Chinese medicine is characteristic of Chinese medical science, is the treasure of the Chinese nation. With the coming of information society, people gradually realize that the development of traditional Chinese medicine (TCM) modernization without the guidance of the information.

1.Several problems of the traditional Chinese medicine information system in our country

1.1 Low level repeated construction is serious since the 1980s, our country has already done hundred types, size range of traditional Chinese medicine database construction, and put into use, but much of the contents of the database, the researchers to retrieve the information for more information on “secondary”, “information” is less, low level repeated construction phenomenon is relatively serious, caused the intangible resources waste, and database of sustainable construction condition is not good, content is not updated, the database information older [1].

1.2 database content is not rich enough

1.2.1 Modern literature, ancient literature in traditional Chinese medicine less in the existing literature database, modern literature database accounted for a large proportion, and a smaller proportion of ancient literature database.

1.2.2 Titles or abstracts database, full text database at least domestic only a few traditional Chinese medicine database can refer to the literature text, but the content is not very comprehensive, most database only provides bibliographic and abstract data[2], however, researchers information retrieval to want to obtain comprehensive and detailed content, and the establishment of full text database is an important way to meet the information needs of researchers, but also the effective method for traditional Chinese medicine data to preserve the integrity of, is to provide the necessary conditions for Chinese traditional medicine database knowledge discovery.

1.3 The application of multimedia technology in database, which is used in the study of Chinese medicine information, has a certain role in promoting the spread and application of the knowledge of Chinese medicine.

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STUDY ON THE EFFECT OF THE EFFECTIVE COMPONENTS OF LCSSY ON THE DIFFERENTIAL EXPRESSION OF LNCRNA IN OVARIAN CANCER

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Abstract The mortality rate of ovarian cancer ranks first in gynecological malignancies. Serious threat to women’s health. Its etiology is still in the exploration, the pathogenesis is not clear. At present, traditional Chinese medicine has become the main adjuvant therapy for ovarian cancer. The traditional Chinese medicine compound of lichong Shengsui Yin(LCSSY) has confirmed that could inhibit the proliferation of ovarian cancer and improve the quality of life by a large number of clinical and experimental studies[1-3].the LCSSY inhibit the angiogenesis of ovarian cancer by regulate the JAK2/STAT3 signaling pathway[4].Long non-coding RNA（lncRNA）was initially thought to have no biological function. In recent years, it has been found that lncRNA plays an important role in transcriptional activation and transcriptional interference, which is closely related to the occurrence,development and prevention of human diseases,The relationship between lncRNA and tumorigenesis and development has also attracted the attention of researchers. In this study, we investigated the effect of LCSSY on the expression of lncRNA in ovarian cancer tissue and the effect on JAK/STAT signaling pathway and transcription factors.

Objective To screen the differentiated lncRNAs in Balb/C nude mice subcutaneous transplantation ovarian tumor treated with lichong Shengsui Yin(LCSSY) effective component by gene chip,expore the mechanism of treating ovarian cancer.

Materials and methods To establish the model of ovarian cancer in Balb/C nude mice, and then randomly divided into model group, bevacizumab group, low-dose group of LCSSY, LCSSY dose group, high dose of LCSSY group.Every group was treated for 21 days.Measure the tumor volume weekly and weigh the tumor in the end of treatment. By gene chip technology screening the differentiated lncRNAs in dose group which is the best and model group, to explore the mechanism;For function prediction of lncRNAs, we adopted method originally demonstrated in paper[5].In briefly, we firstly calculated co-expressed mRNAs for each differentiated lncRNAs, and then we conduct a functional enrichment analysis of this set of co-expressed mRNAs.The enriched functional terms were used as the predicted functional term of given lncRNA. The co-expressed mRNAs of lncRNAs were identified by calculating Pearson Correlation with correlation P-value <0.05. We then use Hypergeometric cumulative distribution function to calculate the enrichment of functional terms of JAK/STAT Signaling pathway and STAT transcription factor in annotation of co-expressed mRNAs. And we also use Hypergeometric cumulative distribution function to calculate the intersection of aggregate between co-expressed mRNAs for each differentiated lncRNAs and transcription factors,then each lncRNA can get multiple lncRNA-TF relationships.

Results and discussion Lcssy effective component have significant effective in inhibit ovarian cancer tumor growth, the dose group is the best compared with the model group(P<0.01);The analysis of gene microarray show that there are four hundred differentiated lncRNAs.Co-expressed mRNAs for differentiated lncRNAs are enriched in the functional terms of JAK/STAT Signaling pathway and STAT3 transcription factor.Since STAT3 signaling pathway plays an important role in tumor angiogenesis,it is speculated that LCSSY may regulate the expression of STAT signaling pathway by regulating the expression of lncRNA in ovarian cancer.

Key words: LCSSY,effective component,ovarian cancer,LncRNA,gene chip

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A CLINICAL STUDY OF ACUPUNCTURE COMBINED WITH REHABILITATION TRAINING IN THE TREATEMT OF SHOULDER-HAND SYNDROME AFTER STROKE

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Abstract Objective To observe the effects of acupuncture combined with rehabilitation training on neurological function ,upper limb motor function,pain degree, comprehensive function in the patients with shoulder-hand syndrome(SHS) after stroke. To study the therapeutic effects of acupuncture combined with rehabilitation training on SHS after stroke and to supply the Evidence of its clinical application.

Methods All the cases were the inpatients of the second hospital affiliated heilongjiang university of chinese medicine. 90 cases of shoulder-had syndrome after stoke enrolled according to inclusion criteia were randomized into three groups : the acupuncture group(groupA),the rehabilitation training group (groupB) and the acupuncture combined with rehabilitation training group (groupC) ,30 cases in each group . Patients in the acupuncture group (groupA) were treadted only with acupuncture , patients in the rehabilitation training group (groupB) were treadted o nly with rehabilitation training, and the patients in acupuncture combined with rehabilitation training group (groupC) were treated with both acupuncture and rehabilitation training . The treatment course lasted for 28 days, acupuncture and rehabilitation training were given five days a week , and basic drug therapy was given throughout the whole course in all the three groups . The three group were evaluated before teratment , 14 days after the treatment and after the whole treatment course .Neurological function was evaluated by Neural Dysfunction Scale (NDS) , upper limb motor function was evaluated by Simplified Fugl-Meyer Assessment (FMA),pain degree was evaluated by Visual Anlogue Scale (VAS) , and comprehensive function was evaluated by Funtional Comprehensive Assessment (FCA) . The comprehensive effect was evaluated after the treatment cuurse.

Resulte Before the treatment , there was no significant difference of age ,sex , NDS score, Simpified FMA score , VAS score and FCA score between three groups(P＞0.05)

1. Results of NDS : Compared with before treatment, the NDS scores decreased significantly both after 14 days of treatment and after the whole treatment course in all the three groups (P＜0.01) . By the reduced scores of NDS afther 14 days of treatment and after the whole treatment course from higher to lower, three groups were sorted as : the acupuncture combined with rehabilitation training group (groupC) , the acupuncture group (groupA) and the rehabilitation training group (groupB) . There was no significant difference between group C and group A (P＞0.05) . The difference was significant between group C and group B , as well as between group A and group B (P＜0.01) .

2 . Results of Simplified FMA : Compared with before treatment , the Simplified FMA score incrsased significantly both after 14 days of treatment and after the whole treatment course in all three groups (P＜0.01) . By the incrsased score of Simplified FMA after 14 days of treatment and after the whole treatment course from higher to lower, three groups were sorted as :groupC,group A and group B.There was no significant difference between three :groups after 14 days of treatment (P＞0.05) . The incrsased score of group C was significantly higher than group B (P＜0.01) ,and the incrsased score of group A was also significantly higher than group B(P＞0.05). There was no significant Difference between group C and group A (P＞0.05).