RPMI medium was used to dilute the drug. According to thepreliminary test results,N-cinnamoylpitrescine was divided into five concentrations: 0.8mg/ml, 0.4mg/ml, 0.2mg/ml, 0.1mg/ml and 0.05mg/ml.And set a control group of 0mg/m.

MTT assay

100 μl of cell suspension of density 1 × 105 cells/wellwas placed

into each well of 96−well plates and incubated for 24 h. Then, the medium was removed and added the N-cinnamoylpitrescine to cultured cells in 96 well plates and incubated for 48 h. Added 100 μL of the tetrazoliumdye (MTT) solution to each well of 96 well platesand incubated for 4 h at 37◦C.MTT reagent was discarded and added150 μL of DMSO. The plate was placed in a plate shaker for 10 min. Then absorbance value (A) was read on anautomatic enzyme-linked at 490 nm. Inhibition rate (%)= (The average absorbance value of the control group — The average absorbance value of the experimental group) / The average absorbance value of the control group×100%.

Statistical analysis Spss22.0 statistical analysis software is used to process data, the

T test was used in the comparison between the experimental group and the control group, P<0.05 was the significant difference, The IC50 value was calculated according to regression equation.

Results The absorbance ofeach experimental group with the increase of concentration decreased,tumor inhibition rate increased gradually. The inhibitory rates of N-cinnamoylpitrescine on colon cancer HT-29 cells were 10.71%、13.25%、18.36%、38.16%、71.06%, IC50 value was 0.499mg/ml.

Conclusion The anticancer activity was measured by the MTTmethods. The results showed that N-cinnamoylpitrescine had anticancer activity. But the mechanism of N-cinnamoylpitrescine treatment is not clear, which will affect the large-scale use and development of the drug. Therefore, the mechanism of N-cinnamoylpitrescine on colon cancer needs to be studied.

FIRE NEEDLE THORN AROUND THE SUPERFICIAL PARTS OF THE BODY IN THE CLINICAL APPLICATION OF THE TREATMENT OF MALIGNANT TUMORS

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[Abstract]:This paper introduces our experiencewith fire needle acupuncture in the treatment ofperi human malignant tumor, this method can make the part of the massdisappear, replacing the surgical treatment, and reducing the patient's financial and spiritual burden.

[Keywords]:Fire needle; Fire needlethorn around; malignant tumor; Superficial malignant tumor of the body

Cancer is one of the major diseases that are serious threats to human survival and social development ofand Cancer control has become a health priority for governments around the world.From the national cancer registry of the "2012 China tumor registration report" issued, according to six people are diagnosed with cancer every minute.Located in a shallow body tumors, such as breast cancer, soft tissue tumor, thyroid cancer,theseare the superficial parts malignant tumor.Such tumors, if no distant metastasis, the preferred surgical treatment. Surgical treatment not only to the patient to a heavy financial burden, but also to suffer organ damage.(Surgical treatment will not only be a heavy financial burden to the patient , but also bring damage to the organ.I Division in the treatment of such diseases, in addition to the use of traditional Chinese medicine dialysis medication, at the same time, the application of fire needle acupuncture treatment, can make some tumors shrink or even disappear, replace the surgical treatment, reliable, no side effects.

Method of operation: The patient to take the sitting position or lying position, first determine the tumor surface positioning, do a good job marking, conventional acupuncture parts of skin disinfection, followed by a hand holding alcohol lamp, one hand holding the needle, the needle placed in the fire outside the flame, When quickly penetrate around the lesion, the lesion and normal tissue at the junction of the need for needle. Perimeter method used for the needle with a special fire needle, each needle is about 1cm interval is appropriate, acupuncture depth of the depth of the lesion depending on the depth of the deep needle acupuncture deep lesions shallow needle shallow. Daily or every other day or twice a week.

Example: Liu xx, male, 80 years old, married, December 27, 2016 due to the right lower limb thigh back mass, hard, treatment in Beijing Tongzhou District West Health Center,ultrasound show: Right thigh soft tissue occupancy, consider the possibility of malignant, the size of about 40 * 64 * 111mm, biopsy pathology: right thigh spindle cell tumor, morphological and immunological enzyme tend to malignant or low degree of malignant.Consider the patient frail, no surgery and radiotherapy and chemotherapy.On the 4th of February in our department of traditional Chinese medicine syndrome plus fire needle acupuncture treatment for 14 days, because patients live in the field, home rest to March 7 line of the second fire needle treatment, March 16 local mass disappeared, with Hand touch the lumps, check the color Doppler: right side of the dorsal medial sulcus see 85 * 28 * 70mm hypoechoic, the border is still clear, composition leaves, echo uneven, visible arterial blood flow signal, right thigh dorsal Muscle muscle solid place.

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 fromthe 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 iswhenthe temperaturereaches43 ℃ 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 THERAPYIN REDUCING APOPTOSIS AND PROMOTING NEUROLOGICAL RECOVERY AFTER FOCAL CEREBRAL ISCHEMIA IN RAT BY A MECHANISM OFUP-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 willobserve 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-Dawleyrats 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 infraction; 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 infraction 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 infraction 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