

# 中药有效成分减轻对乙酰氨基酚肝损伤研究进展

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**摘要:**对乙酰氨基酚(APAP)是普遍使用的镇痛解热消炎药物之一,其由于盲目大量用药、联合用药或长期用药会引起药物性肝损伤,甚至急性肝衰竭。APAP所诱导肝毒性的机制研究主要集中在其毒性代谢产物的生成、线粒体功能障碍、炎症反应、氧化应激、损伤相关的分子模式(damage associated molecular patterns, DAMPs)的释放、细胞自噬、内质网应激以及微循环功能障碍等方面。笔者归纳了APAP所致药物性肝损伤的毒性机制,并整理了中药有效成分对APAP致肝损伤保护作用的研究进展,其中包括多酚类、黄酮类、皂苷、有机酸、萜类化合物、苯丙素类化合物、糖类、生物碱以及其他化合物,旨在为开发防治APAP致肝损伤的药物提供参考。

**关键词:**中药;对乙酰氨基酚;肝损伤;保护作用;多酚类;黄酮类

doi:10.11669/cpj.2019.02.001 中图分类号:R965 文献标志码:A 文章编号:1001-2494(2019)02-0081-05

## Research Advance of Effective Components of Traditional Chinese Medicine on Alleviating Acetaminophen-Induced Liver Injury

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**ABSTRACT:** Acetaminophen (APAP) is one of the commonly used analgesic antipyretic anti-inflammatory drugs, which cause drug-induced liver damage and even acute liver failure due to take large amounts of drugs blindly, combination drugs-using or long-term medication. The mechanisms of APAP-induced hepatotoxicity mainly focus on the generation of toxic metabolites, mitochondrial dysfunction, inflammatory response, oxidative stress, the release of damage associated molecular patterns (DAMPs), autophagy, endoplasmic reticulum stress, and microcirculatory dysfunction. This article summarizes the toxic mechanism of drug-induced liver injury induced by APAP, and summarizes the research progress of active ingredients of traditional Chinese medicine on the protective effect of APAP-induced liver injury, including polyphenols, flavonoids, saponins, organic acids, terpenoids, phenylpropanoids compounds, sugars, alkaloids and other compounds, to provide a reference for the development of drugs to prevent and treat APAP-induced liver injury.

**KEY WORDS:** traditional Chinese medicine; acetaminophen; liver injury; protective effect; polyphenols; flavonoids

药物性肝损伤(DILI)是基于药物的药理学作用而产生的不良肝脏反应,在药物代谢过程中因药物和其代谢产物直接或间接造成对肝脏的毒性,或因机体个体差异导致对药物的敏感性增强或耐受性降低而引起的肝损伤<sup>[1]</sup>。DILI分为非典型(可预测的)和特异性(不可预测的)两大类。对乙酰氨基酚(APAP)是目前临床用于镇痛解热消炎的常用药物之一。虽然常规治疗剂量的APAP是安全有效的,但过量或长

期使用APAP则可能引起肝毒性和急性肝功能衰竭(ALF)<sup>[2]</sup>。美国每年有超过30万例APAP过量致肝损伤的住院治疗,其中ALF高达42%<sup>[3]</sup>。我国的APAP导致的ALF也比较常见。

目前,临床上治疗APAP引起的肝损伤的主要药物是N-乙酰半胱氨酸(N-acetylcysteine, NAC),但是NAC的治疗效果具局限性,只能在APAP口服后1h左右使用NAC才能

**基金项目:**吉林省科技发展计划项目资助(20160204004YY);长春市科技计划项目资助(18SS017)

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起到治疗效果,时间过长则失去治疗效果<sup>[4]</sup>。因此,在天然产物中寻找具有更好疗效、更安全的成分已成为 APAP 研究的一大热点。

## 1 APAP 致 DILI 的损伤机制

APAP 致 DILI 损伤机制十分复杂,主要包括:体内代谢有毒物质的生成、线粒体功能障碍、炎症反应、氧化应激、损伤相关的分子模式 (damage associated molecular patterns, DAMPs) 的释放、细胞自噬、内质网应激以及微循环功能障碍等。更深入的分子机制有待进一步研究。

### 1.1 经体内代谢生成有毒物质

APAP 无肝毒性,但其反应代谢物会造成肝损伤。按推荐剂量服用时,85%~90% 的 APAP 与葡萄糖醛酸或硫酸盐结合后通过尿液排泄出体外,10% 的 APAP 被细胞色素 P450 系统 (主要是 CYP2E1) 转化成有毒活性代谢产物 *N*-乙酰对苯醌亚胺 (NAPQI),NAPQI 再被谷胱甘肽 (GSH) 迅速转化为无毒代谢物。然而,当 APAP 过量时,会导致 GSH 耗竭 NAPQI 的持续生成造成肝损伤<sup>[5]</sup>。

### 1.2 诱发线粒体功能障碍

肝脏参与糖、脂类、激素和药物等代谢并合成多种蛋白质,所需要的能量主要来源于线粒体氧化磷酸化作用。APAP 可破坏线粒体膜并抑制 ATP 的生成。线粒体蛋白与 NAPQI 形成的加合物会引起线粒体 DNA 损伤,线粒体膜通透性转换 (MPT) 和 ATP 生成的抑制,进而导致细胞死亡<sup>[6-7]</sup>。Saito 等<sup>[8]</sup>研究表明,JNK 的释放导致线粒体 Bax 易位致 MPT 孔开放,从而引发更加严重的肝损伤。

### 1.3 诱发炎症反应

APAP 过量导致肝损伤的同时会伴有炎症的发生,炎症被认为是引起肝组织损伤的主要原因<sup>[9]</sup>。APAP 过量产生的有毒代谢加合物会导致肝细胞释放各种炎症因子,包括肿瘤坏死因子 (TNF)- $\alpha$ 、白细胞介素 (IL)-1、干扰素 (IFN)- $\gamma$ 、核因子 (NF)- $\kappa$ B、巨噬细胞游走抑制因子 (MIF) 和白三烯等促炎因子以及 IL-6、环氧合酶 (COX)-2 和 IL-10 等抑炎因子,炎症反应导致肝脏中性粒细胞浸润和显著的损伤<sup>[10]</sup>。TNF- $\alpha$  参与调控炎症反应激活基因及细胞凋亡;白三烯在 5-脂氧化酶 (5-lipoxygenase, 5-LOX) 的调控下,刺激肝细胞生成白三烯 B<sub>4</sub>,这是导致肝毒性的重要炎症因子<sup>[11]</sup>。

### 1.4 诱发氧化应激

氧化应激是 APAP 致肝毒性的重要原因之一。在 *N*-乙酰-对-苯醌亚胺 (NAPQI) 被解毒过程中,谷胱甘肽 (GSH) 耗尽造成肝细胞氧化还原失衡,肝细胞中氧化产物增多导致氧化应激,增加了超氧阴离子的产生,同时增加了组织中过氧亚硝酸盐的生成,导致肝细胞的坏死<sup>[12]</sup>。此外,APAP 被肝脏代谢后引起氧化应激产生大量自由基和亲电子基团,过量自由基引起生物膜上的不饱和脂肪酸过氧化,改变膜的流动性和通透性,破坏膜的完整性,亲电子基团与内质网膜上的巯基结合,导致细胞内钙失衡,引起细胞内钙超载,导致细胞死亡<sup>[13]</sup>。

## 1.5 诱发 DAMPs 的释放

DAMPs 指内源性危险信号,通过 Toll 样受体 (TLR) 从损伤或坏死的细胞中释放并活化先天免疫系统,其包括高迁移率族蛋白盒 (HMGB)-1, S100 蛋白、热休克蛋白 (HSP) 及 c-Jun 氨基末端激酶 (JNK) 等因子。DAMPs 在肝脏炎症反应、氧化应激及细胞凋亡中起作用并参与肝纤维化进程,但 APAP 可引起肝细胞损伤而导致 DAMPs 的胞外释放<sup>[14]</sup>。Kuramochi 等<sup>[15]</sup>研究表明, HMGB-1, HMGB-2 和 S100A4 与肝细胞坏死相关,并且 DAMPs 可以在 DILI 诱导期间激活 TLR-4 和 MHC II 类肝损伤。

## 1.6 诱发细胞自噬

细胞自噬是一种细胞自我严格调节的过程,通过去除不需要的细胞质内容来更新细胞<sup>[16]</sup>。APAP 通过增加线粒体 ROS 的产生和降低的细胞 ATP 水平来抑制 mTORC1 活性,从而导致 AMPK-ULK1 活化并诱导细胞自噬<sup>[17]</sup>。Ni 等<sup>[18]</sup>研究发现,自噬-溶酶体降解途径的激活可以帮助去除 APAP 蛋白质加合物及损伤的线粒体。

## 1.7 诱发内质网应激

在 APAP 肝损伤模型中可观察到内质网 (ER) 应激的发生<sup>[19]</sup>。GSH 耗竭导致细胞内的氧化还原失衡, NAPQI 与 ER 蛋白共价结合成 APAP 蛋白质加合物从而引发 ER 应激<sup>[20]</sup>。ER 应激导致 eIF2 $\alpha$  的磷酸化及 ATF6 和 CHOP 的激活,上调细胞凋亡因子及基因表达水平,导致肝细胞凋亡并造成严重肝损伤<sup>[21]</sup>。

## 1.8 诱发微循环功能障碍

除了由 APAP 引起的直接肝细胞损伤外,肝微循环功能障碍在 DILI 的发病机制中也起着至关重要的作用,在 APAP 过量后,肝窦内皮细胞 (LSEC) 和肝细胞损伤导致凝血级联和血小板减少症的激活,随后,止血系统的紊乱有助于 DILI,至少部分地通过下游蛋白酶激活受体-1 (PAR-1) 信号传导途径<sup>[22]</sup>。然而, PAR-1 介导凝血酶对小鼠和人的血小板活化;因此, Miyakawa 等<sup>[23]</sup>研究定义了血小板在促进 DILI 中的作用,发现 PAR-4 对 LSEC 具有调控作用。研究发现<sup>[24]</sup>,抗凝与凝血酶抑制剂达比加群酯 (DABI) 降低了 DILI 的早期肝毒性,说明促进微循环功能可减轻 DILI 的肝损伤。

## 2 中药对 APAP 致肝损伤的保护作用

许多中药有效成分都具有抑制肝毒性的作用,在 APAP 致肝损伤期间可通过药物性治疗缓解肝脏病变,减轻肝组织损伤,降低肝损伤程度,抑制或改善其副作用,主要包括:多酚类化合物、黄酮类化合物、皂苷类化合物、有机酸类化合物、萜类化合物、苯丙素类化合物、糖类、生物碱以及其他化合物。

### 2.1 多酚类化合物对 APAP 致肝损伤的保护作用

多酚类化合物广泛存在于各种中药中,其可对与氧化应激相关的生物标志物产生影响,而氧化应激是 APAP 过量致肝毒性的重要原因之一<sup>[25]</sup>。Hasanein 等<sup>[26]</sup>研究结果显示,迷迭香酸通过抑制肝 CYP2E1 活性和脂质过氧化作

用而产生显著的肝保护作用。Wu 等<sup>[27]</sup>通过体内外实验发现,红桑多酚具有抗炎作用,可通过参与 TLR/MAPK/NF- $\kappa$ L 信号通路的失活对 APAP 致肝损伤小鼠起到显著的保护作用。有研究表明<sup>[28]</sup>,山柰酚通过抗氧化,抗炎和抗细胞凋亡活性保护肝脏免受 APAP 诱导的损伤。多酚类化合物大多通过逆转 APAP 诱导的 MAPK 及 JUK 信号转导发挥作用<sup>[25]</sup>。

## 2.2 黄酮类化合物对 APAP 致肝损伤的保护作用

黄酮类化合物对 APAP 致肝毒性的保护作用研究也在逐渐深入<sup>[29]</sup>。有研究表明<sup>[30]</sup>,金丝桃苷能够抑制毒性中间体的形成而促进 APAP 肝脏解毒。Fu 等<sup>[31]</sup>研究发现, $\alpha$ -倒捻子素显著抑制 APAP 诱导的氧化应激, $\alpha$ -倒捻子素还可通过 NF- $\kappa$ B 和 MAPK 信号通路介导的抗炎机制减轻 APAP 诱导的炎症反应。有研究表明<sup>[32]</sup>,甘草查尔酮 A 可通过 Nrf2 介导的氧化应激防御机制对 APAP 诱导的肝损伤具保护作用。

## 2.3 皂苷对 APAP 致肝损伤的保护作用

有研究表明<sup>[33]</sup>,人参皂苷由于其抗氧化,抗凋亡和抗炎活性而发挥其对 APAP 致肝损伤的保护作用。Hu 等<sup>[34]</sup>发现,用人参皂苷 Rk1 对 APAP 致肝损伤小鼠进行预处理后,处理组中观察到的脂质过氧化产物 MDA 的水平显著降低。此外,人参皂苷 Rk1 通过增加 Bcl-2 和降低 Bax 蛋白表达水平来抑制凋亡途径的活化。有研究发现<sup>[35]</sup>,人参皂苷 Rg1 通过体内和体外激活 Nrf2 信号通路来预防 APAP 诱导的肝损伤。Leng 等<sup>[36]</sup>研究证明了证明桔梗皂苷通过 NF- $\kappa$ B 和 AMPK/PI3K/Akt 信号通路显示出对 APAP 诱导的肝损伤具显著保护作用。

## 2.4 有机酸对 APAP 致肝损伤的保护作用

有研究表明,牛磺酸可有效缓解 APAP 致小鼠肝损伤及其并发症<sup>[37]</sup>。Jiang 等<sup>[38]</sup>研究表明,委陵菜酸通过降低硫代巴比妥酸反应物(TBARS),iNOS,COX-2,TNF-2,IL-12 和 IL-6,抑制炎症和氧化应激来缓解 APAP 诱导的肝损伤。Cha 等<sup>[39]</sup>研究发现,香豆酸通过 ROS 依赖性方式调节丝裂原活化蛋白激酶(MAPK)信号轴,减轻 ROS 介导的 DNA 损伤反应和炎症抑制 APAP 诱导的肝细胞凋亡。

## 2.5 萜类化合物对 APAP 致肝损伤的保护作用

萜类化合物香茅精油能抑制 APAP 致肝损伤小鼠体内嗜中性粒细胞迁移并表现出其抗氧化活性,从而改善 APAP 诱导肝毒性<sup>[40]</sup>。Zhang 等<sup>[41]</sup>研究证明了虾青素通过抑制 TNF- $\alpha$  介导的 JNK 信号通路,磷酸化 ERK 和 P38 等途径,从而减轻肝细胞坏死,阻断 ROS 生成,抑制氧化应激及减少细胞凋亡,保护肝脏并缓解 APAP 诱导的肝损伤。Yoshioka 等<sup>[42]</sup>研究表明,尾叶香茶菜丙素通过抑制小鼠脂质过氧化和炎症反应改善 APAP 过量诱导的肝毒性。

## 2.6 苯丙素类化合物对 APAP 致肝损伤的保护作用

五味子是广泛应用于保肝的传统中药,Jiang 等<sup>[43]</sup>研究证实,五味子中的木脂素类成分通过抑制 CYP 介导的 APAP 生物代谢途径减轻 APAP 诱导的肝损伤。此外,五味子乙素

可通过激活 NRF2/ARE 通路和调节 NRF2 靶基因,增加肝脏解毒及抗氧化能力从而体现其对 APAP 诱导肝毒性的保护作用<sup>[44]</sup>。研究表明<sup>[45]</sup>,甘草香豆素通过激活自噬减轻 APAP 诱导的氧化应激,从而防止 DILI 的发生。

## 2.7 多糖对 APAP 致肝损伤的保护作用

Lin 等<sup>[46]</sup>研究表明,铁皮石斛多糖通过抑制氧化应激和激活 Nrf2-Keap1 信号通路发挥其保肝作用。研究发现,昆仑雪菊多糖通过其抗炎作用调控凋亡相关蛋白如 Bax 和 Bcl-2 表达来预防 APAP 致肝毒性<sup>[47]</sup>。Wu 等<sup>[48]</sup>研究证实,茯苓多糖对 APAP 诱导的小鼠肝损伤具保护作用,其分子机制与抑制肝细胞炎症反应和凋亡有关。

## 2.8 生物碱对 APAP 致肝损伤的保护作用

最近研究发现<sup>[49]</sup>,许多生物碱类化合物具有保护肝脏的作用。Zhao 等<sup>[50]</sup>研究表明,小檗碱通过抑制氧化应激,肝细胞坏死和炎症反应,对 APAP 诱导的肝毒性具有显著的预防作用。有研究发现<sup>[51]</sup>,乌头原碱通过抑制线粒体功能障碍保护肝细胞避免了 APAP 诱导的损伤。Bian 等<sup>[52]</sup>实验证明,川芎嗪通过调节 NF- $\kappa$ B 和 MAPKs 信号传导途径改善 APAP 诱导的小鼠肝损伤。

## 2.9 其他化合物对 APAP 致肝损伤的保护作用

有研究表明<sup>[53]</sup>,黑木耳提取物在 APAP 诱导的肝损伤中显示出抗微生物,抗氧化和保护作用;Guo 等<sup>[54]</sup>研究发现,半夏提取物对 APAP 诱导肝损伤小鼠的胆汁酸转运蛋白具有调节作用;藤黄果提取物可通过激活 Nrf2 和抑制 NF- $\kappa$ B 信号传导发挥对 APAP 诱导小鼠肝损伤的保护作用<sup>[55]</sup>。单宁酸具抗氧化,抗炎和抗凋亡作用,对 APAP 诱导的肝毒性具有显著的肝保护作用<sup>[56]</sup>。

## 3 结 语

APAP 是目前引起 DILI 最常见的药物之一,且临床上用于治疗 APAP 诱导肝损伤的药物具局限性,而利用中药成分可有效减轻 APAP 诱导的肝损伤,从抑制其肝损伤的途径与机制角度出发,改善或缓解肝脏损伤程度,且中药有效成分具有见效时间快、疗效显著及毒副作用小等优势。因此了解 APAP 致肝损伤的机制,寻求减轻 APAP 致肝损伤的途径及中药有效成分,将会对防治 APAP 致肝损伤提供新思路,为 APAP 致 DILI 的治疗提供依据。

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(收稿日期:2018-05-27)