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辛伐他汀对冠心病患者hs-CRP、MMP-9和TGF-β1的作用

Effect of Simvastatin on Hs-CRP, MMP-9 and TGF-β1 in Patients with Coronary Heart Disease

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中文关键词： 辛伐他汀 冠心病 超敏C反应蛋白 人基质金属蛋白酶-9 转化生长因子-β1

英文关键词：simvastatin coronary heart disease hs-CRP MMP-9 TGF-β1

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中文摘要：

目的 探讨辛伐他汀对冠心病患者超敏C反应蛋白(hs-CRP)、人基质金属蛋白酶-9(MMP-9)以及转化生长因子-β1(TGF-β1)的影响。方法 选取60例冠状动脉粥样硬化性心脏病患者，随机分为观察组和对照组各30例。2组患者均给予常规二级预防药物治疗，观察组加用辛伐他汀40 mg·d^{-1}口服，对照组加用辛伐他汀20 mg·d^{-1}口服，治疗6个月后，对比2组患者hs-CRP、MMP-9、TGF-β1以及低密度脂蛋白胆固醇(LDL-C)水平。结果 经过治疗后，2组患者LDL-C、MMP-9以及hs-CRP浓度均显著下降(P<0.05)，而治疗前后TGF-β1水平比较，差异没有统计学意义(P>0.05)；观察组治疗后，LDL-C、MMP-9以及hs-CRP浓度显著低于对照组(P<0.05)，2组患者治疗后的TGF-β1水平比较，差异没有统计学意义(P>0.05)。观察组LDL-C的达标率及强化达标率为93.33%，66.67%，均显著高于对照组(73.33%，33.33%，P<0.05)。结论 服用辛伐他汀6个月能够降低血脂和炎症因子水平，且强化降脂治疗方案的疗效更佳。

英文摘要：

OBJECTIVE To investigate the effect of simvastatin on high sensitivity C reactive protein(hs-CRP), human matrix metalloproteinase-9(MMP-9) and transforming growth factor-β1 (TGF-β1) in patients with coronary heart disease. METHODS The 60 patients with coronary heart disease were selected and randomly divided into observation group and control group with 30 cases in each. The two groups of patients were given conventional two grade prevention drug treatment. The patients of observation group were treated with simvastatin 40 mg·d^{-1} orally, while the control

group with simvastatin 20 mg·d^{-1}. After 6 months' treatment, hs-CRP, MMP-9, TGF-β1 and low density lipoprotein cholesterol (LDL-C) levels of the two groups were compared. RESULTS After the treatment, LDL-C, MMP-9 and hs-CRP concentrations of the two groups were decreased significantly (P<0.05). The difference of TGF-β1 levels before and after the treatment was not statistically significant (P>0.05). The LDL-C, MMP-9 and hs-CRP levels of the observation group were significantly lower than the control group (P<0.05). The difference of TGF-β1 levels between the two groups was not statistically significant (P>0.05). The LDL-C compliance rate and strengthening compliance rate of the observation group was 93.33% and 73.33%, which were significantly higher than the control group(66.67%, 33.33%, P<0.05). CONCLUSION Long-term administration of simvastatin can reduce blood lipid and inflammatory factors level. The effect of intensive lipid-lowering therapy is better.

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