnoses in trial participants included breast, prostate, gynecologic, hematologic, and other. Thirty-six trials were conducted among participants who were currently undergoing active treatment for their cancer, 10 trials were conducted among participants both during and post active cancer treatment, and the remaining 10 trials were conducted among participants scheduled for active cancer treatment. Mode of exercise intervention differed across trials and included walking by itself or in combination with cycling, resistance training, or strength training; resistance training; strength training; cycling; yoga; or Qigong. HRQoL and its domains were assessed using a wide range of measures. The results suggest that exercise interventions compared with control interventions have a positive impact on overall HRQoL and certain HRQoL domains. Exercise interventions resulted in improvements in: HRQoL from baseline to 12 weeks' follow-up (SMD 0.33; 95% CI 0.12 to 0.55) or when comparing difference in follow-up scores at 12 weeks (SMD 0.47; 95% CI 0.16 to 0.79); physical functioning from baseline to 12 weeks' follow-up (SMD 0.69; 95% CI 0.16 to 1.22) or 6 months (SMD 0.28; 95% CI 0.00 to 0.55); or when comparing differences in follow-up scores at 12 weeks (SMD 0.28; 95% CI 0.11 to 0.45) or 6 months (SMD 0.29; 95% CI 0.07 to 0.50); role function from baseline to 12 weeks' followup (SMD 0.48; 95% CI 0.07 to 0.90) or when comparing differences in follow-up scores at 12 weeks (SMD 0.17; 95% CI 0.00 to 0.34) or 6 months (SMD 0.32; 95% CI 0.03 to 0.61); and, in social functioning at 12 weeks' follow-up (SMD 0.54; 95% CI 0.03 to 1.05) or when comparing differences in followup scores at both 12 weeks (SMD 0.16; 95% CI 0.04 to 0.27)

and 6 months (SMD 0.24; 95% CI 0.03 to 0.44). Further, exercise interventions resulted in a decrease in fatigue from baseline to 12 weeks' follow-up (SMD -0.38; 95% CI -0.57 to -0.18) or when comparing difference in follow- up scores at follow-up of 12 weeks (SMD -0.73; 95% CI -1.14 to -0.31). Since there is consistency of findings on both types of measures (change scores and difference in follow-up scores) there is greater confidence in the robustness of these findings. When examining exercise effects by subgroups, exercise interventions had significantly greater reduction in anxiety for survivors with breast cancer than those with other types of cancer. Further, there was greater reduction in depression, fatigue, and sleep disturbances, and improvement in HRQoL, emotional wellbeing (EWB), physical functioning, and role function for cancer survivors diagnosed with cancers other than breast cancer but not for breast cancer. There were also greater improvements in HRQoL and physical functioning, and reduction in anxiety, fatigue, and sleep disturbances when prescribed a moderate or vigorous versus a mild exercise program.Results of the review need to be interpreted cautiously owing to the risk of bias. All the trials reviewed were at high risk for performance bias. In addition, the majority of trials were at high risk for detection, attrition, and selection bias. AUTHORS' CONCLUSIONS: This systematic review indicates that exercise may have beneficial effects at varying follow-up periods on HRQoL and certain HRQoL domains including physical functioning, role function, social functioning, and fatigue. Positive effects of exercise interventions are more pronounced with moderate- or vigorous-intensity versus mildintensity exercise programs. The positive results must be interpreted cautiously because of the heterogeneity of exercise programs tested and measures used to assess HRQoL and HRQoL domains, and the risk of bias in many trials. Further research is required to investigate how to sustain positive effects of exercise over time and to determine essential attributes of exercise (mode, intensity, frequency, duration, timing) by cancer type and cancer treatment for optimal effects on HRQoL and its domains

2319- gera: 160089/di/re

EXERCISE INTERVENTIONS ON HEALTH-RELATED QUALITY OF LIFE FOR CANCER SURVIVORS. MISHRA SI, SCHERER RW, GEIGLE PM, BERLANSTEIN DR, TOPALOGLU O, GOTAY CC, SNYDER C.. cochrane database syst rev. 2012; aug 15: (eng). BACKGROUND: Cancer survivors experience numerous disease and treatment-related adverse outcomes and poorer health-related quality of life (HRQoL). Exercise interventions are hypothesized to alleviate these adverse outcomes. HRQoL and its domains are important measures for cancer survivorship. OBJECTIVES: To evaluate the effectiveness of exercise on overall HRQoL and HRQoL domains among adult post-treatment cancer survivors. SEARCH METHODS: We searched the Cochrane Central Register of Controlled Trials (CENTRAL), PubMed, MEDLINE, EMBASE, CINAHL PsycINFO, PEDRO, LILACS, SIGLE, SportDiscus, OTSeeker, and Sociological Abstracts from inception to October 2011 with no language or date restrictions. We also searched citations through Web of Science and Scopus, PubMed's related article feature, and several websites. We reviewed reference lists of included trials and other reviews in the field. SELECTION CRITERIA: We included all randomized controlled trials (RCTs) and controlled clinical trials (CCTs) comparing exercise interventions with usual care or other nonexercise intervention to assess overall HRQoL or at least one HRQoL domain in adults. Included trials tested exercise interventions that were initiated after completion of active cancer treatment. We excluded trials including people who were terminally ill, or receiving hospice care, or both, and where the majority of trial participants were undergoing active treatment for either the primary or recurrent cancer. DATA COLLECTION AND ANALYSIS: Five paired review authors independently extracted information on characteristics of included trials, data on effects of the intervention, and assessed risk of bias based on predefined criteria. Where possible, meta-analyses results were performed for HRQoL and HRQoL domains for the reported difference between baseline values and follow-up values using standardized mean differences (SMD) and a random-effects model by length of follow-up. We also reported

the SMDs between mean follow-up values of exercise and control group. Because investigators used many different HRQoL and HRQoL domain instruments and often more than one for the same domain, we selected the more commonly used instrument to include in the SMD meta-analyses. We also report the mean difference for each type of instrument separately. MAIN RESULTS: We included 40 trials with 3694 participants randomized to an exercise (n = 1927) or comparison (n = 1764) group. Cancer diagnoses in study participants included breast, colorectal, head and neck, lymphoma, and other. Thirty trials were conducted among participants who had completed active treatment for their primary or recurrent cancer and 10 trials included participants both during and post cancer treatment. Mode of the exercise intervention included strength training, resistance training, walking, cycling, yoga, Qigong, or Tai Chi. HRQoL and its domains were measured using a wide range of measures. The results suggested that exercise compared with control has a positive impact on HRQoL and certain HRQoL domains. Exercise resulted in improvement in: global HRQoL at 12 weeks' (SMD 0.48; 95% confidence interval (CI) 0.16 to 0.81) and 6 months' (0.46; 95% CI 0.09 to 0.84) follow-up, breast cancer concerns between 12 weeks' and 6 months' follow-up (SMD 0.99; 95% CI 0.41 to 1.57), body image/self-esteem when assessed using the Rosenberg Self-Esteem scale at 12 weeks (MD 4.50; 95% CI 3.40 to 5.60) and between 12 weeks' and 6 months' (mean difference (MD) 2.70; 95% CI 0.73 to 4.67) follow-up, emotional well-being at 12 weeks' follow-up (SMD 0.33; 95% CI 0.05 to 0.61), sexuality at 6 months' followup (SMD 0.40; 95% CI 0.11 to 0.68), sleep disturbance when comparing follow-up values by comparison group at 12 weeks' follow-up (SMD -0.46; 95% CI -0.72 to -0.20), and social functioning at 12 weeks' (SMD 0.45; 95% CI 0.02 to 0.87) and 6 months' (SMD 0.49; 95% CI 0.11 to 0.87) follow-up. Further, exercise interventions resulted in decreased anxiety at 12 weeks' follow-up (SMD -0.26; 95% CI -0.07 to -0.44), fatigue at 12 weeks' (SMD -0.82; 95% CI -1.50 to -0.14) and between 12 weeks' and 6 months' (SMD -0.42; 95% CI -0.02 to -0.83) follow-up, and pain at 12 weeks' follow-up (SMD -0.29; 95% CI -0.55 to -0.04) when comparing follow-up values by comparison group. Positive trends and impact of exercise intervention existed for depression and body image (when analyzing combined instruments); however, because few studies measured these outcomes the robustness of findings is uncertain. No conclusions can be drawn regarding the effects of exercise interventions on HRQoL domains of cognitive function, physical functioning, general health perspective, role function, and spirituality. Results of the review need to be interpreted cautiously owing to the risk of bias. All the trials reviewed were at high risk for performance bias. In addition, the majority of trials were at high risk for detection, attrition, and selection bias. AUTHORS' CONCLUSIONS: This systematic review indicates that exercise may have beneficial effects on HRQoL and certain HRQoL domains including cancer-specific concerns (e.g. breast cancer), body image/selfesteem, emotional well-being, sexuality, sleep disturbance, social functioning, anxiety, fatigue, and pain at varying followup periods. The positive results must be interpreted cautiously due to the heterogeneity of exercise programs tested and measures used to assess HRQoL and HRQoL domains, and the risk of bias in many trials. Further research is required to investigate how to sustain positive effects of exercise over time and to determine essential attributes of exercise (mode, intensity, frequency, duration, timing) by cancer type and cancer treatment for optimal effects on HRQoL and its domains

2320- gera: 160110/di/re

ACUPUNCTURE COMPARED WITH PLACEBO ACUPUNCTURE IN RADIOTHERAPY-INDUCED NAUSEA, A RANDOMIZED CONTROLLED STUDY, ENBLOM A, JOHNSSON A, HAMMAR M, ONELÖV E, STEINECK G, BÖRJESON S.. annals of oncology. 2012;23(5):1353-61 (eng).

BACKGROUND: It is not known if verum (real) acupuncture is effective for nausea and vomiting (emesis) during radiotherapy. PATIENTS AND METHODS: We randomly treated 215 blinded cancer patients with verum: penetrating 'deqi' creating acupuncture (n = 109) or non-penetrating sham

needles (n = 106) two to three times per week. The patients documented emesis daily during the radiotherapy period. Primary end point was the number of patients with at least one episode of nausea. RESULTS: In the verum and the sham acupuncture group, 70% and 62% experienced nausea at least once during the radiotherapy period (relative risk 1.1, 95% CI 0.9-1.4) for a mean number of 10.1 and 8.7 days. Twenty five percent and 28% vomited, and 42% and 37% used antiemetic drugs at least once, respectively. Ninety-five percent in the verum acupuncture group and 96% in the sham acupuncture group believed that the treatment had been effective against nausea. In both groups, 67% experienced positive effects on relaxation, mood, sleep or pain reduction and 89% wished to receive the treatment again. CONCLUSION: Acupuncture creating deqi is not more effective than sham in radiotherapy-induced nausea, but in this study, nearly all patients in both groups experienced that the treatment was effective for nausea

2321- gera: 160385/di/re

DYSPNEA REVIEW FOR THE PALLIATIVE CARE PROFESSIONAL: TREATMENT GOALS AND THERAPEUTIC OPTIONS. KAMAL AH, MAGUIRE JM, WHEELER JL, CURROW DC, ABERNETHY AP.. j palliat med.. 2012;15(1):106-14 (eng).

Although dyspnea is frequently encountered in the palliative care setting, its optimal management remains uncertain. Clinical approaches begin with accurate assessment, as delineated in part one of this two-part series. Comprehensive dyspnea assessment, which encompasses the physical, emotional, social, and spiritual aspects of this complex symptom, guide the clinician in choosing therapeutic approaches herein presented as part two. Global management of dyspnea is appropriate both as complementary to diseasetargeted treatments that target the underlying etiology, and as the sole focus when the symptom has become intractable, disease is maximally treated, and goals of care shift to comfort and quality of life. In this setting, current evidence supports the use of oral or parenteral opioids as the mainstay of dyspnea management, and of inhaled furosemide and anxiolytics as adjuncts. Nonpharmacologic interventions such as acupuncture and pulmonary rehabilitation have potential effectiveness, although further research is needed, and use of a simple fan warrants consideration given its potential benefit and minimal burden and cost.

2322- gera: 161048/di/ra

INFLUENCE OF ELECTROACUPUNCTURE ON TUMOR NECROSIS FACTOR-A AND VASCULAR ENDOTHELIAL GROWTH FACTOR IN RATS WITH EXPERIMENTAL

ARTHRITIS. JIE GAO 高洁, BA-SI OUYANG 欧阳八四, XIAO-

QUN YE 叶晓群, JIAN-LI CHE 车建丽, YIN ZHANG 张音,

TIAN-YAN HU 胡天燕, HAI-ZHOU YANG 杨海洲. journal of acupuncture and tuina science. 2012;10(4):204-208 (eng). Objective To observe the effect of electroacupuncture (EA) on tumor necrosis factor-α (TNF-α) and vascular endothelial growth factor (VEGF) in peripheral blood and joint fluid of collagen-induced arthritis (CIA) rats. Methods After CIA rat models were successfully established, the rats were given corresponding intervention treatments. The levels of TNF- α and VEGF in peripheral blood and joint fluid were measured. Results The levels of TNF-α and VEGF levels in peripheral blood and joint fluid of CIA rats were higher than those of normal group (P<0.05); EA treatment significantly decreased the index levels, of significant difference compared with those before treatment (P<0.05), as well as the model group (P<0.05). Conclusion EA can significantly decrease the TNF-α and VEGF levels in peripheral blood and joint fluid of CIA rats, and helps restrain further development of the disease.

2323- gera: 161073/di/ra

ELECTROACUPUNCTURE COMBINED WITH AURICULAR POINT STICKING FOR HICCUPS IN LATE-STAGE

CANCER. XIA-PING SHAO 邵霞萍. journal of acupuncture and tuina science. 2012;10(2):117-119 (eng). Objective To observe the clinical efficacy of electroacupuncture combined with auricular point sticking for

hiccups occurring in late-stage cancer. Methods A total of 30 cases of hiccups in late-stage cancer were included and treated with electroacupuncture combined with auricular point sticking. Results Of the 30 cases, 10 cases showed marked effect, 18 cases showed improvement and 2 cases failed, with a total effective rate of 93.3%. Conclusion Electroacupuncture combined with auricular point sticking is an effective method to relieve hiccups in late-stage cancer

2324- gera: 161077/di/ra

EFFEČTS OF ACUPUNCTURE AND MOXIBUSTION ON IMMUNOLOGIC SUPPRESSION IN TUMOR-BEARING

MICE. HAI-YAN LI 李海燕, JIAN PEI 裴建, QIN-HUI FU

傅勤慧, ZHI-DAN LIU 刘志丹, LIN-NA YU 俞林娜. journal of acupuncture and tuina science. 2012;10(1):1-8 (eng). Objective To observe the effects of electroacupuncture (EA) and moxibustion on the immunologic suppression in tumor. Methods Forty-eight male Balb/c mice were randomly allocated into an EA group, a moxibustion group, a tumor-bearing group, and a normal group, 12 mice in each group. After tumor models were made, mice in the EA and moxibustion groups were treated with EA and moxibustion at Dazhui (GV 14) respectively. Survival rate, tumor inhibited rate, spleen index, and thymus gland index were observed after 6 treatments. The proliferation of spleen lymphocyte of mice stimulated by ConA was measured with AlamarBlue method, and the expression of Foxp3 mRNA, Stat5a mRNA, and Stat5b mRNA of spleen lymphocyte, and Foxp3 mRNA thymus gland lymphocyte were tested with RT-PCR. Results The survival rate of mice in the moxibustion group was higher than that in the tumor-bearing group without statistic difference. Spleen indexes of mice in the EA group and moxibustion group was higher than that in the tumor-bearing group (P<0.05). Thymus gland indexes of mice in the EA group and moxibustion group were higher than that in the tumor-bearing group without statistic difference. Reducing values of proliferation of spleen lymphocyte of mice in the EA, moxibustion, and tumor-bearing groups were higher than that in the normal group (P<0.05), and the value in the moxibustion group was higher than that in the tumor-bearing group (P<0.05). Expression of Foxp3 mRNA, Stat5a mRNA, and Stat5b mRNA of spleen lymphocyte were up-regulated in the tumor-bearing mice higher than that in the normal mice (P<0.05). The expressions of Foxp3 mRNA, Stat5a mRNA and Stat5b mRNA of the spleen lymphocyte were down- regulated in the EA and moxibustion groups more than that in the tumorbearing group (P<0.05); the expression of Foxp3 mRNA was higher in thymus gland of tumor-bearing mice than that of the normal mice (P<0.05). Expression of Foxp3 mRNA in thymus gland of mice in the moxibustion group is lower than that in the tumor-bearing group (P<0.05). Expression of Foxp3 mRNA in thymus gland of mice in the EA group was lower than that in the tumor-bearing group without statistic difference. Conclusion EA and moxibustion could enhance the spleen index and the proliferation of spleen lymphocyte of tumorbearing mice. The effect of acupuncture-moxibustion therapy on tumor immunologic suppression may be related to the down-regulation of expression of Foxp3 mRNA, Stat5a mRNA, and Stat5b mRNA of the spleen lymphocyte, and Foxp3 mRNA thymus gland lymphocyte.

2325- gera: 161366/di/re

REDUCING VASOMOTOR SYMPTOMS WITH **ACUPUNCTURE IN BREAST CANCER PATIENTS** TREATED WITH ADJUVANT TAMOXIFEN: A RANDOMIZED CONTROLLED TRIAL. LILJEGREN A, GUNNARSSON P, LANDGREN BM, ROBÉUS N, JOHANSSON H, ROTSTEIN S.. breast cancer res treat.. 2012;135(3):791-8 (eng). To evaluate true acupuncture to control acupuncture (CTRL) (non-insertive stimulation at non-acupuncture points) in breast cancer patients treated with adjuvant tamoxifen suffering from hot flushes and sweatings. Eighty-four patients were randomized to receive either true acupuncture or CTRL twice a week for 5 weeks. Seventy-four patients were treated according to the protocol. In the true acupuncture group 42% (16/38) reported improvements in hot flushes after 6 weeks compared to 47% (17/36) in the CTRL group (95% CI, -28 to 18%). Both groups reported improvement regarding severity and frequencies in hot flushes and sweatings but no statistical

difference was found between the groups. In a subanalysis regarding the severity of sweatings at night a statistically significant difference P = 0.03 was found in the true acupuncture group. Former experience of true acupuncture did not influence the perception of true acupuncture or CTRL. No significant differences in hormonal levels were found before and after treatment. In conclusion, convincing data that true acupuncture is more effective than CTRL in reducing vasomotor symptoms is still lacking. Our study shows that both true and CTRL reduce vasomotor symptoms in breast cancer patients treated with

2326- gera: 162020/di/ra

[EXPLORATION ON THE FUNCTION AND CLINICAL SIGNIFICANCE OF MERIDIANS AND COLLATERALS IN TUMOR METASTASIS BASED ON QUEPEN (ST 12)]. ZHANG J, WANG P, LIU LM, CHEN Z, MENG ZQ, MA CZ. chinese acupuncture and moxibustion. 2012;32(12):1099-102 (chi).

The relationship among Quepen (ST 12), meridians that run through Quepen(ST 12) and primary lesion of tumor that metastasized to supraclavicular lymph node [the location of Quepen (ST 12)] are analyzed on the basis of the meridians-collaterals theory, investigation on literature and clinical practice and the clinical feature that varies primary tumor are always bound to supraclavicular lymph node metastasis. Integrated with clinical practice, the function and clinical significance of meridians and collaterals in treating cancer are preliminarily put for ward. The tumor and it's metastasis that locate in the regions where the meridians run through are taken into consideration in acknowledging and treating

2327- gera: 162055/di/ra

[THIRTY-ONE CASES OF SKIN FIBROSIS AFTER RADIOTHERAPY FOR ESOPHAGEAL CARCINOMA TREATED BY CENTRO-SQUARE NEEDLING COMBINED WITH BLOOD LETTING THERAPY]. FENG G. chinese acupuncture and moxibustion. 2012;32(10):901-2 (chi).

2328- gera: 155986/di/re

ACUPUNCTURE FOR CANCER-RELATED FATIGUE: A SYSTEMATIC REVIEW OF RANDOMIZED CLINICAL TRIALS. POSADZKI P, MOON TW, CHOI TY, PARK TY, LEE MS, ERNST E.. support care cancer. 2013; Feb 24.: (eng). PURPOSE: Managing cancer-related fatigue (CRF) is an important element of the palliative care of cancer patients. The aim of this systematic review was to critically evaluate the effectiveness of acupuncture (AT) or electroacupuncture (EA) for CRF. METHODS: Fourteen databases were searched from their respective inception to November 2012. Randomized clinical trials (RCTs) of AT or EA for the treatment of CRF were considered for inclusion. The risk of bias/methodological quality was assessed using the method suggested by the Cochrane Collaboration. RESULTS: Seven RCTs met the eligibility criteria. Most were small pilot studies with serious methodological flaws. Four of the RCTs showed effectiveness of AT or AT in addition to usual care (UC) over sham AT, UC, enhanced UC, or no intervention for alleviating CRF. Three RCTs showed no effect of AT/EA over sham treatment. CONCLUSION: Overall, the quantity and quality of RCTs included in the analysis were too low to draw meaningful conclusions. Even in the positive trials, it remained unclear whether the observed outcome was due to specific effects of AT/EA or nonspecific effects of care. Further research is required to investigate whether AT/EA demonstrates specific effects on CRF.

2329- gera: 157620/di/re

SYSTEMATIC REVIEW OF ACUPUNCTURE IN CANCER CARE: A SYNTHESIS OF THE EVIDENCE. GARCIA MK, MCQUADE J, HADDAD R, PATEL S, LEE R, YANG P, PALMER JL, COHEN L.. j clin oncol. 2013;31(7):952-60 (eng)

PURPOSE Many cancer centers offer acupuncture services. To date, a comprehensive systematic review of acupuncture in cancer care has not been conducted. The purpose of this review was to evaluate the efficacy of acupuncture for symptom management in patients with cancer. METHODS Medline, Embase, CINAHL, Cochrane (all databases), Scopus,

and PubMed were searched from inception through December 2011 for prospective randomized clinical trials (RCT) evaluating acupuncture for symptom management in cancer care. Only studies involving needle insertion into acupuncture points were included. No language limitations were applied. Studies were assessed for risk of bias (ROB) according to Cochrane criteria. Outcomes by symptom were designated as positive, negative, or unclear. Results A total of 2,151 publications were screened. Of those, 41 RCTs involving eight symptoms (pain, nausea, hot flashes, fatigue, radiationinduced xerostomia, prolonged postoperative ileus, anxiety/mood disorders, and sleep disturbance) met all inclusion criteria. One positive trial of acupuncture for chemotherapy-induced nausea and vomiting had low ROB. Of the remaining studies, eight had unclear ROB (four positive, three negative, and one with unclear outcomes). Thirty-three studies had high ROB (19 positive, 11 negative, and three with both positive and negative outcomes depending on the symptom). CONCLUSION Acupuncture is an appropriate adjunctive treatment for chemotherapy-induced nausea/vomiting, but additional studies are needed. For other symptoms, efficacy remains undetermined owing to high ROB among studies. Future research should focus on standardizing comparison groups and treatment methods, be at least singleblinded, assess biologic mechanisms, have adequate statistical power, and involve multiple acupuncturists.

2330- gera: 159343/di/re
BREATHING EXERCISES IMPROVE POST-OPERATIVE PULMONARY FUNCTION AND QUALITY OF LIFE IN PATIENTS WITH LUNG CANCER: A META-ANALYSIS WEI LIU. YING-LI PAN. CAI-XIANG GAO. ZUO SHANG. LI-JUAN NING, XING LIU. experimental and therapeutic medicine. 2013;5(4):1194-200 (eng).

Previous research has shown that breathing exercises may improve the prognosis and health status in patients with lung cancer by enhancing pulmonary function and quality of life (QOL). However, individually published results are inconclusive. The aim of the present meta-analysis was to evaluate the clinical value of breathing exercises on post-operative pulmonary function and QOL in patients with lung cancer. A literature search of Pubmed, Embase, the Web of Science and CBM databases was conducted from their inception through to October 2012. Crude standardized mean differences (SMDs) with 95% confidence intervals (CIs) were used to assess the effect of breathing exercises. A total of eight clinical studies were ultimately included with 398 lung cancer patients. When all the eligible studies were pooled into the meta-analysis, there was a significant difference between the pre-intervention and post-intervention results of breathing exercises on post-operative pulmonary function; forced expiratory volume in 1 sec (FEV1): SMD, 3.37; 95% CI, 1.97-4.77; P<0.001; FEV1/FVC: SMD, 1.77; 95% CI, 0.15-3.39; P=0.032). Furthermore, the QOL in patients with lung cancer was significantly improved following the intervention with breathing exercises; there were significant differences between the pre-intervention and post-intervention results on the ability of self-care in daily life (SMD, -1.00; 95% CI, -1.467 to -0.52; P<0.001), social activities (SMD, -0.94; 95% CI, -1.73 to -0.15; P=0.02), symptoms of depression (SMD, -0.91; 95% CI, -1.25 to -0.57; P<0.001) and symptoms of anxiety (SMD, -0.91; 95% CI, -1.20 to -0.63; P<0.001). Results from the present meta-analysis suggest that breathing exercises may significantly improve post-operative pulmonary function and QOL in patients with lung cancer.

2331- gera: 159359/di/re

A SYSTEMATIC REVIEW OF COMPLEMENTARY AND ALTERNATIVE MEDICINE INTERVENTIONS FOR THE MANAGEMENT OF CANCER-RELATED FATIGUE.

Finnegan-John J, Molassiotis A, Richardson A, Ream E. integr cancer ther. 2013;apr 30: (eng).

Fatigue, experienced by patients during and following cancer treatment, is a significant clinical problem. It is a prevalent and distressing symptom yet pharmacological interventions are used little and confer limited benefit for patients. However, many cancer patients use some form of complementary and alternative medicine (CAM), and some evidence suggests it may relieve fatigue. A systematic review was conducted to

appraise the effectiveness of CAM interventions in ameliorating cancer-related fatigue. Systematic searches of biomedical, nursing, and specialist CAM databases were conducted, including Medline, Embase, and AMED. Included papers described interventions classified as CAM by the National Centre of Complementary and Alternative Medicine and evaluated through randomized controlled trial (RCT) or quasi-experimental design. Twenty studies were eligible for the review, of which 15 were RCTs. Forms of CAM interventions examined included acupuncture, massage, yoga, and relaxation training. The review identified some limited evidence suggesting hypnosis and ginseng may prevent rises in cancerrelated fatigue in people undergoing treatment for cancer and acupuncture and that biofield healing may reduce cancerrelated fatigue following cancer treatments. Evidence to date suggests that multivitamins are ineffective at reducing cancerrelated fatigue. However, trials incorporated within the review varied greatly in quality; most were methodologically weak and at high risk of bias. Consequently, there is currently insufficient evidence to conclude with certainty the effectiveness or otherwise of CAM in reducing cancer-related fatigue. The design and methods employed in future trials of CAM should be more rigorous; increasing the strength of evidence should be a priority.

2332- gera: 159371/di/re

COMPLEMENTARY THERAPIES AND INTEGRATIVE MEDICINE IN LUNG CANCER: DIAGNOSIS AND MANAGEMENT OF LUNG CANCER, 3RD ED: AMERICAN **COLLEGE OF CHEST PHYSICIANS EVIDENCE-BASED CLINICAL PRACTICE GUIDELINES. DENG GE, RAUSCH** SM, JONES LW, GULATI A, KUMAR NB, GREENLEE H, PIETANZA MC, CASSILETH BR. chest.. 2013;143(5 Suppl):420-36 (eng).

BACKGROUND: Physicians are often asked about complementary therapies by patients with cancer, and data show that the interest in and use of these therapies among patients with cancer is common. Therefore, it is important to assess the current evidence base on the benefits and risks of complementary therapies (modalities not historically used in modern Western medicine). METHODS: A systematic literature review was carried out and recommendations were made according to the American College of Chest Physicians Evidence-Based Clinical Practice Guidelines development methodology. RESULTS: A large number of randomized controlled trials, systematic reviews, and meta- analyses, as well as a number of prospective cohort studies, met the predetermined inclusion criteria. These trials addressed many different issues pertaining to patients with lung cancer, such as symptoms of anxiety, mood disturbance, pain, quality of life, and treatment-related side effects. The available data cover a variety of interventions, including acupuncture, nutrition, mindbody therapies, exercise, and massage. The body of evidence supports a series of recommendations. An evidenced-based approach to modern cancer care should integrate complementary therapies with standard cancer therapies such as surgery, radiation, chemotherapy, and best supportive care measures. CONCLUSIONS: Several complementary therapy modalities can be helpful in improving the overall care of patients with lung cancer.

2333- gera: 159375/di/re

ACUPUNCTURE FOR CANCER PAIN AND RELATED SYMPTOMS. LU W, ROSENTHAL DS.. curr pain headache rep. 2013;17(3):321 (eng).

Cancer pain is one of most prevalent symptoms in patients with cancer. Acupuncture and related techniques have been suggested for the management of cancer pain. The National Comprehensive Cancer Network guidelines for adult cancer pain recommends acupuncture, as one of several integrative interventions, in conjunction with pharmacologic intervention as needed. This review presents the latest available evidence regarding the use of acupuncture for cancer pain. It also provides "actionable" acupuncture protocols for specific cancer pain conditions and related symptoms in order to provide more clinically relevant solutions for clinicians and cancer patients with pain. These conditions include postoperative cancer pain, postoperative nausea and vomiting, postsurgical gastroparesis syndrome, opioid-induced constipation, opioid-induced

pruritus, chemotherapy-induced neuropathy, aromatase inhibitor-associated joint pain, and neck dissection-related pain and dysfunction.

2334- gera: 159956/di/re

THE BENEFITS OF MEDICAL QIGONG IN PATIENTS WITH CANCER: A DESCRIPTIVE PILOT STUDY. OVERCASH J, WILL KM, LIPETZ DW. clin j oncol nurs. 2013;17(6):654-8

Medical Qigong (MQ) is a mind-body exercise that includes movement and meditation and is beneficial in reducing high blood pressure, high cholesterol, anxiety, stress, pain, and incidence of falls. The purpose of the current study was to determine whether patients with cancer and survivors who participated in an MQ class experienced a change in fatigue, depression, and sleep from a preintervention evaluation to a postintervention evaluation. Participants were patients diagnosed with cancer who participated in MQ classes. Some were actively undergoing cancer treatment (e.g., surgery, hormone therapy, radiation therapy, chemotherapy) and some were receiving no treatment. Patients diagnosed with cancer and enrolled in an MQ class were invited to participate. A packet of surveys was completed before the first class and before the final class. Scores showed a reduced depression score after completing the five-week MQ course. Those findings indicate that MQ is helpful in reducing some of the problems associated with cancer and cancer treatme

2335- gera: 160013/di/ra

THE EFFECT OF ACUPUNCTURE ON POST-CANCER **FATIGUE AND WELL-BEING FOR WOMEN RECOVERING** FROM BREAST CANCER: A PILOT RANDOMISED CONTROLLED TRIAL. SMITH C, CANNADY B, THORNTON C, PERZ J, USSHER JM. acupunct med. 2013;31(1):9-15

Objective To determine the feasibility and acceptability of acupuncture in managing fatigue and well-being in breast cancer survivors. Methods A randomised controlled trial compared acupuncture was with sham acupuncture and wait list controls was performed in Sydney, Australia. A total of 30 women with fatigue following breast cancer treatment participated in the trial. Women received six sessions of acupuncture over 8 weeks. Outcomes related to an assessment of interest to participate in the trial and identification of appropriate recruitment strategies, appropriateness of eligibility criteria and compliance with treatment attendance. Clinical outcomes assessed fatigue and well-being. In-depth interviews were undertaken with seven women, who described their experience of acupuncture. Results Our study demonstrated feasibility with appropriate trial entry criteria, good acceptability and treatment compliance with the study interventions, and with the completion of outcome forms. There was a significant reduction in fatigue for women receiving acupuncture compared with control after 2 weeks mean difference (MD) 5.3, 95% CI 4.5 to 6.2, p=0.05, and a significant improvement in well-being at 6 weeks for acupuncture compared with the sham and wait list control, MD 2.7, 95% CI 2.1 to 3.2, p=0.006. Women described their experience of acupuncture positively, and interview data may also offer explanations for the improved outcomes of wellbeing, with women reporting an improvement in sleep, mood and relaxation. Conclusions Fatigue is a common symptom experienced by people recovering from treatment, and an appropriately powered trial to evaluate the effect of acupuncture is needed.

2336- gera: 160051/di/re

ACUPUNCTURE FOR THE TREATMENT OF POST-CHEMOTHERAPY CHRONIC FATIGUE: A RANDOMIZED, BLINDED, SHAM-CONTROLLED TRIAL, Deng G, Chan Y, Sjoberg D, Vickers A, Yeung KS, Kris M, Straus D, Cassileth B.. support care cancer. 2013;21(6):1735-41 (eng) PURPOSE: Many cancer patients experience persistent fatigue after the completion of chemotherapy. A previous single-arm study provided evidence for an effect of acupuncture in this population. We conducted a randomized controlled trial to determine whether acupuncture reduces post-chemotherapy chronic fatigue more effectively than sham acupuncture. METHODS: Cancer patients reporting significant fatigue persisting for at least 2 months following the completion of chemotherapy were randomized to receive once weekly true or sham acupuncture for 6 weeks. Fatigue was evaluated before and after treatment using the Brief Fatigue Inventory (BFI, the primary endpoint). Secondary endpoints included the Hospital Anxiety and Depression Scale (HADS) and Functional Assessment of Cancer Treatment-General (FACT-G) scores. RESULTS: One hundred one patients were randomized with 74 (34 true acupuncture; 40 sham control) evaluated for the primary endpoint. BFI scores fell by about one point between baseline and follow-up in both groups with no statistically significant difference between groups. HADS and FACT-G scores also improved in both groups, but there was no significant difference between groups. Patients in the sham acupuncture group crossed over to receive true acupuncture in week 7. No long-term reduction of fatigue scores was observed at the 6-month evaluation. CONCLUSIONS: True acupuncture as provided in this study did not reduce postchemotherapy chronic fatigue more than did sham acupuncture. The study is limited by the number of patients lost to follow-up. We also cannot exclude the possibility that a more intensive treatment regimen may be more effective

2337- gera: 160078/di/ra

THE EFFECT OF COMPLEMENTARY AND ALTERNATIVE MEDICINE ON THE QUALITY OF LIFE OF CANCER SURVIVORS: A SYSTEMATIC REVIEW AND META-ANALYSES. SHNEERSON C, TASKILA T, GALE N, GREENFIELD S, CHEN YF. complement ther med. 2013;21(4):417-29 (eng).

PURPOSE: To assess whether quality of life (QOL) improved in cancer survivors who had undertaken a complementary and alternative medicine (CAM) intervention, compared to cancer survivors who had not. METHODS: A systematic review of randomised controlled trials (RCTs) was undertaken. Electronic databases including MEDLINE, Cochrane CENTRAL, CINAHL, PSYCHINFO, EMBASE, and ClinicalTrials.gov were searched from 1990 to 2012. Search terms incorporating the concepts of cancer survivors, QOL and various types of CAM were used. RESULTS: From 1767 records retrieved and screened 13 full text articles were included in the review. Nine studies were deemed to have a high risk, one a low risk, and three an unclear risk of bias. CAM interventions used incorporated yoga, meditation or mindfulness, energy healing, medical gigong, homoeopathy, or mistletoe therapy. Ten of the studies used breast cancer survivors, whilst the remaining three included other cancer types. The studies had mixed results either showing a significantly greater improvement in QOL in the intervention group compared to the control group, or no significant difference between groups. However, twelve studies were of low to moderate quality, limiting the robustness of findings. CONCLUSIONS: This review has identified significant gaps in the evidence base for the effectiveness of CAM on QOL in cancer survivors. Further work in this field needs to adopt more rigorous methodology to help support cancer survivors to actively embrace self-management and effective CAMs, without recommending inappropriate interventions which are of no proven benefit.

2338- gera: 160092/di/re
ACUPUNCTURE AND ACUPRESSURE FOR CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING: A SYSTEMATIC REVIEW MCKEON C, SMITH CA, HARDY J, CHANG E. aust j acupunct chin med. 2013;8(1):2-27 (eng). Background: Control of chemotherapy-induced nausea and vomiting (CINV) has improved with advances in antiemetics, such as NK1 antagonists. Despite these advances, patients still experience these symptoms, and expert panels encourage additional methods to reduce these symptoms. Objectives: The objective was to assess the effectiveness of acupuncture and acupressure on acute and delayed CINV in cancer patients. Search strategy: The following databases were searched: AMED, MEDLINE, CINAHL, PubMed, Cochrane Controlled Trials Registry, and Science Direct. The search was undertaken from the inception of the database to January 2012. Selection criteria: Randomised controlled trials and systematic reviews of acupoint stimulation by needles, electrical stimulation or acupressure (excluding laser, point

injection and non-invasive electrostimulation) and assessing chemotherapy-induced nausea or vomiting, or both. Data collection and analysis: Data was provided by publications of original trials and pooled. Standardised mean differences with confidence incidences were calculated. Main results: Seven trials were pooled for acupuncture and six for acupressure. Acupuncture reduced the frequency of acute vomiting (mean difference [MD] -7.40, 95% confidence interval [CI] -9.07 to -5.72), but did not reduce acute nausea severity or frequency compared to control. Delayed symptoms for acupuncture were not reported. Acupuncture showed a reduction in the dose of rescue medication (MD - 5.52, 95% CI -7.45 to -3.58) Acupressure showed a decrease in frequency of nausea (MD -0.32, 95% CI -0.59 to 0.06) but not acute vomiting or delayed symptoms. All trials used state-of-the-art combination antiemetics, except for the early electroacupuncture trials. Authors' conclusions: Acupuncture has demonstrated some benefit for chemotherapy- induced acute vomiting by reducing the frequency of vomiting and reducing the use of rescue medication, while acupressure has shown a decrease in the frequency of nausea. Further trials of acupuncture and acupressure for chemotherapy-induced nausea and vomiting in patients with refractory symptoms are needed before recommendations for clinical practice can be made. Future trials must be sufficiently powered, as this remains a major flaw with the majority of studies to date.

2339- gera: 160145/di/re

DO RANDOMIZED ACUPUNCTURE STUDIES IN PATIENTS WITH CANCER NEED A SHAM ACUPUNCTURE CONTROL ARM? AZAD A AND JOHN T. journal of clinical oncology. 2013;31: (eng).

2340- gera: 160146/di/re

ACUPUNCTURE IN THE TREATMENT OF UPPER-LIMB LYMPHEDEMA: RESULTS OF A PILOT STUDY. Cassileth BR, Van Zee KJ, Yeung KS, Coleton MI, Cohen S, Chan YH, Vickers AJ, Sjoberg DD, Hudis CA.. cancer. 2013;119(13):2455-61 (eng).

BACKGROUND: Current treatments for lymphedema after breast cancer treatment are expensive and require ongoing intervention. Clinical experience and our preliminary published results suggest that acupuncture is safe and potentially useful. This study evaluates the safety and potential efficacy of acupuncture on upper-limb circumference in women with lymphedema. METHODS: Women with a clinical diagnosis of breast cancer-related lymphedema (BCRL) for 0.5-5 years and with affected arm circumference ≥2 cm larger than unaffected arm received acupuncture treatment twice weekly for 4 weeks. Affected and unaffected arm circumferences were measured before and after each acupuncture treatment. Response, defined as ≥30% reduction in circumference difference between affected/unaffected arms, was assessed. Monthly follow-up calls for 6 months thereafter were made to document any complications and self-reported lymphedema status. RESULTS: Among 37 enrolled patients, 33 were evaluated; 4 discontinued due to time constraints. Mean reduction in arm circumference difference was 0.90 cm (95% CI, 0.72-1.07; P < .0005). Eleven patients (33%) exhibited a reduction of ≥30% after acupuncture treatment. Seventy-six percent of patients received all treatments; 21% missed 1 treatment, and another patient missed 2 treatments. During the treatment period, 14 of the 33 patients reported minor complaints, including mild local bruising or pain/tingling. There were no serious adverse events and no infections or severe exacerbations after 255 treatment sessions and 6 months of follow-up interviews. CONCLUSIONS: Acupuncture for BCRL appears safe and may reduce arm circumference. Although these results await

confirmation in a randomized trial, acupuncture can be considered for women with no other options for sustained arm circumference reduction.

2341- gera: 160245/di/re

ELECTROACUPUNCTURE TREATMENT FOR PANCREATIC CANCER PAIN: A RANDOMIZED CONTROLLED TRIAL. CHEN H, LIU TY, KUAI L, ZHU J, WU CJ, LIU LM. pancreatology. 2013;13(6):594-7 (eng). BACKGROUND: Pancreatic cancer is often accompanied by severe abdominal or back pain. It's the first study to evaluate

the analgesic effect of electroacupuncture on pancreatic cancer pain. A randomized controlled trial compared electroacupuncture with control acupuncture using the placebo needle. METHODS: Sixty patients with pancreatic cancer pain were randomly assigned to the electroacupuncture group (n = 30) and the placebo control group (n = 30). Patients were treated on Jiaji (Ex-B2) points T8-T12 bilaterally for 30 min once a day for 3 days. Pain intensity was assessed with numerical rated scales (NRS) before the treatment (Baseline), after 3 treatments, and 2 days follow-up. RESULTS: Baseline characteristics were similar in the two groups. After 3 treatment, pain intensity on NRS decreased compared with Baseline (-1.67, 95% confidence interval [CI] -1.46 to -1.87) in the electroacupuncture group; there was little change (-0.13, 95% CI 0.08 to -0.35) in control group; the difference between two groups was statistically significant (P < 0.001). Follow-up also found a significant reduction in pain intensity in the electroacupuncture group compared with the control group (P < 0.001). CONCLUSIONS: Electroacupuncture was an effective treatment for relieving pancreatic cancer pain.

2342- gera: 160304/di/ra

EFFECTIVENESS OF ACUPUNCTURE FOR PALLIATIVE CARE IN CANCER PATIENTS: A SYSTEMATIC REVIEW. LIAN WL, PAN MQ, ZHOU DH, ZHANG ZJ.. chin j integr med.. 2013; dec 13: (eng).

OBJECTIVE: To critically evaluate the currently available randomized clinical trials regarding the effectiveness of acupuncture in palliative care for cancer patients, hence, to provide sufficient evidences for the widespread use of acupuncture in cancer treatment. METHODS: Two independent reviewers extracted data from all of the randomized clinical trials (RCTs) that assessed the efficacy of acupuncture in palliative care for cancer patients. Seven databases were searched from their respective inception to December 2010. All eligible trials identified were evaluated by two independent reviewers using the Jadad scale, and data from the articles were validated and extracted. RESULTS: In total, 33 RCTs met the inclusion criteria. The effects of acupuncture on different cancer-related aspects were shown, including chemotherapy or radiotherapy-induced side effects (13/33, 39.4%), cancer pain (6/33, 18.2%), post-operative urinary retention (4/33, 12.1%), quality of life (2/33, 6.1%), vasomotor syndrome (2/33, 6.1%), post- operative gastrointestinal dysfunction (2/33, 6.1%), prevention of prolonged postoperative ileus (2/33, 6.1%), joint symptoms (1/33, 3.0%), and immunomodulation (1/33, 3.0%). CONCLUSIONS: The result of our systematic review suggested that the effectiveness of acupuncture in palliative care for cancer patients is promising, especially in reducing chemotherapy or radiotherapy-induced side effects and cancer pain. Acupuncture may be an appropriate adjunctive treatment for palliative care.

2343- gera: 160317/di/re

ACUPUNCTURE AND MOXIBUSTION FOR CANCER-RELATED FATIGUE: A SYSTEMATIC REVIEW AND META-ANALYSIS. HE XR, WANG Q, LI PP. asian pac j cancer prev. 2013;14(5):3067-74 (eng).

Background: Faced with highly prevalent and recalcitrant cancer-related fatigue (CRF), together with the absence of any official guidelines on management, numerous groups have been striving to seek and test alternative therapies including acupuncture and moxibustion. However, different patients have various feedbacks, and the many clinical trials have given rise to varied conclusions. In terms of the therapeutic effect of acupuncture and moxibustion, there exist vast inconsistencies. Objective: The aim of the study was to evaluate the auxiliary effectiveness of acupuncture and moxibustion in the treatment of CRF, and to provide more reliable evidence to guide clinical practice. Methods: Randomized controlled trials (RCTs) published before December 2012 were all aggregated, focusing on evaluation of acupuncture or moxibustion for CRF. The quality of the included studies was assessed basing on Cochrane handbook 5.1.0, and the available data were analyzed with RevMan software (version 5.2.0). Descriptive techniques were performed when no available data could be used. Results: A total of 7 studies involving 804 participants were eligible. With real acupuncture versus sham acupuncture,

subjects receiving true acupuncture benefited more in the reduction of fatigue. With real acupuncture versus acupressure or sham acupressure, fatique level appeared 36% improved in the acupuncture group, but 19% in the acupressure group and only 0.6% with sham acupressure. When real acupuncture plus enhanced routine care was compared with enhanced routine care, the combination group improved mean scores for general fatigue, together with physical and mental fatigue. With real acupuncture versus sham acupuncture or wait list controls, the real acupuncture group displayed significant advantages over the wait list controls at 2 weeks for fatigue improvement and better well-being effects at 6 weeks. When moxibustion plus routine care was compared with routine care alone, the meta-analyses demonstrated the combination had a relatively significant benefit in improving severe fatigue and QLQ-C30. Conclusion: Up to the search date, there exist few high quality RCTs to evaluate the effect of acupuncture and moxibustion, especially moxibustion in English. Yet acupuncture and moxibustion still appeared to be efficacious auxiliary therapeutic methods for CRF, in spite of several inherent defects of the included studies. Much more highquality studies are urgently needed.

2344- gera: 160394/di/ra

META-ANALYSIS OF RANDOMIZED CONTROLLED TRIALS OF ACUPUNCTURE FOR CANCER-RELATED FATIGUE. ZENG Y, LUO T, FINNEGAN-JOHN J, CHENG AS.. integr cancer ther. 2013; Nov 25: (eng). BACKGROUND: . Fatigue is a distressing and pervasive problem for people with cancer. In recent years, acupuncture has gained increasing attention among researchers as an alternative management strategy for cancer-related fatigue (CRF). This review aimed to evaluate the effectiveness of acupuncture for CRF. METHOD: . Five databases (Medline, CINAHL, Scopus, the Cochrane Library, and CAJ Full-text Database) were searched up to May 2013. Randomized controlled trials (RCTs) of acupuncture for the treatment of CRF were considered for inclusion. RESULT: . Seven RCTs were included for meta-analysis, involving a total of 689 subjects. Three studies compared acupuncture with sham acupuncture for CRF with follow-up at 10 weeks; the standardized mean difference (SMD) for general CRF change values was -0.82 (95% confidence interval [CI] = -1.90 to 0.26). When acupuncture plus education intervention was compared with usual care, there was a statistically significant difference for the change score of general CRF (SMD = -2.12; 95% CI = -3.21 to -1.03). The SMD for general CRF change scores between acupuncture with no treatment or wait-list control was -1.46 (95% CI = -3.56 to 0.63). Finally, the SMD for general CRF change scores between acupuncture with acupressure or self-acupuncture was -1.12 (95% CI = -3.03 to 0.78). Three trials reported data for general quality of life and functioning status, reporting enough data for statistical pooling but showing no statistically significant difference (: score = 1.15, : = .25, SMD = 0.99, 95% CI = -0.70 to 2.68 and : score = 1.13, : = .26, SMD = 1.38, 95% CI = -1.02 to 3.79, respectively). The: 2 statistics of all statistically pooled data were higher than 50%, indicating heterogeneity between the trials. CONCLUSION: . There were 4 sets of comparison for the effectiveness of acupuncture for CRF; statistical pooling of the reduction in CRF from baseline to follow-up showed in favor of acupuncture. However, 3 sets of comparison for the pooled estimates of effect sizes had no statistical significance. Although one set of comparison (acupuncture plus education interventions vs usual care) had statistically significant differences, it is unclear whether this pooled positive outcome is attributable to the effects of acupuncture or to the education intervention. In addition, the duration of follow-up in these included trials was up to 10 weeks, and some RCTs had methodological flaws. Further rigorously designed RCTs adhering to acceptable standards of trial methodology are required to determine the effectiveness of acupuncture and its long-term effects on CRF. -

2345- gera: 161176/di/ra
ACUPUNCTURE FOR TREATMENT OF ARTHRALGIA SECONDARY TO AROMATASE INHIBITOR THERAPY IN WOMEN WITH EARLY BREAST CANCER: PILOT STUDY. OH B, KIMBLE B, COSTA DS, DAVIS E, MCLEAN A, ORME K, BEITH J.. acupunct med. 2013;31(3):264-71 (eng). BACKGROUND: Aromatase inhibitors (Als) are recommended as adjuvant hormone treatment for postmenopausal women with early breast cancer. A substantial proportion of women taking Als experience joint pain and stiffness. Studies have suggested that acupuncture may be effective in treating joint pain. OBJECTIVE: A pilot study was conducted to evaluate the feasibility, safety and efficacy of using acupuncture to treat Alinduced arthralgia. METHODS: A total of 32 patients were randomised to receive either sham or real electroacupuncture (EA) twice weekly for 6 weeks. Outcomes of joint pain, stiffness and physical function were measured with the Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC), overall pain severity and interference with the BPI-SF and quality of life (QOL) with the Functional Assessment of Cancer Therapy-General (FACT-G) instrument. Hand strength was assessed by a grip test, and a serum marker of inflammation (C reactive protein (CRP)) was also measured. All assessments were performed at baseline, 6 weeks and 12 weeks, except for blood samples at baseline and 6 weeks only. RESULTS: No serious adverse events were reported during or after acupuncture treatments. There were no significant differences in outcome measures. However, positive trends were observed in stiffness and physical function at week 12 in favour of real EA. CONCLUSIONS: Findings suggest that acupuncture is feasible and safe in patients with breast cancer with joint pain caused by Al. A larger study with adequately powered to confirm these results and detect clinically relevant effects is needed.

2346- gera: 161367/di/re

ACUPUNCTURE RELIEVES MENOPAUSAL DISCOMFORT IN BREAST CANCER PATIENTS: A PROSPECTIVE, DOUBLE BLINDED, RANDOMIZED STUDY. BOKMAND S, FLYGER H. breast. 2013;22(3):320-3 (eng). BACKGROUND: This study evaluates the effect of acupuncture on hot flashes and disturbed night sleep in patients treated for breast cancer. The effect of acupuncture was tested against a sham-acupuncture group and a notreatment control group. Plasma estradiol was measured to rule out this as cause of effect. Side effects of the treatment were registered. METHODS: We randomized 94 women into the study: 31 had acupuncture, 29 had sham acupuncture and 34 had no treatment. FINDINGS: In the acupuncture group, 16 patients (52%) experienced a significant effect on hot flashes compared with seven patients (24%) in the sham group (p < 0.05). The effect came after the second acupuncture session and lasted for at least 12 weeks after last treatment. A statistically significant positive effect was seen on sleep in the acupuncture group compared with the sham-acupuncture and no-treatment groups. The effect was not correlated with increased levels of plasma estradiol. No side effects of acupuncture were registered. INTERPRETATION: We find that acupuncture significantly relieves hot flashes and sleep disturbances and is a good and safe treatment in women treated for breast cancer

2347- gera: 161505/di/re

A DUAL-CENTER RANDOMIZED CONTROLLED DOUBLE **BLIND TRIAL ASSESSING THE EFFECT OF** ACUPUNCTURE IN REDUCING MUSCULOSKELETAL SYMPTOMS IN BREAST CANCER PATIENTS TAKING AROMATASE INHIBITORS. BAO T, CAI L, GILES JT, GOULD J, TARPINIAN K, BETTS K, MEDEIROS M, JETER S, TAIT N, CHUMSRI S, ARMSTRONG DK, TAN M, FOLKERD E, DOWSETT M, SINGH H, TKACZUK K, STEARNS V.. breast cancer res treat. 2013;138(1):167-74 (eng). Up to 50 % of women receiving aromatase inhibitor (AI) complain of Al-associated musculoskeletal symptoms (AIMSS) and 15 % discontinue treatment. We conducted a randomized, sham-controlled trial to evaluate whether acupuncture improves AIMSS and to explore potential mechanisms. Postmenopausal women with early stage breast cancer, experiencing AIMSS were randomized to eight weekly real or sham acupuncture sessions. We evaluated changes in the Health Assessment Questionnaire Disability Index (HAQ-DI) and pain visual analog scale (VAS) following the intervention compared to baseline. Serum estradiol, β-endorphin, and proinflammatory cytokine concentrations were measured pre

and post-intervention. We enrolled 51 women of whom 47 were evaluable, including 23 randomized to real and 24 to sham acupuncture. Baseline characteristics were balanced between groups with the exception of a higher HAQ-DI score in the real acupuncture group (p = 0.047). We did not observe a statistically significant difference in reduction of HAQ-DI (p = (0.30) or VAS (p = (0.31)) between the two groups. Following eight weekly treatments, we observed a statistically significant reduction of IL-17 (p ≤ 0.009) in both groups. No significant modulation was seen in estradiol, β-endorphin, or other proinflammatory cytokine concentrations in either group. We did not observe a significant difference in AIMSS changes between real and sham acupuncture. As sham acupuncture used in this study may not be equivalent to placebo, further studies with a non-acupuncture arm may be required to establish whether acupuncture is beneficial for the treatment of AIMSS

2348- gera: 161545/di/re

LEVELS OF FATIGUE AND DISTRESS IN SENIOR PROSTATE CANCER SURVIVORS ENROLLED IN A 12-WEEK RANDOMIZED CONTROLLED TRIAL OF QIGONG.

Campo RA, Agarwal N, Lastayo PC, O'Connor K, Pappas L, Boucher KM, Gardner J, Smith S, Light KC, Kinney AY.. j cancer surv. 2013;30 OCT: (eng).

PURPOSE: Fatigue is a commonly reported symptom by prostate cancer survivors and is associated with significant distress and declines in quality of life. Qigong is a mind-body activity that consists of both physical activity and meditative aspects. This 12-week randomized controlled trial examined the feasibility and efficacy of a Qigong intervention for improving older prostate cancer survivors' levels of fatigue and distress. METHODS: Forty older (median age = 72, range = 58-93), fatigued (cut-off value of ≥1 on the CTCAEv4.0, >20 on a fatigue grading scale), and sedentary (<150 min of moderate exercise/week) prostate cancer survivors were randomized to 12 weeks of Qigong or stretching classes. Primary outcomes were feasibility (i.e., retention and class attendance rates) and fatigue [Functional Assessment of Chronic Illness Therapy-Fatigue (FACIT-Fatigue)], and secondary outcome was distress [Brief Symptom Inventory-18 (BSI-18)]. RESULTS: Study retention rates did not significantly differ between study groups (Qigong = 80 %, stretching = 65 %, p = 0.48). The Qigong group had significantly higher class attendance than the stretching group (p = 0.04). The Qigong group had significantly greater improvements in the FACIT-Fatigue (p = 0.02) and distress (i.e., BSI-18 Somatization, Anxiety, & Global Severity Index, p's < 0.05), than the Stretching group. CONCLUSIONS: This 12-week Qigong intervention was feasible and potentially efficacious in improving senior prostate cancer survivors' levels of fatigue and distress levels. Future, larger definitive randomized controlled trials are needed to confirm these benefits in older prostate cancer survivors and in racially and ethnically diverse populations. IMPLICATIONS FOR CANCER SURVIVORS: Qigong may be an effective nonpharmacological intervention for the management of senior prostate cancer survivors' fatigue and distress.

2349- gera: 161576/di/ra

YOGA AS AN ALTERNATIVE AND COMPLEMENTARY TREATMENT FOR CANCER: A SYSTEMATIC REVIEW.

SHARMA M, HAIDER T, KNOWLDEN AP. j altern complement med. 2013;19(11):870-5 (eng).

Objectives: Cancer is an important public health concern, with millions of patients affected worldwide. Given the physical, psychological, and physiologic changes associated with cancer, holistic therapies are needed to treat all aspect of the disease. Design: A systematic review was conducted to determine the efficacy of yoga as a treatment option for cancer since 2010. Included studies were published from January 2010 to LINE, CINAHL, and Alt HealthWatch. Results: Thirteen studies met the inclusion criteria. Eight of these studies were performed in the United States, and one each was conducted in Slovenia, Italy, the United Kingdom, Canada, and Turkey. Conclusions: The evidence for efficacy of yoga as an alternative and complementary treatment for cancer is mixed, although generally positive. Limitations of the reviewed interventions included a mixed use of instruments, weak

quantitative designs, small sample sizes, and a lack of theory-based studies.

2350- gera: 160393/di/re

ACUPUNCTURE IN THE TREATMENT OF CANCER-RELATED PSYCHOLOGICAL SYMPTOMS. HADDAD NE. PALESH O. integr cancer ther. 2014; Feb 4.: (eng). Acupuncture is being adopted by cancer patients for a wide range of cancer-related symptoms including highly prevalent psychological symptoms like depression, anxiety, insomnia, and impairment in quality of life. Pharmacological treatment of prevalent symptoms like anxiety, depression, and sleep disturbance can contribute to the high chemical burden already carried by cancer patients, creating additional side effects. As a result, patients and providers alike are interested in evidence-based nonpharmacologic alternatives like acupuncture for these symptoms. This article reviews the current literature (January 2000 through April 2013) for acupuncture in cancer-related psychological symptoms with attention to both efficacy and acupuncture-specific methodology. All published studies that met our review criteria demonstrate a positive signal for acupuncture for the treatment of depression, anxiety, sleep disturbance, and for improving quality of life with most results showing statistical significance. However, there are only a handful of acupuncture studies that were specifically designed to evaluate depression, sleep disturbance, and quality of life as primary outcomes, and no studies were found that looked at anxiety as a primary outcome in this population. Published studies in cancer patients and survivors show that acupuncture treatment is not only safe but also more acceptable with fewer side effects than standard of care pharmacological treatments like antidepressants. Finally, there is wide variability in both the implementation and reporting of acupuncture methods in the literature, with only 2 of 12 studies reporting full details of acupuncture methods as outlined in the revised Standards for Reporting Interventions in Clinical Trials of Acupuncture quidelines, published in 2010 and providing an essential framework for the reporting of acupuncture methodology. This lack of methodological detail affects outcomes, generalizability, and validity of research involving acupuncture. Reasons for ongoing challenges in the development of high-quality acupuncture trials are discussed. In conclusion, results are encouraging for the development of randomized trials to directly evaluate the therapeutic impact of acupuncture in cancer-related psychological symptoms, including depression, anxiety, sleep disturbance, and quality of life, but attention to acupuncture methodological specific challenges in the development of high-quality research is necessary

2351- gera: 160399/di/re

A RANDOMISED TRIAL OF ELECTRO-ACUPUNCTURE FOR ARTHRALGIA RELATED TO AROMATASE INHIBITOR USE. MAO JJ, XIE SX, FARRAR JT, STRICKER CT, BOWMAN MA, BRUNER D, DEMICHELE A.. eur j cancer. 2014;50(2):267-76 (eng).

BACKGROUND: Arthralgia is a common and debilitating sideeffect experienced by breast cancer patients receiving aromatase inhibitors (Als) and often results in premature drug discontinuation. METHODS: We conducted a randomised controlled trial of electro-acupuncture (EA) as compared to waitlist control (WLC) and sham acupuncture (SA) in postmenopausal women with breast cancer who self-reported arthralgia attributable to Als. Acupuncturists performed 10 EA/SA treatments over 8weeks using a manualised protocol with 2Hz electro-stimulation delivered by a TENS unit. Acupuncturists administered SA using Streitberger (nonpenetrating) needles at non-traditional acupuncture points without electro-stimulation. The primary end-point was pain severity by Brief Pain Inventory (BPI) between EA and WLC at Week 8; durability of response at Week 12 and comparison of EA to SA were secondary aims. FINDINGS: Of the 67 randomly assigned patients, mean reduction in pain severity was greater in the EA group than in the WLC group at Week 8 (-2.2 versus -0.2, p=0.0004) and at Week 12 (-2.4 versus -0.2, p<0.0001). Pain-related interference measured by BPI also improved in the EA group compared to the WLC group at both Week 8 (-2.0 versus 0.2, p=0.0006) and Week 12 (-2.1 versus -0.1, p=0.0034). SA produced a magnitude of change in pain

severity and pain-related interference at Week 8 (-2.3, -1.5 respectively) and Week 12 (-1.7, -1.3 respectively) similar to that of EA. Participants in both EA and SA groups reported few minor adverse events. INTERPRETATIONS: Compared to usual care, EA produced clinically important and durable improvement in arthralgia related to Als in breast cancer patients, and SA had a similar effect. Both EA and SA were safe

2352- gera: 160413/nd/re

THE EFFECTIVENESS AND SAFETY OF MOXIBUSTION FOR TREATING CANCER-RELATED FATIGUE: A SYSTEMATIC REVIEW AND META-ANALYSES. LEE S, JERNG UM, LIU Y, KANG JW, NAM D, LEE JD.. support care cancer. 2014;MAR 8: (eng).

PURPOSE: Among cancer patients, cancer-related fatigue (CRF) is one of the most common symptoms and adversely affects physical ability and quality of life even several years after treatment. This study aims to evaluate the current evidence for moxibustion in patients with CRF. METHODS: Eighteen databases were searched from their inception to April 2013. All randomized controlled trials (RCTs) of moxibustion for treating CRF without language restriction were considered for inclusion. The risk of bias and reporting quality of each study were assessed using the Cochrane risk of bias tool,

Consolidated Standards of Reporting Trials (CONSORT), and Revised Standards for Reporting Interventions in Clinical Trials of Acupuncture (STRICTA). Risk ratio (RR) or mean difference (MD) was used to measure the treatment effect with 95 % confidence intervals (CIs) in a random effects model. RESULTS: Four RCTs with a total of 374 subjects were included for the review. These four studies compared moxibustion plus routine care with routine care alone. Most studies were determined to have a moderate to high risk of bias with low reporting quality. An indirect moxa stick was used in two studies, an indirect ginger cake-separated moxa was used in one study, and in one remaining study, both moxibustion methods were used. Meta-analysis showed the favorable effects of moxibustion on the response rate (RR, 1.73; 95 % CI, 1.29 to 2.32; p = .0003; heterogeneity, I 2 = 15 %, p = .32). Burning with a mild blister after moxibustion was reported in one study. CONCLUSIONS: Because of a high risk of bias and low reporting quality of the studies included in this review, it is difficult to draw the conclusion that moxibustion is an effective and safe treatment for patients with CRF. Further rigorous research will be necessary to evaluate whether moxibustion has beneficial effects on CRF.

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BALK J, DAY R, ROSENZWEIG M, BERIWAL S. 2093, DENG G, CHAN Y, YEUNG KS, VICKERS A, CASSILETH B¤ Johnston MF, Hays RD, Subramanian SK, ElashoffRM, Axe EK, Li JJ, Kim I, Vargas 2267 LUO M, SUN BD, WU SB¤ 2031 SHEN XUE-YONG FEI LUN WU YAO-CHI, LIN YU-YING DING GUANG-HONG , 1978 SMITH C, CANNADY B, THORNTON C, PERZ J, USSHER A CURA DI A BEMINI¤ 1984 , 1985 , AAPRO MS, MOLASSIOTIS A, OLVER I¤ 1894 , AGLIETTI L ET AL¤ 639 AHMED HE ET AL¤ 1191, AIWU L ET AL¤ 479 ALIMI D ET AL¤ 1329 ALIMI D, RUBINO C, PICHARD-LEANDRI E, FERMAND-BRU¤ 1697 AN LX, HE Y, REN XJ, LI SQ, HAN RQ, WANG BG.¤ 2114, AN LX, LI J, REN XJ, LIU YN, WANG BG. 2139, AN YAPING¤ 707, AN YONG ET AL¤ 859, ANAES¤ 1517 ASLAM M ET AL¤ 56, AUNG H ET AL 391, AUNG S¤ 287, Aung SKH, Dennis DL and Lim JTW¤ 2309, AZAD A AND JOHN Tx 2339, BA YUANMING ET AL¤ 1085, BAI CUANGDE, LIAN ZIQING, LIANG JIAN, ET AL $^{\mathtt{m}}$ 1925 , BAI JIE ET AL¤ 1279 BAI JINWEN ET AL¤ 1305, 1367, BAI SHU XUN ET AL¤ 161, BAI YINCAI ET AL¤ 1412, BAI ZHAO-ZHI ZHANG YAN-MIN ZHANG RUN-SHUN¤ 1964, BAI ZHENQIN ET AL¤ 292, BAO SU-ZHEN¤ 840 BAO T, CAI L, GILES JT, GOULD J, TARPINIAN K, BETTS K, MEDEIROS M, JETER S, 2347, BAO T, YE X, SKINNER J, CAO B, FISHER J, NESBIT S, GROSSMAN SA¤ 2188 BAO YJ, HUA BJ, HOU W, LIN HS, ZHANG XB, YANG GX¤ 2159,2176 BAOQIN L¤ 480 , BARDON M¤ 25 BARDYCHEV MS ET AL 379, BEER TM, BENAVIDES M, EMMONS SL, HAYES M, LIU G, GARZOTTO M, DONOVAN 2127, BEI RUNPU¤ 673 BEIJING HOSPITAL OF TRADITIONAL CHINESE^x 539, BELOTEL-GRENIE¤ 447 BEN-AHARON I, GAFTER-GVILI A, PAUL M, LEIBOVICI L, STEMMER SMm 2036, BENNETT MI, JOHNSON MI, BROWN SR, RADFORD H, BROWN JM, SEARLE RD¤ 2187 BERK LB, SHIVNANI AT, SMALL W JR. 2 1989, BI HD¤ 1959, BI LIQI ET AL¤ 1211, BI YING ET AL¤ 678 BIAN DI, CHENG ZE-DONG, ZHANG NING-SU, ET AL ¤ 1814 BIN HSU¤ 37. BLOM M ET AL 960, 1146, 1325 BOEKHOUT AH, BEIJNEN JH, SCHELLENS JH¤ 1998, BOKMAND S, FLYGER H¤ 2346, BOTTOMLEY DM ET AL¤ 632, BRAGA FDO P, LEMOS JUNIOR CA, ALVES FA, MIGLIARI DA¤ 2194, BRAHIMI A¤ 1138 , BRATILA FC ET AL¤ 494 BRULE-FERMAND S¤ 911, BU PING¤ 1178, 1220, BU PING ET AL¤ 1438, 1562,

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CHEN NANYANG¤ 1518 CHOY YM ET AL¤ 50, CHEN PANHUA ET AL¤ 951, CHU DT ET AL¤ 979, CHEN PEIFENG¤ 555, CHU LSW ET AL¤ 12, CHEN PEIYUAN ET AL¤ 156, CHUNG C¤ 55 CHEN PING, MAO GUOXIN, GU ERLI, ET AL¤ 1865, CHUNG C ET AL¤ 18, 22, CHEN PJ, FURUSE J, HAN KH, HSU C, LIM HY, MOON H, QIN S, YE SL, YEOH EM, 2142, CHUNG JW ET AL¤ 1226, CHUN-KWOK WONG, YI-XI BAO, ELIZA LAI-YI WONG, CHEN QIAN-JUN, ZHANG CE, LU DE-MING, ET AL¤ 1591, PING-CHUNG LEUNG, KWOK 1973 CHEN QING—HUA¤ 1924 COHEN AJ, MENTER A, HALE L¤ 1891 CHEN REI-SHEN ET AL¤ 326, COHEN I, TAGLIAFERRI M, TRIPATHY D¤ 1680 COHEN L, CHEN Z, ARUN B, SHAO Z, DRYDEN M, XU L, CHEN RUI, ET AL¤ 1704 CHEN SHAOZHONG ET AL¤ 1297 LE-PETROSS C, DOGAN 2140 CHEN SHAOZONG, YIEFANG¤ 1636, COLLABORATED RESEARCH GROUP * 4 69, COLLINS KB, THOMAS DJ¤ 1883 , COOPERATIVE GROUP OF FUZHOU¤ 244 , CHEN WC ET AL¤ 1126, CHEN WENGE¤ 1366, CHEN XI, FANG WEN - ZHENG, OUYANG XUE - NONG, ET COORDINATED RESEARCH GROUP OF *x 113, AL¤ 1838 COSS RA ET AL¤ 1185 CRESPO DE LA ROSA JC¤ 105 CHEN XI, OUYANG XUE-NONG, DAI XI-HU, ET AL¤ 1913, CREW KD, CAPODICE JL, GREENLEE H, APOLLO A, CHEN XIANGZHONG¤ 1022, JACOBSON JS, RAPTIS G, 2033 CHEN XIAOYIN¤ 1683 CREW KD, CAPODICE JL, GREENLEE H, BRAFMAN L, CHEN XIAOYIN ET AL^x 1423, FUENTES D, AWAD D, 2122, CHEN XIYI ET AL¤ 314 CHEN XUE-NONG¤ 1999, CROCETTI E ET AL¤ 1186 CUI KAIXIAN¤ 272, 464, 622, CHEN Y ET AL¤ 1101, CHEN YAN¤ 412, 436, CUI KOUSHI¤ 691, CUI LIXIAN ET AL¤ 990 CHEN YINGJIE ET AL¤ 430, 432, CHEN YU ET AL¤ 1019, CUI SK, SUN Y, CHENG F, LIU CC¤ 2239, 2270, CUI TONG-JIAN ET AL¤ 795 , CUI Y, SHU XO, GAO Y, WEN W, RUAN ZX, JIN F, ZHENG CHEN YUANFENG ET AL 318, CHEN YUANLING, PAN YIBIN¤ 1648, CHEN YUFEN¤ 385, 454, 636, W¤ 1845, CHEN YUNFEI D ALTRI¤ 1841, CUI YUMMENG¤ 904, CHEN YUN-FEI ET AL¤ 1447 CUMINS SM ET AL¤ 1345 DAI AW, LI ZY, WANG LH, LI SY, YANG H¤ 2080 , DAI ER-QING, YUAN HONG-XIA, FENG LI, ET AL ¤ 1757 , DAI WEI-JUAN SI DUAN-YUN ET AL¤ 1601 , CHEN YZ, LIN F, ZHUANG GB, REN Y, LI PP¤ 2232, 2254, CHEN Z, GU K, ZHENG Y, ZHENG W, LU W, SHU XO¤ 2047 CHEN ZELIN¤ 51, CHEN ZELIN ET AL¤ 64 DAI ZHAO Z¤ 885, DAI ZHIJUN, WANG XIJING, KANG HUAFENG ET AL¤ 2038, CHEN ZEMIN ET AL¤ 139 D'ALESSANDRO E, DE BRITO C, CECATTO R, SAUL M, CHEN ZETAO, HOU YANGSHAO x 1832, ATTA JA, LIN CA.¤ 2290, DAN NING ET AL¤ 1285 CHEN ZEXIONG ET AL¤ 1470, CHEN ZHE ET AL¤ 1486 DAN YU ET AL¤ 1206, DANG WEN¤ 1175 CHEN ZHE-JING ZHANG QI-YU¤ 1874, CHEN ZHIFENG¤ 978 DANG WEN ET AL¤ 1179, CHEN ZHIFENG ET AL¤ 782. DAVIES FM¤ 1637 CHEN ZHIJIAN IAN ET AL¤ 1671, DE LA VILLA PILAR¤ 763, CHEN ZHIPING¤ 1256 DE TATA E¤ 867, 963 CHEN ZHIREN, XU XIAONAN, CHEN LIBIN, ET AL ¤ 1751, DE VALOIS BA, YOUNG TE, ROBINSON N, MCCOURT C, CHEN ZHIYUN ET AL¤ 1223, MAHER EJ¤ 2180, CHEN ZHONG-JIE, GUO YU-PENG, DIRECTOR; WU DE VALOIS BET AL¤ 2027, ZHONG-CHUO¤ 2037, DELI SUN 孙德利, HANPING CHEN 陈汉平, HUANGAN WU CHEN ZI FU¤ 1072, 吴焕淦, YAN ZHANG 2277, CHENG BAIHUA¤ 232, 443, CHENG CY, LIN YH, SU CC^x 2151, DENG G, CASSILETH BR, YEUNG KS¤ 1846 CHENG JIANHUA¤ 1171, 1509, Deng G, Chan Y, Sjoberg D, Vickers A, Yeung KS, Kris M, Straus D, Cassileth B.¤ 2336, DENG G, SETO D AND CASSILETH B¤ 2311, CHENG JIAN-HUA¤ 849, CHENG JIANHUA ET AL¤ 715, 924 CHENG JIAN-HUA ET AL 1000, 1558, DENG G, VICKERS A, SIMON YEUNG K, CASSILETH BR¤ CHENG SHU-QUAN ET AL¤ 1576, 2005. CHENG YONG ET AL¤ 62, DENG G, VICKERS A, YEUNG S, CASSILETH B¤ 2023, DENG GE, CASSILETH BR, COHEN L, GUBILI J, CHENGJIANG H ET AL¤ 297, JOHNSTONE PA, KUMAR N, 2020 CHENGLIN L ET AL¤ 1026, CHEUNG CS¤ 82, CHEUNG CS ET X, Y ET Z¤ 38, DENG GE, RAUSCH SM, JONES LW, GULATI A, KUMAR NB, GREENLEE H, 2332 CHI YONG-CHUN ET AL¤ 1008, DENG YOUFENG, ZHANG MEILAN, YANG HUI ET AL¤ 1878 CHIANG HC ET AL¤ 720 CHINO A, OKAMOTO H, HIRASAKI Y, UEDA K, OGAWA K, DENG ZEMING¤ 977 NAMIKI T¤ 2266 DEPARTMENT OF PHARMACOLOGY, INSTITUTE* 19, CHIU JEN-HWEY ET AL¤ 1183, DESNOS P¤ 117 DHRUVA A, MIASKOWSKI C, ABRAMS D, ACREE M, CHIZHI Z¤ 1050, CHO CS₂ 2300, COOPER B, GOODMAN S, 2288, CHO JH, CHUNG WK, KANG W, CHOI SM, CHO CK, SON DI LING, , ET AL¤ 1932 , CG¤ 2040 DI STANISLAO C ET AL¤ 1281, CHO JUNG HYOET AL¤ 2028, DIBBLE SL ET AL¤ 1330, CHO WC¤ 2110, DIN ZHICHUN¤ 1437 . DING DU-MING¤ 1114 Choi TY, Lee MS and Ernst E¤ 2301, Choi TY, Lee MS, Ernst E. 2312, DING HOU-DI ET AL 215, CHOI TY, LEE MS, KIM TH, ZASLAWSKI C, ERNST E¤ 2299 DIOS PD, LESTÓN JS¤ 2121, 2137 DONALD GK, TOBIN I, STRINGER J¤ 2223, 2244, CHOUDHURY KJ¤ 376, DONG CONG-HUI¤ 1215,

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GU DI-SHUI, KONG XIA, HUANG PEI-CHUN¤ 1835,

GU HUAPING, SHANG PEIZHONG, FENG JILIANG¤ 1858, HE JIAN-CHENG ET AL¤ 1539, GU JUE-FEN¤ 801, HE JIN-GUANG ¤ 1958, GU KUIXING ET AL¤ 1239, HE JINSHAN¤ 397 GU LIGANG ET AL¤ 325,669, HE JP ET AL¤ 1263 GU LI-GANG, ET AL 1910, HE QINGSI ET AL¤ 1550, HE REN¤ 1229 , 1803 , HE SHUIYONG, WEI PINKANG , XU LING , ET AL¤ 1861 , GU LINJIANG¤ 598 GU QUN-HAO, LIAO QUAN, ZHANG SHENG-HUA, ET AL¤ 1730, HE SONG-QI LI AI-MIN WEN BIN, ET AL¤ 1965, GU YUANXI ET AL¤ 392, HE XIU-LI, LI XUE-MIN¤ 1905, GU ZHEDIAN¤ 1461 HE XR, WANG Q, LI PP¤ 2343 GU ZHENDONG ET AL 90, HE XUE-QIANG, ET AL 1909, GUAN DONGYUAN ET AL¤ 1338, HE YONGHE¤ 1986 GUANG'ANMEN HOSPITAL 188, HE ZHONG-PING GONG BIN-RONG FANG YUAN-SHU ET GUANGRONG L ET AL¤ 1054, AL¤ 1922 HEBEI PROVINCIAL HOSPITAL¤ 191, GUANGZHEN L ET AL¤ 1060 , GUAN-TING WANG ET AL # 761, HEBIN¤ 164, HERVIK J, MJALAND O¤ 2045 , 2315 , HERVIK J, MJÅLAND O¤ 2178 , GUERRA MC¤ 1834, GUI GUIFEN¤ 183, GUI JINSHUI¤ 438, HIROAKI NAKAJIMA ET AL¤ 753 GUICHES JE¤ 52, HON MEI CHENG AND MING CHE TSAI¤ 1808 GUINAND N, DULGUEROV P, GIGER R¤ 2030, HONG SONG -ZHEN, LIN YI, SITU HONG -LIN, ET AL¤ 1951 GUIQING Y¤ 881, 883, GUIQING Y ET AL¤ 467 HONG YEN MSU ET AL 202, GUO CHENGJIE¤ 459 HONGDA BI 毕宏达¤ 2283, GUO GENCHENG, CHEN KANG, AND GUO HONGJUN¤ 1791 HONGWEIL ET AL¤ 1053. HONG-YEN HSU¤ 84, 738 GUO HONG-FEI, CAL RU-CHUN¤ 1776, HOPITAL DES TUMEURS DE HANGZHOU¤ 72, GUO HONG-YAN¤ 1077 HOPITAL UNIVERSITAIRE DE TIANJIN¤ 8, GUO JIANXING¤ 1490 HOPKINS HOLLIS AS. ¤ 2168, GUO RENXU ET AL¤ 1079, HORIE Y ET AL¤ 1007 GUO YONG¤ 1363, HOU ANJI, CHEN YOUXIANG, XIANG RONG¤ 1856, GUO YONG ET AL¤ 917 HOU DE HUI ET AL¤ 510 GUO YUEFENG ET AL¤ 512 HOU FENG-GANG LING CHANG-QUAN ZHAO GANG, ET GUO YUE-FENG, CHENG HUI-JUN, MA CHUN-ZHENG,¤ AL¤ 1966 1724 HOU FENG-GANG ZHAO GANG HE XIAN-MIN, ET AL 2 1748 GUO ZHAO QI¤ 2284, GUO ZHEN XU¤ 524, HOU FENG-GANG, LING CHANG-QUAN, ZHAO GANG, ET GUO ZHENG RONG¤ 674 AL¤ 1870, GUO ZHENQIU ET AL¤ 1372, 1462, HOU JUN ET AL # 647, 731, 802, 846, GUOWEI SHEN 沈国伟, JINGSHENG ZHAO 赵京生 2282, HOU JUNFENG ET AL 1382, GURTIER J¤ 24, HOU SHENG¤ 746 HADDAD NE, PALESH O¤ 2350, HOU SHENG ET AL 343, HSU HY ET AL¤ 1105 HAI-YAN LI 李海燕, JIAN PEI 裴建, QIN-HUI FU 傅勤慧, ZHI-HSU YL, KUO YC, KUO PL, NG LT, KUO YH, LIN CC¤ 1892, DAN LIU 刘志丹, LIN-NA 2324, HSUE YIN HSU ET AL¤ 620, HSUE-YIN ET AL¤ 958 HAKL L ET AL¤ 515, HALLAM C, WHALE Ca 1719, HSUE-YIN HSU ET ALx 741, 957, HU ANBANG ET AL¤ 152 HAMMAR M ET AL¤ 1235 HUB, SHEN KP, AN HM, WUY, DU Q¤ 2205, HAN CHI ET AL¤ 497, 499 HAN CUI, LI XUEWU, LIU ZHEN¤ 1602, HUB, TIAND, HEY 2078, HU BI ET AL¤ 363 HAN GANG ET AL¤ 942 HAN HUIXUE ET AL¤ 1243, HU BOYUAN ET AL 238, HAN J ¤ 909. HU BU-JU ET AL¤ 346 HAN JS ET AL 323 HU D, LIU Q, CUI H, WANG H, HAN D, XU H¤ 1900, HAN KK, YAO TJ, JÓNES B, ZHAO JF, MA FK, LEUNG CY, HU LING ET AL¤ 1192 HU LING,LAO SHAO-XIAN¤ 1772, LAU SK, YIP MW, NGAN 2204 HAN QING ET AL 1107, 1200, 1265, HU LI-NING ET AL¤ 1348, HU PING-PING¤ 1766 HAN R ¤ 1002 HU QINGHE ET AL¤ 517 HAN RUI¤ 1055 HAN XUE HUA ET AL 353, HU RONGXUE ET AL¤ 335, HAN YF, GONG Z, HUANG LQ, XIA X, ZHAO WJ. 2113, HU SUKUN ET AL¤ 551 HAO WEN-SHENG¤ 327 , HU XIA, LINA CHANG-QUAN, ZHOU QING-HUI ¤ 1746, HAO XIAO-YAN, HUA LI, LI RUI-DONG¤ 1866, HU XIA, GU WEI, ZHOU QING-HUI, ET AL 1990, HAO YINGXU ET AL¤ 1160 HU XUE-LIAN ET AL¤ 344 HU ZHONG-LIAN ET AL¤ 696, HAO ZENGLAI, CHEN ZHIFENG, SI CHONGYANG, ET AL¤ HUA CHOUE-HUANG¤ 121, 1698. HARANAKA K ET AL¤ 207, 208, HUA LIANGCAI¤ 245, HARDELL L ET AL¤ 1187 HUAI-WEN X¤ 483 HARDING C, HARRIS A, CHADWICK D¤ 2041, HUAN ZHEYUAN ET AL¤ 331, HAU DM² 54 , 119 , 145 , HAU DM ET AL² 175 , 177 HUANG GUOZHI ET AL¤ 702 HUANG JIAN, ZHANG MING-JIE AND QIU FU-MING¤ 1917, HUANG JINGYU¤ 1740 HAU DOUMONG ET AL¤ 629 HUANG LI-MING ET AL 928, HE BI MEI, LI WAN YAO, LI GUO CAI, ET AL 2002, HE BM, LI WS, LI WY¤ 2019, HUANG LIN ET AL¤ 146, HE CHENGJIAN ET AL¤ 43, HUANG LING, CHEN HUA, ZHANG HE-MING¤ 1933, HUANG NENG ET AL¤ 1362, HE CHUNMEI¤ 1530 HE DONGCHU, ET AL¤ 1612, HUANG TING¤ 1556 HE DONG-CHU, ET AL = 1815, HUANG XIMEI¤ 959, 1024, 1104,

HUANG XIMEI ET AL¤ 566, 716 JING-CHONG WU ET AL 36, 240, HUANG YING, QIAN SUI-YI, HU YONG-HONG¤ 1872, JINGFANG Z¤ 473, HUANG YUELAN¤ 277, JINGFENG T¤ 469 HUANG ZHIFEN ET AL¤ 1413, 1414, 1546, JIPING X ET AL¤ 1059 HUANG ZHIFEN, ET AL¤ 1658 JOHNSTON MF, YANG C, HUI KK, XIAO B, LI XS, HUANG ZHI-FEN, WEI JIN-SONG, SHI ZHI-YAN, ET AL¤ RUSIEWICZ A¤ 2011 JOHNSTONE PA ET AL¤ 1566 JOHNSTONE PA, POLSTON GR, NIEMTZOW RC, MARTIN HUANG ZHIFEN,LI HANZHONG,ZHANG ZUOJUN,ET AL¤ PJ.¤ 1691 HUANG ZHIHUA ET AL¤ 605 JOHNSTONE PAS¤ 1717, HUANGFU CHAOSHEN, LIU BIN, LI LUJUAN, ET A L¤ 1939, JU LAITI¤ 1839 . HUANGLIN ET AL¤ 171 JUBINEAU-ZELPHATI C¤ 34, HUASHAN HOSPITAL[®] 17 JUN WANG 汪军, JIANWEI JIANG 姜建伟, SANJUN CAI HUI ES, CHENG JO, CHENG HK¤ 2039, 蔡三军, HUITING PENG 2280, HUIJUAN C ET AL¤ 1056, HUMPHRIES M¤ 293, JUNG-SAN CHANG, LIEN-CHAI CHIANG, FEN-FANG HSU HURLOW A, BENNETT MI, ROBB KA, JOHNSON MI, AND CHUN-CHING LIN¤ 1811, SIMPSON KH, OXBERRY SG¤ 2313 JUNYU W ET AL¤ 1083 HYUNG-JIN KIM, SEON IL JANG, YOUNG-JUN KIM, HYUN-KAHN ST, JOHNSTONE PA.¤ 1987 OCK PAE, HAE- YOUNG 1806, KAMAL AH, MAGUIRE JM, WHEELER JL, CURROW DC, IGLESIAS MARCOS LM¤ 197, ABERNETHY AP. ¤ 2321, IKEHARA S ET AL¤ 774, KAMEI ET AL¤ 104 ITO H ET AL¤ 231, KAMEI T ET AL 1180, 1444, ITSUO NISHIOKA¤ 737 KANEDA T¤ 764 KANG JX, LIU J, WANG J, HE C, LI FP¤ 1895, JACOBSON JS ET AL¤ 1326, JANG YAN ET AL¤ 1087, KANGZHI C¤ 472, JAYASURIYA A ET AL¤ 28, KAPTCHUK TJ¤ 1570, JEANNIN P, REGARD PG, PIQUEMAL M, SAUTREUIL P, TRIADOU P¤ 2052, Kazuo TARAO, Yasunari SAKAMOTO, 2112, KE XUE FAN¤ 747 KEISOU ISHIMARÚ ET AL¤ 1250, JENSEN SB, PEDERSEN AM, VISSINK A, ANDERSEN E, KESPI JM¤ 748 BROWN CG, DAVIES AN, 2119 KIM MJ, LEE TH, KIM SH, CHOI YJ, HEO J, KIM YH¤ 2141 , JEONG JS, RYU BH, KIM JS, PARK JW, CHOI WC, YOON SW¤ 2145 KING CR ¤ 1176, JI GUANG ET AL¤ 537, KING GE ET AL¤ 519 KINUTA AKIRA ¤ 1833, JI JIE ¤ 1901 JI XIANGDONG ET AL¤ 692 , JI XM, OUYANG B, LIU H, LIU GW, WU ZC, YU HY, WANG KLEIN J, GRIFFITHS Px 1881, KLIEN MD ET AL¤ 200, CY, WANG ZX, WANG WP¤ 2248, KNAPMAN J¤ 895 JI YUBIN, ET AL¤ 465 KO WS, PARK TY, PARK C, KIM YH, YOON HJ, LEE SY, JI YU-BIN, ZHANG XIU-JUAN, KONG QI, ET AL¤ 1607, HONG SH, CHOI BT, LEE YT, 1970 JIA CHUNSHENG ET AL¤ 685, KOBAYASHI T¤ 126, 199, 201, 230, 270, JIA XIHUA¤ 1603, KOBAYASHI T ET AL¤ 204, 269, JIA XIN QIU¤ 525 KOH TC₂ 81 JIA YINGJIE¤ 1655 KOLSTAD A, RISBERG T, BREMNES Y, WILSGAARD T, JIA YING-JIE, SHI FU-MIN, ZHANG YING, ET AL 1967, HOLT¤ 1729 JIA ZHENHE ET AL¤ 1350, KONG QINGZHI ET AL¤ 1241, JIA-JUN Cº 482 , JIANG CHUN ET ALº 423 , 428 , KONKIMALLA VB, EFFERTH Tx 2029, KONNO R¤ 2135, JIANG DAO-GUO ET AL¤ 1713, KONNO R, GYI AA¤ 2305 JIANG J, SLIVA D¤ 2143, KONOSHIMA T ET AL¤ 976 JIANG JIANFU¤ 313, KOU-HWA CHANG, HUI-FEN LIAO, HEN-HONG CHANG, JIANG LIFAN ET AL¤ 1098, YU-YAWN CHEN, MING- 1849 JIANG SHI QING ET AL¤ 1368, KUANG JIAN-MIN, ZHAO XI-YI, ZHAO HUI-QIN, ET AL¤ 1685 JIANG TINGLIANG¤ 46, 47, JIANG XIZHENG¤ 488 KUBO M ET AL¤ 780, JIANG YILAN¤ 1036 , 1037 , JIANG YR, CHEN KJ, XU YG, YANG XH, YIN HJ¤ 2084 , KUO HSIUNG L ET AL¤ 364, KUO-HSIUNG LEE¤ 173, JIANMIN C ET AL¤ 468, KURE F¤ 871 JIANXIN L ET AL¤ 1109, KUZMINA EG ET AL¤ 268, LA SHENG MING ET AL¤ 1479, JIAXIN Qx 1057. LACROIX AM¤ 21 JIE GAO 高洁, BA-SI OUYANG 欧阳八四, XIAO-QUN YE LADAS EJ, ROONEY D, TAROMINA K, NDAO DH, KELLY 叶晓群, JIAN-LI CHE 车建丽, 2322, KM² 2128, 2133 JI-FU M¤ 481 LAI YI-QIN, JIN YUAN, HUANG PING, ET AL = 1609, JIN CHANG-JUAN, SHA HUI-FANG¤ 1670, LAI YUNGCHUNG ET AL¤ 70, JIN DEFANG ET AL¤ 73 LAM F ET AL¤ 103 LAM W, BUSSOM S, GUAN F, JIANG Z, ZHANG W, GULLEN EA, LIU SH, CHENG YC² 2146, JIN H, TAN X, LIU X, DING Yº 2150, JIN HE-KUI ET AL¤ 1667, JIN HONGJIANG¤ 587, LAN CHOW WING TF¤ 295, JIN LAN¤ 381 , 577 , JIN NIAN-ZU, MAO LI , ZHU YAN-PING , ET AL¤ 1936 , LAN MA¤ 1753 . LANG DSP¤ 2285 JIN QIYANG ET AL¤ 242, LANG XINGEAI ET AL¤ 718, JIN R ET AL¤ 1127, LAO L ET AL¤ 1694, JIN SHIYING ET AL¤ 1168, LAO SHAOXIAN ET AL¤ 1111 JIN SHUWEN ET AL¤ 580, LAU ST, LIN ZX, ZHAO M, LEÚNG PS¤ 2043, JIN ZHE-XIU¤ 1702, LE PHI¤ 1335, JING FANG Z¤ 887, LEE A ET AL¤ 1232, LEE H, SCHMIDT K, ERNST Ex 1897 , JING GUANG ET AL¤ 603

JING HUA LIU HUA LING ZHEN¤ 1642,

LEE J, DODD M, DIBBLE S, ABRAMS D. 2054,

LEE JF¤ 14 LI SHUQI ET AL¤ 1429, LEE KUO-HŚIUNG¤ 225, LI SHUSHAN¤ 697, LEE MM ET AL¤ 1327, LI ST, CHI P¤ 2237, 2263, LEE MS, CHEN KW, SANCIER KM, ERNST E^{α} 2018, LI TONG ET AL¤ 1312, LEE MS, CHOI TY, ERNST Ex 2111, LI WEI ET AL¤ 1388, LI WEI, ET AL¤ 1613 LEE MS, CHOI TY, PARK JE, LEE SS, ERNST Ex 2123, LI WENHAI ET AL¤ 1195, LEE MS, KIM KH, CHOI SM, ERNST E¤ 2061 LEE MS, KIM KH, SHIN BC, CHOI SM, ERNST E. 2059 LI X ET AL¤ 653 LEE S, JERNG UM, LIU Y, KANG JW, NAM D, LEE JD. 2352 LI XAO-FENG, LÍN HE-XI, HUANG WEI-XIAN, ET AL¤ 1589, LI XIAO HUI ET AL¤ 1403 LEE S, RA J, SONG JY, GWAK C, KWON HJ, YIM SV, HONG LI XIAO MING ET AL¤ 1267 SP, KIM J, LEE KH, CHO 2220, LI XIAOFENG ET AL¤ 1460, LEE TI, CHEN HH, YEH ML¤ 1994 LI XINQING ET AL¤ 1477. LEE TK, JOHNKE RM, ALLISON RR, O'BRIEN KF, DOBBS LI XIU-RONG, ZHANG DAN, QI YUAN-FU, ET AL¤ 1593, LI XUE-FENG ZHAO JIAN-XIONG¤ 1759 LJ JR¤ 1896, LEE TK, O'BRIEN KF, WANG W, JOHNKE RM, SHENG C, LI XUE-SONG, LIANG YUN-YAN, WANG DAI-SHU, ET AL ¤ BENHABIB SM, WANG T, 2184, LEI JING, ET AL ¤ 1830, 1760 LIY, NIUY, WUH, SUNY, LIQ, KONGX, LIUL, MEIQ¤ LEI JIANPING ET AL¤ 1432, 1434, 2154, LEI QIU MO ET AL¤ 263, LI YAN ET AL¤ 253, LEI XUE-FENG ET AL¤ 651, 744, LI YANHEN ET AL¤ 463, LEI YONGZHONG ET AL¤ 588, LI YING ET AL¤ 1139, LEI YONGZHONG, ET AL¤ 401, LI YING, ET AL¤ 1761 LEI YOUNZHONG ET AL¤ 307, LI YING, LI HAI-BIN, HUANG TAO¤ 1675, LEI ZHIDAN¤ 1583, LI YONG ET AL¤ 503, 1628 LEWITH GT¤ 628, LI YONG HONG ET AL¤ 1476, LI AIZHI¤ 1334, LI YONG JIAN ET AL¤ 507, LI YONG-AN ET AL¤ 1488 , LI YONGHAO¤ 791 , LI BIANLIN¤ 604 LI BINGYING ET AL¤ 593, LI BING-YING ET AL¤ 936, LI YONGHAO ET AL¤ 905, 1314, LI BIYI¤ 349, LI YONGILAN ET AL¤ 1582, LI YONGJIAN¤ 1615, LI BO ET AL¤ 1228 LI CHUN TING ET AL 1404, LI YONGJIAN ET AL¤ 404 LI CHUN-TING, YU JING-HUA¤ 1619 , LI CJ, WEI PK, YUE BL¤ 2164 , 2185 , LI CT, LIN CH, KAO TY, WU MF, YEH CS, YEH KT, KO JL¤ LI YONGJUN ET AL¤ 1238, LI YUAN¤ 1294, LI YUEHENG¤ 328 2147, LI YUEHENG ET AL 399, LI DAPENG¤ 1106, 1969 LI YUNGGUANG¤ 453 LI DE HUA ET AL¤ 420 , 426 , LI DEHUA ET AL¤ 266 , LI ZHANYUA ET AL¤ 681, LI ZHANYUN ET AL¤ 694, LI DONGFANG ED ALTRI¤ 1716, LI ZHAOHUI ET AL¤ 1204, LI ZHENGYU ET AL¤ 546 LI GE ET AL¤ 1411 LI HAILIANG ET AL¤ 1563, LI ZHIYONG, DENG XIAOJUN¤ 1679, LI HAI-YAN ET AL¤ 1355, LI ZHONG ET AL¤ 1764, LI HANYOU¤ 403 LI ZI XIU ET AL¤ 220 LI ZUOQING¤ 866 , 1145 LI HANZHONG, HUANG ZHIFEN, ZHANG ZUOJUN, ET AL¤ LIAN NAN, CAO JUN-GAO, YAN MING-QING¤ 1754 , 1645, LI HUA ET AL¤ 1216, LIAN NV ET AL¤ 380, LI HUASHAN ET AL¤ 1383 LIAN QIMING¤ 1095 LI HUIGANG ET AL¤ 783 , 1118 , LIAN WL, PAN MQ, ZHOU DH, ZHANG ZJ.¤ 2342, LI J, FAN ZZ, SUN J, XU JH¤ 2230, 2252, LIANG HAO ET AL¤ 583 LI JIABANG, TIAN YONGLI, LIU SHENG¤ 1596, LIANG HONGZHENG¤ 1040, LIANG JIAN-HUI¤ 394 , LIANG JQ, XU HB, WU YL, SUN SR, JIA ZH, WEI C, YOU LI JIANXIN ET AL¤ 1078 LI JIE, SUN GUIZHI, QI XIN, ET AL¤ 1663, LI JI-HAN¤ 1134, JH¤ 2087 LI JING ET AL¤ 1097, 1225, 1373, 1440, LIANG JUNXIONG ET AL¤ 1468, LIANG QIANJIN ET AL¤ 1283 , LIANG QINGHU¤ 729 , LI JINGPEI ET AL¤ 689, LI JINGXIAN¤ 1174 , LI JUAN ET AL¤ 680, LIANG SHAOHUA LI MINJIANG LI TINGGUAN ¤ 1660, LI JUNXIANG¤ 1021 LIANG SHAOYAN SUN ZHI¤ 991, LIANG YAZHEN ET AL¤ 1115, LI LIANHUA ET AL¤ 596, 671, 757, 837, 1246, 1441, LIANG YU ET AL¤ 1364 LI MINGRUI¤ 489, LI MINMIN¤ 822, LIANG ZHIQIANG ¤ 1804 LIANGCUN W ET AL¤ 969 , LI NAI MIN ET AL¤ 659, LI NAIMIN¤ 229, LIANHUA L ET AL¤ 882 LI NAI-QING ET AL¤ 845 LIAO FANGZHEN LILI ET AL¤ 1286, LI NAIQING, SHI XIAOGUANG, ZHOU KEXIN, ET AL¤ 1678, LIAO MEIDE ET AL¤ 1629, LI OU ET AL¤ 1541, LIAO WEI ET AL¤ 1446 LI PEIQUEN ET AL¤ 451, LIAO YUPING ET AL¤ 278, LI PEIQUN ET AL¤ 372, LIEN EJ¤ 396, LI PEIWEN¤ 65, 250, LI PEIWEN¤ 341, 821, LIEN EJ ET AL¤ 174 LI PEIWEN ET AL¤ 668, LIEN EJ ET LI WY¤ 203, LI PING-PING¤ 852, LIGUORI A¤ 624 LI QI-SONG ET AL¤ 1001 LILJEGREN A, GUNNARSSON P, LANDGREN BM, ROBÉUS LI QJ, JIA XH, MA YJ¤ 1692 , LI RONGXIAN ET AL¤ 706 , N, JOHANSSON H, 2325, LIM KAMTI¤ 4, LI RUI ET AL¤ 1452 LIN BIN XIE ZHAO-PING, LIAO XIAO-QI, ET AL¤ 1649, LI SD, LIU Y, YANG MH¤ 2202 . LIN CHUANRONG ET AL 1120, LIN DONG XIN ET AL¤ 355, LI SHUNQING ET AL¤ 857,

LIN HAOJIANG¤ 339 LIU LU-MING ET AL¤ 844 LIN HONG-SHENG, YANG YU-FEI, LI PING-PING, ET AL ¤ LIU LU-MING, WU LIANG-CUN, LIN SHENG-YOU, ET AL¤ 1816, 1701, LIN HOUWEN ET AL¤ 1510, LIU MINGSHENG ET AL¤ 799, LIN HSIN I ET AL¤ 1131, LIU MING-YI ET AL¤ 1043, LIU MINPEI ET AL¤ 1302. LIN JG ET AL¤ 1261 LIN JG, CHEN YH¤ 2302, LIU PEI-QIOU¤ 493, LIU PING ET AL¤ 1400 LIN JG, CHEN YH. 2294, LIN JIANJUN ET AL¤ 1319, LIU PX, LIN Y, CHEN QJ¤ 1890 LIU Q, ZHANG YB, MA CH, YUE XQ, LING CQx 1971, LIN JJ, JIN CN, ZHENG ML, OUYANG XN, ZENG JX, DAI LIU QI¤ 1553 XH¤ 1888 LIN JM, WEI LH, CHEN YQ, LIU XX, HONG ZF, SFERRA TJ, LIU SHANGCHUN¤ 1039, PENG J¤ 2227 LIU SHANJING ET AL¤ 1088, LIN JUNHUA¤ 952, LIU SHAOXIANG ET AL¤ 545, 734, 803, 873, LIN JUNHUA ET AL¤ 987, 1017, LIU SHAO-XIANG ET AL¤ 1153, LIN JUN-HUA ET AL¤ 1467 LIU SHAOXING¤ 670 LIU SHENG ET AL¤ 1523 , 1812 , LIU SHU-JING¤ 1777 , LIN JUNHUA, GUO WEIJIAN¤ 1938, LIN LAN¤ 1018, LIU SHUJING, HU GUOBIN, CHEN SENLIN, ET AL¤ 1855, LIN LIZHU, LAN SHAOQING¤ 1592 LIN LI-ZHU, ZHOU DAI-HAN, LIU KUN, ET AL¤ 1912, LIU SHUKUI¤ 1245, LIU SHUSHUO ET AL¤ 1209, 1430, LIN PEIZHONG ET AL¤ 140, 618, LIN SC, CHEN MF¤ 2181 LIU W, GUO QL, YOU QD, ZHAO L, GU HY, YUAN ST¤ 1893 LIN SC, HUANG ML, LIU SJ, HUANG YF, CHIANG SC, CHEN MF¤ 2099, 2105, LIU XIA¤ 1271, LIN SHAODONG¤ 1507, LIU XIA ET AL¤ 1521 LIN SHENG-YOU ET AL 1073, LIU XIANGXIAO¤ 1775 LIN SILAN ET AL¤ 664, LIU XIUFANG ET AL¤ 1381, LIU XU YI ET AL¤ 608, LIU YE ET AL¤ 1424, LIN TONG WANG¤ 435 LIN YH, CHEN KK, CHIU JH¤ 2120, 2130, 2190, 2191, LIU YING, ZHU WENFENG, LU FANGGUO, ET AL¤ 1743, LIN YH, CHIU JH¤ 2183, LIU YINGTAO¤ 31 LIN ZH ET AL¤ 723, LIU YINGTAO ET ÁL¤ 42, LIN ZONGGUANG¤ 124, 1023, LIU YINTAO ET AL¤ 234, LING CHANGQUAN ET AL¤ 949, LIU YUE¤ 60 LING HONGYING ET AL¤ 452, LIU YUE ET ÁL¤ 1551, LING YI HE ET AL¤ 261 LIU YULIN¤ 828 LIU YULONG¤ 1123, 1454, LIPING WANG, YIN BIAN, JIANYUAN LI, WEI ZHOU, YONGWEI FENG, AND JU 2026, LIU YU-LONG¤ 1353 LIU AI-WU, HU ZHENG-YAN¤ 1605, LIU YX, JIANG SJ, KÚANG TH, YAO YW, YANG JW, WANG LIU AN ET AL¤ 1212, YQ¤ 2089, 2108 LIU B, WANG Q, YUAN DD, HONG XT, TAO L^x 2215, LIU ZD, PEI J, FU QH, LI HY, YU QW, ZHANG JY, ZHANG LIU BIQING, QIAN HAIBIN, WANG YI, ET AL¤ 1857, LIU CHANGJIANG ET AL¤ 133, DQ.¤ 2075, LIU ZHENGYU¤ 926, LIU CHAOXIA, JIAO ZHONGHUA ¤ 1769, LIU ZHEN-XUE¤ 897, LIU CHENG-LI, CHEN WEI-PING, CUI SHU-ZHONG, ET AL ¤ LIU ZHENYI ET AL¤ 1094, LIU ZHIMIN ET AL¤ 1365, 1793. LIU CHENGLIN ET AL¤ 1290, 1621, LIU ZHI-YUN ET AL¤ 500, LIU CX ET AL¤ 721, LIU ZHUOYOU¤ 162, LIU ZZ, YU ZY, OUYANG XN, DAI XH, CHEN X, ZHAO ZQ, WANG WW, LI J, TU H, YE 2076, LIU DEFU ET AL¤ 279, 317, LIU FANG¤ 613, 633, 642, LIU GUANGPU ET AL¤ 548, LIYING Z ET AL¤ 477 LO HC, CHEN YW, CHIEN CH, TSENG CY, KUO YM, LIU GUIFANG ET AL¤ 429, LIU HAI-TAO DAI XI-MENG ¤ 1758 HUANG BM¤ 1977 LIU HANDONG, WANG FENG¤ 1831, LOIBL S, LINTERMANS A, DIEUDONNÉ AS, NEVEN P¤ 2193 LIU HAO JIANG¤ 418, LIU HONGWEI ET AL¤ 1284, LOU FENG CHANG ET AL¤ 444, LIU HONGYAN¤ 635, LOU ZHENGHUI ET AL¤ 868 LOUIS WC CHOW, WINGS TY LOO, JONATHAN S T SHAM LIU HUA¤ 1652, LIU HUA ET AL¤ 1633 AND MARY N B CHEUNG¤ 1805 LU DR, LI DY, CHEN XY, YE PZ, TIAN SD¤ 2109 , LU GUIRONG ET AL¤ 557 , LIU JIA WEI ET AL¤ 257, LIU JIAN XIAN¤ 785 LIU JIANAN ET AL¤ 1435 LÜ GUIZHI ET AL¤ 276, LIU JIAXANG ET AL¤ 1331, LU JIN ET AL¤ 1254, LIU JIAXIANG¤ 402 , LIU JIAXIANG ET AL¤ 251 , 299 , 931 , LU JUNREN ET AL¤ 1588 LU JUNZHANG ET AL¤ 1418, LIU JIA-XIANG ET AL¤ 1533, LU JUNZHANG, ET AL ¤ 1739, LIU JINFANG ET AL¤ 559 LU JZ, ZHAO L, REN JP, CAO XT, LI HX, ZHAO H¤ 2213, LIU JING, WANG WEI-PING, ZHOU YI-YANG, ET AL¤ 1915, LU KAI¤ 254 LIU JINZHOU¤ 534, LU KE-QIN¤ 1534 LIU JU ET AL¤ 1548, 1640, LU LIN A ET AL¤ 205, LIU JUN ET AL¤ 1253 , 1627 LU M, CAO DM, LI DM, ZHAO XX, LI JW, LI HX, ZHANG HH, LIU JZ, CHEN SG, ZHANG B, WANG CB, ZHAO XW, LI GY, WANG LX¤ 2095, 2102, LIU LIN ET AL¤ 1328, 1564, ZHANG HF.¤ 2068, LU MEI¤ 1202, LU MEI ET AL 1343, 1480, LIU LING-SHUANG¤ 1445 , LIU LONG, XU LING, SUN DA-ZHI¤ 1868 , LU MING, WU TAO, MA JIN-LI¤ 1844, LU PENG CHEN LI, LU ZHENG-XIN ¤ 1767, LIU LUMING¤ 450, 585, LU RENQI ET AL¤ 1536, LIU LU-MING ¤ 1819, LU SHIXIN ET AL¤ 1280 LU SHOUBIN ET AL¤ 1506, LIU LUMING ET AL 516, 565, 742,

LU W, HU D, DEAN-CLOWER E, DOHERTY-GILMAN A, MIAO HOURUN ET AL¤ 815, MIAO LIJUN ET AL¤ 1124, LEGEDZA AT, LEE H, 2010, LU W, MATULONIS UA, DOHERTY-GILMAN A, LEE H, MIAO WENHONG¤ 1425, DEAN-CLOWER E, ROSULEK 2097, 2103 MICHIKO ET AL¤ 13, LU W, POSNER MR, WAYNE P, ROSENTHAL DS, HADDAD MILES D¤ 1515 MIN CUN -YUN, LI QING -MING, LIU HE -QIANG¤ 1952, RI.¤ 2166. MING LIU J ET AL¤ 1149 LU W, ROSENTHAL DS¤ 2138, LU W, ROSENTHAL DS. 2333, MING YI-HUA ZHU YU-MING, ZHOU HONG, TONG WEN-LU W.¤ 1988 PU, SHI LING-LI¤ 2046, LU WEI MIN ET AL¤ 1402 MINGRUI L¤ 474 MING-ZHUANG L^m 879, LU WENPING ET AL¤ 1103, LU WENQI¤ 340 MINH L¤ 88, LU X, LI B¤ 2088, MINTON O, HIGGINSON IJ¤ 2009, MISHRA SI, SCHERER RW, GEIGLE PM, BERLANSTEIN LU XIAO FU¤ 168, LU XIAO-QIN ET AL¤ 1668, DR, TOPALOGLU O, 2319, MISHRA SI, SCHERER RW, SNYDER C, GEIGLE PM, LU YONG KE ET AL¤ 1428 BERLANSTEIN DR, 2318, LU ZH, BAI XG, XIONG LZ, WANG YH, WANG Y, WANG Q¤ MO LI¤ 1926 2.2177 LUO CHUANHUAN ET AL¤ 1089 MOK T, YEO W, JOHNSON P, HUI P, HO W, LAM K, XU M, LUO HAIYING, XU KAI, CHEN DACAN¤ 1765, CHAK K, CHAN A, WONG 2008 MOLASSIOTIS A, BARDY J, FINNEGAN-JOHN J, MACKERETH P, RYDER DW, 2316, LUO JINGGUANG ET AL¤ 487, LUO QING¤ 646, LUO SHU-LIN¤ 831 MOLASSIOTIS A, FERNANDEZ-ORTEGA P, PUD D, OZDEN LUO XUE-XIN¤ 832, G, PLATIN N, 1887 LUO YONG MING ET AL¤ 597, LUO YONGMING ET AL¤ 703, MOLASSIOTIS A, HELIN AM, DABBOUR R, HUMMERSTON S¤ 2014, LUO ZEMIN ET AL¤ 1398, 1456, MOLASSIOTIS A, POTRATA B, CHENG KK. a 2056 MOLASSIOTIS A, SYLT P, DIGGINS H¤ 2022, 2024, LYTTLETON J¤ 383 MA CHAOYING ET AL¤ 1293, MORELLI G¤ 733, MA DONGXING ET AL¤ 1526, MORELLI G ET AL¤ 528, MA FEIYA¤ 573. MORENO L¤ 1273 MA FENGYOU¤ 690 MORIO YONEZAWA ET AL¤ 362 MA GUO-HAI¤ 1458, MOU H, ZHENG Y, ZHAO P, BAO H, FANG W, XU Nº 2211, MA JI FU¤ 219, MOYAD MA¤ 1231 MA JIFU¤ 248, 414 MOYAD MA ET AL¤ 1234, MA JING ET AL¤ 1459 MU JIAN-GUO, ZHANG GUANG-HUA, ZHENG HAI-TAO, ET MA JUN WANG GUO-HUA CM DING-FANG, ET AL¤ 1963, AL¤ 1750, MA JUN, LI YONGJIAN¤ 1614, MU LIXIANG, DANG WENSHENG, AND YAN LIUYU¤ 1745, MA LINGYUN¤ 1122 , MU RONG, ZHENG QUBIN¤ 1674 MA TINGXING ET AL^x 576 MURASHIMA T, KATAYAMA H, SHOJIRO K, NISHIZAWA Y¤ MA XIAOPENG ET AL¤ 1392 MA ZENG-CHUN ET AL¤ 1631 MUSTIAN KM, KATULA JA, ZHAO H¤ 1880 MYUNG NY, CHOI IH, JEONG HJ, KIM HM¤ 2195, MA ZHE-HE, GUO HONG-FEI¤ 1664, MACEK C¤ 87, 122, NAGASAWA J ET AL¤ 872, MACIOCIA G¤ 1341, 1465, NAO JIANHE¤ 571 MANNIX K¤ 1997, NEDSTRAND E, WIJMA K, WYON Y, HAMMAR M¤ 1981, MANOS D¤ 1727, NEOH CK¤ 769, NG LT, CHIANG LC, LIN YT, LIN CCa 1993, MANSKY P, SANNES T, WALLERSTEDT D, GE A, RYAN M, JOHNSON LL, CHESNEY 2004 NGUYEN J¤ 652 MAO JJ, XIE SX, FARRAR JT, STRICKER CT, BOWMAN MA, NI AI-DI ET AL¤ 1504 , BRUNER D, 2351 NI AI-TI ET AL¤ 1317 MAO SANBAO¤ 660, NI YONG-WEN ET AL 345, MAOCHU Z¤ 476 NING CHUNHONG¤ 369, MAO-YING QL, CÚI KM, LIU Q, DONG ZQ, WANG W, WANG NING ZEPO¤ 589 J, SHA H, WU GC, WANG 1980, 2001, NIU HAITONG¤ 393 MASAHIRO YAMAMOTO ET AL¤ 110, NIU HAITONG ET AL¤ 319, MASKARINEC G ET AL¤ 1443, NIU HONGMEI¤ 1288 MATSUDA H ET AL¤ 777 NIU HONGMEI ED ALTRI¤ 1840, MCKEON C, SMITH CA, HARDY J, CHANG Ex 2338, NIU WEIET AL¤ 1581, MCMILLAN CM ET AL¤ 656, 657, NOBUAKI OTSUKA ET AL¤ 638, MEEKINS K¤ 2268 NOGIER¤ 48 NOGIER ET AL¤ 15, NOGIER P¤ 23, 77, 78, MEHENDALE SR, AUNG HH, JUN-JIE YIN, LIN E, FISHBEIN A, CHONG-ZHI WANG, 1851 MEHLING WE, JACOBS B, ACREE M, WILSON L, BOSTROM A, WEST J, ACQUAH J, 2012 , NOKTA M¤ 2234 , 2256 , NOMURA M ET AL¤ 974 , 1005 , MEI PO YANG M E TAL¤ 754, NORDENSTRÖM BEW¤ 456, MEI QI BING ET AL¤ 406 NORHEIM AJ ET AL¤ 1184, MELCHART D, IHBE-HEFFINGER A, LEPS B, VON NORIO SHIMURA ET AL¤ 290, 291, NU HAITUNG ET AL¤ 552 SCHILLING C, LINDE K¤ 1995, MENG MB, WEN QL, CUI YL, SHE B, ZHANG RM¤ 2199, OH B, KIMBLE B, COSTA DS, DAVIS E, MCLEAN A, ORME K, BEITH J.¤ 2345 MENG WEI ET AL¤ 1587, OHTAKI Y ET AL¤ 983 MENG YULING, WANG XIANGQI, YANG XI ¤ 1762 OKITA K ET AL¤ 912, MENG Z, GARCIA MK, HU C, CHIANG J, CHAMBERS M, OMURA Y ET AL¤ 1071 ROSENTHAL DI, PENG H, 2298 , MENG Z, KAY GARCIA M, HU C, CHIANG J, CHAMBERS M, O'REGAN D, FILSHIE J¤ 2134 OSAKA I, KURIHARA Y, TANAKA K, NISHIZAKI H, AOKI S, ROSENTHAL DI, PENG 2295 ADACHI I¤ 2096, MENG ZHI-QIANG ET AL¤ 1354, O'SULLIVAN EM, HIGGINSON IJ¤ 2158, 2170 MI YI-YENG ET AL¤ 796,

OU TT, WU CH, HSU JD, CHYAU CC, LEE HJ, WANG CJ¤

QIAN XINLAN¤ 945, OU YANG-BING, JI XU-MING, YANG YONG, ET AL¤ 1908, QIAN XUEYE ET AL¤ 896, OUYANG BS, GAO J, CHE JL, ZHANG Y, LI J, YANG HZ, HU TY, YANG M, WU YJ, JI 2231 , 2253 , QIAN YALIN ET AL¤ 1473 , QIAN YF, WANG XJ¤ 2107 OUYANG QUN ET AL¤ 755, 862 QIAN YI, KONG XIANGYAN ¤ 1732, OVERCASH J, WILL KM, LIPETZ DWm 2334, QIANG YONG ET AL¤ 1401 PALEY CA, JOHNSON MI¤ 2224, 2246, QIAO B, ZHANG CH, XING H. 2243, PALEY CA, JOHNSON MI, TASHANI OA, BAGNALL AM¤ QIAO QIAO¤ 1172, QIN HONG ET AL¤ 504, QIN JIHUA ET AL¤ 288 PAN CX ET AL¤ 1450, PAN DENIAN¤ 190, QIN SHANWEN, ZHENG YULING¤ 1927, PAN ET AL¤ 889, QIN SONGYUN ET AL¤ 687, PAN JINYOU, YAO ZUYI, LU LUHUA, ET AL¤ 1654, QINFENG HUANG 黄琴峰¤ 2278, PAN LIGUN ET AL¤ 667 QINGQIANG C¤ 1084. PAN LIQUN¤ 536, 666, 1090, QIU BAOSHAN¤ 1041 PAN LIQUN ET AL¤ 813 QIU JIANXIN ET AL¤ 433 PAN MIN QIU ET AL¤ 354, QIU JIAXIN ET AL 274, 308, 449, 518, 829, PAN MINGJI¤ 875, QIU WEILIU ET AL¤ 95 PAN MINGJI ET AL¤ 211, 228, QIU XINGSHENG ED ALTRI¤ 1955, PAN MINGLI ET AL¤ 1141 QIU ZUPING¤ 800, PAN MINGQIU, ET AL¤ 1657 QIU ZUPING ET AL¤ 938, PAN MINQIU ET AL¤ 186, 550 QU BAO XI ET AL¤ 427 , QU LIANGYI ET AL¤ 1519 , PAN MINQIU, PAN BO, LI YUEHENG ¤ 1709, PAN MINQUI ET AL 306, QU SHUFEN ET AL¤ 150, 448, PAN TIAN-HUI, FAN QIAO-YUN¤ 1780 QU YZ, GUAN JZ, PAN H, SONG Y¤ 2165 , 2186 , QUAN DAFANG ET AL¤ 1252 , PAN XIANG-XUE, YUAN JIAN-YEx 1763, PAN XINGNAN ET AL¤ 1395, QUAN HONGXUN ET AL¤ 1015, PAN YUN LING ET AL¤ 1409, QUAN HONG-XUN ET AL¤ 918 PAN YUXIAO¤ 163, QUE HF, CHEN HF, GAO SP, LU DM, TANG HJ, JIA XH, XU PAN ZHI-QIANG, FANG ZHAO-QIN, FU XIAO-LING, ET AL ¤ JN¤ 2048 1734 QUE HUAFA ET AL¤ 1224, PANG DEXIANG ET AL¤ 921, 1528 QUIREZA RAMOS O¤ 725 PANG DEXIANG, ZHU FAPING, LIAN JIANWEI, ET AL¤ RADTKE JV, TERHORST L, COHEN SM¤ 2197, RAJAN S¤ 1237 PAO-HSIN LIAO, SHIOW-LING CHEN, HUNG-CHE SHIH RAO BENQIANG ET AL¤ 1407, AND MING-YUNG CHOU¤ 1889, RAO BEN-QIANG ET AL¤ 1491 PEILI H ET AL¤ 1137, RAO MR, RAGHURAM N, NAGENDRA HR, GOPINATH KS, PEIWEN L¤ 884, SRINATH BS, DIWAKAR 2058, PELUSO FC, GRAVES PR, ASHAMALLA H¤ 2303, RAO XIEQING ET AL 281, PEN ZHENGSHUN ET AL¤ 1082, RAO XIE-QING ET AL¤ 677, PENG DA-WEI ET AL¤ 824, REIN G¤ 210 PENG HUI-TING¤ 1207 REINDL TK, GEILEN W, HARTMANN R, WIEBELITZ KR, PENG JH, HU YY, FENG Q, CHENG Y, XU LL, CHEN SD, KAN G, WILHELM I, 1976, TAO Q, LI FH¤ 2086, REMPP C¤ 964 PENG MINGE, ET AL¤ 1646, REN BEN, DING TIAN-GUI, YIN LI-JIE, ET AL¤ 1681 , PENG PEICHU ET AL¤ 784 REN DONGLIN ET AL¤ 1433, PENG YUN - RU, LUO YU - HUI, YE QI - ZHENG, ET AL ¤ REN HUA-PING, CHENG LIN x 1773 REN J, ZHENG C, FENG G, LIANG H, XIA X, FANG J, DUAN PENG ZHENG-SHUN ET AL¤ 920, X, ZHAO H¤ 2077, PERKINS P, VOWLER SL¤ 2042, REN LIANSHENG ET AL¤ 540 PERNICE C¤ 1699 REN LIAN-SHENG ET AL¤ 1552, PHUTTHAVONG Px 384, REN QIUGUI ET AL¤ 1397, PIAO BINGKUI¤ 301, REN YANMING¤ 1370 PIAO BINGKUI ET AL^x 711 RENXU G ET AL¤ 1110, PIAO LONG QIA ET AL¤ 511, REQUENA Y¤ 457, 458, PICA G ET AL¤ 625, RIBETON L¤ 182, PICHARD Ex 106. RIBETON L ET AL 213, PINKOWISH MD¤ 2091 RICO RC ET AL¤ 79, PORTER M, KOLVA E, AHL R, DIEFENBACH MA¤ 2049, RISBERG T ET AL¤ 1217 POSADZKI P, MOON TW, CHOI TY, PARK TY, LEE MS, ROBB K, OXBERRY SG, BENNETT MI, JOHNSON MI, ERNST E.¤ 2328 SIMPSON KH, SEARLE RD¤ 2055 POSADZKI P, PAREKH S¤ 2082, ROBB KA, NEWHAM DJ, WILLIAMS JE¤ 2032, POULAIN P ET AL 217, RONGLAI Z¤ 1029, PRICE H ET AL¤ 650, PU LU YAN¤ 890, ROSCOE JA ET AL¤ 1638, ROSCOE JA, JEAN-PIERRE P, MORROW GR, HICKOK JT, PU ZHI¤ 1783, ISSELL B, WADE JL, 2006 , ROSCOE JA, MATTESON SE, MORROW GR, HICKOK JT, PU ZU-YI ET AL¤ 941 PUCHE G ET AL¤ 1161, BUSHUNOW P, GRIGGS 1898 PUJOL ET AL¤ 49 ROSCOE JA, MORROW GR, HICKOK JT, BUSHUNOW P, PIERCE HI, FLYNN PJ, 1721 , PULCRI R ET AL¤ 623, QI CHONG¤ 1489 ROSENBERG Z¤ 1164 QI CONG ET AL¤ 999 ROSTOCK M1, LACOUR M2, JAROSLAWSKI K1, GUETHLIN C2, ZUNDER T2, 2015, QIF, LIA, INAGAKIY, GAOJ, LIJ, KOKUDON, LIXK, TANG W¤ 2153 RUBIN M¤ 7, RUZHONG O¤ 478, QI YUANFU¤ 930 , 1086 , QI YUANFU ET AL¤ 806 , 925 , RYDHOLM M ET AL¤ 1269 QIAN BAOYAN ET AL¤ 1205, 1298, Sagar SM ANd . Wong RK¤ 2310, QIAN BOWEN¤ 413, SAIF MW¤ 2044, QIAN BOWEN ET AL¤ 303,

SAKAMOTO S ET AL¤ 913, CHEN YF¤ 2337 SANTINI¤ 32 SHOU MA GANG ET AL 351, SATOH Y ET AL¤ 1100, SIDORAK M¤ 1276, SATOMINET AL 520, SILVA DRF ET AL¤ 2094 SIMA L, WANG X¤ 2057, SAWADA NO, OKINO L AND NICOLUSSI AC¤ 2308 SIMA L, WANG X.¤ 2071, SIMCOCK R, FALLOWFIELD L, JENKINS V¤ 2079, SAWADA NO, ZAGO MM, GALVÃO CM, CARDOZO FM, ZANDONAI AP, OKINO L, 2129, SCHRAUB S¤ 298, SIMCOCK R, FALLOWFIELD L, MONSON K, SOLIS-SCHROEDER S, MEYER-HAMME G, EPPLÉE S. 2198, TRAPALA I, PARLOUR L, 2292 SELLICK SM ET AL¤ 1189, SIMON L, PREBAY D, BERETZ A, BAGOT JL, LOBSTEIN A, SHAH S ET AL¤ 1270 RUBINSTEIN I, 2016, SHAN GY, ZHANG S, LI GW, CHEN YS, LIU XA, WANG JK¤ SIN YM ET AL¤ 271 2225, 2247 SMITH ME, BAUER-WU S. 2296, SHANG HONG SHENG ET AL¤ 255 SON DJ, LEE JW, LEE YH, SONG HS, LEE CK, HONG JT¤ SHANG MINGHUA ET AL¤ 1154 , 1208 2021 SHANG PEIZHONG, GU HUAPING, SUN YINCHEN, ET AL ¤ SONG AILI, ET AL¤ 1906, SONG DONG-JUAN¤ 1557 1774 SHAO JING' ZHUO YUYING, ZHOU XIAOJING¤ 1825 , SONG GENG-REN ET AL¤ 860, SHAO NIAN-FANG¤ 532, 533, SONG GUANJI¤ 411 SHAO QUN ET AL¤ 1585, SONG HONG EN ET AL 264, SHAO WENSHENG¤ 374 SONG HUAIYU ET AL¤ 1396, SHAO ZHONG-XING ET AL¤ 1559 SONG HUAI-YU ET AL¤ 1505, SHARMA M, HAIDER T, KNOWLDEN AP¤ 2349, SONG JIA-JU¤ 1836, SONG JIE ET AL¤ 1542 SHAW S¤ 1514, SONG JL, FAN FJ, HAN ZP, HONG WX¤ 1992 , SHCHERBATYI AA ET AL¤ 1262, SHEN CHUNDI¤ 1038, SONG LING ET AL¤ 1469, SHEN HONGMEI ET AL 1064, SONG MULING¤ 130, SHEN J¤ 1333 SONG WENGE ET AL¤ 1062, SHEN J ET AL¤ 1332, 1361, 1571, SONG XIANG ZHANG¤ 526 SHEN JIYUN ET AL¤ 1420, SONG YA-GUANG, YUAN HUI, XU-LAN-FENG¤ 1695, SHEN KE ET AL¤ 1451, SOTTE L¤ 730, SHEN KE-PING ET AL¤ 1316, STANNARD D¤ 521 SHEN LI, ZHANG GUANGJI¤ 1946, STERNFELD Mx 387, SHEN LIDA ET AL¤ 1308, STERNFELD M ET AL¤ 189 STONE JA, GREENE SC AND JOHNSTONE px 2307, SHEN LIJUN ET AL¤ 944, SU JINMEI ET AL¤ 1492 SHEN LIN ET AL¤ 562 SHEN LING ET AL¤ 416 SU SHOUYUAN ET AL¤ 212, SHEN MEILING¤ 120, SU W, XU ZY, WANG ZQ, XU JT¤ 2235, 2257 SHEN MINGHE ET AL 710, SU XIAOKANG, ZHOU WEISHENG, XU FABIN, ET AL¤ 1735 SHEN PEIAN ET AL¤ 75, SHEN RN ET AL¤ 1113, SUEN YI, GAU BS, CHAO SC¤ 1899, SUGIYAMA K ET AL¤ 1061, 1065, SHEN RONGFU ET AL¤ 675 SULLIVAN SG ET AL¤ 196 SHEN SHI -LIN, ZHAO JIAN -XIONG, LI YING -PING, ET AL¤ SUMIE TOYODA ET AL¤ 395 SHEN SW, HUI JP, YUWEN Y, WANG JH, CHEN LY, NIU Y, PENG N, YANG ZH, 2233 , 2255 , SUN DELI¤ 1352, SUN DELI ET AL¤ 1322 SHEN W, ZOU X, CHEN M, LIU P, SHEN Y, HUANG S, GUO SUN DE-LI, ET AL¤ 1610 H, ZHANG L^m 2219 SUN DZ, JU DW, HE J, LU Y, WU F, LI C, WEI PK 2160, SHEN WEISHENG ET AL¤ 1390, 2173 SHEN WEIXI ET AL¤ 1277 SUN GANG ET AL¤ 1572 , 1626 , 1632 , SHEN WEI-XI ET AL¤ 1453 SUN GUI SENG ET AL¤ 1410, SHEN XIAOHENG ET AL¤ 665, SUN GUIZHI ET AL¤ 309 SHEN ZHAOKE¤ 855 SUN HONG-YOU, MA BIN-4N WANG RUO-SHENG, ET AL¤ SHENTU JIN ET AL¤ 157, 1756 SHI BIANZHEN¤ 612, SUN HUA ET AL¤ 805, SHI BIAN-ZHEN ET AL¤ 490 SUN HUALI¤ 543, SHI HANG, SHAN GUANG-ZHI, LU WEI-NA 1737, SUN HUALI ET AL¤ 662, SHI HENGJUN ET AL¤ 953, SUN JIANLI¤ 1584 SHI J, WEI PK¤ 2221, SUN JINGINGET AL # 1282, SUN JINXIANG¤ 601 SHI JIZHAO¤ 109, SHI LING ET AL¤ 1391 , SHI LL, ZHOU H , TONG WP , ET AL¤ 1960 , SUN JUE ET AL¤ 1357, 1503, SUN LANYING¤ 398, SHI LU, YEYUNSHAN LUO SHIGANG, ET AL¤ 1871, SUN LIN ET AL¤ 781 SHIQETAL¤779, SUN LIQUN, ET AL¤ 1928, SHI SHIAI¤ 134 SUN LIZHEN¤ 1080, SHI X, TIAN L, ZHU XD, WANG HM, QIN H¤ 2238, 2264, SUN MAN-YI¤ 1947, SHI XIAOGUANG, LI BAOZHONG, YUAN HAI, ET AL¤ 1662, SUN SHUXIA ET AL¤ 1426 SHI XIAO-PING ET AL 980 SUN WEI-FENG ET AL¤ 1520 , SHI Y, ZHOU EH, WU HG, ZHOU CL, WANG QY, QI L¤ 2236 SUN XF, PEI YT, YIN QW, WU MS, YANG GT¤ 2172 , SUN XICAI ET AL¤ 437 , , 2262, SHI ZHIYUN ET AL¤ 594, SUN XINONG ET AL¤ 1143, SUN Y¤ 390,768 SHIMOTSUURA Y ET AL¤ 529 SHIN VY, SO WH, LIU ES, WU YJ, PANG SF, CHO CH¤ 1853 SUN YALIN ET AL¤ 1375, SUN YAN¤ 726, SHIN YH, KIM TI, SHIN MS, JUON HS¤ 1882, SUN YAN ET AL¤ 91 SHINOBU SAKAMOTO ET AL¤ 740, SUN YI-NONG, ZHA WEI, SHANG MING-HUA¤ 1710, SHINOHARA S ET AL¤ 876 SUN YU ET AL¤ 262 SHNAGHAI MUNICIPAL HEALTH BUREAU¤ 1358, SUN ZAIDIAN ET AL¤ 704, SHNEERSON C, TASKILA T, GALE N, GREENFIELD S, SUN ZHONGYI¤ 348,

SUPOKEN A, CHAISRISAWATSUK T, CHUMWORATHAYI WAN YAO DE ET AL¤ 409 , 410 , WAN YU-LIANG, JIANG YU-SHI, WANG NING, ET AL¤ 1837 , B¤ 2074 SWANSON JR¤ 736, TA 0 Lan, it ala 1821 WANG J AND YUESHENG XIA¤ 2025, TACÓN AM, MCCOMB J¤ 2100, 2106, WANG ANFENG¤ 1431 TAGLIAFERRI M ET AL¤ 1567, TAHMAZOV RAFIG FAIG OGLY¤ 968, WANG BING JI ET AL¤ 498, WANG BINGSHENG ET AL¤ 1380 , TAKAHISA USHIROYAMA, ATSUSHI IKEDA, KOU SAKUMA WANG BJ¤ 655, AND MINORU UEKI¤ 1809, WANG CANG-JUN ET AL¤ 1346, WANG CHANGJUN ET AL¤ 1289, TAKEDA¤ 176 TAMAGAWA TET AL¤ 878, WANG CHAO ET AL¤ 1092 TAN GUANG, YU ZHIHONG, GONG PENG, ET AL¤ 1920, WANG CHENGBAI ET AL¤ 1108 TAN HUO ET AL¤ 1197 WANG CHENGUANG ET AL¤ 1251, TAN PINGGUO ET AL¤ 1386, WANG CJ ET AL¤ 773, WANG CM ET AL¤ 766 TAN XIN MIN¤ 89 TAN YONGDONG¤ 819, WANG CZ, BASILA D, AUNG HH, MEHENDALE SR, CHANG TANG CHUNZHI ET AL¤ 1472 , TANG DEPENG ET AL¤ 166 , WT, MCENTEE E, GUAN 1886, WANG DC ET AL¤ 1014, TANG FAQING ET AL¤ 1374, WANG DE SHAN ET AL¤ 1478, TANG HAN-JUN¤ 1962 WANG DE-SHAN ET AL¤ 1544 TANG WEI PING ET AL¤ 408, WANG FANG, GAO QI-QUAN x 1779, WANG FY ¤ 906 , TANG XING MING¤ 141, TANG XINMIN¤ 187 WANG G ET AL¤ 961 WANG GUAN TING ET AL¤ 606 , TANG XINMING¤ 810 TANG XUEZHENG¤ 316, WANG GUANTING¤ 1594 TANG XUEZHENG ET AL¤ 153, WANG GUANTING ET AL 68, 193, 300, TANG YING¤ 347 WANG GUIMIAN ET AL¤ 984, 1025, TANG YOUJUN ET AL¤ 811 , TANG YUMIN ET AL¤ 1527 , WANG GUI-MIAN ET AL¤ 1013 , WANG GUIZHI ET AL¤ 686 , TANG YU-MING ET AL¤ 1359 WANG GUO-PING¤ 788, TANG ZHAOLIANG ET AL¤ 1321, WANG H ET AL¤ 891, TAO KAI ET AL¤ 1625 WANG HAI FENG¤ 900, TAO KAIXIONG ET AL¤ 1471, WANG HF ET AL¤ 724, TAO LAN, ET AL¤ 1859, WANG HONG FU ET AL¤ 169 TAO MING FEI , ET AL ¤ 1829 , TAO XIAOCHEN ET AL¤ 382 , WANG HONG-QI, ZHANG ZHÉNG, ZHAO YAN-PING, ET AL ¤ 1792 TASPINAR A, SIRIN A¤ 2125, WANG HUAI-ZHANG¤ 1555, TCHEPA ML^x 758, WANG HUAI-ZHANG ET AL¤ 1466 THE CO-ORDINATING GROUP FOR THE RESEARCH¤ 10, WANG HUI-JIE,SUN WEI-FEN¤ 1715, THE NATIONAL COUNCIL FOR HOSPICE AND SPECIALIST WANG HUILING¤ 992 PALLIATIVE CARE 1720, WANG J, JIANG JW, CAI SJ, ET AL ¤ 1842, WANG JI, ET AL ¤ 1714 , WANG JIAN, HE HUI-JUAN, HE CHENG-WEI, ET AL ¤ 1818 , THWAITE J¤ 1132, TIAN GUOFANG, LÍ XIN, DUAN RENHUI¤ 1738 , TIAN HQ, LI HL, WANG B, LIANG GW, HUANG XQ, HUANG WANG JIAN'AN, ZHOU FENGXUE, ZHANG MEILAN¤ 1797, ZQ, LANG JM, ZHANG YP, 2162 WANG JIANG 'CHEN ANMIN, GUO FENGJIN, ET AL¤ 1921, TIAN HQ, YU SY, WANG B¤ 2013 , TIAN HUA-QIN, LIANG GUI-WEN, TAO YIN, ET AL¤ 1616 , WANG JIAN-YING AND ZHONG XUE-MEI ¤ 1918, WANG JIEMIN ET AL¤ 67, TIAN JINGZHEN¤ 226 WANG JIMIN ET AL¤ 333, TIAN SUQIN ET AL¤ 1133, WANG JING¤ 123 TIAN YAXIAN¤ 621, WANG JING ET AL¤ 672, TIING YU, ET AL¤ 1706 WANG JUXIANG ET AL¤ 1227, 1303, TILDEN VP, DRACH LL, SUASN W TOLLE S¤ 1848, WANG JZ ET AL¤ 770, TINGJUN Z ET AL¤ 967, TODE T ET AL¤ 778, 910, WANG KUN REN ET ÂŤ 76 , WANG L, ZHANG ZZ, TU XH, ZOU ZD, LIU JH, WANG Y¤ TONG CN ET AL 776, 2063,2081 TONG GUOQUON ET AL 329, WANG LEIMING ¤ 1785, WANG LIPING, BIAN YIN, LI JIANYUAN, ET AL¤ 1687, TOSHIKAZU T ET AL¤ 129 , TRAPASSO T ET AL¤ 1249, 1448, WANG MANXIA ET AL¤ 790, TREISH I, SHORD S, VALGUS J, HARVEY D, NAGY J, WANG MEI ET AL¤ 1266 STEGAL J, LINDLEY C. x 1722, WANG MEI, ZHANG HONG -JUN, LIANG JUN¤ 1903, WANG MINGYI ET AL¤ 933 , WANG MU-DI ET AL¤ 817 , TRINH R¤ 366, TRINH R ET AL = 128, TRINH R ET AL = 181, TRUONG TAN TRUNG HY¤ 1982, WANG N, PAN W, ZHU M, ZHANG M, HAO X, LIANG G, TSUJIMOTO T ET AL¤ 880, 1081, FENG Y¤ 2210 TU HUA CHENG ET AL 509, WANG QINGCÁI ET AL¤ 663 TUCK CM^m 2171 WANG R, LIU J, CHEN P, YU D¤ 2291, TUKMACHI Ex 1344, 1349, WANG RL ¤ 907 WANG RONG PING¤ 419, URGELLES MACHADO ET AL¤ 221, WANG RONGPING¤ 283, VALESI MG ET AL¤ 1268 VAN BENSHOTEN MM¤ 1076 WANG RONGPING ET AL¤ 1247 VICKERS AJ, STRAUS DJ, FEARON B, CASSILETH BR¤ WANG RONG-PING ET AL¤ 1580, WANG RUI-HUI¤ 1666 1728 VON ZLLER¤ 80, WANG RUI-PING ET AL¤ 1487 Walker EM, Rodriguez AI, Kohn B, Ball RM, Pegg J, Pocock WANG RUIPING, PAN YU, YE ZHICHAO, ET AL¤ 1827, JR, Nunez R, Peterson E, 2072, 2116, WAN DONG-GUI AND LI PEI-WEN ¤ 1817 WANG SHANGJIN ¤ 1863 WANG SHAODONG ET AL¤ 599, WAN HUA WU XUE-QING FU QIN-HUI, ET AL¤ 1801, WANG SHI XIAN ET AL¤ 256, WANG SHIZHEN¤ 582, 1093 WAN HUA, WU XUE-QING, LU DE-MING¤ 1650, WAN XUYING ZHANG CHENG, LING CHANGQUN, ET AL $\tt m$ WANG SHOUFENG ET AL¤ 1511,

WANG SHOUZHANG ET AL¤ 1151, WONG RK, SAGAR SM, CHEN BJ, YI GY, COOK Rx 2124, WU BIN ET AL¤ 1009, 1135, WANG SHULIN ET AL¤ 1475, WU BIN, ZHOU RONG-XING, CHEN MING-JIN, ET AL¤ 1148 WANG SIWANG ET AL¤ 820, WANG SY ET AL¤ 1152 WANG TING CHU ET AL 147, WU CC ET AL¤ 57 WANG TING ET AL¤ 986, WU G ET AL¤ 1010 WU GEN FU ET AL¤ 584 WANG WEIPING ET AL¤ 1545, WANG WEN ET AL¤ 1244, WU GL, ZHANG L, LI TY, CHEN J, YU GY, LI JP¤ 2161, WANG WEN JUAN ET AL 1417, WU JIAN-GUANG ET AL¤ 1165, WANG XI AO¤ 118, WU JIPING ET AL¤ 1405, WANG XIAO¤ 955, 1150, WU LIANGCHUN¤ 713 WANG XIAO ET AL¤ 823, WU MIAN-HUA, ZHOU XUE-PING, CHENG HAI-BO, ET AL¤ WANG XIAOXIAN¤ 954 . 1916. WANG XIMIN ET AL¤ 101, 116, WU PEIJUN¤ 544 WU PING ET AL¤ 1574 WANG XIMING¤ 249, 693 WANG XIN-HUA, ZHANG MANG, QIAO JUN-HONG, ET AL¤ WU QIYAN ET AL¤ 1310, WU SHENGXIAN ET AL¤ 1387 1796 WANG XINJIE, GUO YONGYI¤ 1934, WU SHUISHENG ET AL¤ 1384, WANG XINMING¤ 442, WU WY¤ 2163, WANG XIUQING ET AL 809, WU WY, YANG XB, DENG H, LONG SQ, SUN LS, HE WF, ZHOU YS, LIAO GY, CHAN 2174, WANG XIWEN¤ 592, WU XIAOCHUN¤ 1406, WANG XU-AO² 247, WANG YAFEI ET AL¤ 1196, WU XUE-MEI, YAO DE-JIAO¤ 1617 WANG YG¤ 2065 WU XUE-QING, GAO SHANG-PU, MU MING-CHUN, ET AL¤ WANG YI CHENG ET AL¤ 356, 1747, WANG YIFU ET AL¤ 506, WU YAOCHI ET AL¤ 1182, WU YING-KAI ET AL¤ 367 WANG YING¤ 1155 WANG YONG KUA¤ 1112, 1129, WU YINGMEI, ET AL¤ 1686, WANG YOUJUN ET AL¤ 1770, WU YITING¤ 1944, WANG YOULIANG ET AL¤ 71, WU YUN LIN ET AL¤ 441, WANG YOUMIN¤ 58 WU YUSHENG¤ 695, WANG YU CHEN GANG XIANG YONG-CHEN, ET AL ¤ 1798 WU ZHENGJUN¤ 1604 WU ZHENGJUN, ET AL¤ 1682, WANG YU-LAI ET AL¤ 1045 WU ZHONG JIU ET AL¤ 948, WANG YUN -QI, HE YONG -HENG¤ 1953, WU ZHONGJIU ET AL¤ 902 WANG YUN-QI, ET AL¤ 1907 WUE XUE QING ET AL¤ 1415, WANG YUNQI, TIAN XUEFEI, HE XIN, ET AL¤ 1869, WU-LUNG WU ET AL¤ 739, WANG YUQIN ET AL¤ 378 X¤ 11, 94, 100, 165, 167, 267, 282, 294, 342, 377, 617, WANG YUZHANG¤ 538, 935, 649, 750, 751, 752, 1047, 1048, 1177, 1568, 1689, 1731 WANG ZESHI ET AL¤ 434, , 2017, 2265 WANG ZHAO-LIN¤ 1669, X U JIAN-HUA, FAN ZHONG-ZE¤ 1781, WANG ZHAOXIANG, ET AL¤ 1611, WANG ZHE, ET AL¤ 1911, XANG XUEZHİ ET AL¤ 92, XI YONG LIN ET AL¤ 541, WANG ZHENGCHANG ET AL¤ 149. XIA JIN-PING¤ 853 WANG ZHENG-YAN, SUN HONG-JIE x 1733, XIA QINHUA ET AL¤ 1240 WANG ZHEREN ET AL¤ 1199, XIA YUE-SHAN ET AL¤ 1336, XIA YUQIN ET AL¤ 222 WANG ZHIQUAN ET AL¤ 1512, WANG ZHI-QUAN ET AL¤ 848, XIA YUQING ET AL¤ 159, 170, 223, WANG ZHIXUE¤ 1287 XIA YU-QING ET AL¤ 995, XIA Z ET AL¤ 1051 WANG ZHONGSHAN¤ 1482, XIANG BAIKANG¤ 1193 WANG ZU-HAO¤ 1042 WANG LI-LIN ET AL¤ 1538, XIANG YAO QIAN ET AL¤ 496, XIAO JIANHUA ET AL¤ 1032, WATANABE Y ET AL¤ 9 WEBER D, WHEAT JM, CURRIE GM² 2259, XIAO LI, YU ZHENG, LI YUAN¤ 1854 WEI BAO-HE¤ 1586, XIAO YANG, LI SONGWEN, REN WEIWEI, ET AL 1843, WEI HUA ET AL¤ 1436 XIAO ZIRONG ET AL¤ 74 WEI JA, ZENG X, HAN L, HUANG Yº 2229, 2251 XIAOGUANG C ET AL¤ 1181 WEI LIU, YING-LI PAN, CAI-XIANG GAO, ZUO SHANG, XIA-PING SHAO 邵霞萍¤ 2323, LI-JUAN NING, XING LIU¤ 2330, XIE FU-TI ET AL¤ 491 WEI YULIN ET AL¤ 563 XIE HAI ZHOU ET AL¤ 502 WEIDONG LU, POSNER MR, WAYNE P, ROSENTHAL DS, XIE JIN-YU ET AL¤ 789, 1067, HADDAD RI¤ 2136, XIE MINGYING ET AL¤ 98, WELLMANN KF ET AL¤ 41, XIE TONG ET AL¤ 63, WELLS M, SARNA L, COOLEY ME, BROWN JK, CHERNECKY C, WILLIAMS RD, 2007, XIE YING ¤ 1647 XIE YUANMING¤ 575 WEN BIN, HE SONG-QI, LIAO RONG-XIN, ET AL¤ 1875, XIMEI H ET AL¤ 971, 972, 1030, WEN D¤ 1049, XIMING W¤ 1027 WEN HL¤ 16 XIN HAI, LUO HE-CHUN ¤ 1794, WEN Y LI ET AL¤ 178, XIN YULING¤ 1162, WENJUN X ET AL¤ 973 XIN YU-LING ET AL¤ 1561 WEN-YEN LI ET AL¤ 224, XING JIAN-HUA ET AL¤ 1547, WHITE P¤ 1188 XING XUEMEI ET AL¤ 994, WONG BY ET AL¤ 771,870 XINGREN N¤ 1052 WONG CK ET AL 775, 1011, XIONG JIAMING¤ 712 WONG KIEW KIT¤ 1214 XIONG NANG HUA ET AL¤ 296, WONG LC, CHAN E, TAY S, LEE KM, BACK Mx 2148, XIONG NANHUA ET AL¤ 194 WONG RK, SAGAR SM¤ 2304, XIONG SHAOQUAN, JU GUOSHENG, WANG BODING, ET WONG RK, JAMES JL, SAGAR S, WYATT G, NGUYEN-TÂN AL¤ 1940, PF, SINGH AK, 2297, 2314,

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*¤ 906, 1691, 1846, 1891, 1988, 2005, 2091, 2134, 2136, 2138, 2166, 2290, 2294, 2296, 2329,

19,07 -¤ toothache. acupuncture anesthesia in oral surger/ douleur dentaire. analgésie par acupuncture en chirurugie stomatologique

*¤ 1060,

20,01 -¤ poisoning/ intoxications

arsenic¤ 1133,

benzène¤ 974, 983, 1005,

mercure¤ 1071,

21,04 -¤ postoperative care/ réanimation post-opératoire

*x 530, 581, 942, 1007, 1178, 1232, 1426, 2290

22,01 -¤ UROLOGY- NEPHROLOGY/ URO-NEPHROLOGIE *¤ 129 .

22,02 -¤ kidney diseases. kidney failure/ néphropathies. insuffisance rénale

*¤ 737, 1241,

22,04 -¤ enuresis. urinary incontinence. urinary retention/énuresie. incontinence et rétention d'urine

*¤ 751, 1250,

22,05 - α urinary tracts infections/ infections urinaires α 998 .

22,06 -¤ bladder/ vessie

*¤ 899 .

22,07 - \mathbf{z} urologic and male genital diseases/ appareil génital masculin

*¤ 1,350,531,

prostate¤ 197, 531, 1231, 1234, 1235, 1549, 2087, 2118, prostate¤ 2130, testicule¤ 1,

23,01 -¤ INTERNAL MEDICINE. MISCELLANEOUS/ MEDECINE INTERNE. DIVERS

*¤ 681,

23,02 -¤ allergology. immunology/ allergologie. immunologie.

*¤ 63 , 87 , 98 , 101 , 195 , 221 , 234 , 253 , 269 , 297 , 311 , 370 , 443 , 457 , 523 , 558 , 596 , 647 , 689 , 696 , 733 , 755 , 804 , 847 , 879 , 966 , 968 , 999 , 1000 , 1003 , 1009 , 1011 , 1053 , *¤ 1075 , 1124 , 1135 , 1159 , 1181 , 1203 , 1205 , 1251 , 1274 , 1279 , 1382 , 1383 , 1385 , 1408 , 1480 , 1505 , 1521 , 1574 , 1580 , 1598 , 1602 , 1628 , 1639 , 1842 , 2331 , anticorps¤ 121 , greffe¤ 392 , leucocyte¤ 121 , 320 , 368 , lymphocyte¤ 234 , 680 , 1127 , 1205 , 1251 , 1297 , 1407 ,

lymphocytex 1408, 1441, 1501, 1528, 1562, 1572, 1592, 1628, 1663,

natural killer¤ 1113 , 1180 , 1182 , 1203 , 1251 ,

23,03 - asthenia/ asthénies

*m 386, 2093, 2179, 2267, 2316, 2328, 2335, 2336, 2343, 2344, 2352,

23,04 -¤ oncology/ cancérologie

* 1, 4, 7, 9, 10, 11, 12, 13, 14, 16, 17, * 20, 22, 24, 25, 26, 27, 28, 31, 33, 34, 39, 41, 42, 43, 44, 45, 51, 52,53,55,57,58,59,60,61,62,63,65,66,67,68, 69,70,71,72,73,74,75,79,81,*x 82,83,87,88,89 ,90,91,92,93,94,95,96,97,98,102,103,104,105, 106,107,108,109,110,111,112,113,116,119,120, 121, 122, 123, 124, 125, 126, 128, 129, 130, 131, 132, *¤ 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 148, 149, 150, 151, 152, 154, 155 161, 171, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, *x 196, 197, 209, 210, 211, 212, 213, 214, 215, 217, 218, 219, 222 227, 228, 229, 229, 231, 234, 235, 236, 237, 241, 243, 244, 245, 246, 247, 248, 250, 251, 252, 254, 258, 260, 261, 263, 264, 271, 272, *x 273, 274, 276, 277, 278, 281, 283, 284, 287, 288, 293, 296, 297, 299, 300, 303, 304, 305, 306, 307, 308, 309, 310, 312, 313, 314, 315, 319, 320, 323, 326, 327, 328, 329, 330, 332, 333, 334, 335, 336, *x 337, 339, 347, 349, 350, 353, 354, 358, 359, 364, 366, 367, 368, 371, 372, 373, 374, 376, 379 382, 383, 384, 385, 388, 389, 391, 393, 395, 397, 399, 400, 401, 403, 404, 405, 407, 408, 411, 413, 414, 418, 419, 433, 441, 442, 445, 446, 447, 448, 449, 450, 451, 452, 453, 456, 457, 458, 459, 460, 463, 466, 467, 469, 470, 471, 472, 475, 476, 477, 479, 480, 481, 482, 484, 485, 487, 488, 490, 494, 495, *¤ 497, 504, 513, 515, 516, 518, 521, 522, 523, 524, 525, 529, 532, 533, 535, 536, 537, 538, 539, 542, 544, 545, 548, 550, 555,

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23,08 -¤ inflammation/ inflammation
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                                                                           oldenlandia diffusa (willd.) roxb.¤ 870,
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                                                                            schisandra¤ 974.
                                                                            schisandra chinensis (turcz.) baill. x 869,
noyan caudé¤ 17,
                                                                            scutellaria 771,870,
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25,10 -¤ central neurotransmitters/ neuromédiateurs
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