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三七总皂苷多成分经鼓室给药的体内分布及药代动力学研究

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中文摘要:目的: 考察三七总皂苷(PNS)经鼓室给药后人参皂苷 $Rb_1(Rb_1)$ 、人参皂苷 $Rg_1(Rg_1)$ 和三七皂苷 $R_1(R_1)$ 在豚鼠的体内行为, 探索中药多种成分经内耳途径转运至脑的可行性。 方法 :PNS 分别经鼓室和静脉治药-于不同时间点采集内耳外淋巴液、脑脊液 (CSF)、脑组织和血浆、采用 HPLC 测定各组织中Rb₁,Rg₁和R₁的浓度;计算上述成分在各组织的药代动力学参数:根据各成分的药时 曲线下面积(AUC)所占比值自定义为权重系数,并进一步估算 PNS 整合后的药代动力学参数。 结果:PNS 经鼓室给药,其 Rb₁,Rg₁ 和R₁均能穿过圆窗膜进入内耳外淋巴并转运进入脑部,但3种成分在体内各组织的药代动力学参数差异较大。PNS 整合药代动力学 參數显示.PNS 采用放室鉛套能增加进入脑部的套置提高局部生物利用度.在CSF 和腕组织的 C_{\max} 分别比静脉给药高1.1.0.4 倍.AU C 分别增加0.4.0.2 倍.并且.PNS 在血浆的分布减少. C_{\max} 和AUC 分别比静脉给药降低 45.9%。33.1%。 结论:经耳入脑有望成为中 药脑内输送的一种新方法。

In vivo distribution and pharmacokinetics of multiple effective components contained in Panax notoginseng saponins after intratympanic administration

Abstract: Objective: To investigate in vivo distribution and pharmacokinetics of ginsenoside Rb, (Rb,), ginsenoside Rg, (Rg,) and sanchinoside R₁ (R₁) after intratympanic administration (IT) or intravenous administration (IV) of Panax notoginseng saponions (PNS) solution, and provide a novel route for delivering traditional Chinese medicine (TCM) to the brain. Method: The guine grays were employed as experimental animal. Perilymph (PL), cerebrospinal fluid (CSF), brain tissue and plasma were collected periodically after IT and IV OPNS solution. The concentrations of Rp, Rg, and Rq were measured by high performance liquid chromatography (HPLC), and statistic program DAS was applied to the calculation of pharmacokinetic parameters. The self-defined weighting coefficients based on area under curve (AUC) of each component were created to obtain the holistic pharmacokinetic profiles of PRs. The integrated pharmacokinetic parameters were then calculated from non-compartmental model analysis. Result: Rb₁, Rg₁ and R₁ diffused through the round window membrane into PL of the inner car, and then transported to the brain after IT of PMS solution. However, the pharmacokinetic practices showed significant differences between the three components. Based on the self-defined AUC weighting coefficients integration approach the holistic pharmacokinetic profiles of PMS were obtained, from which the integrated pharmacokinetic profiles of PMS were obtained, from which the integrated pharmacokinetic profiles of PMS were obtained, from which the integrated pharmacokinetic profiles of PMS were obtained, from which the integrated pharmacokinetic profiles of PMS were obtained, from which the integrated pharmacokinetic profiles of PMS were obtained, from which the integrated pharmacokinetic profiles of PMS were obtained, from which the integrated pharmacokinetic profiles of PMS were obtained, from which the integrated pharmacokinetic profiles of PMS were obtained, from which the integrated pharmacokinetic profiles of PMS were obtained from the pharmacokinetic profiles. and brain tissues increased by 0. 5 and 1. 2 times compared with IV. Furthermore, the C_{\max} and AUC in plasma following IT were respectively 45.9% and 33.1% lower than those following IV. Conclusion: This novel intra-cochlear administration might serve as a potential and promising alternative to TCM delivery with enhanced brain-targeted efficiency.

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