Experiment study on treating ulcerative colitis by panax notoginseng, baphicacanthus cusia or portulaca oleracea from TCM formula of qingchang suppository

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To examine the mechanism by which the Chinese herbs, such as, Sanqi (Panax notoginseng), Qingdai (Baphicacanthus cusia(Nees)Bremek) or Machixian (Portulaca oleracea L.) from formula of Qingchang Suppository, prevent neither development of pathogenesis or activity of immunocyte in ulcerative colitis (UC). Rats were randomly divided into 8 groups, and received TNBS/Ethanol by clysterizing to establish T cell mediated UC model at first 24h except normal group. Beginning day 3, they were respectively treated with solution by enema as follows: Sanqi, Qingdai, Machixian, three-herb compound (Sanqi, Qingdai and Machixian), Qingchang Suppository, SASP or placebo (NS) for 5 days. After then they were killed at day 7. Sections of colonic tissue were stained with H.E. for histopathologic evaluation, and the activity index of colonic ulcer was graded by naked eye. ABC-Ellisa assay was used to measured content of TNF-α and MCP-1 in colon. Expressions of Fas/FasL and NF-κB P50 antigen on colonic mucosa was detected by immunohistochemistry, and Western Blot was used to measure the expression of NF-κB P65. In addition, MDA and SOD in colon was tested.

The results showed that the Sanqi group is one of the two best groups in morphologic evaluation also as the Qingdai group and the lever of MCP-1 in lesions of colonic mucosa in those two groups, as well as three herb (Sanqi, Qingdai and Machixian) compound group and Qingchang Suppository Group was lower than others significantly (P<0.05). The expressions of Fas/FasL in Sanqi group and Qingdai group were lower than others, which correlated with pathologic grade and content of MCP-1 significantly (P<0.05). Integrations and expressions of NF-κB in groups of Chinese herb were more suppressed than SASP group, and Sanqi revealed the marked better effect in it. Compared with placebo group, content of MDA in Machixian group was more decreased as well as in Sanqi or Qingdai group, but there was no significant difference among the three. Consequently, Sanqi, Qingdai and Machixian in formula of Qingchang Suppository played important roles in different respects on treating UC. It was found that Sanqi could influence the activation of NF-κB in local lesion satisfyingly. As nearly equal to Qingdai, Sanqi also could effectively inhibit the Fas/FasL-mediated colonic epithelial apoptosis by reducing activity of immunocyte. These data showed that blood stasis and heart-toxicity in large intestine had close relationship with immunocyte respondence.

Biography
Dr. Hong-yi HU received his Bachelor degree of Medicine (1992), Master degree of Medicine (2000) and Doctor degree of Medicine (2004) from Shanghai University of Traditional Chinese Medicine, China. He works as a Dean of academy affairs in Shanghai University of Traditional Chinese Medicine and as a Professor of Gastroenterology Department in Longhua Hospital, attached by SHUTCM. He is an Executive Member of The professional committee of Gastroenterology, SHITCM, Director of The Research committee of Educational Management, China Institute of Higher Education in Traditional Chinese Medicine, Editorial Board Member of Chinese Journal of Medical Education and External examiner for Full-time Bachelor of Chinese Medicine programer, the School of Chinese Medicine, The University of Hong Kong.