

Recommended patients at home for about three weeks to rest, continue to strengthen the efficacy of fire needle.

Discussion: The theory that fire needle has been able to treat the body superficial tumor, comes from the Chinese medicine to Yanghua Yin reason. Fire needle in the alcohol lamp to the white when the temperature is as high as 600-800 degrees, piercing the skin when the temperature is also about 100 degrees, quickly stabbed the tumor tissue, the needle around the organization of cancer cells. not able to recover. Traditional view is when the temperature reaches 43 °C cancer cells can not be heated to death, and normal human cell heat resistance above this threshold, and can still recover. From the perspective of modern cytology to understand: the needle body heat to the cells of the protein has changed to promote cancer cell death. Heat to stimulate the body's yang, improve the body's immune cell function, to achieve the purpose of treatment of the tumor. Chinese medicine is warm is the pass, Wen is the bulk of that. So the fire needle Acupuncture can treat the superficial part of the human body malignancy, so that some tumors shrink or even disappear, replace the surgical treatment, both to reduce the huge economic burden of surgery, but also eliminate the pain of patients with incomplete organs. The method is simple, safe, reliable, no side effects, great significance to explore the promotion.

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EFFICACY OF ACUPUNCTURE-REHABILITATION THERAPY IN REDUCING APOPTOSIS AND PROMOTING NEUROLOGICAL RECOVERY AFTER FOCAL CEREBRAL ISCHEMIA IN RAT BY A MECHANISM OF UP-REGULATING cIAP1 IN NEURONS

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Objective: In China, acupuncture-rehabilitation therapy has been widely used in stroke patients with various types of dysfunction treatment, clinical efficacy is significant, its safety and efficacy are confirmed by a large number of clinical and animal studies. In this study, we will observe the effect of acupuncture-rehabilitation therapy on neurological function and ischemic penumbra cell apoptosis after cerebral ischemic injury in rats, and to explore whether the neuroprotective effect of acupuncture-rehabilitation therapy is related to the up-regulation of cellular inhibitor of apoptosis protein 1 (cIAP1) expression in neurons.

Methods: 60 male SPF-level Sprague-Dawley rats were divided into five groups, namely sham group, model group, acupuncture group, rehabilitation group and acupuncture-rehabilitation group, and 12 in each group. Their middle cerebral arteries were occluded except those of sham group. The sham and model groups accepted no treatment, while the acupuncture group accepted cluster needling of scalp acupuncture, rehabilitation group accepted treadmill training, and the acupuncture-rehabilitation group accepted combined cluster needling of scalp acupuncture and treadmill training. They were assessed with modified Neurologic Severity Score (mNSS) 1 day and 7 days after operation; TUNEL staining was used to measure the apoptotic rate of cortical cells in peripheral cortex of cerebral infarction; Immunofluorescence double labeling method was used to observe the expression of cIAP1 and NeuN and co-localization of cIAP1 in neurons (labeled with NeuN, which is a neuron marker); Western blotting was used to detect the expression of cIAP1, cleaved-caspase-3 and cleaved-caspase-8 in peripheral cortex of cerebral infarction at 7 days after operation, respectively.

Results: At 1 day after operation, compared with the sham operation group, the mNSS was significantly increased ($P < 0.05$) in the model group and each treatment group, while the difference between the groups was not significant ($P > 0.05$). At 7 days after operation, compared with the sham group, the mNSS was significantly increased ($P < 0.05$) in the model group, the apoptotic rate in peripheral cortex of cerebral infarction was significantly increased ($P < 0.05$), the mean optical intensity (MOI) of fluorescence expression of cIAP1 and NeuN decreased ($P < 0.05$), and the expression of cIAP1 protein down-regulated ($P < 0.05$), cleaved-caspase-3 and cleaved-caspase-8 protein up-regulated ($P < 0.05$); Compared with the model group, the mNSS was reduced ($P < 0.05$), the apoptotic rate in peripheral cortex of cerebral infarction was significantly decreased ($P < 0.05$), the MOI of fluorescence expression of cIAP1 and NeuN increased ($P < 0.05$), and the expression of cIAP1 protein up-regulated ($P < 0.05$), cleaved-caspase-3 and cleaved-caspase-8 protein down-regulated ($P < 0.05$) in each treatment group, and the acupuncture-rehabilitation group is most obvious ($P < 0.05$) compared to the acupuncture group and rehabilitation group.

Conclusion: acupuncture-rehabilitation therapy can reduce the neurological deficit, play a neuroprotective effect after cerebral ischemia in rats, which is superior to simple acupuncture or rehabilitation therapy. The potential mechanism of action is related to the up-regulation of cIAP1 expression in neurons, inhibition of caspase-3, caspase-8 activation-mediated apoptosis, thereby reducing neuronal apoptosis.

Key words: cerebral ischemia; acupuncture-rehabilitation therapy; neurological function; apoptosis; cIAP1; NeuN; rats

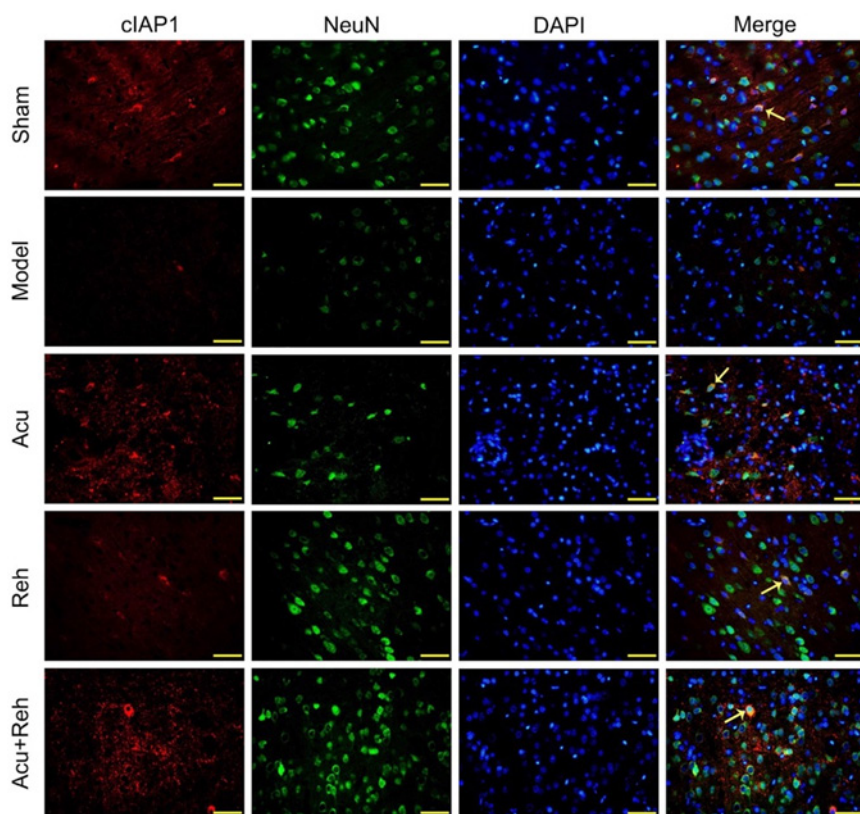


Fig 1 Immunofluorescence double labeling of cIAP1 and NeuN

Note: cIAP1(Red), NeuN(Green), DAPI(blue). The yellow arrows refer to co-localization cells of cIAP1 and NeuN.

EFFECT OF QIANGXIN CAPSULE ON ENDOPLASMIC RETICULUM STRESS RELATED PERK-EIF2A PATHWAY IN RATS WITH ADRIAMYCIN-INDUCED CHRONIC HEART FAILURE

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The present study was supported by the National Natural Science Foundation of Heilongjiang Province (grant No. H201485), .

OBJECTIVE: To investigate the effect of Qiangxin capsule(QXC) on changes of cardiac structure and function and its putative mechanism by investigating myocardial pathological and apoptosis station, and PERK-eIF2 α protein expression in rats with chronic heart failure.

METHOD: The chronic heart failure(CHF) model in rats was administrated by intravenous injected adriamycin hydrochloride 3mg/kg in 1,3,5week and 1mg/kg in 2,4,6 week, once a week, for 6 times. The control group was intravenous injected by 0.9% Nacl, once a week, for 6 times. Six weeks after the procedure, rats were randomly classified into 5 groups: model group, Enalapril(1.8mg/kg),low QXC dose(0.66g/kg),medium QXC dose(1.32g/kg), and high QXC dose(2.64g/kg).The administration of drugs was given from the 7th week after modeling, and the treatments continued for 4 consecutive weeks. After the treatment, we observed the general state included diet, stool, hair color, urine, respiration, et al. of each groups and measured the heart weight index. Changes of cardiac function were evaluated by echocardiography. Myocardial morphology were investigated by hematoxylin and eosin staining. The myocardial apoptosis was detected by TUNEL. The related protein expression of myocardial PERK-eIF2 α pathway were detected by western blotting.

RESULTS:

1.Qiangxin Capsule Attenuates Heart Function Injury in CHF rats:Compared with the control group, The LVEDD and LVESD of model group were significantly increased($P<0.01$),and the LVEF and LVFS were significantly decreased($P<0.01$).Compared with the model group, the LVEDD and LVESD in each treatment group was significantly decreased($P<0.01$), Meanwhile the LVEF and LVFS were significantly increased($P<0.01$).Com-