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# 头颈部血管变异的 256 层螺旋 CT 诊断及临床探讨

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DOI:10.3760/ema.j.issn.1008-6706.2016.24.001

**【摘要】** 目的 研究 256 层螺旋 CT 血管成像(CTA)对头颈部各种血管变异的诊断价值,并探讨其临床意义。**方法** 回顾分析 140 例头颈部血管变异的 CTA 成像资料,通过多种重组方法对影像进行重建,并对变异血管进行分析。**结果** 140 例头颈部血管变异患者,其中椎动脉变异 39 例(27.86%);血管重复变异和缺失变异 27 例(19.29%);大脑后动脉变异 71 例(50.71%);其他血管变异 7 例(5.00%)。**结论** 256 层螺旋 CTA 可很好地显示头颈部血管的正常解剖结构和解剖变异,有助于指导临床医生选择合理的手术路径及治疗方案,提高手术治疗的安全性。

**【关键词】** 血管畸形; 头部; 颈; 体层摄影术,X 线计算机

**Diagnosis and clinical study of 256 – slice spiral CT in vascular variation of head and neck** Wang Jian, Du Xiaojing.

Department of Radiology, Shanxi Provincial People's Hospital, Taiyuan, Shanxi 030012, China

**【Abstract】 Objective** To investigate the diagnostic value of 256 – slice spiral CT angiography (CTA) in vascular variation of head and neck, and discuss its clinical significance. **Methods** Retrospectively analyzed 140 patients' CTA image with vascular variation of head and neck, which were analysed through a variety of reformation method. **Results** In 140 patients with vascular variation of head and neck, there were 39 patients with vertebral artery variation (27.86%); 27 patients with vascular duplication or absence (19.29%); 71 patients with posterior cerebral artery variation (50.71%); 7 patients with other kind of vascular variation (5.00%). **Conclusion** 256 – slice spiral CTA can clearly show normal anatomical structure and anatomical variation of head and neck arteries, which is helpful to guide the clinical doctor to make a reasonable surgical approach and treatment plan, improve the safety of surgical treatment.

**【Key words】** Vascular malformations; Head; Neck; Tomography, X – ray computed

# 高密度脂蛋白与脑动脉粥样硬化相关性研究

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DOI:10.3760/cma.j.issn.1008-6706.2016.24.002

**【摘要】** **目的** 探讨高密度脂蛋白(HDL)与脑动脉粥样硬化(AS)的相关性。**方法** 选择 200 例缺血性脑血管病患者,均于晨 8:00 空腹采集静脉血液检验血常规及生化指标,计算测量得到 HDL 占总胆固醇的比例,以 25% 为标准,≥25% 为高 HDL 组, <25% 为低 HDL 组。同时进行双侧颈动脉超声检查,测量双颈总动脉内-中膜厚度,≥0.9 mm 为 AS 组、<0.9 mm 为非 AS 组。**结果** 经生化分析,200 例患者中高 HDL 患者 47 例(高 HDL 组),低 HDL 患者 153 例(低 HDL 组);高 HDL 组患者中经颈动脉多普勒超声检查确诊 AS 12 例(25.53%)、非 AS 35 例(74.47%),低 HDL 组患者中经颈动脉多普勒超声检查确诊 AS 139 例(94.56%)、非 AS 14 例(9.52%),低 HDL 组确诊 AS 患者显著高于高 HDL 组,HDL 占总胆固醇的比例与脑动脉粥样硬化呈负相关关系( $r = -0.644, P < 0.05$ )。**结论** HDL 的检测对于脑动脉粥样硬化的诊断具有重要意义,可通过 HDL 含量评估缺血性脑血管病病情,为下一步治疗提供参考。

**【关键词】** 动脉粥样硬化; 脑动脉; 脂蛋白类,HDL

**Correlation study between high density lipoprotein – cholesterol with cerebral atherosclerosis** Liu Yong, Chen Shengli, You Xi, Xiong Jian.

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**【Abstract】** **Objective** To explore the correlation between high density lipoprotein – cholesterol(HDL) with cerebral atherosclerosis(AS). **Methods** 200 patients with potential cerebral AS were chosen. Blood routine and biochemical indices of venous blood of all patients were analyzed. According to the results of biochemical indices (25%), all the patients were classified as high HDL group(≥25%) or low HDL group(<25%). According to the results of carotid artery ultrasonography by color Doppler flow imaging, all the patients were classified as AS group or non – AS group. **Results** According to the biochemical examination, there were 47 patients with high HDL(high HDL group) and 153 patients with low HDL(low HDL group) in all 200 cases with potential cerebral AS. There were 12 cases of AS(25.53%) and 35 cases of non – AS(74.47%) in the high HDL group, and there were 139 cases of AS(94.56%) and 14 cases of non – AS(9.52%) in the low HDL group, the final diagnosis rate of AS in the high HDL group was higher than that in the low HDL group, there was statistically negative correlation with AS( $r = -0.644, P < 0.05$ ). **Conclusion** Serum HDL levels bear a particular significance to the diagnosis of cerebral AS.

**【Key words】** Atherosclerosis; Cerebral arteries; Lipoproteins, HDL

# 瑞舒伐他汀对冠心病患者经皮冠状动脉介入治疗术后血管内皮功能及预后的影响

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**【摘要】** 目的 观察瑞舒伐他汀对冠心病患者经皮冠状动脉介入治疗(PCI)术后血管内皮功能及预后的影响。**方法** 选取2013年1月至2015年1月行PCI术治疗的冠心病患者92例,通过随机数字表法将患者分为对照组( $n=46$ )和观察组( $n=46$ )。对照组给予口服辛伐他汀,观察组给予口服瑞舒伐他汀。测定全部患者术前、术后1d及术后30d的内皮素(ET-1)、血管性假血友病因子(VWF)、一氧化氮(NO)和C-反应蛋白(CRP)水平,随访时间1年以上,记录PCI术后患者心血管事件和冠脉再狭窄发生率。**结果** 观察组、对照组术前和术后30d的VWF、ET-1水平低于术后1d( $t=57.797, 53.747$ , 均 $P < 0.001$ ; $t=4.248, 24.541$ , 均 $P < 0.001$ );观察组、对照组术后30d的NO水平高于术后1d( $t=15.407, 2.333$ , 均 $P < 0.05$ );观察组术后30d的VWF、ET-1水平低于对照组,NO水平高于对照组( $t=4.884, 8.568, 6.076$ , 均 $P < 0.001$ );观察组术前、术后1d的CRP水平与对照组相近( $t=0.226, P=0.821$ );观察组术后30d的CRP水平为( $5.4 \pm 2.3$ )mg/L,显著低于对照组的( $10.6 \pm 4.2$ )mg/L( $t=7.365, P < 0.001$ )。观察组的心血管事件总发生率为4.35%,显著低于对照组的32.61%( $\chi^2 = 26.558, P < 0.001$ );观察组的冠脉再狭窄率为2.17%,低于对照组的10.87%( $\chi^2 = 6.663, P = 0.010$ )。**结论** 瑞舒伐他汀能有效改善冠心病患者PCI术后血管内皮功能,降低心血管事件和冠脉再狭窄发生率,值得在临床中推广。

**【关键词】** 瑞舒伐他汀; 冠心病; 血管成形术,气囊,冠状动脉; 内皮; 预后

## Effect of atorvastatin on vascular endothelial function and prognosis of patients with coronary heart disease after percutaneous coronary intervention Ning Xiaofang, Ji Fucui.

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**【Abstract】 Objective** To study the effect of atorvastatin on vascular endothelial function and prognosis in patients with coronary heart disease after percutaneous coronary intervention (PCI). **Methods** 92 cases with coronary heart disease treated by PCI in our hospital from January 2013 to January 2015 were selected. They were divided into the control group ( $n=46$ ) and the observation group ( $n=46$ ) by random number table method. The control group was orally given simvastatin, and the observation group was orally given atorvastatin. The levels of ET-1, VWF, NO and CRP were measured in preoperation, postoperative 1 day and postoperative 30 days. Over 1 year follow-up and the incidence of cardiovascular events and restenosis after PCI were recorded. **Results** In the experimental group and the control group, the VWF, ET-1 levels before operation and 30 days after operation were lower than postoperative 1 day ( $t=57.797, 53.747$ , all  $P < 0.001$ ;  $t=4.248, 24.541$ , all  $P < 0.001$ ). 30 days after the operation, the levels of NO in the observation group and the control group were higher than 1 day after the operation ( $t=15.407, 2.333$ , all  $P < 0.05$ ). The VWF, ET-1 levels of the observation group 30 days after the operation were lower than the control group, the level of NO was higher than the control group ( $t=4.884, 8.568, 6.076$ , all  $P < 0.001$ ). The CRP level of the observation group was similar to that of the control group at 1 day after operation, there was no significant difference between the two groups ( $t=0.226, P=0.821$ ). The CRP level of 30 days after operation in the observation group was ( $5.4 \pm 2.3$ ) mg/L, which was lower than ( $10.6 \pm 4.2$ ) mg/L of the control group ( $t=7.365, P < 0.001$ ). The total incidence rate of CVE in the observation group was 4.35%, which was significantly lower than 32.61% of the control group ( $\chi^2 = 26.558, P < 0.001$ ). The restenosis rate of the observation group was 2.17%, which was lower than 10.87% of the control group ( $\chi^2 = 6.663, P = 0.010$ ). **Conclusion** Atorvastatin can effectively improve the endothelial function of patients with coronary heart disease after PCI, reduce the incidence of cardiovascular events and restenosis, it is worthy of promoting in clinical.

**【Key words】** Atorvastatin; Coronary heart disease; Angioplasty, balloon, coronary; Endothelium; Prognosis

# 急性脑出血患者血清白细胞介素 6、肿瘤坏死因子 $\alpha$ 、超氧化物歧化酶、丙二醛水平与周围脑组织水肿的相关性研究

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**【摘要】** **目的** 对急性脑出血(ICH)患者血清中肿瘤坏死因子  $\alpha$ (TNF- $\alpha$ )、白细胞介素 6(IL-6)、丙二醛(MDA)及超氧化物歧化酶(SOD)水平与周围脑组织水肿量进行动态监测,并探讨其相关性。**方法** 选取住院急性 ICH 患者 90 例,并选取同期的健康体检者 60 例为对照组;分析两组患者的一般资料、外周血不同时间(包括入院后,24 h,72 h,7 d)IL-6、TNF- $\alpha$ 、SOD、MDA 水平变化情况并记录同时段脑组织水肿情况,研究血清炎症因子和氧化应激产物与周围脑组织水肿的相关性。**结果** 急性 ICH 患者 IL-6、TNF- $\alpha$  浓度以及 MDA 水平在 24~72 h 即开始上升,3~7 d 时逐渐下降,但仍高于对照组,各组之间差异有统计学意义( $P < 0.05$ ),而血清 SOD 水平在 24~72 h 即下降,3~7 d 时开始升高,但仍低于对照组,各组之间差异有统计学意义( $P < 0.05$ );患者在入院时周围脑组织无水肿,0~24 h 即开始上升,在 24 h 时水肿量最大,然后逐渐消退,不同时间点差异统计学意义( $F = 432.67, P < 0.01$ );IL-6 与水肿量呈显著正相关关系( $r = 0.292, P < 0.05$ );TNF- $\alpha$  与水肿量呈显著正相关关系( $r = 0.312, P < 0.05$ );MDA 与水肿量呈显著正相关关系( $r = 0.337, P < 0.05$ );SOD 与水肿量呈负相关关系( $r = -0.364, P < 0.05$ )。**结论** 急性 ICH 患者血清炎症因子和氧化应激水平都明显高于对照组,且呈先上升后减少的趋势,且炎症因子和氧化应激水平与周围脑组织水肿量存在线性依存关系,SOD 对急性 ICH 患者脑组织水肿的影响最大,MDA 次之,IL-6 最小。这表明血清 IL-6、TNF- $\alpha$ 、SOD、MDA 水平可能参与脑组织水肿的发生、发展过程。

**【关键词】** 脑出血; 氧化性应激; 炎症因子; 脑水肿

## Correlation between serum levels of IL - 6, TNF - $\alpha$ , SOD and MDA in patients with acute cerebral hemorrhage and edema of peripheral brain tissue Jiao Guanghui.

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**【Abstract】** **Objective** To investigate the correlation between serum levels of IL - 6, TNF -  $\alpha$ , SOD, MDA and the amount of edema around brain tissue in patients with acute cerebral hemorrhage (ICH). **Methods** From May 2012 to May 2015, 90 cases with acute ICH in the Department of Neurology of our hospital were selected, and 60 healthy subjects were selected as control group. The general information, peripheral blood at different time (including after admission, 24h, 72h, 7d) IL - 6, TNF -  $\alpha$ , SOD, MDA levels were analyzed in the two groups. The situation at the same time brain edema was recorded, and the correlation between serum inflammatory cytokines and oxidative stress product and surrounding brain tissue edema was studied. **Results** The IL - 6, TNF -  $\alpha$  concentrations and MDA level in acute ICH patients began to increase at 24 - 72h, 3 - 7d gradually decreased, but still higher than the control group, there were statistically significant differences between the two groups ( $P < 0.05$ ). While the serum SOD level decreased in 24 - 72h, 3 - 7d began to increase, but still lower than the control group, there was statistically significant difference between the two groups ( $P < 0.05$ ). Patients with no edema at admission, 0 - 24h began to rise at 24h when the maximum amount of edema, then gradually subsided, at different time the difference was statistically significant ( $F = 432.67, P < 0.01$ ). There was significantly positive correlation between IL - 6 and edema volume ( $r = 0.292, P < 0.05$ ); a significantly positive correlation between TNF -  $\alpha$  and edema volume ( $r = 0.312, P < 0.05$ ). There was significantly positive correlation between MDA and edema volume ( $r = 0.337, P < 0.05$ ). There was a negative correlation between SOD and edema volume ( $r = -0.364, P < 0.05$ ). **Conclusion** The blood serum inflammatory factors and the levels of oxidative stress in acute ICH patients are significantly higher than the control group, and showed a trend of first increased and then decreased, and inflammatory cytokines and oxidative stress levels and edema volume exist linear dependence, SOD has the greatest effect on brain edema in patients with acute ICH, MDA times, IL - 6 is minimal. This indicates that serum IL - 6, TNF -  $\alpha$ , SOD, MDA levels may be involved in the occurrence and development of brain edema.

**【Key words】** Cerebral hemorrhage; Oxidative stress; Inflammatory factors; Brain edema

# 替米沙坦预防高血压伴阵发性心房颤动的临床研究

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**【摘要】 目的** 观察替米沙坦预防高血压伴阵发性心房颤动复发的效果,并探讨替米沙坦预防房颤复发的量效关系及其主要机制。**方法** 将符合入选条件的 186 例患者采用数字表法随机分为观察组( $n=91$ )和对照组( $n=95$ )。观察组又用数字表法随机分为替米沙坦 20 mg 组( $n=30$ )、40 mg 组( $n=30$ )、80 mg 组( $n=31$ )3 个观察亚组。各组均给予标准剂量的胺碘酮,各观察亚组口服相应剂量的替米沙坦,对照组避免应用肾素-血管紧张素系统抑制剂。随访 6 个月,观察各组患者的血压、左室舒张末内径(LVEDD)、左房内径(LAD)的变化,统计房颤复发例数、次数以及房颤首次复发时间。**结果** 观察组、替米沙坦 80 mg 组在 6 个月内房颤复发例数(分别为 26 例、6 例)与次数[分别为( $0.35 \pm 0.08$ )次、( $0.34 \pm 0.07$ )次]显著减少( $\chi^2 = 5.413, 5.0262, P < 0.05; u = 11.111, t = 9.668, P < 0.01$ )。替米沙坦 40 mg 组房颤首次复发时间在 6 个月内[( $97.87 \pm 30.42$ )d]明显延长( $t = 2.175, P < 0.05$ ),80 mg 组[( $102.36 \pm 31.53$ )d]更为显著( $t = 2.930, P < 0.01$ )。同时,6 个月内观察组 LVEDD[( $48.39 \pm 2.65$ )mm]、LAD[( $34.47 \pm 2.18$ )mm]和替米沙坦 80 mg 组 LAD[( $34.04 \pm 2.13$ )mm]显著缩短[ $u = 2.019$ (LVEDD)、 $u = 2.143$ (LAD), $t = 2.3785, P < 0.05$ ]。**结论** 替米沙坦对预防高血压伴阵发性房颤的复发有效,且存在量效关系,其机制主要与抑制心房结构重构有关。

**【关键词】** 心房颤动; 替米沙坦; 胺碘酮

**基金项目:**上海市浦东新区科技发展资金资助项目(NKYL0810)

**Clinical research of telmisartan in preventing hypertension with paroxysmal atrial fibrillation** Zhou Hui, Wang Zhijing, Zhou Maofeng, Di Yong.

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**【Abstract】 Objective** To observe the effects of telmisartan (Tel) in the recurrence prevention of hypertension with paroxysmal atrial fibrillation (PAF), and to explore the dose-effect relationship and the main mechanism of Tel in the prevention of atrial fibrillation (AF). **Methods** 186 cases who met the inclusion criteria were randomly divided into the observation group ( $n=91$ ) and the control group ( $n=95$ ). And the observation group was randomly divided into the 20 mg subgroup ( $n=30$ ), 40 mg subgroup ( $n=30$ ) and 80 mg subgroup ( $n=31$ ). The standard dose of amiodarone (Ami) was uniformly administered to each group, and the observation subgroups were orally administered the scheduled doses of Tel, while the control group avoided the application of the renin-angiotensin system inhibitors. The follow-up lasted for 6 months, the changes of blood pressure, the recurrence number and frequency of AF, and the first recurrence time, the left ventricular end-diastolic diameter (LVEDD) and the left atrial diameter (LAD) were observed. **Results** The recurrence number (26 cases, 6 cases respectively) and frequency of AF [( $0.35 \pm 0.08$ ) times, ( $0.34 \pm 0.07$ ) times respectively] in the observation group and the 80 mg subgroup in 6 months significantly reduced ( $\chi^2 = 5.413, 5.026$ , all  $P < 0.05$  and  $u = 11.111, t = 9.668$ , all  $P < 0.01$ ). The first recurrence time of AF in the 40 mg subgroup was significantly longer within 6 months [( $97.87 \pm 30.42$ ) d] ( $t = 2.175, P < 0.05$ ), which was much more significant than that in the 80 mg subgroup [( $102.36 \pm 31.53$ ) d] ( $t = 2.930, P < 0.01$ ). Meanwhile, the LVEDD [( $48.39 \pm 2.65$ ) mm] and LAD [( $34.47 \pm 2.18$ ) mm] in the observation group and the LAD [( $34.04 \pm 2.13$ ) mm] in the 80 mg subgroup within 6 month were significantly shorter [ $u = 2.019$  (LVEDD),  $u = 2.143$  (LAD) and  $t = 2.378$ , all  $P < 0.05$ ]. **Conclusion** Tel was effective in the recurrence prevention of hypertension with PAF, existed a dose-effect relationship, which was mainly related with the inhibition of atrial structural remodeling.

**【Key words】** Atrial fibrillation; Telmisartan; Amiodarone

**Fund program:** Shanghai Pudong New Area science and technology development funds (NKYL0810)



# 加速康复护理在结肠癌患者围手术期中应用的临床效果

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**【摘要】 目的** 探讨加速康复护理在结肠癌患者围手术期中应用的可行性,为临床护理提供借鉴。**方法** 将 90 例围手术期的结肠癌患者按随机数字表法分为观察组 45 例和对照组 45 例,对照组患者实施传统护理,观察组实施加速康复护理,比较两组患者术后排气时间、排便时间、进食时间、下床时间、尿管及胃管留置时间、总住院时间,观察术后并发症发生及体质量变化情况,出院前进行护理满意度调查。**结果** 观察组排气时间、排便时间、进食时间、下床时间、导尿管留置时间、胃管留置时间、总住院时间分别为(57.6±7.2)h、(76.8±9.6)h、(36.0±6.3)h、(84.3±12.4)h、(50.4±5.2)h、(50.2±6.6)h、(8.4±0.6)d,均优于对照组的(88.8±10.6)h、(113.7±11.3)h、(93.8±8.5)h、(120.4±17.3)h、(101.4±10.6)h、(108.7±14.2)h、(13.2±0.8)d( $t=6.447,7.004,10.277,7.426,11.303,12.048,5.764$ ,均 $P<0.01$ );观察组术后体质量与术前差异无统计学意义( $P>0.05$ ),对照组术后 7 d、术后 30 d 体质量均较术前明显下降,观察组术后 7 d、术后 30 d 体质量明显高于对照组( $t=3.657,3.907$ ,均 $P<0.05$ );观察组恶心呕吐、肺部感染、尿路感染的发生率明显低于对照组( $\chi^2=3.92,6.049,4.232$ ,均 $P<0.05$ ),护理满意度明显高于对照组( $\chi^2=4.939, P<0.05$ )。**结论** 加速康复护理有助于围手术期结肠癌患者胃肠功能恢复,减少并发症发生,加速术后康复速度,不影响患者体质量,值得临床推广使用。

**【关键词】** 结肠肿瘤; 结肠切除术; 围手术期护理; 康复护理

**基金项目:**浙江省宁波市科技计划项目(2015A610223)

**The effect of rapid rehabilitation nursing on perioperative patients with colon cancer** Shan Jun.

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**【Abstract】 Objective** To investigate the effect of rapid rehabilitation nursing on perioperative patients with colon cancer, thus to provide reference for clinical care. **Methods** According to the digital table, 90 perioperative patients with colon cancer were randomly divided into observation group and control group, 45 cases in each group. The control group was given traditional nursing, the observation group was given rapid rehabilitation nursing. The exhaust time, defecation time, eating time, bed time, indwelling catheter and tube time, hospitalization days were compared. The complications and weight changes, made a satisfaction survey of nursing when predischarge were observed. **Results** The exhaust time, defecation time, feeding time, bed time, catheter indwelling time, gastric retention time, hospitalization days of the observation group were (57.6±7.2)h, (76.8±9.6)h, (36.0±6.3)h, (84.3±12.4)h, (50.4±5.2)h, (50.2±6.6)h, (8.4±0.6)d, respectively, which were better than those of the control group [(88.8±10.6)h, (113.7±11.3)h, (93.8±8.5)h, (120.4±17.3)h, (101.4±10.6)h, (108.7±14.2)h, (13.2±0.8)d] ( $t=6.447,7.004,10.277,7.426,11.303,12.048,5.764$ , all  $P<0.01$ ). The body weight of the observation group was not significantly different compared between before surgery and after surgery ( $P>0.05$ ), which of the control group after surgery 7d, 30d were significantly decreased than before surgery, and the body weight of the observation group after surgery 7d, 30d were significantly higher than the control group ( $t=3.657,3.907$ , all  $P<0.05$ ). The incidence rates of nausea and vomiting, pulmonary infection, urinary tract infections of the observation group were significantly lower than those of the control group ( $\chi^2=3.920,6.049,4.232$ , all  $P<0.05$ ). The nursing satisfaction was significantly higher than the control group ( $\chi^2=4.939, P<0.05$ ). **Conclusion** The rapid rehabilitation nursing can contribute to recovery of gastrointestinal function, reduce complications, accelerate postoperative recovery rate, does not affect the patients' weight, and it is worthy of clinical using in the perioperative patients with colon cancer.

**【Key words】** Colonic neoplasms; Colectomy; Perioperative nursing; Rehabilitation nursing

**Fund program:** Science and Technology Planning Project of Ningbo, Zhejiang Province (2015A610223)

# 瑞舒伐他汀对早期糖尿病肾病患者肾脏保护作用观察

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**【摘要】** **目的** 观察瑞舒伐他汀对早期糖尿病肾病患者的肾脏保护作用。**方法** 将 64 例早期糖尿病肾病患者按数字表法随机分为治疗组和对照组各 32 例。对照组患者给予降血糖和降血压等常规治疗。治疗组在对照组常规治疗的基础上给予瑞舒伐他汀 10 mg/d, 每晚口服, 两组疗程均为 12 周。分别于治疗前和治疗 12 周后, 检测两组患者的尿微量白蛋白排泄率(UAER)、尿  $\beta_2$  微球蛋白( $\beta_2$ -MG)、血肌酐(Ser)、C 反应蛋白(CRP)、空腹血糖(FPG)、总胆固醇(TC)、甘油三酯(TG)、低密度脂蛋白胆固醇(LDL-C)、高密度脂蛋白胆固醇(HDL-C)。**结果** 治疗 12 周后, 治疗组 UAER、Ser、 $\beta_2$ -MG、CRP 均显著下降[(123.4 ± 10.5)  $\mu$ g/min 比(85.4 ± 12.6)  $\mu$ g/min, (98.2 ± 11.5)  $\mu$ mol/L 比(76.3 ± 8.6)  $\mu$ mol/L, (0.76 ± 0.35) mg/L 比(0.37 ± 0.21) mg/L, (19.5 ± 1.5) mg/L 比(10.3 ± 1.6) mg/L], 与治疗前比较差异均有统计学意义( $t = 3.461, 3.532, 3.284, 3.671$ , 均  $P < 0.05$ )。治疗后对照组与治疗组 UAER、Ser、 $\beta_2$ -MG、CRP [(117 ± 12.5)  $\mu$ g/min 比(85.4 ± 12.6)  $\mu$ g/min, (92.7 ± 8.3)  $\mu$ mol/L 比(76.3 ± 8.6)  $\mu$ mol/L, (0.69 ± 0.24) mg/L 比(0.37 ± 0.21) mg/L, (17.7 ± 1.2) mg/L 比(10.3 ± 1.6) mg/L] 比较差异均有统计学意义( $t = 3.365, 3.584, 3.752, 3.274$ , 均  $P < 0.05$ )。LDL-C、TC、TG 也均显著下降。**结论** 瑞舒伐他汀在早期糖尿病肾病治疗中发挥调脂作用的同时, 能抑制炎症反应, 减少尿蛋白排泄, 改善肾功能。

**【关键词】** 糖尿病肾病; 瑞舒伐他汀; 蛋白尿

**基金项目:** 山东省医药卫生科技发展计划项目(2015WS0363)

## The clinical observation of the role of rosuvastatin in the treatment of early - stage diabetic nephropathy

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**【Abstract】** **Objective** To observe the protective effect of rosuvastatin on kidney in patients with early - stage diabetic nephropathy. **Methods** 64 patients with early - stage diabetic nephropathy were randomly divided into the treatment group ( $n = 32$ ) and the control group ( $n = 32$ ). The patients of the treatment group were treated with rosuvastatin (10mg, po, qn) + routine medication, while the patients of the control group were treated with routine medication alone. All patients were treated for 12 weeks. Routine medication included diabetic diet, blood glucose control and anti - hypertensive drugs. Urinary albumin excretion rate (UAER), urinary  $\beta_2$  - microglobulin ( $\beta_2$  - MG), serum creatinine (Ser), C - reactive protein (CRP), fasting plasma glucose (FPG), low density lipoprotein - C (LDL - C), high density lipoprotein - C (HDL - C), total cholesterol (TC) and triglyceride (TG) were determined and compared between the two groups before and after treatment for 12 weeks. **Results** 12 weeks after treatment, the levels of UAER, Ser,  $\beta_2$  - MG and CRP were lower in the treatment group compared with before treatment [(123.4 ± 10.5)  $\mu$ g/min vs. (85.4 ± 12.6)  $\mu$ g/min, (98.2 ± 11.5)  $\mu$ mol/L vs. (76.3 ± 8.6)  $\mu$ mol/L, (0.76 ± 0.35) mg/L vs. (0.37 ± 0.21) mg/L, (19.5 ± 1.5) mg/L vs. (10.3 ± 1.6) mg/L], the differences were statistically significant ( $t = 3.461, 3.532, 3.284, 3.671$ , all  $P < 0.05$ ). 12 weeks after treatment, the levels of UAER, Ser,  $\beta_2$  - MG and CRP in the control group and in the treatment group were (117 ± 12.5)  $\mu$ g/min vs. (85.4 ± 12.6)  $\mu$ g/min, (92.7 ± 8.3)  $\mu$ mol/L vs. (76.3 ± 8.6)  $\mu$ mol/L, (0.69 ± 0.24) mg/L vs. (0.37 ± 0.21) mg/L, (17.7 ± 1.2) mg/L vs. (10.3 ± 1.6) mg/L, there were significant differences between the two groups ( $t = 3.365, 3.584, 3.752, 3.274$ , all  $P < 0.05$ ). LDL - C, TC and TG were lower in the treatment group. **Conclusion** Rosuvastatin can improve renal function in patients with early - stage diabetic nephropathy by regulating the levels of blood lipid and decreasing the levels of CRP, UAER and urine protein.

**【Key words】** Diabetic nephropathies; Rosuvastatin; Proteinuria

**Fund program:** Medicines Health Science and Technology Development Project of Shandong Province (2015WS0363)

# 传统支气管针吸活检术在基层医院诊断原发性肺癌中的运用价值

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**【摘要】目的** 探讨传统支气管针吸活检术(C-TBNA)在基层医院诊断原发性肺癌中的运用价值。**方法** 回顾性分析嘉兴市第一医院呼吸科 2013 年 1 月至 2014 年 12 月经 C-TBNA 病理诊断的原发性肺癌患者 118 例临床资料,其中包括淋巴结的穿刺和肺内肿块的穿刺,同时所有患者均行胸部 CT 检查。**结果** 通过对 118 例 C-TBNA 阳性患者的病理分析,其中腺癌 45 例(38.1%)、鳞癌 28 例(23.7%)、小细胞癌 17 例(14.4%)。联合 TNBA 淋巴结与胸部 CT 比较,C-TBNA 淋巴结穿刺在肺癌诊断及分期中明显优于胸部 CT,并减少胸部 CT 淋巴结的假阴性率。C-TBNA 淋巴结的阳性率与穿刺区域无关,118 例患者取得淋巴结穿刺标本 289 份,其中阳性标本 194 份,分三个区域(上纵隔区,下纵隔区,10~14 区),对三个区域进行组间率比较,差异无统计学意义( $P=0.407$ ),所有患者检查耐受性良好,均无相关并发症。**结论** C-TBNA 作为肺门、纵隔淋巴结及肺内肿块病理评估手段,明显提高肺癌的诊断阳性率,其穿刺阳性率与穿刺区域无关。气管镜在肺癌诊断的应用中安全、有效、可行。

**【关键词】** 肺肿瘤; 淋巴结; 活组织检查,针吸; 体层摄影术,X 线计算机

**基金项目:**浙江省嘉兴市科技计划项目(2013AY21042-1)

**Traditional transbronchial needle aspiration biopsy in the diagnosis of primary lung cancer in the use of value in the primary hospital** Zhang Qi, Tao Feng.

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**【Abstract】 Objective** To investigate traditional transbronchial needle aspiration biopsy (C-TBNA) using the diagnostic value of lung cancer in primary hospital. **Methods** The clinical data of patients with 118 cases of primary lung cancer was analyzed retrospectively and the respiratory department of the First Hospital of Jiaxing from January 2013 to December 2014 period was analyzed by C-TBNA pathologic diagnosis, including the lymph nodes and lung tumor puncture biopsy. Meanwhile, all patients did chest CT. **Results** By means of the positive C-TBNA pathologic analysis among the 118 cases of patients, it gets the result of 45 cases of adenocarcinoma (38.1%), squamous cell carcinoma and 28 cases (23.7%), small cell carcinoma in 17 patients (14.4%). Combining the TNBA lymph nodes and the chest CT comparison, C-TBNA lymph node biopsy in the diagnosis and staging of lung cancer was found significantly better than the chest CT. It can reduce the false negative rate of the chest CT lymph nodes. The positive rate of C-TBNA lymph nodes is regardless of the puncture area. 118 patients made 289 parts by lymph node biopsy specimens, including 194 positive samples which are divided into three regions (the mediastinum and lower mediastinal region, 10-14 region). Comparing the three groups' region rates, no statistical significant difference was found ( $P=0.407$ ). All patients was well tolerated, no complications. **Conclusion** As hilus pulmonis and mediastinal lymph nodes and lung tumor pathology assessment tools, C-TBNA can significantly improve the diagnostic yield of lung cancer. In addition, the positive rate is regardless of the puncture area. The application of bronchoscopy of lung cancer diagnosed is safe, effective and feasible.

**【Key words】** Lung neoplasms; Lymph nodes; Biopsy, needle; Tomography, X-ray computed

**Fund Program:** The Science and Technology Planning Project of Jiaxing, Zhejiang Province (2013AY21042-1)

# 多阶段抗原的结核分枝杆菌亚单位疫苗 SHP/TMD 的免疫原性及保护性研究

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**【摘要】 目的** 设计构建包含结核分枝杆菌(*M. tb*)感染多阶段抗原的融合蛋白亚单位疫苗 SHP, 在中国 *M. tb* 感染者和小鼠模型中评价其免疫原性和抗感染保护性。**方法** 选择 *M. tb* 复制期分泌抗原 Rv0577、休眠期抗原 Rv2623 和 PE/PPE 家族抗原 Rv3478, 构建并原核表达融合蛋白 SHP; 以基于 TB-IGRA 的全血 IFN- $\gamma$  分析试验(WBIA)检测 SHP 及其亚组分蛋白诱导中国 *M. tb* 感染者和健康对照者外周血淋巴细胞产生的特异性 IFN- $\gamma$  水平及其差异; 以 SHP 联合佐剂 TMD 皮下免疫 C57BL/6 小鼠, 9 周后处死并检测特异性抗体滴度、脾淋巴细胞培养上清中特异性 Th1 型细胞因子水平以及肺脏 IFN- $\gamma$ 、TNF- $\alpha$ 、IL-10 和 iNOS 的表达水平; 以 *M. tb* H37Rv 毒株攻毒 4 周后评价 SHP/TMD 的抗感染保护性。**结果** 成功构建、表达融合蛋白 SHP, SHP 及其亚组分蛋白刺激 *M. tb* 感染者淋巴细胞产生的 IFN- $\gamma$  浓度均显著性高于健康对照者[如 SHP 刺激值分别为  $(1\ 420.0 \pm 253.9)$  pg/mL 和  $(236.1 \pm 95.1)$  pg/mL,  $t = 2.063$ ,  $P < 0.01$ ]。SHP/TMD 诱导产生显著高水平的特异性 IgG 抗体及其亚类, IgG2a/IgG1 趋向 Th1 型应答; SHP/TMD 免疫小鼠的脾淋巴细胞诱导显著高水平的特异性 IL-2、IFN- $\gamma$  和 TNF- $\alpha$ ; SHP/TMD 免疫小鼠肺脏组织 IFN- $\gamma$ 、TNF- $\alpha$  及 iNOS 表达水平显著上升。此外, SHP/TMD 显著降低 *M. tb* 急性感染小鼠肺、脾脏菌量(如 SHP/TMD 组肺脏菌量相对 TMD 组减少了 1.03 log,  $F = 1518$ ,  $P < 0.05$ ), 同时肺部病理病变减轻。**结论** 以中国 *M. tb* 感染者 T 细胞识别的多阶段优势表达抗原构建亚单位疫苗 SHP/TMD, 免疫小鼠可提供显著的抗 *M. tb* 急性感染的保护性, 主要与 SHP 抗原特异性 CD4<sup>+</sup>Th1 型应答有关。

**【关键词】** 分枝杆菌, 结核; 疫苗, 亚单位; 卡介苗; 免疫

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**Immunogenicity and protective efficacy of a subunit vaccine SHP/TMD consisting of multi-stage antigens against Mycobacterium tuberculosis infection** Wang Xiaochun, Xu Lifa, Wei Qinqin, Li Yueliang, Wang Fenglong, Zhang Chao.

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**【Abstract】 Objective** To construct a fusion protein SHP of subunit vaccine containing multi-stage antigens, and to confirm the immunogenicity and protective effect of SHP through *M. tb* infected Chinese population and C57BL/6 mice model. **Methods** Rv0577 (secreted by replicating bacilli), Rv2623 (expressed in dormant bacilli) and Rv3478 (from PE/PPE family) were selected and to construct fusion protein SHP, WBIA (based on TB-IGRA) was performed to detect the specific concentration of IFN- $\gamma$  stimulated from peripheral-blood lymphocyte of Chinese *M. tb* infections and non-infections. C57BL/6 mice were immunized (s.c.) with SHP emulsified in the adjuvant TMD. Nine weeks after immunized, SHP-specific antibody titers (IgG, IgG1, IgG2a), as well as the levels of Th1 cytokines by splenic lymphocytes stimulated with SHP and the mRNA expression levels of molecules in the lung of vaccinated mice were detected. Four weeks after challenge by *M. tb* H37Rv, the protective efficacy of SHP/TMD was

evaluated. **Results** Recombinant plasmid pET30b-SHP and subgroups were constructed and expressed successfully, which stimulated statistically higher levels of IFN- $\gamma$  in *M. tb* infected Chinese subjects than in healthy donors [SHP stimulated IFN- $\gamma$  levels in infected and healthy groups were  $(1\,420.0 \pm 253.9)$  pg/mL and  $(236.1 \pm 95.1)$  pg/mL,  $t = 2.063, P < 0.01$ ]. SHP/TMD induced higher levels of specific IgG, IgG2a and IgG1 antibodies, and the ratio of IgG2a/IgG1 indicated that SHP/TMD mainly induced the Th1-type cell-mediated immune response. Meanwhile, SHP/TMD induced statistically higher levels of specific IFN- $\gamma$ , TNF- $\alpha$  and IL-2 from splenic lymphocytes, also the mRNA expression levels of IFN- $\gamma$ , TNF- $\alpha$  and iNOS from the lung. Moreover, SHP/TMD group resulted in the significant reduction of bacterial load in the lung and spleen organ (the reduction of bacterial load of SHP/TMD in comparison of TMD group was 1.03 log,  $F = 1518, P < 0.05$ ), as well as lessened inflammation in alveolar tissue.

**Conclusion** Based on the predominant antigens expressed during multi stages which can be recognized by T cells of *M. tb* infections from China, a subunit vaccine SHP/TMD was constructed. SHP/TMD can provide significant protective efficacy against acute infection of *M. tb*, which is mainly attributed to the SHP-specific CD<sub>4</sub><sup>+</sup> Th1-type cell immune response.

**[Key words]** Mycobacterium tuberculosis; Vaccine, subunit; BCG vaccine; Immunity

**Fund program:** Key University Science Research Project of Anhui Province (KJ2016A211, KJ2015A093); Training Program of Innovation and Entrepreneurship for Undergraduates (201510361093, 201510361096); Outstanding Young Academic Backbone Project of Anhui University of Science and Technology (13339)

# 股神经阻滞联合右美托咪定用于全膝关节置换术后镇痛效果观察

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**【摘要】** 目的 探讨神经阻滞联合右美托咪定用于全膝关节置换术后的镇痛效果。方法 2012 年 5 月至 2014 年 8 月收集在武警浙江总队医院行全膝关节置换术(TKA)治疗的 100 例膝关节炎(OA)患者,采用随机数字表法将患者分为观察组和对照组,每组各 50 例,观察组术前采用罗帕卡因、右美托咪定联合股神经阻滞,对照组采用罗帕卡因联合股神经阻滞,观察术后静息及活动 VAS 评分、镇静 Ramsay 评分、术后 MAP、HR、术后膝 ROM、术后镇痛情况及不良反应发生情况。结果 观察组患者术后 T1、T2、T3、T4 阶段静息痛、活动痛均明显低于对照组(静息痛 T1 ~ T4( $t$ ) = 4.53, 9.97, 8.44, 5.43,  $P < 0.05$ ; 活动痛 T1 ~ T4( $t$ ) = 6.34, 7.24, 6.43, 4.53,  $P < 0.05$ ), 两组患者 T1、T2、T3、T4 阶段镇静 Ramsay 评分、MAP、HR 差异均无统计学意义(均  $P > 0.05$ ), 观察组术后 1 ~ 5 d 膝关节 ROM 明显高于对照组( $t$  = 4.83, 6.83, 6.52, 6.63, 6.22,  $P < 0.05$ ), 两组患者曲马朵首次应用时间差异无统计学意义( $P > 0.05$ ), 观察组曲马朵应用率、镇痛泵按压次数及曲马朵应用剂量均明显低于对照组( $\chi^2$  = 5.32,  $t$  = 4.66, 18.20, 均  $P < 0.05$ ), 两组患者总不良反应发生率差异无统计学意义( $\chi^2$  = 0.71,  $P = 0.40$ )。结论 股神经阻滞联合右美托咪定可有效减轻 TKA 术后疼痛, 减少阿片类镇痛药用量, 提高膝关节功能, 同时并未影响患者血流动力学, 安全性较高。

**【关键词】** 关节成形术, 置换, 膝; 阻滞; 股神经; 镇痛; 右美托咪定

**基金项目:**浙江省医药卫生计划项目(2011Kyb052)

## The effect of femoral nerve block combined with dexmedetomidine in perioperative analgesia for total knee arthroplasty Zhou Haiou.

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**【Abstract】 Objective** To explore the effect of femoral nerve block combined with dexmedetomidine in perioperative analgesia for total knee arthroplasty. **Methods** One hundred patients undergoing total knee arthroplasty and met criterions were collected from May 2012 to August 2014 in General Hospital of Zhejiang People's Armed Police Force. They were randomly divided into the observation group and control group. The patients in the observation group received femoral nerve block combined with dexmedetomidine and ropivacaine. And the patients in the control group received femoral nerve block combined with dexmedetomidine. The rest pain, activities pain, Ramsay sedation score, MAP, HR at T1, T2, T3, T4 stage, postoperative knee ROM, postoperative analgesia effect and postoperative adverse reactions were recorded. **Results** The rest pain and activities pain of patients in the observation group were lower than those in the control group at T1, T2, T3, T4 stage ( $t$  resting pain T1 - T4 = 4.53, 9.97, 8.44, 5.43, all  $P < 0.05$ ;  $t$  active pain T1 - T4 = 6.34, 7.24, 6.43, 4.53, all  $P < 0.05$ ). The Ramsay sedation score, MAP and HR of the two groups had no significant differences at T1, T2, T3, T4 stage ( $P > 0.05$ ). The postoperative knee ROM of patients in the observation group were higher than those in the control group ( $t$  = 4.83, 6.83, 6.52, 6.63, 6.22, all  $P < 0.05$ ). The tramadol first application time of the two groups had no significant difference ( $P > 0.05$ ). The postoperative analgesia pressing times and tramadol usage of patients in the observation group were lower than those in the control group ( $\chi^2$  = 5.32,  $t$  = 4.66, 18.20, all  $P < 0.05$ ). And the difference was not statistically significant regarding to incidence rate of postoperative adverse reactions ( $\chi^2$  = 0.71,  $P = 0.40$ ). **Conclusion** Femoral nerve block combined with dexmedetomidine can effectively relieve pain after TKA, reduce the usage of opioids, improve knee function. At the same time, it has no impact on patients' hemodynamics. It is worthy to be promoted due to high safety and efficacy.

**【Key words】** Arthroplasty, replacement, knee; Block; Femoral nerve; Analgesia; Dexmedetomidine

**Fund program:** Project of Medicine and Health of Zhejiang Province in 2011 (2011Kyb052)

# 右美托咪定用于老年危重患者清醒喉罩置入全身麻醉的效果观察

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**【摘要】** 目的 探讨预注小剂量右美托咪定用于老年危重症患者清醒状态下置入喉罩行全身麻醉的临床价值。方法 选择 60 例择期接受全身麻醉下手术的老年危重症患者,按随机数字表法分为两组( $n=30$ );观察组:于麻醉诱导前 10 min 静脉泵注右美托咪定  $0.4 \mu\text{g}/\text{kg}$ ,静注咪达唑仑  $0.03 \text{ mg}/\text{kg}$ ,苏芬太尼  $0.2 \mu\text{g}/\text{kg}$ ,1% 的丁卡因。对照组:于麻醉诱导前 10 min 给予等容积的 0.9% 氯化钠注射液,其余同观察组。分别观察两组泵注右美托咪定后的 BIS 值(T1),给予诱导药物后准备置入喉罩时的 BIS 值(T2),置入喉罩时患者发生躁动、呛咳、恶心反射等不良反应的例数(T3),喉罩置入后的血流动力学变化,丙泊酚、瑞芬太尼的用量,手术结束后 Steward 苏醒评分等。结果 两组 BIS 值:T1 时比较:( $77.6 \pm 6.2$ )比( $96.5 \pm 3.1$ ), $t=14.929$ , $P<0.01$ ;T2 比较:( $71.2 \pm 5.7$ )比( $90.8 \pm 3.3$ ), $t=16.066$ , $P<0.01$ ;T3 比较:2 例比 9 例, $t=2.335$ , $P<0.05$ ;麻醉药物用量比较:丙泊酚( $146.6 \pm 36.7$ )mg 比( $182.7 \pm 25.3$ )mg, $t=4.436$ , $P<0.01$ ;瑞芬太尼( $293.5 \pm 74.3$ ) $\mu\text{g}$  比( $365.4 \pm 51.7$ ) $\mu\text{g}$ , $t=4.351$ , $P<0.01$ ;两组术中生命体征、血气检测、Steward 评分等比较:HR( $87.2 \pm 9.3$ )次/min 比( $94.6 \pm 10.2$ )次/min, $t=2.937$ , $P<0.05$ ;MAP( $93.7 \pm 10.1$ )mmHg 比( $103.5 \pm 14.3$ )mmHg, $t=3.066$ , $P<0.01$ ;pH( $7.37 \pm 0.04$ )比( $7.34 \pm 0.05$ ), $t=2.566$ , $P<0.05$ ;PaO<sub>2</sub>( $155.7 \pm 34.6$ )mmHg 比( $108.5 \pm 37.7$ )mmHg, $t=5.052$ , $P<0.01$ ;PaCO<sub>2</sub>( $37.7 \pm 5.8$ )mmHg 比( $41.5 \pm 7.3$ )mmHg, $t=2.233$ , $P<0.05$ ;BE( $-3.1 \pm 0.8$ )mmol/L 比( $-5.8 \pm 1.5$ )mmol/L, $t=8.699$ , $P<0.01$ ;Steward 评分( $5.5 \pm 0.5$ )分比( $5.0 \pm 0.6$ )分, $t=3.571$ , $P<0.01$ ;VAS( $1.9 \pm 0.5$ )分比( $3.9 \pm 0.8$ )分, $t=18.779$ , $P<0.01$ 。结论 小剂量右美托咪定  $0.4 \mu\text{g}/\text{kg}$  诱导前静脉泵注,复合丁卡因表面麻醉,有利于患者清醒状态下的喉罩置入,对于老年危重症患者,其对血流动力学影响较小,术中血气指标平稳,提高了麻醉和苏醒质量及镇痛效果,减少了麻醉药物的用量,对保证临床麻醉医疗质量安全有重要的临床意义。

**【关键词】** 右美托咪定; 危重病; 麻醉,全身; 气道管理; 老年人

基金项目:陕西省榆林市科技计划项目(2014jh-20)

## Effects of dexmedetomidine in the application of LMA in the airway management in critically ill elderly patients awake

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**【Abstract】** **Objective** To investigate pre-injection of low-dose dexmedetomidine in the curative of applying laryngeal masks in the airway management in critically ill elderly patients awake. **Methods** 60 case of critically ill elderly patients who underwent general anesthesia were collected, and they were randomly into two groups. The observation group: before induction of anesthesia, injected dexmedetomidine  $0.4 \mu\text{g}/\text{kg}$ , midazolam  $0.03 \text{ mg}/\text{kg}$ , sufentanil  $0.2 \mu\text{g}/\text{kg}$ , throat topical anesthesia by 1% tetracaine. The control group: injected the same volume of sodium chloride solution 10 min before induction of anesthesia. Observed the BIS after the infusion of dexmedetomidine (T1); the BIS before laryngeal mask airway insertion and after topical anesthesia (T2); the restlessness, cough, nausea reflex and so on, when laryngeal mask airway insertion (T3); the hemodynamic changes after laryngeal mask insertion; the dosage of propofol and remifentanyl; postoperative Steward score, complications, analgesic effect, etc. SPSS statistical program 13.0 was used for statistical analysis. **Results** There was no significant difference between the two groups before operation ( $P>0.05$ ). The T1, T2, T3, and anesthetic dosage had significant differences. The comparison results were as follows: T1: ( $77.6 \pm 6.2$ ) vs ( $96.5 \pm 3.1$ ),  $t=14.929$ ,  $P<0.01$ ; T2: ( $71.2 \pm 5.7$ ) vs ( $90.8 \pm 3.3$ ),  $t=$

16.066,  $P < 0.01$ ; T3: (2-9) cases,  $t = 2.335$ ,  $P < 0.05$ . The comparison of anesthetic dosage: propofol ( $146.6 \pm 36.7$ ) mg vs ( $182.7 \pm 25.3$ ) mg,  $t = 4.436$ ,  $P < 0.01$ ; Remifentanyl ( $293.5 \pm 74.3$ )  $\mu\text{g}$  vs ( $365.4 \pm 51.7$ )  $\mu\text{g}$ ,  $t = 4.351$ ,  $P < 0.01$ . During the operation, the vital signs, blood gas, complications, analgesia score and so on, were significantly different ( $P < 0.05$ ). HR ( $87.2 \pm 9.3$ ) times/min vs ( $94.6 \pm 10.2$ ) times/min,  $t = 2.937$ ,  $P < 0.05$ ; MAP ( $93.7 \pm 10.1$ ) mmHg vs ( $103.5 \pm 14.3$ ) mmHg,  $t = 3.066$ ,  $P < 0.01$ ; pH ( $7.37 \pm 0.04$ ) vs ( $7.34 \pm 0.05$ ),  $t = 2.566$ ,  $P < 0.05$ ; PaO<sub>2</sub> ( $155.7 \pm 34.6$ ) mmHg vs ( $108.5 \pm 37.7$ ) mmHg,  $t = 5.052$ ,  $P < 0.01$ ; PaCO<sub>2</sub> ( $37.7 \pm 5.8$ ) mmHg vs ( $41.5 \pm 7.3$ ) mmHg,  $t = 2.233$ ,  $P < 0.05$ ; BE ( $-3.1 \pm 0.8$ ) mmol/L vs ( $-5.8 \pm 1.5$ ) mmol/L,  $t = 8.699$ ,  $P < 0.01$ ; Steward score ( $5.5 \pm 0.5$ ) points vs ( $5.0 \pm 0.6$ ) points,  $t = 3.571$ ,  $P < 0.01$ ; VAS ( $1.9 \pm 0.5$ ) points vs ( $3.9 \pm 0.8$ ) points,  $t = 18.779$ ,  $P < 0.01$ . **Conclusion** For elderly critically ill patients, a small dose of dexmedetomidine before induction, with midazolam, sufentanil intravenous injection and tetracaine anesthesia, can maintain stable vital signs and blood gas analysis, shorten the anesthesia time, improve the quality of anesthesia and recovery and the effect of analgesia, reduce the dosage of anesthetics and the complication of anesthesia. There was important clinical significance to ensure the medical safety.

**【Key words】** Dexmedetomidine; Critical illness; Anesthesia, general; Airway management; Aged

**Fund program:** Planning Project of Yulin City, Shanxi Province (2014jh-20)



# 儿童腺病毒肺炎血清和支气管肺泡灌洗液中 白细胞介素 6、白细胞介素 10 及肿瘤坏死因子 $\alpha$ 的水平及意义

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**【摘要】** 目的 通过检测腺病毒肺炎患儿血清和支气管肺泡灌洗液中白细胞介素 6、白细胞介素 10 及肿瘤坏死因子  $\alpha$  的表达, 并且与健康对照组相比较, 探讨其与儿童腺病毒肺炎临床表现的相关性。方法 采用酶联免疫吸附试验(ELISA)法检测 40 例腺病毒肺炎患儿及 20 例健康对照儿童血清和支气管肺泡灌洗液中白细胞介素 6、白细胞介素 10 及肿瘤坏死因子  $\alpha$  水平。结果 腺病毒肺炎急性期和恢复期的患儿外周血中 IL-6、IL-10、TNF- $\alpha$  的水平均明显高于对照组, 差异均有统计学意义(均  $P < 0.05$ )。腺病毒肺炎急性期患儿外周血中 IL-6、IL-10、TNF- $\alpha$  的水平明显高于恢复期[(47.5 ± 17.7) pg/mL 比 (22.3 ± 6.5) pg/mL, (7.5 ± 1.3) pg/mL 比 (5.3 ± 2.1) pg/mL, (123.4 ± 5.3) pg/mL 比 (71.3 ± 5.4) pg/mL], 差异均有统计学意义( $t = 7.57, 8.39, 11.57$ , 均  $P < 0.05$ )。结论 腺病毒肺炎患儿外周血以及支气管肺泡灌洗液中白细胞介素 6、白细胞介素 10 及肿瘤坏死因子  $\alpha$  水平显著性升高, 表明白细胞介素 6、白细胞介素 10 及肿瘤坏死因子  $\alpha$  可能在儿童腺病毒肺炎的发病中起着重要的作用。

**【关键词】** 肺炎; 腺病毒科感染; 白细胞介素 6; 白细胞介素 10; 肿瘤坏死因子  $\alpha$

**基金项目:** 浙江省温州市卫生科学计划项目(2015A10)

**The levels of interleukin -6, interleukin -10 and tumor necrosis factor  $\alpha$  in serum and bronchoalveolar lavage fluid of children with adenovirus pneumonia and its clinical significance** Jin Weimin, Zheng Ge, Huang Yumao, Jin Guoxin, Zhao Lifen.

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**【Abstract】 Objective** To detect the levels of interleukin -6 (IL -6), interleukin -10 (IL -10) and tumor necrosis factor - $\alpha$  (TNF - $\alpha$ ) in serum and bronchoalveolar lavage fluid of children with adenovirus pneumonia, and compared with the healthy control group, and to explore the correlation with the clinical manifestations of adenovirus pneumonia. **Methods** Enzyme linked immunosorbent assay (ELISA) was used to detect IL -6, IL -10 and TNF - $\alpha$  levels in serum and bronchoalveolar lavage fluid of 40 children with adenovirus pneumonia and 20 healthy control children. **Results** The levels of IL -6, IL -10 and TNF - $\alpha$  in serum and bronchoalveolar lavage fluid of 40 children with adenovirus pneumonia were significantly higher than the control subjects (all  $P < 0.05$ ). In addition, the levels of IL -6, IL -10 and TNF - $\alpha$  in serum and bronchoalveolar lavage fluid of children in the acute phase were significantly higher than children in the recovery phase [(47.5 ± 17.7) pg/mL vs. (22.3 ± 6.5) pg/mL; (7.5 ± 1.3) pg/mL vs. (5.3 ± 2.1) pg/mL; (123.4 ± 5.3) pg/mL vs. (71.3 ± 5.4) pg/mL], the differences were statistically significant ( $t = 7.57, 8.39, 11.57$ , all  $P < 0.05$ ). **Conclusion** The levels of IL -6, IL -10 and TNF - $\alpha$  in peripheral blood and bronchoalveolar lavage fluid of children with adenovirus pneumonia increased significantly, suggest that IL -6, IL -10 and TNF - $\alpha$  may play important roles in the incidence of adenovirus pneumonia in children.

**【Key words】** Pneumonia; Adenoviridae infections; Interleukin -6; Interleukin -10; Tumor necrosis factor  $\alpha$

**Fund program:** Health Science Project of Wenzhou, Zhejiang Province (2015A10)

# 原发性胆汁性肝硬化患者抗着丝粒抗体与慢性肾功能损伤的相关性研究

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**【摘要】 目的** 了解原发性胆汁性肝硬化(PBC)患者的肾功能与抗着丝粒抗体(ACA)的相关性。**方法** 对 54 例 PBC 患者进行了连续 12 个月的分析。并计算 PBC 患者年内的肾小球滤过率(eGFR)年降低率。用线性回归分析和 logistic 回归分析对与 eGFR 降低相关的因素进行评定。**结果** 54 例 PBC 患者中 ACA 阳性患者 24 例(44%),阴性患者 30 例(56%)。ACA 阳性患者 eGFR 较阴性患者显著降低,差异有统计学意义 [63.7(46.8 ~ 67.8) 比 77.2(67.4 ~ 92.7) mL · min<sup>-1</sup> · (1.73 m<sup>2</sup>)<sup>-1</sup>,  $P=0.005$ ], eGFR 年降低率更高 [-2.75(-7.65 ~ -0.45) 比 0.50(-3.12 ~ -2.73) mL · min<sup>-1</sup> · (1.73 m<sup>2</sup>)<sup>-1</sup>,  $P=0.01$ ], 慢性肾病患病率显著高于阴性组(54% 比 4%,  $P=0.001$ )。对包括年龄、性别、eGFR、糖尿病和高血压等潜在危险因素的单变量和多变量回归分析显示,ACA 与 eGFR 的降低有相关性( $P$  值分别为 0.019 和 0.021)。**结论** ACA 是 PBC 患者发生 CKD 的独立危险因子。ACA 和肾功能关系的评估对预防 PBC 患者进展为慢性肾病具有重要意义。

**【关键词】** 肝硬化,胆汁性; 肾功能衰竭,吸收; 着丝粒; 肾小球滤过率

**基金项目:**江苏省苏州市科教兴卫青年项目(KJXW2014046);江苏省常熟市科技发展项目(CS201313)

## Correlation between anti-centromere antibody and chronic kidney disease in primary biliary cirrhosis

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**【Abstract】 Objective** To investigate the correlation between anti-centromere antibody (ACA) and kidney function in primary biliary cirrhosis (PBC). **Methods** 54 patients diagnosed as PBC were retrospectively analyzed for a follow-up period of 12 months. The annual rate of estimated glomerular filtration rate (eGFR) decline within 1 year after the diagnosis were evaluated. The factors associated with eGFR decline were evaluated by linear regression analysis and logistic regression analysis. **Results** 54 PBC patients were included, 24 case (44%) of whom had ACA. The patients with ACA had a lower eGFR [63.7(46.8 - 67.8) mL · min<sup>-1</sup> · (1.73m<sup>2</sup>)<sup>-1</sup> vs. 77.2(67.4 - 92.7) mL · min<sup>-1</sup> · (1.73m<sup>2</sup>)<sup>-1</sup>,  $P=0.005$ ], a higher rate of annual eGFR decline [-2.75(-7.65 - -0.45) mL · min<sup>-1</sup> · (1.73m<sup>2</sup>)<sup>-1</sup> vs. 0.50(-3.12 - -2.73) mL · min<sup>-1</sup> · (1.73m<sup>2</sup>)<sup>-1</sup>,  $P=0.01$ ] and a higher rate of chronic kidney disease (CKD) (54% vs. 4%,  $P=0.001$ ). Univariate regression analysis and multivariate regression analysis adjusted for potential cofounders including age, eGFR, sex, diabetes mellitus and hypertension showed that ACA was associated with eGFR decline ( $P=0.019$  and 0.021, respectively). **Conclusion** ACA is an independent risk factor for CKD in PBC. Evaluation of ACA and kidney function is necessary to prevent CKD progression in PBC patients.

**【Key words】** Liver cirrhosis, biliary; Kidney failure, absorption; Centromere; Glomerular filtration rate

**Fund program:** Teaching and Scientific Research Project of Suzhou for Young Scholars (KJXW2014046); Scientific and Technologic Development Programme of Changshu (CS201313)

# 胃炎散颗粒治疗肝胃不和型慢性浅表性胃炎 临床疗效研究

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**【摘要】 目的** 探讨胃炎散颗粒治疗肝胃不和型慢性浅表性胃炎的疗效及安全性。**方法** 将 64 例肝胃不和型慢性浅表性胃炎患者,按数字表法随机分为治疗组 32 例和对照组计 32 例,治疗组口服胃炎散颗粒;对照组口服替普瑞酮胶囊。两组均以 8 周为 1 个疗程。比较两组疗效及不良反应。**结果** 治疗组总有效率为 90.6%,明显优于对照组的 84.4%,差异有统计学意义( $\chi^2 = 2.015, P < 0.05$ )。两组均无严重不良反应。**结论** 胃炎散颗粒治疗肝胃不和型慢性浅表性胃炎疗效确切,安全且无任何不良反应。

**【关键词】** 胃炎; 胃炎散; 医学,中国传统

**基金项目:**安徽省卫生和计划生育委员会中医药科研课题(2014zy108)

**Research on clinical effect of Gastritis drug granule on treating in - coordination between liver and stomach syndrome of chronic superficial gastritis** Wang Junfei, Zhang Aining, Wang Qin, Guo Bin, Pang Jing.

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**【Abstract】 Objective** To explore the clinical effect and safety of Gastritis drug granule on treating in - coordination between liver and stomach syndrome of chronic superficial gastritis. **Methods** According to the digital table, 64 patients with in - coordination between liver and stomach syndrome of chronic superficial gastritis were randomly divided into treatment group and control group, 32 cases in each group. The treatment group was treated by Gastritis drug granule, while the control group was treated by teprenone. The treatment course was 8 weeks. The clinical efficacy and safety were compared between the two groups. **Results** The comprehensive effect of the treatment group was 90.6%, which was higher than 84.4% of the control group, the difference was statistically significant ( $\chi^2 = 2.015, P < 0.05$ ). There were no serious adverse reactions in the two groups. **Conclusion** Gastritis drug granule is safe and effective for curing liver and stomach syndrome of chronic superficial gastritis and can significantly improve the clinical symptoms of the CSG patients.

**【Key words】** Gastritis; Gastritis drug granule; Medicine, Chinese traditional

**Fund program:** Traditional Chinese Medicine Project of Anhui Provincial Health and Family Planning Commission Committee(2014zy108)

# 急诊胆总管探查并肝左外叶切除 37 例 临床疗效分析

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**【摘要】 目的** 探讨急性梗阻性胆管炎行急诊胆总管探查并肝左外叶切除的治疗效果及安全性。**方法** 采用回顾性描述性研究方法, 收集 2010 年 1 月至 2015 年 1 月商洛市中心医院收治的 37 例急性胆总管探查合并行左外叶切除治疗肝内外胆管结石患者的临床资料。患者行急诊胆总管探查及肝左外叶切除术。观察指标: (1) 患者手术情况。(2) 主要并发症: 术后胆漏、结石残留、术中出血情况。(3) 术后患者的引流、结石残留及恢复情况。**结果** 37 例患者手术时间 90 ~ 180 min, 平均手术时间 120 min, 肝左外叶切除时间平均 23 min, 平均出血量 80 mL, 胆管结石残留 3 例, 术中胆道出血 3 例, 术后残端胆漏 1 例, 术后病理检查回报肝内胆管癌 1 例。**结论** 急诊行胆总管探查及肝左外叶切除是安全可行的手术方式, 可以避免术中结石残留左叶, 又可避免术后左外叶的再感染及结石再生。

**【关键词】** 胆管炎; 胆汁淤积; 肝切除术; 急诊处理

**Clinical effect of 37 cases of emergency common bile duct exploration and left lateral lobectomy** Feng Lifeng, Li Bin, Mei Yong, Liu Aijun.

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**【Abstract】 Objective** To investigate the therapeutic effect and safety of acute obstructive cholangitis underwent emergency exploration of common bile duct and left hepatic lobectomy. **Methods** A retrospective descriptive study was used. The clinical data of 37 cases of acute common bile duct exploration with left lateral lobectomy in the Central Hospital of Shangluo from January 2015 to January 2010 were collected. The patients received emergency common bile duct exploration and left lateral lobectomy of the liver. Outcome measures: (1) patients with surgery; (2) major complications: postoperative bile leakage, residual stones, intraoperative bleeding; (3) postoperative drainage, residual stones and recovery of patients. **Results** 37 patients was performed in 16 cases, the average operation time was 120min, hepatic left lateral lobe resection average 23min, average amount of bleeding was 80mL. Postoperative stump 1 case of bile leakage, bile duct stones residue in 3 cases, intraoperative bleeding in 3 cases, postoperative return pathology intrahepatic cholangiocarcinoma in 1 case. **Conclusion** Emergency treatment of common bile duct exploration and left lateral lobectomy is a safe and feasible surgical approach, which can avoid the the reinfection of left lateral lobe.

**【Key words】** Cholangitis; Cholestasis; Hepatectomy; Emergency treatment

# 右美托咪定联合地佐辛用于纤维支气管镜检查的临床研究

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**【摘要】 目的** 评价右美托咪定联合地佐辛用于纤维支气管镜(纤支镜)检查的效果。**方法** 择期行纤支镜检查患者 40 例,ASA I 级或 II 级,采用数字表法随机分为两组:右美托咪定复合地佐辛组(A 组)和 0.9% 氯化钠注射液复合地佐辛对照组(B 组),每组 20 例。两组术前均使用 2% 利多卡因超声雾化吸入行局部表面麻醉。记录两组患者给药前( $T_1$ )、静脉泵注药物 15 min 后( $T_2$ )、纤支镜入声门即刻( $T_3$ )、纤支镜入声门后 3 min( $T_4$ )、检查结束后患者完全清醒时( $T_5$ )的平均动脉压(MAP)、心率(HR)和脉搏血氧饱和度( $SpO_2$ )。记录两组患者检查时间、术后不适度视觉模拟评分(VAS)、重复检查的依从性评分。**结果** 40 例患者均顺利完成纤支镜检查。A 组检查时间、术后 VAS 评分、重复检查的依从性评分分别为( $8 \pm 2$ ) min、( $2 \pm 2$ )分、( $3 \pm 2$ )分,均低于 B 组的( $10 \pm 3$ ) min、( $7 \pm 2$ )分、( $7 \pm 3$ )分( $t = 3.17, 10.46, 8.78$ , 均  $P < 0.05$ )。A 组  $T_3$ 、 $T_4$ 、 $T_5$  的 MAP 分别为( $90 \pm 10$ ) mmHg、( $86 \pm 11$ ) mmHg、( $81 \pm 9$ ) mmHg,较 B 组的( $115 \pm 15$ ) mmHg、( $100 \pm 14$ ) mmHg、( $96 \pm 13$ ) mmHg 降低( $t = 11.93, 9.96, 7.37$ , 均  $P = 0.00$ ),A 组  $T_2$ 、 $T_3$ 、 $T_4$ 、 $T_5$  的 HR 分别为( $73 \pm 12$ )次/min、( $90 \pm 13$ )次/min、( $85 \pm 11$ )次/min、( $78 \pm 10$ )次/min,较 B 组的( $88 \pm 15$ )次/min、( $112 \pm 21$ )次/min、( $101 \pm 18$ )次/min、( $96 \pm 16$ )次/min 降低( $t = 7.96, 16.79, 9.58, 7.98$ , 均  $P = 0.00$ )。两组组间各时点脉搏血氧饱和度差异均无统计学意义(均  $P > 0.05$ )。**结论** 右美托咪定联合地佐辛可安全有效地用于纤支镜检查。

**【关键词】** 支气管镜检查; 右美托咪定; 地佐辛

## Evaluation of the effects of intravenous pump infusion with dexmedetomidine and dezocine on flexible fiberoptic bronchoscopy

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**【Abstract】 Objective** To evaluate the effects of intravenous pump infusion with dexmedetomidine and dezocine on flexible fiberoptic bronchoscopy (FFB). **Methods** Forty ASA I or II patients undergoing elective FFB were randomly divided into two groups, 20 cases in each group. The intravenous anesthesia group was given dexmedetomidine and dezocine (group A), the control group was given 0.9% sodium chloride injection and dezocine (group B). All patients received airway local topical anesthesia with 2% lidocaine before the procedure. MAP, HR and  $SpO_2$  were continuously monitored and recorded pre-administration ( $T_1$ , baseline), 15 min after pump infusion ( $T_2$ ), immediately and 3 min after intubation ( $T_3, T_4$ ), after FFB ( $T_5$ ). The persistence time of the procedure was noted. All patients were interviewed for the global tolerance to the procedure, the acceptance of another fiberoptic bronchoscopy and the degree of amnesia. **Results** All of the forty patients finished FFB successfully. The persistence time, global tolerance to the procedure and the acceptance of another FFB in group A [( $8 \pm 2$ ) min, ( $2 \pm 2$ ) points, ( $3 \pm 2$ ) points] were significantly lower than those in group B [( $10 \pm 3$ ) min, ( $7 \pm 2$ ) points, ( $7 \pm 3$ ) points] ( $t = 3.17, 10.46, 8.78$ , all  $P < 0.05$ ). MAP at  $T_3 - 5$  in group A [( $90 \pm 10$ ) mmHg, ( $86 \pm 11$ ) mmHg, ( $81 \pm 9$ ) mmHg] were significantly decreased compared with the group B [( $115 \pm 15$ ) mmHg, ( $100 \pm 14$ ) mmHg, ( $96 \pm 13$ ) mmHg] ( $t = 11.93, 9.96, 7.37$ , all  $P = 0.00$ ). HR at  $T_2 - 5$  in group A [( $73 \pm 12$ ) times/min, ( $90 \pm 13$ ) times/min, ( $85 \pm 11$ ) times/min, ( $78 \pm 10$ ) times/min] were significantly decreased compared with those in the control group [( $88 \pm 15$ ) times/min, ( $112 \pm 21$ ) times/min, ( $101 \pm 18$ ) times/min, ( $96 \pm 16$ ) times/min] ( $t = 7.96, 16.79, 9.58, 7.98$ , all  $P = 0.00$ ). There were no significant differences in oxygen saturation between the two groups ( $P > 0.05$ ). **Conclusion** Intravenous pump infusion with dexmedetomidine and dezocine is safe and effective for FFB.

**【Key words】** Bronchoscopy; Dexmedetomidine; Dezocine

# 宫腔镜检查在反复自然流产患者中的应用价值

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**【摘要】 目的** 评价宫腔镜检查在反复自然流产患者诊治中的应用价值,了解反复自然流产患者宫腔内可能存在的致病因素。**方法** 对就诊并进行宫腔镜检查的反复自然流产患者 192 例的临床资料进行回顾性分析,按反复自然流产次数分为三组,A 组:2 次流产组;B 组:3 次流产组;C 组:>3 次流产。分析各组宫腔异常检出率。**结果** 192 例反复自然流产患者宫腔异常检出率 54.7%,其中宫腔粘连检出率达 34.4%;B 组、C 组宫腔异常和宫腔粘连检出率(B 组:宫腔异常检出率 67.1%、宫腔粘连检出率 45.6%,C 组:宫腔异常检出率 77.8%、宫腔粘连检出率 50.0%)均高于 A 组(宫腔异常检出率 40.0%、宫腔粘连检出率 22.1%),差异均有统计学意义( $\chi^2_{AB} = 12.69, \chi^2_{AC} = 8.69; \chi^2_{AB} = 10.78, \chi^2_{AC} = 5.47$ , 均  $P < 0.05$ );B 组与 C 组宫腔异常和宫腔粘连检出率差异无统计学意义( $\chi^2 = 0.78, 0.12$ , 均  $P > 0.05$ )。同时发现其他宫腔异常,包括子宫畸形 14 例(7.3%)、子宫内膜息肉 12 例(6.3%)、子宫内膜炎 9 例(4.7%)、宫颈机能不全 2 例(1.0%)、黏膜下肌瘤 1 例(0.5%)、妊娠物残留 1 例(0.5%)。**结论** 宫腔镜检查是一项无创、直观、安全高效的检查方法,应对反复自然流产患者常规进行宫腔镜检查,及时发现宫腔内可能存在的致病因素并给予治疗以改善妊娠结局。

**【关键词】** 宫腔镜检查; 流产,自然; 宫腔异常; 宫腔粘连

**Application value of hysteroscopy in patients of recurrent spontaneous abortion** Li Wenyuan, Wang Zhiyong, Han Yufen, Zhang Chenjing, Pei Xiaojie, Li Li, Peng Fangmin.

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**【Abstract】 Objective** To evaluate the application value of hysteroscopy in the diagnosis and treatment of recurrent spontaneous abortion patients, and to understand the possible pathogenic factors of recurrent spontaneous abortion. **Methods** A retrospective study was performed to analyze the findings of 192 cases of recurrent spontaneous abortion, who underwent hysteroscopy examination. According to the number of recurrent spontaneous abortion, they were divided into three groups, group A: 2 times abortion group; group B: 3 times abortion group; group C: >3 times abortion group. Then, intrauterine adhesions detection rate was analyzed. **Results** Of the 192 cases of recurrent spontaneous abortion, the detective rate of uterine abnormality was 54.7%, the intrauterine adhesion was 34.4%, and in group B and group C, the uterine abnormalities and intrauterine adhesions detection rates (group B: uterine abnormalities 67.1%, intrauterine adhesions detection rate 45.6%; group C: uterine abnormalities 77.8%, intrauterine adhesions detection rate 50.0%) were higher than group A (uterine abnormalities 40.0%, intrauterine adhesions detection rate 22.1%), the differences were significant ( $\chi^2_{AB} = 12.69, \chi^2_{AC} = 8.69; \chi^2_{AB} = 10.78, \chi^2_{AC} = 5.47$ , all  $P < 0.05$ ). The uterine abnormalities and intrauterine adhesions detection rate had no significant difference between group B and group C ( $\chi^2 = 0.78, 0.12$ , all  $P > 0.05$ ). Also found other uterine abnormalities, including uterine malformation 14 cases (7.3%), 12 cases (6.3%) of endometrial polyps, endometritis in 9 cases (4.7%), cervical insufficiency in 2 cases (1.0%), submucous myoma in 1 case (0.5%), pregnancy residues in 1 case (0.5%). **Conclusion** Hysteroscopy is a noninvasive, intuitive, safe and efficient check. Recurrent spontaneous abortion patients should be routinely performed hysteroscopy, timely detection of pathogenic factors may exist in the uterine and give treatment to improve the pregnancy outcome.

**【Key words】** Hysteroscopy; Abortion, spontaneous; Uterine abnormalities; Intrauterine adhesion

# 重症急性胰腺炎患者肠道菌群、肠道屏障功能变化及益生菌的干预效果

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**【摘要】 目的** 研究重症胰腺炎患者肠道菌群、肠道黏膜屏障的变化及肠道益生菌的干预效果。**方法** 选择重症胰腺炎患者 36 例为研究对象,采用数字表法随机分为观察组和对照组,各 18 例。对照组给予重症胰腺炎的常规治疗,观察组在胰腺炎常规治疗的基础上给予肠道益生菌。观察胰腺炎对肠道菌群的影响及益生菌的干预作用。**结果** 治疗后,观察组双歧杆菌、乳酸杆菌含量分别为  $(6.54 \pm 1.78) \ln/g$ 、 $(7.36 \pm 1.58) \ln/g$ ,明显高于对照组 [ $(4.35 \pm 1.12) \ln/g$ 、 $(4.38 \pm 1.29) \ln/g$ ] ( $t=3.78, 4.15, P<0.05$ );而大肠杆菌、肠球菌含量分别为  $(7.86 \pm 1.98) \ln/g$ 、 $(5.21 \pm 0.96) \ln/g$ ,低于对照组的  $(8.96 \pm 1.87) \ln/g$ 、 $(6.65 \pm 1.78) \ln/g$ ,差异均有统计学意义 ( $t=3.65, 3.67$ , 均  $P<0.05$ )。治疗后,观察组内毒素、血浆二胺氧化酶(DAO)、D-乳糖水平分别为  $(20.54 \pm 6.37) \text{pg/mL}$ 、 $(4.38 \pm 1.20) \text{U/mL}$ 、 $(6.36 \pm 1.64) \text{mg/L}$ ,均明显低于对照组的  $(50.97 \pm 9.94) \text{pg/mL}$ 、 $(5.89 \pm 1.29) \text{U/mL}$ 、 $(9.17 \pm 1.97) \text{mg/L}$  ( $t=3.46, 3.14, 4.06$ , 均  $P<0.05$ )。观察组有效率为 94.4%,高于对照组的 88.8%,两组差异有统计学意义 ( $\chi^2=4.15, P<0.05$ )。**结论** 肠道益生菌有助于改善重症胰腺炎患者肠道菌群和肠道黏膜功能,值得临床推广运用。

**【关键词】** 胰腺炎; 急性坏死性; 肠杆菌科; 肠道屏障; 益生菌

## The changes of intestinal microflora and intestinal epithelial barrier in patients with severe acute pancreatitis and the effect of probiotics Zhou Fengwei.

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**【Abstract】 Objective** To study the changes of intestinal microflora and intestinal epithelial barrier in patients with severe acute pancreatitis and the effect of probiotics. **Methods** 36 cases of severe acute pancreatitis were selected as the research subjects. They were randomly divided into observation group and control group. 18 cases in the control group were given the conventional treatment for severe acute pancreatitis, the observation group was given intestinal probiotics based on routine treatment for pancreatitis. The effect of pancreatitis on intestinal flora and the intervention effect of probiotics were observed. **Results** After treatment, the contents of Bifidobacterium and lactobacillus in the observation group were  $(6.54 \pm 1.78) \ln/g$ 、 $(7.36 \pm 1.58) \ln/g$ , which were significantly higher than those in the control group [ $(4.35 \pm 1.12) \ln/g$ 、 $(4.38 \pm 1.29) \ln/g$ ] ( $t=3.78, 4.15$ , all  $P<0.05$ ); and Escherichia coli and Enterococcus contents were  $(7.86 \pm 1.98) \ln/g$ 、 $(5.21 \pm 0.96) \ln/g$ , which were lower than those of the control group [ $(8.96 \pm 1.87) \ln/g$ 、 $(6.65 \pm 1.78) \ln/g$ ], the differences were statistically significant ( $t=3.65, 3.67$ , all  $P<0.05$ ). After treatment, the levels of plasma endotoxin, diamine oxidase(DAO), D-lactose of the observation group were  $(20.54 \pm 6.37) \text{pg/mL}$ 、 $(4.38 \pm 1.20) \text{U/mL}$ 、 $(6.36 \pm 1.64) \text{mg/L}$ , which were significantly lower than those of the control group [ $(50.97 \pm 9.94) \text{pg/mL}$ 、 $(5.89 \pm 1.29) \text{U/mL}$ 、 $(9.17 \pm 1.97) \text{mg/L}$ ] ( $t=3.46, 3.14, 4.06$ , all  $P<0.05$ ). The effective rate of the observation group was 94.4%, which was higher than 88.8% of the control group, there was significant difference between the two groups ( $\chi^2=4.15, P<0.05$ ). **Conclusion** The intestinal probiotics can help to improve the intestinal microflora and intestinal epithelial barrier in patients with severe acute pancreatitis, it is worthy of clinical application.

**【Key words】** Pancreatitis, acute necrosis; Enterobacteriaceae; Intestinal epithelial barrier; Probiotics

# 白细胞介素-2 治疗带状疱疹的临床效果观察

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**【摘要】 目的** 观察白细胞介素-2(IL-2)对带状疱疹的治疗效果。**方法** 142 例带状疱疹患者以随机数字表法分成治疗组和对照组,109 例患者完成临床观察(治疗组 48 例,对照组 61 例)。治疗组 IL-2 50 万 IU,肌内注射,1 次/d,疗程 7 d;对照组伐昔洛韦 300 mg,口服,2 次/d,疗程 7 d。两组患者均外用酞丁安软膏。比较两组疗效。**结果** 治疗组和对照组第 3 天止痛显效及有效率分别为 87.5%、68.9%,两组差异有统计学意义( $\chi^2 = 4.917, P < 0.05$ );第 3 天止疱有效及显效率分别为 95.8%、82.0%,两组差异有统计学意义( $\chi^2 = 5.285, P < 0.05$ );第 7 天止痛显效及有效率分别为 93.8%、78.7%,两组差异有统计学意义( $\chi^2 = 4.866, P < 0.05$ )。**结论** IL-2 治疗带状疱疹可以促进止疱,镇痛效果也较为显著。

**【关键词】** 疱疹,带状; 白细胞介素 2; 治疗结果

**Clinical efficacy of interleukin - 2 injection for the treatment of herpes zoster** Xu Jianrong, Ding Yixing, Xia Fulin.

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**【Abstract】 Objective** To evaluate the efficacy of interleukin - 2 in the treatment of herpes zoster. **Methods** 142 patients with herpes zoster were enrolled and randomly divided into the treatment group and control group to receive interleukin - 2 injection 500 thousand IU a day or valaciclovir 300mg two times a day respectively for a week. Patients in two groups both received ftibamzone ointment. The evaluations of neuropathic pain were done by using visual analogue scale (VAS) before and during the treatment. The effect was compared between the two groups.

**Results** Significant differences were observed between the treatment group and control group in the effective rate of blister drying (95.8% vs. 82.0%,  $\chi^2 = 4.917, P < 0.05$ ) and analgesia (87.5% vs. 68.9%,  $\chi^2 = 5.285, P < 0.05$ ) on the third day, and the effective rate of analgesia on the seventh day (93.8% vs. 78.7%,  $\chi^2 = 4.866, P < 0.05$ ).

**Conclusion** Interleukin - 2 is effective for the treatment of herpes zoster in shortening the course of blister drying and especially in relieving the pain.

**【Key words】** Herpes, zoster; Interleukin 2; Treatment outcome



# 复方甘草酸苷对过敏性紫癜患儿细胞免疫功能及血清细胞因子水平的影响

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**【摘要】** **目的** 探讨复方甘草酸苷对过敏性紫癜患儿细胞免疫功能及血清中细胞因子水平的影响。**方法** 确诊的 60 例过敏性紫癜患儿随机数表法均分为观察组和对照组, 每组 30 例。对照组患儿均采用对症治疗及常规护理, 观察组患儿采用复方甘草酸苷治疗。观察两组患儿过敏性紫癜症状改善情况、Treg 细胞及 Th17 细胞转阳率以及 IL-10、IL-12 和 IL-1 $\beta$  细胞因子的水平变化。**结果** 经分析比较, 观察组的皮疹、腹痛以及关节症状改善有效率分别为 93.3%、87.7% 及 76.7%, 优于对照组 57.6%、56.7% 及 50.0%, 差异均有统计学意义 ( $\chi^2 = 5.455, 6.648, 3.890$ , 均  $P < 0.05$ ); 观察组治疗后外周血 Treg 细胞及 Th17 细胞比例分别为 7.77% 和 0.46%, 优于对照组的 6.14% 和 0.60%, 差异有统计学意义 ( $t = 2.391, 2.355$ , 均  $P < 0.05$ ); 观察组治疗后 IL-10、IL-12 和 IL-1 $\beta$  细胞因子分别为  $(46.26 \pm 6.37)$  pg/mL、 $(117.36 \pm 12.76)$  pg/mL 和  $(6.69 \pm 1.23)$  pg/mL, 均高于对照组的  $(29.43 \pm 4.77)$  pg/mL、 $(89.46 \pm 8.38)$  pg/mL、 $(4.23 \pm 1.06)$  pg/mL, 差异均有统计学意义 ( $t = 11.583, 10.010, 8.298$ , 均  $P < 0.05$ )。**结论** 复方甘草酸苷对调节过敏性紫癜患儿细胞免疫功能及血清中细胞因子水平等方面具有一定的促进作用。

**【关键词】** 复方甘草酸苷; 过敏性紫癜; 细胞免疫; 细胞因子

## Effect of compound glycyrrhizin on levels of cytokines and cellular immune function in children with Henoch - Schonlein purpura Hu Xiaozhong.

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**【Abstract】** **Objective** To explore the effect of compound glycyrrhizin on the cellular immune function and the levels of cytokines in serum of children with Henoch - Schonlein purpura. **Methods** 60 cases of allergic purpura were selected and randomly divided into observation group and control group. The control group were treated with symptomatic treatment and routine nursing care, the observation group was treated with compound glycyrrhizin. The improvement of symptoms of the two groups, Treg cell and Th17 cell positive rates, as well as the levels of IL - 10, IL - 12 and IL - 1 $\beta$  beta were observed. **Results** After analysis and comparison, the effective rates of rash, abdominal pain and joint symptoms in the observation group were 93.30%, 87.70% and 76.70% respectively, which were significantly higher than 57.60%, 56.70% and 50.00% in the control group, the differences were statistically significant ( $\chi^2 = 5.455, 6.648, 3.890$ , all  $P < 0.05$ ). The proportions of Treg cells and Th17 cells in peripheral blood after treatment in the observation group were 7.77% and 6.14%, which were significantly higher than those of the control group (0.60% and 0.46%), and the differences were statistically significant ( $t = 2.391, 2.355$ , all  $P < 0.05$ ). After treatment, the levels of IL - 10, IL - 12 and IL - 1 $\beta$  beta in the observation group were  $(46.26 \pm 6.37)$  pg/mL,  $(117.36 \pm 12.76)$  pg/mL,  $(6.69 \pm 1.23)$  pg/mL, which were higher than those of the control group  $(29.43 \pm 4.77)$  pg/mL,  $(89.46 \pm 8.38)$  pg/mL,  $(4.23 \pm 1.06)$  pg/mL, the differences were statistically significant ( $t = 11.583, 10.010, 8.298$ , all  $P < 0.05$ ). **Conclusion** The effect of compound glycyrrhizin on the cellular immune function and the level of cytokines in serum of children with Henoch - Schonlein purpura is good.

**【Key words】** Compound glycyrrhizin; Henoch - Schonlein purpura; Cellular immunity; Cytokines

# 事件相关电位 P300 在卒中后抑郁 早期诊治中的临床应用

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**【摘要】** 目的 探讨事件相关电位 P300 在卒中后抑郁早期筛查和早期干预中的作用。方法 选择 67 例首发脑卒中患者,在病程 2 周时行汉密尔顿抑郁量表评分,分为轻度 PSD 组( $n=15$ )、中度 PSD 组( $n=11$ )、重度 PSD 组( $n=4$ )和无抑郁组( $n=37$ ),所有患者均行 P300 检查;30 例 PSD 患者采用数字表法随机分为两组,氟西汀干预组( $n=15$ )和未干预组( $n=15$ ),病程 3 个月时再次行 P300 检查。结果 PSD 组的 P300 潜伏期为( $351.30 \pm 22.48$ )ms,与无抑郁组潜伏期( $320.92 \pm 15.45$ )ms 比较明显延长,差异有统计学意义( $t = -6.295, P < 0.01$ );PSD 组的 P300 波幅为( $5.09 \pm 1.47$ ) $\mu V$  亦较无抑郁组的( $6.47 \pm 1.74$ ) $\mu V$  明显降低,差异有统计学意义( $t = 3.475, P < 0.01$ )。四组间 P300 的潜伏期比较差异有统计学意义( $F = 24.484, P < 0.01$ ),其中中度 PSD 组 P300 的潜伏期[( $362.73 \pm 20.56$ )ms]与重度 PSD 组 P300 潜伏期[( $369.75 \pm 22.54$ )ms]均较无抑郁组[( $320.92 \pm 15.45$ )ms]和轻度 PSD 组[( $338.00 \pm 15.70$ )ms]明显延长,差异均有统计学意义(均  $P < 0.05$ )。但中度 PSD 组和重度 PSD 组比较,P300 潜伏期、波幅差异均无统计学意义(均  $P > 0.05$ )。使用氟西汀干预组在病程 3 个月时 P300 潜伏期[( $326.40 \pm 24.42$ )ms]较治疗前[( $356.13 \pm 25.76$ )ms]明显缩短,差异有统计学意义( $t = 5.173, P < 0.01$ ),与未干预组病程 3 个月时[( $342.07 \pm 21.24$ )ms]比较,差异亦有统计学意义( $t = 2.058, P < 0.05$ )。结论 P300 可以作为早期筛查诊断 PSD 的客观指标,而早期进行抗抑郁干预治疗,可促进神经功能的恢复,改善 PSD 患者预后。

**【关键词】** 抑郁; 卒中; 事件相关电位,P300; 氟西汀

## Clinical study of event-related potential P300 in early diagnosis and treatment of post-stroke depression

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**【Abstract】 Objective** To explore the role of event-related potential P300 in early diagnosis and treatment of post-stroke depression. **Methods** Hamilton depression rating scale (HAMD) assessment was adopted to assess 67 patients of first time stroke at 2 weeks. The patients with stroke were divided into four groups: mild post-stroke depression group ( $n=15$ ), moderate post-stroke depression group ( $n=11$ ), severe post-stroke depression group ( $n=4$ ) and non-depression group ( $n=37$ ). 30 patients of post-stroke depression were divided into two groups randomly: treatment with fluoxetine 3 months ( $n=15$ ) and unused anti-depression drugs ( $n=15$ ). At 3 months, P300 was executed again in all of patients of post-stroke depression. **Results** The P300 latency of the patients of the post-stroke depression group[( $351.30 \pm 22.48$ )ms] was significantly prolonged than the patients of the non-depression group[( $320.92 \pm 15.45$ )ms] ( $t = -6.295, P < 0.01$ ), and the P300 amplitude of the patients of the post-stroke depression group [( $5.09 \pm 1.47$ ) $\mu V$ ] was also reduced significantly compared with the patients of the non-depression group [( $6.47 \pm 1.74$ ) $\mu V$ ] ( $t = 3.475, P < 0.01$ ). The P300 latency among the patients of the four groups had significant difference ( $F = 24.484, P < 0.01$ ). While the means of P300 latency of the patients in the moderate post-stroke depression group[( $362.73 \pm 20.56$ )ms] and the severe post-stroke depression group[( $369.75 \pm 22.54$ )ms] were obviously prolonged than that in the mild post-stroke depression group[( $338.00 \pm 15.70$ )ms] and the non-depression group[( $320.92 \pm 15.45$ )ms] (all  $P < 0.05$ ), but there was no difference in the P300 latency between the moderate post-stroke depression group and the severe post-stroke depression group. The mean score of P300 latency after treatment with fluoxetine in the post-stroke depression group[( $326.40 \pm 24.42$ )ms] was significantly shorten compared with ( $356.13 \pm 25.76$ )ms of before treatment ( $t = 5.173, P < 0.01$ ), and also obviously shorten than ( $342.07 \pm 21.24$ )ms of the unused anti-depression drugs group ( $t = 2.058, P < 0.05$ ). **Conclusion** P300 latency and amplitude may be used as an indicator in early diagnosis and treatment of post-stroke depression.

**【Key words】** Depression; Stroke; Event-related potentials, P300; Fluoxetine

# 宁泌泰胶囊联合西药治疗慢性前列腺炎的疗效及安全性观察

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**【摘要】 目的** 观察宁泌泰胶囊和左氧氟沙星及坦洛辛联合治疗慢性前列腺炎的疗效及安全性。**方法** 选择 126 例慢性前列腺炎患者, 采用数字随机法将患者分为两组, 每组各 63 例。对照组: 左氧氟沙星片 + 坦洛辛。观察组: 左氧氟沙星片 + 坦洛辛 + 宁泌泰胶囊。1 个疗程为 2 周, 2 个疗程后评价疗效。记录治疗前后慢性前列腺炎症状指数 (NIH-EPSI) 评分及前列腺液白细胞数目, 并且比较治疗前后两种疗法的疗效及安全性。**结果** 观察组治疗后前列腺液常规检查中白细胞计数低于对照组, 差异有统计学意义 ( $t = 7. 612, P < 0. 01$ )。观察组治疗后 NIH-CPSI 量表的疼痛或不适症状 [ $(5. 32 \pm 1. 67)$  分]、生活质量 [ $(3. 60 \pm 1. 34)$  分]、排尿症状 [ $(3. 28 \pm 0. 93)$  分]、总评分 [ $(13. 95 \pm 4. 77)$  分] 都低于对照组的 ( $9. 21 \pm 1. 88$ ) 分、( $4. 69 \pm 1. 43$ ) 分、( $4. 65 \pm 1. 20$ ) 分、( $20. 39 \pm 5. 24$ ) 分, 差异均有统计学意义 ( $t = 16. 786, 6. 987, 6. 641, 13. 876$ , 均  $P < 0. 01$ )。观察组总有效率为 87. 3%, 高于对照组的 66. 7%, 差异有统计学意义 ( $\chi^2 = 7. 987, P < 0. 05$ )。两组在治疗期间均未出现体位性低血压、药疹等不良反应。**结论** 宁泌泰胶囊和左氧氟沙星及坦洛辛联合治疗慢性前列腺炎疗效满意, 有良好的安全性。

**【关键词】** 前列腺炎; 左氧氟沙星; 坦洛辛; 宁泌泰

## Safety and efficacy of Ningmitai capsule combined with western medicine in the treatment of chronic prostatitis

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**【Abstract】 Objective** To observe the efficacy and safety of levofloxacin hydrochloride combined with Tensaw complex symplectic and Ningmitai in the treatment of chronic prostatitis. **Methods** 126 patients with chronic prostatitis were selected. The patients were randomly divided into two groups with 63 cases in each group. The control group was given levofloxacin tablets + tamsulosin hydrochloride. The observation group was given levofloxacin tablets + tamsulosin hydrochloride + Ningmitai capsule. The treatment course was 2 weeks. The therapeutic effect was evaluated after two courses of treatment. Chronic prostatitis symptom index (NIH - EPSI) score before and after treatment, and white blood cell of prostate were compared, and the therapeutic effect and safety of two treatments were compared before and after treatment. **Results** The white blood cell count in the observation group after treatment was lower than that of the control group, and the difference was statistically significant ( $t = 7. 612, P < 0. 01$ ). After treatment, in the observation group, the NIH - CPSI scale of pain or discomfort symptoms [ $(5. 32 \pm 1. 67)$  points], quality of life [ $(3. 60 \pm 1. 34)$  points] and voiding symptoms [ $(3. 28 \pm 0. 93)$  points], total score [ $(13. 95 \pm 4. 77)$  points] were lower than those of the control group [ $(9. 21 \pm 1. 88)$  points, ( $4. 69 \pm 1. 43$ ) points, ( $4. 65 \pm 1. 20$ ) points, ( $20. 39 \pm 5. 24$ ) points], the differences were statistically significant ( $t = 16. 786, 6. 987, 6. 641, 13. 876$ , all  $P < 0. 01$ ). The total effective rate of the observation group was 87. 3%, which was higher than 66. 7% of the control group, the difference was statistically significant ( $\chi^2 = 7. 987, P < 0. 05$ ). In the two groups, there were no adverse reactions during orthostatic hypotension, drug eruption etc. **Conclusion** Levofloxacin hydrochloride combined with Tensaw complex symplectic and Ningmitai has satisfactory effect in the treatment of chronic prostatitis, with good security.

**【Key words】** Prostatitis; Levofloxacin; Tamsulosin; Ningmitai

# 山东省高青县医院健康体检人群的血脂状况研究

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**【摘要】 目的** 了解山东省高青县医院健康体检人群的血脂状况及其影响因素,为建立健康的生活方式提供重要的理论依据。**方法** 前瞻性地选取 2013 年 9 月至 2015 年 8 月 367 例在高青县医院体检人群为研究对象,用全自动生化分析仪来检测所选研究对象血清中总胆固醇(TC)、甘油三酯(TG)、高密度脂蛋白胆固醇(HDL-C)、低密度脂蛋白胆固醇(LDL-C)、载脂蛋白 A(ApoA)及载脂蛋白 B(ApoB)的浓度,然后按研究对象的年龄、性别及可能的危险因素进行分组并将所检测的结果并进行统计分析。**结果** TC、TG、HDL-C、LDL-C 及 ApoB 随着年龄的增长均有增加的趋势( $F = 48.121, 51.343, 46.873, 47.342, 12.865, 53.012$ , 均  $P < 0.05$ ); TC、HDL-C 及 ApoA 在女性研究对象血清中的水平均明显高于男性( $t = 2.143, 1.669, 0.979$ , 均  $P < 0.05$ ), 而 TG 的水平明显低于男性( $t = 2.143, P < 0.05$ ); 脑力劳动人群血清的 TC、HDL-C 及 ApoA 水平明显高于进行体力劳动的人群( $t = 2.056, 5.721, 2.029$ , 均  $P < 0.05$ ); TC、TG、LDL-C 及 ApoB 在血清中的水平随着体质指数(BMI)的增加有逐渐增加的趋势( $F = 3.142, 7.355, 6.622, 5.012$ , 均  $P < 0.05$ ), 而 HDL-C 及 ApoA 在血清中的水平随着 BMI 的增加而有逐渐减少的趋势( $F = 4.379, 73.865$ , 均  $P < 0.05$ )。**结论** 高青县医院健康体检人群存在高脂血症状况,特别要注意老年、女性、脑力劳动及 BMI 高的人群的血脂。

**【关键词】** 血脂异常; 健康调查; 危险因素

**The blood lipid status study of the healthy check – up crowd in the People’s Hospital of Gaoqing county, Shandong province** Guo Jin’gang, Guo Jinhua.

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**【Abstract】 Objective** To know the blood lipid status and its influencing factors of the healthy check – up crowd in the People’s Hospital of Gaoqing County, Shandong, and to provide theoretical basis for a healthy lifestyle. **Methods** 367 cases for medical health examination were collected as the study subjects from September 2013 to August 2015 in our hospital. The concentrations of total cholesterol (TC), triglyceride (TG), high – density lipoprotein cholesterol (HDL – C), low density lipoprotein cholesterol (LDL – C), apolipoprotein A (ApoA) and apolipoprotein B (ApoB) in serum of the study subjects were detected with automatic biochemical analyzer. And then, the study subjects were grouped according to the age, gender and the possible risk factors. The results were analyzed. **Results** The concentrations of TC, TG, HDL – C, LDL – C and ApoB had increasing trends with age ( $F = 48.121, 51.343, 46.873, 47.342, 12.865, 53.012$ , all  $P < 0.05$ ). The levels of TC, HDL – C and ApoA in serum of women were significantly higher than those in men ( $t = 2.143, 1.669, 0.979$ , all  $P < 0.05$ ). The levels of TC, HDL – C and ApoA in serum of knowledge workers were significantly higher than the manual workers ( $t = 2.143, P < 0.05$ ). TC, TG, LDL – C and ApoB had the trends of increase gradually with the increase of the body mass index (BMI) ( $F = 3.142, 7.355, 6.622, 5.012$ , all  $P < 0.05$ ). HDL – C and ApoA had the trends of reduce gradually with the increase of the BMI ( $F = 4.379, 73.865$ , all  $P < 0.05$ ). **Conclusion** There is hyperlipidemia conditions in the health check – up crowd in the People’s Hospital of Gaoqing County, especially in the elderly, women, mental workers, and the high BMI should be pay more attention.

**【Key words】** Dyslipidemias; Health surveys; Risk factors

# 共情护理对甲状腺切除手术患者负性情绪与术后康复的效果评价

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**【摘要】 目的** 探讨共情护理对实施甲状腺切除手术患者负性情绪及术后康复的影响。**方法** 选取 128 例接受甲状腺切除术患者为研究对象,按照入院日期分为观察组 62 例与对照组 66 例,对照组给予常规护理模式,观察组在常规护理的基础上给予共情护理,比较 2 组患者负性情绪、术后康复及满意度。**结果** 干预后观察组 SAS 评分、SDS 评分均优于对照组[(35.09 ± 4.01) 分比 (44.70 ± 6.59) 分, (36.55 ± 4.12) 分比 (42.03 ± 7.62) 分,  $t = 4.693, 5.436$ , 均  $P < 0.05$ ]; 观察组颈部肿胀、声音嘶哑、低血钙行发生率(1.61%、0.00%、3.23%)明显较低对照组(6.06%、6.06%、7.58%),差异均有统计学意义( $\chi^2 = 3.572, 3.879, 4.002$ , 均  $P < 0.05$ ); 观察组对护理人员满意度明显高于对照组(95.16% 比 78.79%),差异有统计学意义( $\chi^2 = 4.275, P < 0.05$ )。**结论** 共情护理能有效地缓解甲状腺切除手术患者的紧张情绪,减少血压、心率的波动,使患者以最佳的状态接受和配合手术治疗,改善术后康复。

**【关键词】** 甲状腺切除术; 情绪障碍; 康复; 护理

## Effect of empathy nursing on the negative emotions and postoperative rehabilitation of thyroidectomy patients

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**【Abstract】 Objective** To investigate the effect of empathy nursing on the negative emotions and postoperative rehabilitation of thyroidectomy patients. **Methods** A total of 86 patients with thyroidectomy were chosen and were divided into the control group ( $n = 44$ ) and the observation group ( $n = 42$ ) according to the hospital date. The control group received conventional nursing mode, while the observation group was given empathy nursing. The negative emotions postoperative rehabilitation and satisfaction degree of patients were analyzed and compared between the two groups. **Results** After intervention, the SAS score, SDS score of the observation group were better than those of the control group, the differences were statistically significant [(35.09 ± 4.01) points vs. (44.70 ± 6.59) points, (36.55 ± 4.12) points vs. (42.03 ± 7.62) points,  $t = 4.693, 5.436$ , all  $P < 0.05$ ]. The incidence rates of swelling of the neck, hoarseness, hypocalcemia in the observation group (1.61%, 0.00%, 3.23%) were significantly lower than those of the control group (6.06%, 6.06%, 7.58%), the differences were statistically significant ( $\chi^2 = 3.572, 3.879, 4.002$ , all  $P < 0.05$ ). The satisfaction degree for nursing staff in the observation group was better than that in the control group (95.16% vs. 78.79%), the difference was statistically significant ( $\chi^2 = 4.275, P < 0.05$ ). **Conclusion** Empathy nursing can relieve the tension of patients who undergo thyroidectomy, it can reduce fluctuations of blood pressure and heart rates, help to successful completion of thyroidectomy, and improve postoperative rehabilitation.

**【Key words】** Thyroidectomy; Mood disorders; Rehabilitation; Nursing care

# 稳定型冠心病患者血清生化指标与焦虑抑郁状态的相关性研究

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**【摘要】** 目的 评估稳定型冠心病患者焦虑抑郁与 C 反应蛋白(CRP)、肌钙蛋白 T(TnT)以及氨基端前-B 型脑钠素(NT-proBNP)之间的关系。方法 120 例稳定型冠心病门诊患者,共四组:冠心病合并抑郁症组(MDD 组)、冠心病合并焦虑症组(GAD 组)、冠心病合并焦虑症抑郁组(MDD + GAD 组)及无精神障碍冠心病组,每组各 30 例。比较四组患者 CRP、TnT 及 NT-proBNP 的差异,并应用 Logistic 回归分析探索三者与焦虑抑郁之间的关系。结果 MDD 组、GAD 组、MDD + GAD 组的 CRP 水平[分别为:( $8.5 \pm 1.2$ ) mg/L、( $6.7 \pm 1.7$ ) mg/L、( $7.6 \pm 1.4$ ) mg/L]均明显高于无精神障碍组的( $5.1 \pm 2.4$ ) mg/L( $t = 6.940, P < 0.001; t = 2.978, P = 0.004; t = 4.928, P < 0.001$ )。Logistic 回归分析显示,CRP 水平与 GAD( $P = 0.04$ )、MDD( $P = 0.03$ )、MDD + GAD( $P = 0.03$ )以及受教育程度( $P = 0.004$ )之间显著相关;TnT 水平与高血脂( $P = 0.009$ )、肥胖或超重( $P = 0.04$ )和受教育程度( $P = 0.04$ )之间显著相关。NT-proBNP 水平和 2 型糖尿病显著相关( $P = 0.005$ )。结论 CRP 水平与稳定型冠心病合并焦虑抑郁障碍显著相关,可以此为依据对冠心病患者焦虑抑郁情绪进行识别,及时治疗。

**【关键词】** C 反应蛋白质; 焦虑; 抑郁; 冠状动脉疾病

## Analysis of correlation between C - reactive protein, troponin T, NT - proBNP and anxiety and depression in patients with stable coronary heart disease Yang Jimin, Su Yaling.

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**【Abstract】 Objective** To analyze the correlation between C - reactive protein (CRP), troponin T (TnT), NT - proBNP and anxiety and depression in patients with stable coronary heart disease (CHD). **Methods** 120 patients with stable CHD were divided into 4 groups: CHD with major depressive disorder (MDD), CHD with general anxiety disorder (GAD), CHD with MDD and GAD, CHD without mental disorders, and 30 cases in each group. CRP, TnT and NT - proBNP were compared among 4 groups, and the logistic regression analysis was applied to explore the relationship between them and anxiety/depression. **Results** The CRP levels in MDD group ( $8.5 \pm 1.2$ ) mg/L, GAD group ( $6.7 \pm 1.7$ ) mg/L, MDD + GAD group ( $7.6 \pm 1.4$ ) mg/L were significantly higher than those without mental disorders group ( $5.1 \pm 2.4$ ) mg/L ( $t = 6.940, P < 0.001; t = 2.978, P = 0.004; t = 4.928, P < 0.001$ ). Logistic regression showed that CRP level was significantly correlated with GAD ( $P = 0.04$ ), MDD ( $P = 0.03$ ), MDD + GAD ( $P = 0.03$ ), as well as education level ( $P = 0.004$ ). The TnT level was correlated with hyperlipidemia ( $P = 0.009$ ), obesity/overweight ( $P = 0.04$ ) and educational level ( $P = 0.04$ ). NT - proBNP was significantly related with type 2 diabetes ( $P = 0.005$ ). **Conclusion** CRP level is significantly associated with anxiety and depression in patients with stable CHD. CRP can be used to screen for anxiety and depression, and to provide timely treatment.

**【Key words】** C - reactive protein; Anxiety; Depression; Coronary artery disease

# 三种抗病毒药物联合用于艾滋病母婴传播 26 例预防效果观察

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**【摘要】** 目的 观察三种抗病毒药物联合用于阻断妊娠合并艾滋病母婴传播的疗效和安全性。方法 选择住院分娩的妊娠合并艾滋病患者 26 例, 孕期均采用三种抗病毒药物治疗, 监测用药期间孕妇的血常规、肝功能、CD<sub>4</sub><sup>+</sup> 细胞、及不良反应, 共安全分娩 26 例新生儿, 进行 18 个月的跟踪检测, 并分析阻断效果。结果 26 例孕妇抗病毒治疗前 CD<sub>4</sub><sup>+</sup> 低于正常值共 3 例, 分别为 (182/μL, 196/μL, 189/μL), 抗病毒治疗后 CD<sub>4</sub><sup>+</sup> 细胞为 (489/μL, 616/μL, 589/μL), 在正常范围, 抗病毒前后 CD<sub>4</sub><sup>+</sup> 细胞数量分别为 (413.5 ± 0.39)/μL、(435.6 ± 0.53)/μL, 差异无统计学意义 (P > 0.05)。孕妇服用抗病毒药物期间不良反应轻, 仅轻度贫血 3 例, 无其他严重不良反应发生, 26 例新生儿随访到 18 个月 HIV 抗体检测均为阴性, 无一例新生儿艾滋病感染。结论 三种抗病毒药物联合阻断妊娠合并艾滋病疗效满意, 建议及早抗病毒治疗, 抗病毒药物对孕妇治疗安全有效, 不良反应少。

**【关键词】** 抗病毒药; 妊娠; 获得性免疫缺陷综合征

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**Effect of three kinds of joint antiviral drugs on prevention of mother – to – child transmission of HIV/AIDS in 26 cases** Deng Fuying, Chen Rong, Liu Shourong, Zhang Suying.

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**【Abstract】 Objective** To observe the efficacy and safety of three antiviral drug combinations for blocking the pregnancy merge HIV mother – to – child transmission. **Methods** 26 pregnancy patients with HIV/AIDS in hospital delivery were chosen, adopted three kinds of antiviral drug treatment during pregnancy. During the treatment, the pregnant women blood routine, liver function, CD<sub>4</sub><sup>+</sup> cells, and adverse reactions were monitored. A total of 26 cases of newborn, safe childbirth for 18 months of tracking detection, and analyzed the blocking effect. **Results** Before antiviral therapy, of 26 pregnant women, CD<sub>4</sub><sup>+</sup> was lower than normal in 3 cases (182/μL, 196/μL, 189/μL), after antiviral treatment, the CD<sub>4</sub><sup>+</sup> cells levles were in the normal range (489/μL, 616/μL, 489/μL). Number of CD<sub>4</sub><sup>+</sup> cells before and after antiviral treatment were (413.5 ± 0.39)/μL, (435.6 ± 0.53)/μL respectively, there was no statistically significant difference (P > 0.05). Pregnant women who took antiviral drugs had light adverse reactions, only mild anemia (3 cases), no other serious adverse reactions. 26 cases of newborn were followed up to 18 months, they were negative for HIV antibody detection, no case of neonatal infection. **Conclusion** The effect of three kinds of antiviral drugs joint on the block pregnancy with AIDS is very significant, recommended the early antiviral treatment, antiviral therapy is safe and effective for the pregnant women, with less adverse reaction.

**【Key words】** Antiviral agents; Pregnancy; Acquired immunodeficiency syndrome

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# 恩替卡韦与替诺福韦酯初始治疗慢性乙型肝炎的疗效比较

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**【摘要】 目的** 比较恩替卡韦(ETV)与替诺福韦酯(TDF)初始治疗慢性乙型肝炎(CHB)患者的疗效和安全性。**方法** 选择 52 例 CHB 患者,采用数字表法随机分为 ETV 组(26 例)和 TDF 组(26 例),两组治疗后 4 周、8 周、12 周、24 周、36 周、48 周、72 周、96 周分别检测乙型肝炎病毒血清学标志物、HBV DNA 水平及血清丙氨酸氨基转移酶(ALT),并观察药物的安全性。**结果** 两组患者临床特征差异无统计学意义;ETV 组早期病毒学应答率低于 TDF 组(8 周,23.1% 比 50.0%, $\chi^2 = 4.266, P = 0.045$ ),但两组远期病毒学应答率(12~96 周)差异均无统计学意义(均  $P > 0.05$ );两组治疗后,血清 HBeAg 转阴率差异无统计学意义(均  $P > 0.05$ );两种药物均未见明显不良反应。**结论** 总体来说,ETV 和 TDF 抗病毒效果及安全性相当。

**【关键词】** 肝炎,乙型,慢性; 恩替卡韦; 替诺福韦酯

## Comparison of efficacy of tenofovir and entecavir in initial treatment of chronic hepatitis B virus infection

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**【Abstract】 Objective** To compare the effects and safety of entecavir(ETV) and tenofovir disoproxil fumarate(TDF) in initial treatment of patients with chronic hepatitis B virus infection. **Methods** 52 chronic HBV infection cases were randomly divided into initially treated with tenofovir(TDF group) or entecavir(ETV group) in this retrospective study. The following parameters were assessed: HBeAg status, serum alanine aminotransferase(ALT), and HBV-DNA levels at weeks 4, 8, 12, 24, 36, 48, 72, and 96; total duration of follow-up and adverse reactions. **Results** The clinical characteristics of two groups had no statistically significant difference. At 8 weeks, the response rate was significantly higher in the TDF group than in ETV group(23.1% vs. 50.0%, $\chi^2 = 4.266, P = 0.045$ ). Less patients administered ETV showed undetectable HBV-DNA levels compared with the TDF group in late treatment(weeks 12-96), the differences were not statistically significant(all  $P > 0.05$ ), as well as HBeAg seroconversion rate(all  $P > 0.05$ ). No adverse reactions were found. **Conclusion** ETV and TDF are comparable in efficacy and safety to suppress HBV-DNA replication in CHB patients.

**【Key words】** Hepatitis, type B, chronic; Entecavir; Tenofovir disoproxil fumarate



# 全身麻醉联合硬膜外阻滞麻醉对腹腔镜胆囊切除术患者应激反应的影响

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**【摘要】 目的** 比较全身麻醉联合硬膜外阻滞麻醉和单纯全身麻醉用于腹腔镜胆囊切除术对患者术中循环和应激反应的影响。**方法** 行腹腔镜胆囊切除术择期手术患者 60 例,采用随机数字表法分为全身麻醉复合硬膜外阻滞麻醉组(A组)和全身麻醉组(B组),每组 30 例,比较两组麻醉前 5 min(T<sub>0</sub>)、气腹后 15 min(T<sub>1</sub>)、和停气腹后 10 min(T<sub>2</sub>)的 MAP、HR、C-反应蛋白(CRP)、肾上腺素(E)和去甲肾上腺素(NE)浓度。**结果** B组 T<sub>1</sub>时的 MAP 和 HR[分别为(95.4±4.6)mmHg、(90.5±12.2)次/min]明显高于 A组[分别为(87.1±6.0)mmHg、(83.2±13.5)次/min]( $t_1=7.81, t_2=6.98$ , 均  $P<0.05$ );B组 T<sub>1</sub>、T<sub>2</sub>时的 E、NE 和 T<sub>2</sub>的 CRP[分别为(242.1±40.5)ng/L、(271.5±31.5)ng/L、(238.0±41.8)ng/L、(265.1±40.6)ng/L、(39.3±3.9)mg/L]均明显高于 A组[分别为(195.7±28.0)ng/L、(236.9±20.3)ng/L、(191.3±31.8)ng/L、(239.2±34.2)ng/L、(26.3±3.8)mg/L]( $t_1=10.02, t_2=8.06, t_3=9.42, t_4=8.69, t_5=9.48$ , 均  $P<0.05$ );A组术后清醒及拔管时间[分别为(7.2±0.8)min、(11.2±7.3)min]明显短于 B组[分别为(16.4±0.8)min、(18.8±0.4)min]( $t_1=9.81, t_2=9.60$ , 均  $P<0.05$ )。**结论** 相对于单纯全麻,全麻复合硬膜外阻滞则能较好地抑制术后应激反应。

**【关键词】** 胆囊切除术,腹腔镜; 麻醉,硬膜外; 麻醉,全身; 急相反应

## The influence of general combined epidural anesthesia on stress reaction in patients with laparoscopic gallbladder resection Jin Lizhao, Ding Tijie.

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**【Abstract】 Objective** To compare the effects of general anesthesia combined with epidural space block anesthesia and pure general anesthesia on intraoperative circulation and stress reaction in patients with laparoscopic cholecystectomy. **Methods** 60 patients undergoing elective surgery of laparoscopic cholecystectomy were randomly divided into general anesthesia compound epidural group (group A) and general anesthesia group (group B), 30 cases in each group. The MAP, HR, C-reactive protein (CRP), epinephrine (E) and norepinephrine (NE) concentrations in the two groups at 5 min before anesthesia (T<sub>0</sub>), 15min after the pneumoperitoneum (T<sub>1</sub>), and stop 10 min after pneumoperitoneum (T<sub>2</sub>) were compared. **Results** T<sub>1</sub> MAP and HR in group B [(95.4±4.6) mmHg, (90.5±12.2) times/min] were significantly higher than those in group A [(87.1±6.0) mmHg, (83.2±13.5)times/min] ( $t_1=7.81, t_2=6.98$ , all  $P<0.05$ ). In group B, the E and NE levels at T<sub>1</sub>, T<sub>2</sub> and CRP level at T<sub>2</sub> [(242.1±40.5)ng/L, (271.5±31.5)ng/L, (238.0±41.8)ng/L, (265.1±40.6)ng/L, (39.3±3.9)mg/L] were significantly higher than those of group A [(195.7±28.0)ng/L, (236.9±20.3)ng/L, (191.3±31.8)ng/L, (239.2±34.2)ng/L, (26.3±3.8)mg/L] ( $t_1=10.02, t_2=8.06, t_3=9.42, t_4=8.69, t_5=9.48$ , all  $P<0.05$ ). The sober and postoperative extubation time of group A [(7.2±0.8) min, (11.2±7.3) min] were significantly shorter than group B [(16.4±0.8) min, (18.8±0.4) min] ( $t_1=9.81, t_2=9.60$ , all  $P<0.05$ ). **Conclusion** Compared with the pure general anesthesia, general anesthesia compound epidural block can inhibit the postoperative stress reaction.

**【Key words】** Cholecystectomy, laparoscopic; Anesthesia, epidural block; Anesthesia, general; Acute-phase reaction

# 成年人外周血细胞参数与单纯性冠状动脉扩张症的相关性研究

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**【摘要】** **目的** 分析成年人外周血细胞参数与单纯性冠状动脉扩张症(CAE)的相关性。**方法** 对比分析单纯性 CAE 患者(CAE 组)与健康对照组(CON 组)外周血细胞参数中性粒/淋巴细胞比值(NLR)、红细胞分布宽度(RDW)和平均血小板体积(MPV)的差异,利用 Spearman 相关分析及 Logistic 回归分析评价 NLR、RDW、MPV 与单纯性 CAE 的相关性。**结果** 纳入单纯性 CAE 患者 31 例和 CON 组 35 例。与 CON 组比较, CAE 组 NLR $[(1.72 \pm 0.64)$ 比 $(2.46 \pm 1.16)$ ,  $Z = 2.897$ ,  $P = 0.004$ ]、RDW $[(12.77 \pm 0.82)$ 比 $(13.42 \pm 1.39)$ ,  $Z = 2.271$ ,  $P = 0.023$ ]明显升高,差异有统计学意义;Spearman 相关性分析结果提示 NLR( $r = 0.359$ ,  $P = 0.003$ )、RDW( $r = 0.282$ ,  $P = 0.022$ )与 CAE 呈正相关,Logistic 回归分析显示 NLR( $SE = 0.407$ ,  $Wals = 7.632$ ,  $P = 0.006$ )和 RDW( $SE = 0.340$ ,  $Wals = 5.105$ ,  $P = 0.024$ )是 CAE 的独立危险因素。**结论** 外周血细胞参数 NLR、RDW、MPV 与单纯性 CAE 密切相关,NLR 和 RDW 是单纯性 CAE 的独立危险因素,对 CAE 的评估具有一定临床价值。

**【关键词】** 冠状动脉疾病; 红细胞分布宽度; 平均血小板体积; 中性粒/淋巴细胞比值

**The correlation of peripheral blood cell parameters and isolated coronary artery ectasia in adults** Huang Dan, Cao Xiaoping, Liu Shiping, Liu Mao, Chen Jian, Lin Xiufang.

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**【Abstract】 Objective** To assess the correlation of peripheral blood cell parameters and isolated coronary artery ectasia(CAE) in adults. **Methods** The differences of peripheral blood cell parameters neutrophil/lymphocyte ratio(NLR), red blood cell distribution width(RDW) and mean platelet volume(MPV) between healthy subjects(CON group) and isolated CAE patients(CAE group) were compared. The Spearman correlation analysis and Logistic regression analysis were used to analyze the correlation between NLR, RDW, MPV and isolated CAE. **Results** The case - control study participants included 31 patients with isolated CAE and 35 subjects in CON group. Compared with CON group, the levels of NLR $[(1.72 \pm 0.64)$  vs.  $(2.46 \pm 1.16)$ ,  $Z = 2.897$ ,  $P = 0.004$ ] and RDW $[(12.77 \pm 0.82)$  vs.  $(13.42 \pm 1.39)$ ,  $Z = 2.271$ ,  $P = 0.023$ ] increased significantly in CAE group, the differences were statistically significant. Spearman correlation analysis suggested that NLR( $r = 0.359$ ,  $P = 0.003$ ) and RDW( $r = 0.282$ ,  $P = 0.022$ ) were positively correlated with isolated CAE. Logistic regression analysis showed that NLR( $SE = 0.407$ ,  $Wals = 7.632$ ,  $P = 0.006$ ) and RDW( $SE = 0.340$ ,  $Wals = 5.105$ ,  $P = 0.024$ ) were independent risk factors for isolated CAE. **Conclusion** The peripheral blood cell parameters NLR, RDW, MPV are closely related to CAE. NLR and RDW are independent risk factors for the development of isolated CAE and have important clinical value in the evaluation of isolated CAE patients.

**【Key words】** Coronary disease; Red blood cell distribution width; Mean platelet volume; Neutrophil/lymphocyte ratio

# 树突细胞-细胞因子诱导的杀伤细胞免疫 治疗晚期结直肠癌 32 例临床观察

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**【摘要】 目的** 探讨树突细胞-细胞因子诱导的杀伤细胞(DC-CIK)免疫治疗晚期结直肠癌患者的临床疗效及安全性。**方法** 选择32例晚期结直肠癌患者作为研究对象,所有患者均采用树突细胞(DC)联合细胞因子诱导杀伤细胞(CIK)治疗,每疗程间隔3个月,治疗3个疗程,疗程结束后评价实体瘤近期疗效,治疗前后进行KPS评分,空腹抽血检测血清AFP,CEA,CA125,CA199及外周血T细胞亚群,记录不良反应发生情况。**结果** 32例患者,CR 1例,PR 10例,SD 15例,PD 6例,DCR为81.25%;KPS较治疗前评分提高20分的18例(56.25%);免疫指标好转25例(78.13%),变差7例(22.87%)。治疗后AFP和CEA分别为(123.15±45.26)ng/mL和(15.48±7.34)ng/mL,较治疗前明显降低( $t=4.043, 4.152$ ,均 $P<0.05$ );治疗后 $CD_3^+$ 、 $CD_4^+$ 、 $CD_8^+$ 、 $CD_4^+/CD_8^+$ 分别为(63.51±2.35)%、(36.27±2.96)%、(29.32±3.01)%、(1.41±1.02),较治疗前明显升高( $t=3.952, 3.945, 3.434, 3.522$ ,均 $P<0.05$ )。**结论** DC-CIK细胞免疫治疗晚期结直肠癌的效果确切,能有效增强晚期直肠癌患者的免疫水平,缓解病情,改善症状,毒副作用轻微。

**【关键词】** 结直肠肿瘤; 树突细胞; 细胞因子诱导杀伤细胞; 免疫治疗

## Observation of DC - CIK immune therapy in the treatment of patients with advanced colorectal cancer

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**【Abstract】 Objective** To investigate the efficacy and safety of DC - CIK immune therapy in the treatment of patients with advanced colorectal cancer. **Methods** 32 patients with advanced colorectal cancer in our hospital were selected as study subjects. All patients had been treated by dendritic cells (DC) combined with cytokine - induced killer cells (CIK) treatment for 3 courses, each treatment interval was 3 months. After the treatment, the effects on solid tumors were evaluated, KPS scores were assessed, the fasting blood samples were exsanguinated for detecting AFP, CEA, CA125, CA199 and peripheral blood T cell subsets, the adverse reactions were recorded. **Results** Of 32 patients, there were CR in 1 patient, PR in 10 patients, SD in 15 patients, PD in 6 patients. There were 18 cases (56.25%) whose KPS increased after treatment; immune index improved in 25 cases (78.13%), deteriorated in 7 cases (22.87%). After treatment, the AFP and CEA levels were (123.15±45.26)ng/mL and (15.48±7.34)ng/mL, which were lower than before treatment ( $t=4.043, 4.152$ , all  $P<0.05$ ). After treatment, the  $CD_3^+$ ,  $CD_4^+$ ,  $CD_8^+$ ,  $CD_4^+/CD_8^+$  were (63.51±2.35)%, (36.27±2.96)%, (29.32±3.01)%, (1.41±1.02) respectively, which were significantly higher than before treatment ( $t=3.952, 3.945, 3.434, 3.522$ , all  $P<0.05$ ). **Conclusion** The DC - CIK cell immune therapy has exact effect in the treatment of patients with advanced colorectal cancer, can effectively enhance the immune level, remission of disease, improve symptoms, and has mild side effects.

**【Key words】** Colorectal neoplasms; Dendritic cells; Cytokine - induced killer cells; Immunotherapy

# 椎间孔镜治疗腰椎间盘突出症术后的 MRI 观察

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**【摘要】** 目的 通过 MRI 评价椎间孔镜下髓核摘除术治疗腰椎间盘突出症的临床疗效。方法 选择 2013 年 1 月至 2016 年 3 月收治腰椎间盘突出症患者 98 例, 采用椎间孔镜下摘除突出髓核, 术前、术后 3 d 及术后 3 个月进行 MRI 检查, 比较其椎管占位率和椎管狭窄率, 观察临床疗效。结果 MRI 检查显示, 术前的椎管占位率和椎管狭窄率与术后 3 d 及 3 个月相比较, 差异均有统计学意义 ( $t = 40.368, 42.242, 31.955, 34.117$ , 均  $P < 0.001$ ); 术后 3 个月与术后 3 d 椎管占位率和椎管狭窄率比较, 差异均有统计学意义 ( $t = 47.619, 41.946$ , 均  $P < 0.001$ )。结论 MRI 影像证实, 椎间孔镜下髓核摘除术治疗腰椎间盘突出症具有明显优势, 该技术能够彻底地摘除腰椎突出的髓核组织, 解除神经根及硬膜囊受压。

**【关键词】** 关节镜检查; 腰椎; 椎间盘移位; 磁共振成像

**MRI observation of lumbar disc herniation of PELD therapy after surgery** Liang Hui, Pang Likai.

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**【Abstract】 Objective** To investigate the curative effect PELD discectomy in the treatment of lumbar disc herniation by MRI examination. **Methods** 98 cases with lumbar disc herniation from November 2013 to March 2016 were treated, they were given PELD removal of herniated nucleus pulposus, preoperative and postoperative 3 days and 3 months, MRI examination was conducted, compared the canal occupancy rates and spinal stenosis. The clinical curative effect was observed. **Results** MRI results showed that the canal occupancy rates and spinal stenosis between pre-operation and postoperative 3 days and 3 months had significant differences ( $t = 40.368, 42.242, 31.955, 34.117$ , all  $P < 0.001$ ). MRI showed that the spinal canal and spinal stenosis occupancy rates had significant differences between three months after surgery and three days after surgery ( $t = 47.619, 41.946$ , all  $P < 0.001$ ). **Conclusion** MRI images confirmed that the PELD discectomy in the treatment of lumbar disc herniation has obvious advantages, the technology can be removed completely protruding lumbar nucleus pulposus, relieve pressure on the nerve root and dural sac.

**【Key words】** Arthroscopy; Lumbar vertebrae; Intervertebral disk displacement; Magnetic resonance imaging

## 八珍汤加味预防老年直肠癌患者放疗所致白细胞减少的疗效观察

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**【摘要】** **目的** 研究八珍汤加味对老年直肠癌患者放疗过程中白细胞减少的预防作用。**方法** 选取老年直肠癌高龄放疗患者 52 例, 根据患者入院月份的奇偶将其随机分为两组。其中 28 例在放疗的同时口服八珍汤加味方为治疗组, 其余 24 例为对照组, 放疗过程中先不口服其他任何影响白细胞药物。**结果** 治疗组在放疗过程中有 7 例 (25.00%) 白细胞减少至正常值以下, 对照组有 14 例 (58.33%) 患者在放疗过程中白细胞减少至正常值以下, 两组比较差异有统计学意义 ( $\chi^2 = 5.964, P = 0.01$ )。**结论** 八珍汤加味可以有效地预防老年直肠癌患者放疗过程中的白细胞减少。

**【关键词】** 直肠肿瘤; 放射疗法; 白细胞减少; 八珍汤

**Efficacy of Bazhen decoction in preventing radiation – induced leukopenia in elderly patients with colorectal cancer** Shao Tingting, Huang Jing, Ding Jiyuan.

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## 热毒宁注射液联合奥硝唑治疗老年人吸入性肺炎疗效及安全性观察

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**【摘要】 目的** 探讨热毒宁注射液联合奥硝唑注射液治疗老年吸入性肺炎疗效与安全性。**方法** 90 例老年吸入性肺炎患者按照入院顺序分为观察组与对照组, 每组各 45 例。观察组患者给予 0.5 g 奥硝唑注射液, 每 12 小时 1 次静脉滴注。热毒宁注射液 30 mL, 溶于 200 mL 0.9% 氯化钠注射液中静脉滴注, 每天 1 次。对照组患者给予每次注射用头孢米诺钠 2 g, 溶于 100 mL 0.9% 氯化钠注射液中静脉滴注, 每天 2 次。两组疗程均为 14 d, 对患者的疗效与不良反应进行监测及记录。**结果** 观察组治疗后 23 例显效, 有效 12 例, 进步 6 例, 无效 4 例, 总有效率为 91.1%; 对照组治疗后 20 例显效, 有效 9 例, 进步 4 例, 无效 12 例, 总有效率为 73.3%。观察组总有效率高于对照组 ( $\chi^2 = 4.86, P < 0.05$ )。观察组仅有 1 例出现皮肤性不良反应, 2 例出现肠胃系统不适。对照组有 2 例患者出现皮肤性不良反应, 8 例出现胃肠道反应。观察组不良反应发生率低于对照组 ( $\chi^2 = 4.41, P < 0.05$ )。**结论** 热毒宁注射液联合奥硝唑在老年吸入性肺炎早期的应用效果明显, 且安全性较高, 值得临床推广。

**【关键词】** 肺炎, 吸入; 热毒宁注射液; 奥硝唑; 老年人

**Clinical effects and safty of Reduning injection combined with ornidazole in the treatment of elderly patients with aspiration pneumonia** Yu Xiaoying.

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## 经胃镜放置胃肠营养管的临床效果观察

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**【摘要】** **目的** 探讨经胃镜放置胃肠营养管的临床效果。**方法** 52 例患者接受经胃镜引导下放置胃肠营养管及肠内营养支持治疗,术前常规作胃镜或泛影普胺上消化道造影,了解病变部位及性质等,置管结束后,记录插入营养管长度,并于营养管内注入 20 mL 泛影普胺造影剂进行 X 线下透视,确认营养管先端部位位置。**结果** 置管成功率 100%,平均置管长度达 71.5 cm,未出现腹痛、消化道穿孔、出血等并发症。**结论** 经胃镜引导下放置胃肠管是实施肠内营养置管的一种安全有效的新方法。

**【关键词】** 胃镜检查; 肠道营养

**The application of gastrointestinal nutrition tube placement by gastroscope auxiliary** Xu Fazhen, Huang Shu, Li Guiqin, Sheng Hongxia, Wang Wei, Cheng Yajun, Zhou Aijun.

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## 儿童肺炎 42 例肺部超声诊断分析

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**【摘要】** 目的 探讨肺部超声检查对儿童肺炎的诊断价值。方法 选取 2014 年 12 月至 2015 年 10 月确诊为肺炎的患儿 42 例,进行超声检查和 X 线检查,将检查结果进行比较分析。结果 42 例患儿中,X 线检查发现肺实变 10 例,检出率 23.8% (10/42);胸膜炎性改变 7 例,检出率 16.7% (7/42);胸腔积液 8 例,检出率 19.0% (8/42)。肺部超声检查发现肺实变 19 例,检出率 45.2% (19/42);胸膜炎性改变 16 例,检出率 38.1% (16/42);胸腔积液 18 例,检出率 42.9% (18/42)。结论 肺部超声检查可以作为儿童肺炎 X 线检查的有效补充,有助于儿童肺炎的诊断。

**【关键词】** 超声检查; 肺炎

**The observation of lung ultrasound for children with pneumonia** Zhang Xiaolin, Lu Jie, Tian Yuan, Yuan Yu.  
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## 高压氧治疗双下肢动脉栓塞取栓术后 早期肢体缺血再灌注损伤一例

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**Hyperbaric oxygen therapy in the treatment of 1 patient with limb ischemia reperfusion injury after the treatment of double lower limb arterial embolism** Zhu Haijin, Lou Weihua, Lou Xiaohong, Mao Zhanglin, Wang Jianfeng, Shi Xuan.

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患者,女,79岁。因7h前无明显诱因下突然出现双下肢疼痛无力不能行走,亲属于2015年9月9日19点20分急送至义乌市中心医院。体格检查:体温36.6℃,脉搏93次/min,呼吸26次/min,血压167/77 mmHg,神志清,痛苦貌,口唇无发绀,皮肤巩膜无黄染,双肺呼吸音稍粗,未闻及干湿啰音,心律不齐,未闻及病理性杂音,腹平软,无压痛,肝脾肋下未及,Murphy sign阴性,肝区无叩击痛,肠鸣音3次/min,移动性浊音阴性,双肾区无叩痛,双下肢股动脉、腘动脉及足背动脉搏动未及,双膝以下皮温下降明显,足趾毛细血管充盈差,足趾色灰暗,双下肢活动受限,肌力1级。即行辅助检查:心脏超声检查:主动脉瓣及二尖瓣轻度返流,三尖瓣少量

返流,左心功能测定基本正常。双下肢CT血管造影:两侧髂动脉起始段及股动脉中上段局限性充盈缺损,考虑血栓形成可能大。左侧腘动脉、胫腓动脉未见明显显示。主动脉增强CT血管造影:主动脉部分钙化斑块;左心房前上壁局限性充盈缺损、提示附壁血栓形成可能大,请结合临床。头颅CT:脑CT平扫脑质未见明显异常,老年脑。初步诊断:双下肢动脉栓塞、心房颤动(房颤)。急送手术室在硬麻下行经股动脉切开取栓术,术中找到双股动脉,未及搏动,切开股动脉取出血栓较多,可见血栓头。缝合股动脉明确未见漏血。

## 基底节钙化的病因及临床特点

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**【摘要】** 基底节钙化是一种少见的神经变性疾病,其病理改变主要为双侧基底节区钙化斑。患者大多以锥体外系症状为首发症状,还可表现为小脑功能失调、语言障碍、痴呆、癫痫和神经精神症状等,部分患者可终生无症状。基底节钙化目前尚无特效方法可治疗或延缓疾病进展,且药物大多数效果不佳或耐受性较差。该研究就其病因、发病机制、病理变化、影像学表现、临床特点及治疗方法做一综述。

**【关键词】** 脑血管基底神经节疾病; 特发性; 综合征

**The etiology and clinical features of basal ganglia calcification** Zhang Hanhua, Zhou Yewei, Zhou Ping.

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**【Abstract】** The prevalence of basal ganglia calcification is increasing, and it is a rare neurodegenerative disease. Its pathological changes are mainly bilateral basal ganglia calcification plaques. Most patients with pyramidal symptoms as the starting symptoms, but also manifested cerebellar dysfunction, language disorder, dementia, epilepsy and neurological symptoms, some patients can be asymptomatic. At present, there is no specific method to treat or delay the progress of the disease, and the majority of the drug effect is not good or poor tolerability. This article reviews the etiology, pathogenesis, pathological changes, imaging features, clinical features and treatment methods.

**【Key words】** Basal ganglia cerebrovascular disease; Idiopathic; Syndrome

## 全程健康教育在门诊输液室实施的效果观察

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**【摘要】** 目的 探讨在门诊输液患者中开展全程护理管理及健康教育的临床效果。方法 收集门诊输液患者 1 280 例的临床资料,采用数字表法随机分为两组,对照组 640 例患者,给予常规护理模式干预,观察组 640 例患者,给予全程护理模式干预,比较两组健康教育知识掌握程度及护理满意度。结果 观察组疾病背景知识掌握率 96.88%、用药知识掌握率 95.31%、健康生活习惯等知识掌握率 96.88%,均优于对照组的 70.31%、71.88%、75.00%,差异均有统计学意义( $\chi^2 = 25.739, 20.015, 19.810$ , 均  $P < 0.01$ ),观察组护理满意度 96.87%,显著高于对照组的 79.69%,差异有统计学意义( $\chi^2 = 14.263, P < 0.01$ )。结论 对门诊输液患者开展全程护理管理及健康教育的效果较好,促进患者对健康疾病知识的掌握,同时提高了护理质量,值得推荐。

**【关键词】** 门诊输注疗法; 护理管理; 健康教育

**The effect of whole course health education in the outpatient transfusion room** Liu Huafen, He Jianyong, Liu Yan.

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## 控制门诊次均费用对二级综合医院总额预付工作的影响

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**【摘要】** **目的** 通过对二级综合医院的总额预付发生费用进行总体分析,有效地控制门诊基金发生费用,特别是控制门诊次均费用,使总额预付工作达到预期目标。**方法** 通过客观分析总额预付基金增长因素,确定主要影响因子,进而制定总额预付工作实施对策及实施方案,具体措施即通过加强对医务人员的政策培训,成立院内医保管理员团队,实时监督检查医师的诊疗规范、不定期对违规医师进行违规约谈、每月进行处方点评及增强信息系统的功能等来规范门诊医疗工作。**结果** 2015 年总额预付工作门诊人次增长 7.26%,门诊人数增长 11.42%,费用增长 8.70%,门诊次均费用降低了 1.16%,药占比降低了 10.18%,参保人员个人负担下降了 0.21%。2015 年该院总额预付基金结余 3.50%,达到了预期目的,并超额完成了既定任务。**结论** 控制门诊次均费用能够使二级综合医院的总额预付发生费用得到有效地控制。

**【关键词】** 预付费卫生计划; 医院,综合; 门诊; 费用,医疗

**Effect of control in out-patient total costs on two level general hospital paid work** Xu Yongping, Hu Wenjiang, Liu Fengjie.

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## 睑板按摩在睑板腺功能异常护理中的效果观察

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**【摘要】** **目的** 探讨睑板按摩在睑板腺功能异常护理中的应用效果。**方法** 选取接受治疗的睑板腺功能异常患者 86 例,采用数字表法随机分为观察组 43 例和对照组 43 例。对照组患者进行常规治疗和常规护理,观察组在对照组基础上进行睑板腺按摩。比较、分析两组患者的临床治疗效果。**结果** 观察组临床治疗有效率(95.35%)明显优于对照组(76.74%),差异有统计学意义( $\chi^2 = 14.4214, P < 0.01$ )。治疗后,观察组泪膜破裂时间、睑缘评分、症状评分分别为( $13.12 \pm 2.85$ )s、( $2.78 \pm 0.35$ )分、( $0.84 \pm 0.78$ )分,对照组分别为( $9.78 \pm 1.85$ )s、( $2.34 \pm 0.62$ )分、( $1.21 \pm 1.34$ )分,两组差异均有统计学意义( $t = 7.997, 5.289, 2.792, P < 0.05$ )。**结论** 睑板按摩在睑板腺功能异常患者护理中具有显著的临床效果,而且方法简单,便于操作,值得广泛推广。

**【关键词】** 睑板腺; 按摩; 护理

**The application effect of tarsal massage in the nursing of meibomian gland dysfunction** Liang Xiaohong.

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## 经皮椎体成形术治疗骨质疏松性椎体压缩骨折的护理

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**【摘要】目的** 探讨经皮椎体成形术应用于骨质疏松性椎体压缩骨折患者的护理效果。**方法** 回顾性分析 65 例骨质疏松性椎体压缩骨折患者的临床资料, 所有患者给予经皮椎体成形术治疗, 根据单双数编号法, 分为 2 组, 系统组和常规组。常规组行常规护理; 系统组行系统化护理。就两组患者手术时间、疼痛评分、下床时间、住院日数和护理满意率、手术并发症率进行比较。**结果** 系统组患者手术时间( $62.74 \pm 8.85$ ) min、疼痛评分( $2.02 \pm 0.53$ ) 分、下床时间( $3.52 \pm 1.12$ ) d、住院时间( $14.52 \pm 1.92$ ) d, 均少于常规组, 差异有统计学意义( $t = 8.453, 8.876, 8.562, 8.124$ , 均  $P < 0.05$ )。系统组护理满意率 100%, 高于常规组的 81.25%, 手术并发症率 6.06%, 低于常规组的 31.25%, 差异有统计学意义( $\chi^2 = 9.234, 10.423$ , 均  $P < 0.05$ )。**结论** 经皮椎体成形术应用于骨质疏松性椎体压缩骨折患者效果确切, 辅以系统化护理, 可缩短手术时间, 减少并发症, 减轻患者痛苦, 加速术后康复, 提升患者满意度, 值得推广。

**【关键词】** 椎体成形术; 骨质疏松; 骨折, 压缩性; 护理

### Effect of percutaneous vertebral plasty in the treatment of osteoporotic vertebral compression fractures

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## 全程优质护理用于经皮肾镜钬激光碎石术的效果观察

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**【摘要】** 目的 观察全程优质护理对经皮肾镜钬激光碎石术的护理效果。方法 选取 284 例拟行经皮肾镜钬激光碎石术肾结石患者作为研究对象,将其按数字表法随机分为对照组(142 例)和研究组(142 例)。对照组患者采用传统护理,研究组患者采用全程优质护理,对比观察两组患者护理效果、护理满意度、护理质量评价、临床疗效、患者焦虑情况、患者生活质量。结果 对照组患者护理效果优良率 74.6%,与研究组患者(95.1%)对比差异有统计学意义( $\chi^2 = 9.237, P < 0.05$ )。对照组患者护理总满意度为 54.2%,明显高于研究组(76.8%)( $\chi^2 = 5.229, P < 0.05$ )。两组护理质量得分  $> 90$  分( $\chi^2 = 5.637, P < 0.05$ )及  $< 70$  分组比例差异有统计学意义( $\chi^2 = 5.922, P < 0.05$ ),两组患者护理质量平均得分[(65.7  $\pm$  3.9)分比(87.6  $\pm$  7.7)分]对比差异有统计学意义( $t = 6.199, P < 0.05$ )。两组患者手术时间、术中出血量、术后卧床时间、住院时间及并发症发生率等临床疗效及生活质量对比差异均有统计学意义( $t = 6.291, 6.533, 7.381, 8.326, 5.937, 6.233, 5.299, 5.306, 4.924, 4.292, 4.716$ , 均  $P < 0.05$ )。两组患者出院时焦虑发生率和 SAS 评分对比差异均有统计学意义( $\chi^2 = 3.594, t = 5.221$ , 均  $P < 0.05$ )。结论 治疗肾结石的微创手术方法首选经皮肾镜钬激光碎石术,具有并发症较少,患者恢复快,创伤出血少,疗效肯定等优点,全程优质护理服务模式是保证手术成功的关键环节之一。

**【关键词】** 护理; 肾造口术,经皮; 碎石术,激光

**Nursing effect of whole course high quality nursing care on percutaneous laser lithotripsy** Xu Fei, Ye Lanfen, Xu Yan.

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