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氟比洛芬酯对神经损伤大鼠疼痛治疗效果的研究

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目的：研究不同剂量氟比洛芬酯 (FA) 对慢性压迫性损伤 (CCI) 模型大鼠神经行为学的影响。

方法：成年 SD 大鼠 30 只, 只按随机数字表法分成三组: 对照组 (C 组) 行假手术但不结扎神经; CCI 组行坐骨神经慢性压迫性损伤, 氟比洛芬酯治疗组 (FA 组) 予 CCI 模型大鼠每 12 小时腹腔注射不同剂量的氟比洛芬酯 (FA1 组 2 mg/kg, FA2 组 4 mg/kg, FA3 组 8 mg/kg, FA4 组 16 mg/kg), 每组均给予 5 只大鼠, 所有大鼠分别在术前及术后 6 h, 1 d, 3 d, 5 d, 7 d 测试热缩血管潜伏期 (TWL) 和机械性缩足反射阈值 (MWT)。

结果：CCI 组和 FA1-FA4 组术后的 TWL、MWT [TWL: (5.645 ± 1.144) s, (5.901 ± 0.914) s, (6.300 ± 0.835) s, (7.631 ± 0.597) s, (7.894 ± 0.526) s]; MWT: (5.14 ± 0.71) g, (5.28 ± 0.60) g, (6.74 ± 0.50) g, (6.74 ± 0.25) g] 均较 C 组 [TWL: (12.396 ± 1.144) s; MWT: (12.801 ± 0.494) g] 显著下降 [TWL: t 值: 26.973, 31.047, 31.176, 30.373, 30.772; MWT: t 值: 84.192, 48.132, 51.136, 54.326, 46.937, 均 P < 0.05]。FA 组随 FA 的剂量从 2 mg/kg 增大至 16 mg/kg, TWL、MWT 不断上升 [TWL: 最小 (5.030 ± 0.240) s, 最大 (8.300 ± 0.430) s; MWT: 最小 (4.56 ± 0.14) g, 最大 (7.11 ± 0.20) g]; 与 CCI 组相比, FA1 组的 TWL 和 MWT 与之差异无统计学意义 (均 P > 0.05), FA2、FA3、FA4 组的 TWL 和 MWT 明显升高 [TWL: (6.300 ± 0.835) s, (7.631 ± 0.597) s, (7.894 ± 0.526) s; MWT: (6.74 ± 0.50) g, (6.74 ± 0.25) g, (6.70 ± 0.42) g] [TWL: t 值分别为 -3.768, -11.569, -13.867, MWT: t 值分别为 -3.898, -15.233, -14.801, 均 P < 0.05]。结论：4 mg/kg 以上的氟比洛芬酯能明显减轻 CCI 模型大鼠的热痛敏和机械性痛敏症状, 但有封顶效应, 8 mg/kg 时达到最大的镇痛效果。

关键词：神经疼痛；氟比洛芬酯

基金项目：广东省医学科学技术研究基金 (B2014285)

Investigation of flurbiprofen axetil on analgesic efficacy in nerve – injured rats Zheng Zhenwei, You Zhijian.
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Abstract Objective: To investigate the influence of different doses of flurbiprofen axetil on neurological behavior in CCI rats. Methods: All SD rats were randomly assigned to 3 groups; control group (C group), operation but without CCI, n = 5; CCI group, without injection, n = 5; flurbiprofen axetil (FA) group, different doses of flurbiprofen axetil were intraperitoneally administered every 12 hours for 7 days beginning on postoperative 6 hours in CCI rats (FA1 group: 2 mg/kg, FA2 group: 4 mg/kg, FA3 group: 8 mg/kg, FA4 group: 16 mg/kg), 5 rats in each subgroup. The thermal withdrawal latency (TWL) and mechanical withdrawal threshold (MWT) were tested on preoperative 1, 3, 5 and 7 days and postoperative 1, 3, 5 and 7 days. Results: Firstly, compared with C group [TWL: (12.396 ± 1.144) s; MWT: (12.801 ± 0.494) g], the TWL and MWT of CCI and FA groups [TWL: (5.645 ± 1.144) s, (5.901 ± 0.914) s, (6.300 ± 0.835) s, (7.631 ± 0.597) s; MWT: (5.14 ± 0.71) g, (5.28 ± 0.60) g, (6.74 ± 0.50) g, (6.74 ± 0.25) g] were significantly declined after surgery (tTWL = 26.973, 31.047, 31.176, 30.373, 30.772; tMWT = 44.192, 48.132, 51.136, 54.326, 46.937, all P < 0.05) and the TWL and
MWT of FA groups significantly improved with the doses from 2mg/kg to 16mg/kg of flurbiprofen axetil [TWL: the minimum (5.030 ± 0.240) s, the maximum (8.300 ± 0.430) s; MWT: the minimum (4.56 ± 0.14) g, the maximum (7.11 ± 0.20) g]. Secondly, there were no statistically significant differences in TWL and MWT between CCI group and FA1 group (all P > 0.05). However, the TWL and MWT of FA2 group, FA3 group and FA4 group [TWL: (6.300 ± 0.835) s, (7.631 ± 0.597) s, (7.894 ± 0.526) s; MWT: (6.74 ± 0.50) g, (6.74 ± 0.25) g, (6.70 ± 0.42) g] increased significantly compared with CCI group (\( t_{\text{TWL}} = -3.768, -11.569, -13.867, t_{\text{MWT}} = -3.898, -15.233, -14.801 \), all \( P < 0.05 \)). Thirdly, there were no statistically significant differences in TWL and MWT between FA3 group and FA4 group (all \( P > 0.05 \)). **Conclusion** Over 4mg/kg of flurbiprofen axetil can significantly reduce the thermal hyperalgesia and mechanical allodynia in CCI rats, however, there is a ceiling effect of flurbiprofen axetil, and the dosage of 8mg/kg can provide a maximum analgesic effect.

**Key words** Neuralgia; Flurbiprofen axetil

**Fund program**: Medical science and technology research fund of Guangdong province (B2014285)
血清胱抑素 C 和 N 端脑钠肽前体水平与冠心病患者冠状动脉病变程度的相关性研究

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【摘要】 目的 探讨冠心病患者血清胱抑素 C (CysC) 和 N 端脑钠肽前体 (NT-proBNP) 水平的变化与冠状动脉病变程度的相关性。方法 选取 240 行冠状动脉造影的冠心病患者为研究对象。根据冠状动脉造影结果分为四组:非冠心病组 52 例、冠状动脉单支病变组 73 例、双支病变组 62 例、三支病变组 53 例。测定四组患者空腹血清 CysC、NT-proBNP 水平并进行比较,分析 CysC、NT-proBNP 水平与冠心病患者冠状动脉病变严重程度的关系。结果 冠状动脉单支病变组、双支病变组和多支病变组血清 CysC、NT-proBNP 水平均高于非冠心病组,差异均有统计学意义 (t = 2.019, 3.870, 7.449, P = 0.046, 0.000, 0.000; t = 6.068, 15.365, 24.851, P = 0.000, 0.000, 0.000);且随着冠状动脉病变支数的增多,血清 CysC、NT-proBNP 水平有逐渐增高的趋势,单支病变组与双支病变组、双支病变组与多支病变组差异均有统计学意义 (t = 2.080, 3.070, P = 0.039, 0.000; t = 10.953, 12.078, P = 0.000, 0.000)。冠脉病变的严重程度与 CysC、NT-proBNP 水平的变化呈正相关 (r1 = 0.562, r2 = 0.503)。结论 冠状动脉病变的严重程度与 CysC、NT-proBNP 水平的高低密切相关,对冠状动脉的病变具有一定的预测价值,对高 CysC、NT-proBNP 的患者应给予高度重视。

【关键词】 胱抑素 C；利钠肽,脑；冠状动脉疾病

【基金项目】 浙江省宁波市科技局项目(2012C50028)

Correlation of serum cystatin C and N–terminal pro–brain natriuretic peptide with severity of coronary heart disease  Ying Danyang.

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【Abstract】 Objective To investigate the correlation of serum cystatin C (CysC) and N–terminal brain natriuretic peptide (NT–proBNP) levels with severity of coronary heart disease. Methods 240 patients with coronary artery disease were selected. According to coronary angiography, they were divided into four groups: 52 cases of non–CAD group, coronary single vessel disease group (73 cases), 62 cases of double vessel disease, 53 cases of triple vessel disease group. The serum CysC, NT–proBNP levels were determined and compared among the four groups. The relationship between CysC, NT –proBNP levels and severity of coronary artery disease was analyzed.

Results The CysC, NT–proBNP levels in the single coronary vessel disease group, double vessel disease group and multivessel disease group were higher than non–CHD group, the differences were statistically significant (t = 2.019, 3.870, 7.449, P = 0.046, 0.000, 0.000; t = 6.068, 15.365, 24.851, P = 0.000, 0.000, 0.000); and with the crown pulse lesion count increased, the serum CysC, NT–proBNP levels increased gradually, the differences were statistically significant (t = 2.080, 3.070, P = 0.039, 0.000; t = 10.953, 12.078, P = 0.000, 0.000). Coronary artery disease severity was positively correlated with CysC, NT–proBNP levels (r1 = 0.562, r2 = 0.503). Conclusion The severity of coronary artery disease is closely related to the levels of CysC, NT–proBNP, which has some predictive value for coronary artery disease, patients with high CysC, NT –proBNP levels should be given high priority.

【Key words】 serum cystatin C (CysC); Natriuretic peptide, brain; Coronary artery disease

Fund Program: Ningbo city science and technology plan projects(2012C50028)
高压氧治疗狼疮性脑病疗效及对血清 C 反应蛋白及肾功能的影响

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【摘要】目的 探讨高压氧治疗狼疮性脑病疗效及对血清 C 反应蛋白(CRP)及肾功能的影响。方法 选取 100 例狼疮性脑病患者为研究对象,按照随机数字表法分为观察组和对照组,对照组给予常规措施治疗,观察组在对照组治疗措施基础上给予高压氧治疗,比较两组治疗效果及治疗前后 CRP 水平变化及肾功能指标改善情况。结果 观察组的总有效率(96.00%)高于对照组(68.00%)($\chi^2=13.279, P=0.000$)。观察组治疗后 3 d、5 d、7 d 时 CRP 水平[(17.53±1.58)$\mu$g/mL, (14.59±1.52)$\mu$g/mL, (9.39±1.01)$\mu$g/mL]明显低于对照组[(20.48±1.78)$\mu$g/mL, (18.49±1.32)$\mu$g/mL, (13.24±1.13)$\mu$g/mL],差异均有统计学意义(均 $P<0.05$)。观察组治疗后血尿素氮(BUN)、血清肌酐(SCr)明显优于对照组,差异均有统计学意义($t=12.069, 15.203, P=0.000, 0.000$)。结论 高压氧治疗狼疮性脑病的疗效显著,改善患者症状,促进 CRP 水平恢复,缓解肾功能指标,临床意义重大。

【关键词】红斑狼疮,系统性; 脑损伤,慢性; 高压氧; C 反应蛋白

基金项目:浙江省温州市科技计划项目(Y20130065)

Effect of hyperbaric oxygen therapy on lupus encephalopathy and its influence on serum CRP and renal function Liu Xiaoxia. Department of Rehabilitation, Wenzhou Hospital of Traditional Chinese Medicine, Wenzhou, Zhejiang 325000, China

【Abstract】Objective To observe the effect of hyperbaric oxygen therapy on lupus encephalopathy and its influence on serum CRP and renal function. Methods 100 patients with lupus encephalopathy were selected and they were randomly divided into observation group and control group according to the digital table. The control group was treated with routine therapy. The observation group was given hyperbaric oxygen therapy and routine therapy. The therapeutic effects of two groups were compared and the changes of CRP level and the improvement of renal function before and after treatment were analyzed. Results The total effective rate of the observation group was 96.00%, which was significantly higher than 68.00% of the control group ($\chi^2=13.279, P=0.000$). After treatment for 3 d, 5d, 7d, the CRP levels of the observation group were (17.53±1.58)$\mu$g/mL, (14.59±1.52)$\mu$g/mL, (9.39±1.01)$\mu$g/mL, respectively, which were significantly lower than those of the control group[(20.48±1.78)$\mu$g/mL, (18.49±1.32)$\mu$g/mL, (13.24±1.13)$\mu$g/mL], the differences were statistically significant (all $P<0.05$). After treatment, the blood urea nitrogen (BUN), serum creatinine (Scr) of the observation group were significantly better than those of the control group, the differences were statistically significant ($t=12.069, 15.203, P=0.000, 0.000$). Conclusion Hyperbaric oxygen exerts significant effect in treatment of lupus encephalopathy can improve symptoms, promote the recovery of CRP levels, relieve renal function, and has clinical significance.

【Key words】Lupus erythematosus, systemic; Brain injury, chronic; Hyperbaric oxygen; C-reactive protein

Fund Program: Wenzhou Municipal Science and Technology Plan, Zhejiang Province (Y20130065)
非小细胞肺癌化疗前后 T 淋巴细胞亚群变化与化疗疗效相关性分析

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【摘要】目的 监测非小细胞肺癌(NSCLC)患者化疗前后外周血 T 淋巴细胞亚群变化,探讨患者化疗疗效与 T 淋巴细胞亚群变化的关系。方法 选取 NSCLC 患者 42 例为治疗组,另选同期体检者 28 例为对照组。所有 NSCLC 患者接受标准方案化疗,分别于化疗前、化疗 2~4 个疗程后检测患者 T 淋巴细胞亚群水平,每 2 个疗程评价化疗疗效。结果 与对照组相比,NSCLC 患者 CD8+ ( t = 3.222, P < 0.01 ), CD4+ /CD8+ ( t = 10.657, P < 0.01 ), NK 淋巴细胞 ( t = 5.310, P < 0.01 ) 均明显下降,CD4+ 细胞显著升高 ( t = 7.926, P < 0.01 ),差异有统计学意义;患者不同性别、年龄之间 T 淋巴细胞变化差异无统计学意义。 I ~ II 期患者其 CD8+ ( t = 2.097, P < 0.05 ), CD4+ /CD8+ ( t = 2.045, P < 0.05 ) 免疫功能均好于 III ~ IV 期患者,腺癌患者 CD8+ ( t = 2.015, P < 0.05 ), CD4+ /CD8+ ( t = 2.315, P < 0.05 ) 免疫功能优于鳞癌患者;患者接受化疗 2~4 个疗程后,T 淋巴细胞亚群均得到全面地改善 ( P < 0.05 );患者化疗疗效与 T 淋巴细胞功能呈正相关,PR > SD > PD。结论 化疗可以改善 NSCLC 患者 T 淋巴细胞亚群免疫功能,并且疗效与患者 T 淋巴细胞表达有关,为临床上 NSCLC 患者进行适时、合理的免疫治疗提供理论依据。

【关键词】癌,非小细胞肺; 抗肿瘤联合化疗方案; T 淋巴细胞亚群

【基金项目】浙江省金华市科技计划项目 (2014-3-146)

Correlation analysis of T lymphocyte subgroup changes before and after chemotherapy with the chemotherapy effect in non—small cell lung cancer  Zhu Peizhen, Xu Xiangwei, Chen Yingjiao.

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【Abstract】Objective To monitor the changes of T lymphocyte subsets during chemotherapy in patients with non—small cell lung cancer (NSCLC). Furthermore, to analyze the relationship between chemotherapy curative effect and the T lymphocyte subsets. Methods 42 cases with NSCLC were selected as the subjects, and 28 people undergoing health examination were selected as control group. All NSCLC patients just received NSCLC standard chemotherapy, then respectively determined T lymphocyte subsets at pre—chemotherapy and after 2, 4 courses of chemotherapy. Every two cycles of chemotherapy we would evaluate the effect of chemotherapy. Results Before chemotherapy, the patients’ CD8+ ( t = 3.222, P < 0.01 ), CD4+ /CD8+ ( t = 9.655, P < 0.01 ), CD4+/CD8+ ( t = 10.657, P < 0.01 ) and NK lymphocytes ( t = 5.310, P < 0.01 ) were significantly decreased than those of the control group, and CD8+ lymphocytes ( t = 7.926, P < 0.01 ) increased significantly. There were no significant differences in patients’ gender, age, but I — II period patients’ CD8+ ( t = 2.097, P < 0.05 ), CD4+/CD8+ ( t = 2.045, P < 0.05 ) immune function were better than III — IV period patients. In patients with adenocarcinoma, CD8+ ( t = 2.015, P < 0.05 ), CD4+/CD8+ ( t = 2.315, P < 0.05 ) immune function were better than squamous carcinoma. The patients received chemotherapy after 2, 4 courses, the T lymphocyte subgroup was comprehensively improved ( P < 0.01 ). The curative effect of chemotherapy was positively correlated with T lymphocyte function, PR > SD > PD. Conclusion Chemotherapy can improve the NSCLC patients’ T lymphocyte subgroup, and improve the situation related to the curative effect of chemotherapy.

【Key words】Carcinoma, non—small — cell lung; Antineoplastic combined chemotherapy protols; T lymphocyte subgroup

Fund Program: Jinhua city science and technology plan projects (2014-3-146)
细胞色素P450 2C19基因多态性对雷贝拉唑治疗胃食管反流病疗效的影响

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【摘要】 目的 探讨CYP2C19基因多态性对雷贝拉唑治疗胃食管反流病(GERD)疗效的影响。方法纳入经胃镜、质子泵抑制剂治疗试验而确诊的GERD患者共278例，其中非糜烂性反流病(NERD)122例，反流性食管炎(RE)98例和Barrett食管58例。均接受8周雷贝拉唑治疗(10mg，每天2次)，治疗前后行GerdQ评分，RE患者治疗后内镜复查。采用基质辅助激光解析电离飞行时间质谱法(MALDI-TOF-MS)进行CYP2C19基因分型。结果 根据CYP2C19基因分型分为快代谢组(EM)、中等代谢组(IM)、慢代谢组(PM)，分别占39.57%、42.45%和17.98%。三组治疗前GerdQ评分差异无统计学意义( P > 0.05)，治疗8周后GerdQ评分差异无统计学意义( P > 0.05)，各亚组治疗后评分较治疗前均有明显下降。98例RE患者治疗后内镜复查总有效率达86.73%，但各基因组总有效率差异无统计学意义(χ² = 0.073， P > 0.05)。结论 雷贝拉唑治疗GERD疗效确切，受CYP2C19基因型影响程度较小，疗效更稳定，值得临床推荐。

【关键词】 细胞色素P450酶系统； 雷贝拉唑； 胃食管反流

基金项目：浙江省温州市科技计划项目(Y20150152)

Effect of cytochrome P450 2C19 genotypic polymorphism on treatment efficacy for gastroesophageal reflux disease by rabeprazole Yu Jiandong, Lin Yong, Ren Zonghai, Ji Tingting.

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【Abstract】 Objective To investigate whether the effect of rabeprazole in treating gastroesophageal reflux disease is related to CYP2C19 gene polymorphisms. Methods 278 patients with gastroesophageal reflux disease confirmed by endoscopy and proton-pump inhibitor testing were enrolled in this study, including non erosive reflux disease (NERD) in 122 cases, the reflux esophagitis (RE) in 98 cases and Barrett esophagus in 58 cases. They were treated with rabeprazole for 8 weeks. GerdQ scores before and after the treatment were completed, endoscopy was performed again in patients with RE after treatment. The blood CYP2C19 genotyping was detected by matrix assisted laser desorption ionization time of flight mass spectrum (MALDI-TOF-MS). Results According to the genotype of CYP2C19, they were divided into extensive metabolizers, intermediate metabolizers and poor metabolizers, accounted for 39.57%, 42.45% and 17.98%, respectively. There was no significant difference in GerdQ scores of three groups before treatment, and also had no significant difference after 8 weeks treatment, but in each subgroup GerdQ scores after treatment was decreased significantly than before treatment. The total effective rate of 98 patients with RE by endoscopy was 86.73%, but there was no significant difference in total effective rate of the three groups after treatment. Conclusion Rabeprazole is effective in the treatment of gastroesophageal reflux disease. Moreover, rabeprazole is less affected by CYP2C19 genotype and therefore its curative effect is more stable.

【Key words】 Gtochrome P-450 enzyme system; Gastroesophageal reflux; Rabeprazole

Fund program: Science and Technology Planning Project of Wenzhou City, Zhejiang Province ( Y20150152)
复方氨基酸联合丹参注射液治疗胎儿生长受限的疗效观察

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【摘要】目的探讨复方氨基酸联合丹参注射液治疗胎儿生长受限的疗效。方法选取122例确诊为胎儿生长受限的孕妇进行研究，并使用信封数字随机法分为两组，分为研究组(丹参注射液+复方氨基酸)和对照组(复方氨基酸)，两组孕妇按孕周分为前期(24±8周)、中期(28±32周)及后期(32±36周)三个亚组，疗程均为7d，共3个疗程，比较两组临床疗效、体质量增量、宫高增量、腹围增量、胎儿双顶径(BPD)增量、股骨长(FL)增量、脐血流S/D值及新生儿体质量。结果研究组总有效率为84.13%，高于对照组的76.79%，差异有统计学意义(χ²=4.484，P<0.05)；研究组前期亚组体质量增量，宫高增量与腹围增量分别为(523.21±103.72)g，(2.88±0.52)cm和(3.19±0.75)cm，均高于对照组前期亚组(t=2.215，4.402，2.328，均P<0.05)；研究组中期亚组宫高增量与腹围增量分别为(2.14±0.27)cm和(2.89±0.52)cm，均高于对照组前期亚组(t=2.103和2.097，均P<0.05)；研究组中期亚组BPD增量分别为(2.61±1.28)mm和(2.19±0.57)mm，均高于对照组前期及中期亚组(t=2.053和2.244，2.038和2.128，均P<0.05)；脐血流S/D值研究组前期为(2.33±0.19)cm，中期为(2.46±0.17)cm及后期为(2.328)cm，均低于对照组(t=4.040，2.981和4.418，均P<0.05)，差异均有统计学意义(均P<0.05)；研究组新生儿体质量为(2.756±0.621)g，对照组为(2.384±0.428)g，组间差异有统计学意义(t=1.999，P<0.05)。结论丹参注射液与复方氨基酸联合早期用药可显著改善孕妇与生长受限胎儿临床指标，临床疗效较好。

【关键词】胎儿生长迟缓；丹参注射液；氨基酸

【基金项目】浙江省余姚市科学技术项目(2014Y08)

Observation of effects of amino acid combined with Salvia miltiorrhiza injection on fetal growth restriction

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【Abstract】Objective To investigate the effects of amino acid combined with Salvia miltiorrhiza injection on fetal growth restriction. Methods 122 pregnant women diagnosed with fetal growth restriction were chosen, and they were divided into study group (amino acid + Salvia miltiorrhiza injection) and control group (amino acid). The course of treatment was 7d, and the patients were treated for 3 treatment courses. The clinical efficacy, weight increment, uterine height increment, abdominal circumference increment, fetal biparietal diameter (BPD) increment, femur length (FL) increment, umbilical cord blood flow S/D value and neonatal weight between the two groups were compared. Results The total effective rate in the study group was 84.13%, which was higher than that of the control group (χ²=4.484, P<0.05). In the study group, the body weight gain, the uterine height increment, abdominal circumference increment were (523.21±103.72)g, (2.88±0.52)cm and (3.19±0.75)cm, respectively, which were significantly higher than those in the control group (t=2.215, 4.402, 2.328, all P<0.05). The uterine height increment and abdominal circumference increment in the intermediate stage of the study group were (2.14±0.27)cm and (2.89±0.52)cm, respectively, which were significantly higher than those of the control group, and the differences were significant (t=1.503, 2.097, all P<0.05). In the study group, the BPD increment and FL increment at prophase and intermediate stage were (2.69±1.23)mm and (2.24±0.97)mm, (2.61±1.28)mm and (2.19±0.38)mm, respectively, which were significantly higher than those in the control group (t=2.053 and 2.244, 2.038 and 2.128, all P<0.05). The S/D values of umbilical cord blood flow in early stage, middle stage and anaphase of the study group were (2.33±0.19), (2.46±0.17) and (2.12±0.14), which were significantly lower than those of the control group (t=2.891 and 2.981, 4.418, all P<0.05). Conclusions Ammonium combined with Salvia miltiorrhiza injection can significantly improve pregnancy with fetal growth restriction, its effects are better than those of the control group.
of the control group ($t = 4.040, 2.9817$ and $4.418$, all $P < 0.05$), the differences were statistically significant. The neonatal weight of the study group was ($2.576.18 \pm 621.04$) g, which of the control group was ($2.384.09 \pm 428.76$) g, and there was significant difference between the two groups ($t = 1.999, P < 0.05$). **Conclusion** Amino acid combined with Salvia miltiorrhiza injection can effectively improve the clinical indicators of pregnant woman and fetal growth restriction, with good clinical effects.

【Key words】 Fetus growth retardation; Salvia miltiorrhiza injection; Amino acid

**Fund:** Yuyao City, Zhejiang Province Science and Technology Project (2014Y08)
论著

核因子-κB、幽门螺杆菌细胞毒素相关蛋白A在特发性血小板减少性紫癜发病中的作用

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【摘要】目的对特发性血小板减少性紫癜(IPA)患者的核因子-κB(NF-κB)、幽门螺杆菌(Hp)、幽门螺杆菌细胞毒素相关蛋白A(CagA)、血小板(PLT)及血小板相关IgG(PAIgG)进行检测分析,探讨NF-κB、CagA在IPA发病机制中的作用,寻找改善IPA预后的临床方法。方法SABC法检测NF-κB、CagA、尿素呼气试验(ubT)检测Hp,酶联免疫法测定外周血CagA、PA-IgG,全自动血细胞分析仪测定PLT。依据检测结果将患者分为Hp+CagA+NF−B-、Hp+CagA+NF−κB+、Hp+CagA-NF−κB-、Hp-CagA+NF−κB-、Hp-NF−κB+、Hp-NF−κB-六组。对各组PA-IgG、PLT进行统计学分析。结果224例IPA,Hp阳性175例,阳性率78.13%。175例Hp+,其中CagA+91例,Hp+中占52.1%,总体中占43.63%。NF−κB+共108例,总阳性率46.21%;其中Hp+CagA+中78例,阳性率85.71%;Hp+CagA-中21例,阳性率25%;49例Hp-中9例NF−κB+,占18.37%。分析各组PA-IgG、PLT,Hp+较高,差异有统计学意义(P<0.05)。结论CagA可能直接或通过激活NF−κB参与免疫应答,致IPA患者PA-IgG升高,血小板降低。

【关键词】幽门螺杆菌;幽门螺杆菌细胞毒素相关蛋白A;核因子-κB;紫癜,血小板减少性

【基金项目】浙江省绍兴市社会科学界联合会(125347)

The role of nuclear factor kappa B and helicobacter pylori associated protein A in the pathogenesis of idiopathic thrombocytopenic purpura

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【Abstract】Objective To detect and analyze nuclear factor kappa B (NF-κB), Helicobacter pylori (HP), Helicobacter pylori cytotoxin associated protein A (CagA), platelet (PLT) and platelet associated IgG (PA IgG) in 224 patients with idiopathic thrombocytopenic purpura (ITP) from three urban hospitals of Shaoxing, in order to explore the role of NF-κB and CagA in the pathogenesis of ITP, then to improve the prognosis of ITP. Methods SABC method was used to detect the NF-κB, 13C breath test for the determination of the HP infection, CagA and PA - IgG were tested by enzyme linked immunosorbent assay. Automatic blood cell analyzer was used to measure PLT. According to the test results, the patients were divided into Hp + CagA + NF-κB +, Hp + CagA + NF - κB-, Hp + CagA - NF - κB +, Hp + CagA - NF - κB-, Hp - NF - κB +, Hp - NF - κB-, Hp - NF - κB - PLT groups, and PA - IgG, PLT of the six groups were statistically analyzed. Results Of 224 cases with ITP, 175 cases of HP positive, the positive rate was 78.13% . CagA + 91 cases in 175 cases of HP +, accounting for 52%, overall 43.63% . NF-κB + 108 cases, the positive rate was 46.21%, 78 cases were found in Hp + CagA +, accounting for 85.71% in CagA +. In 84 cases of Hp + cagA -, there were 21 cases NF-κB +, the positive rate was 25%. In 49 of HP-, 9 cases with NF-κB +, accounting for 18.37%. PLT and PA-IgG were compared among the groups. The count of PLT of group Hp +, group Hp + CagA + and group NF - κB + was lower than group Hp -, group Hp + CagA - and group NF - κB -. However, the level of PA-IgG of group Hp +, group Hp + CagA + and group NF - κB + was higher than group
Hp−, group Hp + cagA− and group NF−κB−, the difference was statistically significant (P < 0.05).

Conclusion

CagA may directly or through the activation of NF−κB take part in the immune response of ITP, cause PA−IgG increased and thrombocytopenia.

【Key words】 Helicobacter pylori; Cytotoxin−associated protein; Nuclear factor−kappa B; Purpur, thrombocytopenic

Fund Program: Subject source: shaoxing federation of social science(125347)
超声造影术在评价颈动脉粥样硬化斑块
稳定性中的应用

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【摘要】目的探讨超声造影术 (CEUS) 在评价颈动脉粥样硬化斑块 (CAP) 稳定性中的应用价值。方法选择 162 例颈动脉粥样硬化斑块患者为研究组,选取同期 34 例颈动脉强回声斑块患者为对照组,采用彩色多普勒超声进行检查,观察患者颈动脉粥样硬化斑块情况。结果研究组 162 例患者中脂质型、纤维型、钙化型和溃疡型斑块患者(21.60%、33.33%、34.57%和10.37%)均高于对照组(5.88%、2.94%、2.94%和2.94%),差异均有统计学意义(χ² = 4.537, 12.859, 3.859和3.855, P < 0.05)。研究组 162 例患者中软斑块患者 75 例,混合斑块患者 36 例,硬斑块患者 51 例,软斑块的新生血管分级 36.00%,45.33%和10.33%高于混合斑块 30.56%,41.67%和8.33%和硬斑块 31.37%,13.72%和7.84%。软斑块组患者的峰值强度(-86.41±7.81%),达峰时间(8.34±1.62)s,平均渡越时间(24.18±8.67)s明显低于混合斑块(-100.73土6.52%),(9.79±2.14) s,(28.93±9.11)s和硬斑块患者(-104.14±6.15%),(10.23±2.33)s,(30.07±9.48)s,差异有统计学意义(t = 9.518, 6.966, 2.658, 13.592, 5.374, 3.855, P < 0.05),而混合斑块和硬斑块患者比较,差异无统计学意义(P > 0.05)。CEUS 诊断的斑块直径(4.13±0.75)mm 显著大于常规超声的(3.62±1.14)mm,差异有统计学意义(t = 4.757, P = 0.000)。结论超声造影可定性检测动脉粥样硬化斑块新生血管情况,能够进行斑块定量评估,评价斑块的稳定性,且灵敏度较高。

【关键词】超声检查,多普勒,彩色;血管造影术;动脉粥样硬化;稳定性

基金项目:浙江省宁波市卫生局项目(2014C0062)

Application of contrast–enhanced ultrasonography in the evaluation of the stability of carotid atherosclerotic plaque
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【Abstract】ObjectiveTo study the application of contrast–enhanced ultrasonography (CEUS) in the evaluation of the stability of carotid atherosclerotic plaque (CAP). Methods162 patients with CAP were selected as study group. Meanwhile, 34 patients with carotid artery strong echo plaques were selected as control group. The color doppler ultrasound was used to observe the CAP. ResultsThe proportions of lipid type, fibrous type, calcification and ulcer plaque in the study group were 21.60%, 33.33%, 34.57% and 10.37%, which were higher than those of the control group (5.88%, 2.94%, 2.94% and 2.94%), the differences were statistically significant (χ² = 4.537, 12.859, 3.859 and 3.855, P < 0.05). There were 75 patients of soft plaques, 36 patients with mixed plaques, 51 patients with hard plaque in 162 patients. The new blood vessels classification in soft plaque group (36.00%, 45.33% and 10.33%) were higher than the mixed plaque (30.56%, 41.67% and 8.33%) and hard plaque group (31.37%, 13.72% and 7.84%). The peak intensity (-86.41±7.81) dB, mean transit time (24.18±8.67) s in the soft plaque group were significantly lower than the mixed plaque (-100.73±6.52) dB, (9.79±2.14) s and (28.93±9.11) s and hard plaque patients ( -104.14±6.15 dB, (10.23±2.33) s, (30.07±9.48) s), the differences were statistically significant (t = 9.518, 6.966, 2.658, 13.592, 5.374, 3.855, P < 0.05), but there were no statistically significant differences between mixed plaque and hard plaque (all P > 0.05). The plaque diameter (4.13±0.75) mm diagnosed by CEUS was significantly larger than that of conventional ultrasound (3.62±1.14) mm, the difference was statistically significant (t = 4.757, P = 0.000). ConclusionThe CEUS can qualitatively detect the atherosclerotic plaque angiogenesis, can quantitatively assess plaque, evaluate the stability of the plaques, and the sensitivity is high.

【Key words】Ultrasonography, doppler, color; Angiography; Atherosclerosis; Stability

Fund Program: Health Bureau Project of Ningbo City of Zhejiang Province (2014C0062)
Analysis of effect of severe full - time nursing group on nursing intervention of neonatal respiratory distress syndrome  
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【Abstract】 Objective To investigate the intervention value of intensive care team in neonatal respiratory distress syndrome. Methods 110 cases of neonatal respiratory distress syndrome were selected, by using a random number table method they were randomly divided into the observation group and the control group, 55 cases in each group. The control group was treated with routine care model, the observation group dedicated care team for critically ill children. The incidence of complications, mechanical ventilation time, cost of hospitalization, duration of hospitalization were compared after the care of children. Results The incidence rates of infection, abdominal bloating and intra-ventricular hemorrhage in the observation group (3.64%, 1.82%, 0.00%) were significantly lower than those in the control group (20.00%, 16.36%, 5.45%), the incidence of infection, abdominal distension between the two groups had statistically significant differences (χ² = 4.852, P = 0.027; χ² = 7.040, P = 0.008). The mechanical ventilation time, hospitalization time in the observation group [(11.23 ± 2.17) d, (23.45 ± 5.45) d] were significantly shorter than those in the control group [(16.78 ± 4.52) d, (26.78 ± 6.47) d], there were statistically significant differences between the two groups (t = 8.209, P = 0.000; t = 2.919, P = 0.004). The hospitalization costs of the observation group[(20462.78 ± 214.45) yuan] was significantly lower than the control group [(24975.45 ± 312.45) yuan], there was significant difference between the two groups (t = 8.311, P = 0.000). The total effective rate of the observation group was 98.18%, which was higher than 87.27% of the control group, there was statistically significant difference between the two groups (χ² = 4.852, P = 0.027). Conclusion Full implementation of critical care nursing team intervention on neonatal respiratory distress syndrome, can effectively reduce the incidence of children with complications, mortality, shorter hospital stays, reduce hospitalization costs, the effect is significant and should be introduced. 

【Key words】 Respiratory distress syndrome, newborn; Critical illness; Management quality circles; Nurse's practice patterns 

Fund program: Science and technology planning project of Jiaxing City, Zhejiang Province (2014AY21050)
洛铂与复方苦参注射液联合腹腔灌注治疗卵巢癌并发恶性腹水的疗效及其对肿瘤坏死因子的影响

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摘要
目的 评估洛铂与复方苦参注射液联合腹腔灌注治疗卵巢癌并发恶性腹水的短期效果及其对肿瘤坏死因子 (TNF) 的影响。
方法 将 60 例确诊为卵巢癌并发恶性腹水的患者按随机数字表法分为三组: 洛铂联合复方苦参注射液灌注组 (联合组)、洛铂单药灌注组 (洛铂组) 及复方苦参注射液单药灌注组 (复方苦参组), 每组 20 例。三组均置中心静脉导管于腹腔内以便引流积液及药物灌注, 治疗前开始前三组均排尽腹腔内的积液, 之后按照上述分组行腹腔灌注治疗。比较三组治疗效果、副反应以及对血清 TNF 水平的影响。
结果 三组患者均顺利完成治疗, 联合组有效率为 95%, 洛铂组为 60%, 复方苦参组为 55%, 联合组有效率明显优于单药组 ($\chi^2 = 7.025, P < 0.05$), 且不良反应较单药组无明显增加 ($\chi^2 = 1.026, P > 0.05$); 三组灌注治疗后的血清 TNF 水平均明显低于治疗前 ($t = 15.40, 13.82, 8.90, \text{均 } P < 0.05$), 且联合组 TNF 水平降低更明显, 差异有统计学意义 ($F = 9.719, P < 0.05$)。
结论 洛铂与复方苦参注射液联合腹腔灌注是一种更加有效的治疗卵巢癌并发恶性腹水的方法, 临床值得推荐。

Key words：卵巢肿瘤；腹水；细胞因子类；洛铂；复发苦参注射液

基金项目：江苏大学医学临床科技发展基金 (JLY20160069)

Therapeutic effect of losecplatin combined with compound matrine in the intraperitoneal perfusion treatment of ovarian cancer with malignant ascites and its effect on TNF, Zhang Tao, Xu Haiting, Hui Hua, Geng Chong, Ding Manhua, Xu Jing.

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Abstract Objective To evaluate the effect of losecplatin combined with compound matrine in the intraperitoneal perfusion treatment of ovarian cancer with malignant ascites and its influence on the level of serum tumor necrosis factor alpha (TNF –) of ovarian cancer marker. Methods 60 ovarian cancer patients with malignant ascites were divided into three groups: losecplatin combined with compound matrine perfusion group (combination group), single losecplatin perfusion group (losecplatin group) and single compound matrine perfusion group (compound matrine group), 20 cases in each group. Before treatment, all the three groups were drained intraperitoneal fluid, then given the above – mentioned group of intraperitoneal perfusion therapy. The effects, side effects and serum TNF – levels of the three groups were compared. Results The patients of the three groups were successfully completed treatment, the effective rate of the combination group was 95%, which of the losecplatin group was 60%, which of the compound matrine group was 55%. The effective rate of the combination group was significantly higher than that of the single drug group ($\chi^2 = 7.025, P < 0.05$), and the adverse reaction of the combination group was not significantly increased ($\chi^2 = 1.026, P > 0.05$). The serum TNF – levels of the three groups after the perfusion treatment were significantly decreased ($t = 15.40, 13.82, 8.90, \text{all } P < 0.05$), TNF – level of the combination group was significantly lower, the difference was statistically significant ($F = 9.719, P < 0.05$). Conclusion Losecplatin combined with compound matrine in the intraperitoneal perfusion is a more effective method for the treatment of ovarian cancer with malignant ascites, which is worthy of promotion.

Key words：Ovarian neoplasms; Ascites; Cytokines; Lobaplatin; Compound matrine

Fund program: Jiangsu University Medical Science and Technology Development Fund(JLY20160069)
小切口白内障摘除治疗急性闭角型青光眼合并白内障临床研究

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【摘要】目的  观察小切口白内障摘除治疗急性闭角型青光眼合并白内障的临床效果。方法  选择急性闭角型青光眼合并白内障患者58例,采用随机数字表法将58例患者分为对照组和观察组各29例,对照组予以常规方法治疗,观察组予以小切口白内障摘除术。观察两组治疗前后的眼压、前房深度、视力的改变,比较两组治疗后并发症发生率及患者对治疗的满意度。结果  治疗前两组患者的眼压、视力情况、前房深度差异均无统计学意义(P > 0.05);治疗后,观察组眼压、前房深度、视力分别为(10.2 ± 4.0) mmHg、(3.3 ± 0.5) mm、(0.85 ± 0.08),对照组分别为(17.5 ± 5.0) mmHg、(3.2 ± 0.5) mm、(0.50 ± 0.06),两组眼压、视力、前房深度均有所改善,观察组眼压、前房深度改善情况均优于对照组(t = 0.120, 0.520, 1.012,均P < 0.05);观察组患者对治疗的满意率(96.6%)高于对照组(75.8%) (χ² = 9.823, P < 0.05);治疗后半年随访,两组并发症发生率差异无统计学意义(χ² = 1.04, P > 0.05)。结论  对于急性闭角型青光眼合并白内障患者予以小切口白内障摘除术治疗效果良好,且术后的并发症少,患者对治疗的满意度高,值得临床推广。

【关键词】白内障摘除术;青光眼,闭角型;白内障

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Clinical study of small incision cataract extraction in the treatment of acute angle-closure glaucoma complicated with cataract  Wu Jianwei, Xia Lin.  
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【Abstract】 Objective  To study the clinical effect of small incision cataract extraction in the treatment of acute angle-closure glaucoma with cataract.  
 Methods  Fifty-eight patients with acute angle-closure glaucoma combined with cataract were selected, and according to the digital table they were randomly divided into two groups: control group and observation group. The patients in the control group were treated by conventional method. The patients in the observation group were treated with small incision cataract. The changes of intraocular pressure, anterior chamber depth and visual acuity before and after treatment were observed. The incidence of complications and the satisfaction of treatment were compared between the two groups.  
 Results  There were no significant differences in IOP, visual acuity and anterior chamber depth between the two groups before treatment (all P > 0.05). After treatment, the intraocular pressure, anterior chamber depth and visual acuity of the observation group were (10.2 ± 4.0) mmHg, (3.3 ± 0.5) mm, (0.85 ± 0.08), respectively, which of the control group were (17.5 ± 5.0) mmHg, (3.2 ± 0.5) mm and (0.50 ± 0.06), respectively. The improvement of intraocular pressure and anterior chamber depth of the observation group was more significant than the control group (t = 0.120, 0.520, 1.012, all P < 0.05). The satisfaction rate of the observation group (96.6%) was higher than that of the control group (75.8%) (χ² = 9.823, P < 0.05). There was no significant difference in the incidence of complications between the two groups (P > 0.05).  
 Conclusion  Small incision cataract extraction is an effective treatment for acute angle-closure glaucoma complicated with cataract, and the postoperative complications are less. The patients are satisfied with the treatment and deserve to be popularized.

【Key words】 Cataract extraction; Glaucoma angle-closure; Cataract  
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Application of CD10, desmin and vimentin in differential diagnosis of special types of uterine tumors  

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【Abstract】Objective To study the application value of CD10, desmin and vimentin in the diagnosis and differential diagnosis of special types of uterine tumors. Methods The clinical data of 79 cases of special types of uterine cancer were retrospectively analyzed. CD10, desmin and vimentin were detected respectively by immunohistochemical streptavidin–peroxidase (SP) method. Results The positive rates of CD10 in endometrial stromal sarcoma, epithelioid leiomyoma, atypical leiomyoma, leiomyosarcoma, carcinosarcoma were 76.2%, 0.0%, 13.3%, 30.8, 75.0%, respectively. The positive rates of vimentin in endometrial stromal sarcoma, epithelioid leiomyoma, atypical leiomyoma, leiomyosarcoma, carcinosarcoma were 100.0%, 5.6%, 0.0%, 46.2, 83.3%, respectively. The positive rates of desmin in endometrial stromal sarcoma, epithelioid leiomyoma, atypical leiomyoma, leiomyosarcoma, carcinosarcoma were 0.0%, 61.1%, 53.3%, 30.8, 0.0%, respectively. The positive rates of vimentin and CD10 in endometrial stromal sarcoma and carcinosarcoma were all significantly higher than those in atypical leiomyoma, epithelioid leiomyoma (CD10: $\chi^2 = 23.255$, 13.829, 15.880, 8.102, all $P = 0.000$; vimentin: $\chi^2 = 35.159$, 36.000, 15.556, 16.440, all $P = 0.000$). The positive rates of desmin in atypical leiomyoma, epithelioid leiomyoma tissues were significantly higher than those in endometrial interstitial sarcomas, carcinosarcoma (CD10: $\chi^2 = 11.480$, 6.717, 17.875, 9.097, all $P = 0.000$). Conclusion CD10, desmin and vimentin can be used as sensitive indicators for the differential diagnosis of uterine tumors with special types.  

【Key words】Uterine neoplasms; CD10; Desmin; Vimentin; Diagnosis, differential
新辅助化疗联合保乳术治疗Ⅱ、Ⅲ期乳腺癌的效果观察

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【摘要】目的探讨Ⅱ、Ⅲ期乳腺癌患者经新辅助化疗联合保乳术治疗的有效性及安全性。方法选取85例Ⅱ、Ⅲ期乳腺癌患者,分为保乳组与改良根治组,分别为42例及43例,保乳组术前使用新辅助化疗,而改良根治组未化疗,观察两组患者的疗效、随访结果等。结果经过治疗后,保乳组的CR及PR例数共30例,有效率为71.4% ,而改良根治组的CR及PR例数共21例,有效率为55.8%;两组差异有统计学意义(t = 4.518, P = 0.034)。根据乳房外形评价标准,34例患者为优,占80.9%;良为5例,占11.9%;差为2例,占4.8%,其优良率92.9%。根据患者自身对乳房外形进行判断,非常满意为37例,占88.1%;基本满意为3例,占7.1%;不满意为2例,占4.8%,满意率为95.2%。结论Ⅱ、Ⅲ期乳腺癌患者保乳手术之前采取新辅助化疗可使临床分期降低,术后疗效及乳房外观均良好,具有重要的临床应用价值。

【关键词】乳腺肿瘤; 抗肿瘤联合化疗方案; 保乳术

Observation of the efficacy of neoadjuvant chemotherapy combined with conserving – breast surgery in the treatment of patients with stage Ⅱ, Ⅲ breast cancer  Fan Jinxin, Hong Bo, Zhong Zhilong, Su Zhaowei. Department of Surgery, the Integrated Traditional Chinese and Western Medicine Hospital of Jiaode, Jiaode, Zhejiang 311600, China

【Abstract】Objective To observe the efficacy and safety of neoadjuvant chemotherapy combined with conserving – breast surgery in treatment of patients with stage Ⅱ, Ⅲ breast cancer. Methods 85 patients with stage Ⅱ, Ⅲ breast cancer were selected, 42 patients in breast – conserving group and 43 patients in modified radical group. Neoadjuvant chemotherapy was used in breast – conserving, while was not used in modified radical group. Efficacy and follow – up results were observed in the two groups. Results After treatment, the CR and PR in the breast – conserving group was 30 cases and the effective rate was 71.4%, which of the modified radical group was 55.8% with 21 patients of CR and PR. After the comparative analysis, the difference was statistically significant(t = 4.518, P = 0.034). After followed for 12 – 36 months, the patients in the breast conserving group were all alive and one case of local recurrence. According to breast shape evaluation criteria, 34 patients were excellent, accounting for 80.9%; good for the five cases, accounting for 11.9%; bad of two cases, accounting for 4.8% and the excellent rate was 92.9%. According to the patients’ own judgment on the breast shape, 37 cases were very satisfied, accounting for 88.1%; basic satisfaction for three cases, accounting for 7.1%; dissatisfied 2 cases, accounting for 4.8% and the satisfaction rate was 95.2%. Conclusion Patients with breast cancer of Ⅱ, Ⅲ period before breast – conserving surgery taking chemotherapy can reduce the clinical stage while the postoperative efficacy and breast appearance are good with important clinical value.

【Key words】Breast neoplasms; Antineoplastic combined chemotherapy protocols; Breast – conserving surgery
腹腔游离气在胃肠道穿孔 CT 定位诊断中的应用价值

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【摘要】目的 探讨腹腔游离气的多排螺旋 CT (MSCT) 分布特点及其对胃肠道穿孔的定位诊断价值。方法 回顾性收集 60 例消化道穿孔病例, 分析、观察 CT 图像中游离气的分布情况, 以 Treitz 韧带为界, 将消化道分为上消化道和下消化道, 应用 χ² 检验, 分析其腹腔游离气分布的统计学差异, 同时分析上、下消化道各个穿孔部位之间腹腔游离气分布的统计学差异。结果 上消化道穿孔 38 例, 下消化道穿孔 22 例, 两组间腹腔游离气分布差异有统计学意义 (χ² = 22.33, P < 0.001), 上消化道穿孔中, 胃穿孔 13 例, 十二指肠穿孔 25 例, 两者之间腹腔游离气分布差异无统计学意义 (χ² = 1.97, P > 0.05)。下消化道穿孔中, 小肠穿孔 11 例, 结肠穿孔 11 例, 两者间游离气分布差异有统计学意义 (χ² = 8.98, P < 0.05)。结论 MSCT 腹腔游离气的分布特点对胃肠道穿孔定位有一定诊断价值。

【关键词】胃肠道穿孔; 腹腔游离气; 体层摄影术, X 线计算机

The applied value of intraperitoneal free gas in diagnosis of the site of gastrointestinal perforation using multi – slice CT  Su Jianwei, Du Jingbo, Zhao Pengfei, Fu Shunbin, Yao Yonggang.

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【Abstract】Objective To study the distribution characteristics of intraperitoneal free gas and the location value of the site of gastrointestinal perforation using multi – slice CT (MSCT). Methods 60 cases of gastrointestinal perforation were retrospectively collected. The distribution of the intraperitoneal free gas in CT image was analyzed and observed. The digestive tract were divided to the upper digestive tract and the lower digestive tract by Treitz ligament. The distribution of the intraperitoneal free gas was analyzed using χ² test. The distribution of the intraperitoneal free gas between each different perforational site was analyzed. Results 38 cases of the site of gastrointestinal perforation located in upper gastrointestinal tract and 22 cases located in lower gastrointestinal tract, there was statistically significant difference between the upper digestive tract and the lower digestive tract about the distribution of the intraperitoneal free gas(χ² = 22.33, P < 0.001). In the cases of upper gastrointestinal tract perforation, 13 cases of the site located in stomach and 25 cases located in duodenum, there was no statistically significant difference between stomach and duodenum (χ² = 1.97, P > 0.05). In the cases of lower gastrointestinal tract perforation, 11 cases of the site located in bowel and 11 cases located in colon, there was statistically significant difference between bowel and colon(χ² = 8.98, P < 0.05). Conclusion The MSCT distribution of the intraperitoneal free gas has important value in localization diagnosis of gastrointestinal perforation.

【Key words】Gastrointestinal perforation; Intraperitoneal free gas; Tomography, X – ray computer
七氟烷与丙泊酚对全子宫切除术患者认知功能的影响及麻醉效果比较

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【摘要】目的 比较七氟烷与丙泊酚对广泛全子宫切除术患者认知功能的影响及麻醉效果。方法 选择行广泛全子宫切除术患者94例，依照抽签法分为对照组、观察组，每组47例，分别行丙泊酚和七氟烷麻醉，观察两组术后简易精神状态检查（MMSE）评分、认知功能障碍发生率及炎性因子、应激反应、血流动力学变化，比较两组麻醉效果和并发症发生情况。结果 术后，观察组MMSE评分高于对照组（t = 2.346，P = 0.021）；观察组认知功能障碍发生率为2.12%，低于对照组的12.76%，两组差异有统计学意义（χ² = 3.858，P = 0.049）。观察组炎性因子、应激反应及血流动力学指标均优于对照组（均P < 0.05）。结论 七氟烷对广泛全子宫切除术患者认知功能的影响较丙泊酚小，且麻醉效果更确切。

【关键词】子宫切除术；七氟烷；丙泊酚；麻醉；认知功能

Comparison of the anaesthesia effects of sevoflurane and propofol in extensive hysterectomy patients and the influence on cognitive function Su Liren.

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【Abstract】Objective To compare the anaesthesia effects of sevoflurane and propofol in extensive hysterectomy patients and the influence on cognitive function. Methods 94 patients of extensive hysterectomy were selected, according to the drawing method they were divided into control group and observation group, 47 cases in each group, the patients were given propofol or sevoflurane anaesthesia respectively. The postoperative mini – mental state examination(MMSE) score and the incidence of cognitive dysfunction, inflammation factors, stress reaction, hemodynamic, anesthetic effect and complications were observed in the two groups. Results After operation, the MMSE score of the observation group was higher than that of the control group (25.44 ± 3.18 points vs. 23.96 ± 2.93 points) (t = 2.346, P = 0.021), the incidence rate of cognitive dysfunction in the observation group was lower than that of the control group (2.12% (1/47) vs. 12.76% (6/47)), there was statistically significant difference between the two groups (χ² = 3.858, P = 0.0495). The inflammatory factors, stress reaction and hemodynamic index of the observation group were better than those of the control group (all P < 0.05). The spontaneous breathing recovery time, open time, extubation time of the observation group were less than those of the control group [(6.19 ± 0.77) min vs. (8.75 ± 1.09) min, (6.89 ± 0.86) min vs. (9.36 ± 1.7) min, (9.47 ± 1.43) min vs. (11.26 ± 1.43) min], there were statistically significant differences between the two groups (t = 13.150, 11.661, 6.619, P = 0.000, 0.000, 0.000). The complication rate had no difference between the two groups (P > 0.05). Conclusion The effect of sevoflurane on cognitive function in patients with extensive hysterectomy is less than propofol, and the anaesthesia effect is more precisely.

【Key words】Hysterectomy; Sevoflurane; Propofol; Anaesthesia; Cognitive function
心房颤动 926 例抗凝状况分析

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【摘要】目的 分析心房颤动(以下简称房颤)患者抗凝状况。方法 对 926 例房颤患者的抗凝治疗情况进行回顾性分析, 旨在总结经验, 提高对房颤的抗凝认识。结果 在 926 例房颤患者中, 有 675 例患者未进行抗凝治疗, 占 72.89%; 而仅有 251 例患者进行了抗凝治疗, 占 27.11%。年龄 >75 岁患者中仅有 66 例进行抗凝治疗, 占 33.17%。在合并冠心病患者中 17.60% 患者进行抗凝治疗, 合并糖尿病患者中 28.37% 患者进行抗凝治疗, 合并高血压患者中 28.32% 患者进行抗凝治疗, 合并心功能不全患者中 30.77% 患者进行抗凝治疗。年龄 >75 岁、高血压、冠心病、临床医师的治疗策略以及患者对治疗的选择都是华法林使用情况的影响因素, 但是其中只有年龄 >75 岁、冠心病、患者选择治疗因素等三个因素差异有统计学意义 (OR =7.02, 12.73, 4.79, all P<0.05)。675 例未抗凝治疗患者中 101 例患者因无华法林抗凝治疗指征而未使用华法林进行抗凝治疗, 占 14.96%。另外, 有 574 例 AF 患者有华法林抗凝治疗指征而未用华法林抗凝治疗, 分析其原因: 63 例有抗凝禁忌证, 172 例为医生过分担心出血并发症, 440 例患者不能按照要求检测 INR。结论 在基层医院 AF 患者应用华法林抗凝治疗严重不足, 应提高广大基层医务人员与患者对房颤并发栓塞的危险性的认识, 做好对患者的宣教, 减少房颤患者栓塞事件的发生。

【关键词】心房颤动; 抗凝; 基层医院

【基金项目】浙江省医药卫生科技项目(2014ZHA006)

Analysis of anticoagulation in 926 patients with atrial fibrillation Sun Linqiang, Yu Jian, He Zhengfei, Chen Zhiyun, Liu Qunhua, Ling Qilong, Hu Weilyu.
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【Abstract】Objective To analyze the anticoagulation in patients with atrial fibrillation. Methods A retrospective analysis of anticoagulant therapy situation in 926 patients with atrial fibrillation was conducted, in order to sum up experience and improve the understanding of atrial fibrillation. Results In 926 patients with atrial fibrillation, there were no anticoagulant therapy in 675 patients, accounting for 72.89%, while only 251 cases received the treatment of anticoagulation, accounting for 27.11%. Only 66 patients aged >75 years were treated with anticoagulant therapy, accounting for 33.17%. The patients with coronary heart disease, in 17.60% and with anticoagulation treatment, the patients with diabetes in 28.37% and received anticoagulation therapy, 28.32% patients with anticoagulation therapy in patients with hypertension, 30.77% patients with cardiac insufficiency with anticoagulant therapy. Choice of treatment of aged >75, hypertension, coronary heart disease, clinical treatment strategies and patients were the main factors that affected the use of warfarin, but only >75 years of age, coronary heart disease, choice of treatment factors with statistical significance of three factors (OR =7.02, 12.73, 4.79, all P<0.05). 675 cases without anticoagulant therapy in 101 patients with non-warfarin treatment indications without the use of warfarin anticoagulation treatment, accounted for 14.96%. In addition, there were 574 AF patients with warfarin treatment indications and treatment with warfarin, analysis of its causes, 63 cases had anticoagulant contraindications, 172 cases for the doctor too much about bleeding complications, 440 patients were not in accordance with the requirements of the detection of INR. Conclusion The positive effect of warfarin in prevention of ischemic stroke, but in basic hospital application of warfarin anticoagulation in patients with severe AF deficiency, should raise the awareness of risk of grassroots medical staff and patients of atrial fibrillation complicating embolism, do a good job of educating patients, to reduce the incidence of embolic events in patients with atrial fibrillation.

【Key words】Atrial fibrillation; Anticoagulation; Basic level hospital

【Fund program】Zhejiang medical and health science and technology project(2014ZHA006)
布地奈德混悬液雾化吸入联合妥洛特罗贴剂治疗小儿喘息性肺炎的疗效及其对炎性因子的影响

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【摘要】目的 探讨布地奈德混悬液雾化吸入联合妥洛特罗贴剂治疗小儿喘息性肺炎的疗效及其对血清炎性因子的影响。方法 选取 90例喘息性支气管肺炎患儿,采用随机数字表法分为观察组和对照组,每组45例。对照组患儿给予常规西医治疗,并给予盐酸氨溴索雾化吸入。观察组在对照组治疗基础上给予布地奈德混悬液雾化吸入联合妥洛特罗贴敷。1个疗程后评价疗效。比较两组临床症状改善情况、临床疗效及血清细胞因子水平、炎症指标、不良反应发生情况。结果 观察组气促、咳嗽、喘鸣音和肺部啰音等临床体征的消失时间均显著短于对照组,分别为(7.58±0.72)d、(8.42±1.33)d、(5.66±0.74)d、(7.76±0.75)d和(4.21±0.29)d、(2.59±0.71)d、(3.41±0.69)d和(5.29±0.71)d,两组差异均有统计学意义(t=29.124、25.940、14.913、16.044,均P<0.05)。观察组临床总有效率为93.3%,显著高于对照组的80.0%,两组差异有统计学意义(χ²=5.214,P<0.05)。两组治疗前外周血嗜酸粒细胞阳离子蛋白(ECP)、嗜酸粒细胞计数(Eos)水平差异无统计学意义(均P>0.05);两组患儿治疗后外周血ECP、Eos均较治疗前显著降低,两组差异均有统计学意义(t=8.363、4.307、13.431、12.949,均P<0.05)。且观察组治疗前外周血ECP、Eos显著低于对照组(t=7.792、5.838,均P<0.01)。两组治疗前外周血干扰素γ(IFN-γ)、白细胞介素4(IL-4)、IL-6以及IL-10水平差异均无统计学意义(均P>0.05);两组治疗前外周血IL-4、IL-6以及IL-10均显著降低,IFN-γ显著升高,与治疗前比较,差异均有统计学意义(t=17.216、20.051、17.891、15.417、32.724、26.709、28.028、112.26、708,均P<0.05)。且观察组治疗后外周血各项炎性细胞因子的改善程度显著优于对照组,差异均有统计学意义(t=9.306、4.150、5.117、4.124,均P<0.05)。两组在治疗期间未发生严重不良反应。结论 布地奈德混悬剂雾化吸入联合妥洛特罗贴敷治疗小儿喘息性肺炎疗效确切,可有效缓解咳嗽、喘息等症状,其机制可能与通过纠正Th1/Th2免疫失衡状态、降低气道炎性反应有关。

【关键词】肺炎;投药,吸入;儿童;布地奈德混悬液;妥洛特罗

Effect of pulmicort Respules inhalation combined with tulobuterol in treating infantile asthmatic pneumonia and its effect on serum inflammatory factors Zhong Mengmeng. Department of Pediatric Respiratory Diseases, Wenzhou Hospital of Integrated Traditional Chinese and Western Medicine, Wenzhou, Zhejiang 325000, China

【Abstract】Objective To study the effect of atomized inhalation of pulmicort Respules combined with tulobuterol in the treatment of children with wheezing pneumonia and its influence on serum inflammatory factors. Methods 90 children with asthmatic bronchopneumonia were selected, and they were randomly divided into observation group and control group, 45 cases in each group. The control group received routine western medicine and atomized inhalation of ambroxol hydrochloride. The observation group was treated with pulmicort Respules inhalation combined with tulobuterol paste service on the basis of the control group. After 1 course of treatment, the efficacy was evaluated. The improvement of clinical symptoms, clinical efficacy, serum cytokine level, inflammatory index and adverse reaction were compared between the two groups. Results The disappearance time of clinical signs such as shortness of breath, cough, wheezing and pulmonary rates in the observation group were significantly shorter than those in the control group [(7.58±0.72)d, (8.42±1.33)d, (5.66±0.74)d, (7.76±0.75)d vs. (4.21±0.29)d, (2.59±0.71)d, (3.41±0.69)d, (5.29±0.71)d, P<0.01], and there were statistically significant differences between the
two groups ($t = 29.124, 25.940, 14.913, 16.044, \text{all } P < 0.05$). The total effective rate in the observation group was 93.3%, which was significantly higher than 80.0% in the control group ($\chi^2 = 5.214, P < 0.01$). There was no significant difference in the ECP and Eos levels between the two groups before treatment ($P > 0.05$). The ECP and Eos in the peripheral blood of the two groups were significantly lower than those before treatment ($t = 8.363, 4.307, 13.431, 12.949, \text{all } P < 0.05$). The ECP and Eos of the observation group were significantly lower than those of the control group ($t = 7.792, 5.838, \text{all } P < 0.05$). IL-4, IL-6 and IL-10 in peripheral blood of the two groups before treatment were not significantly different ($\text{all } P > 0.05$). After treatment, the levels of IL-4, IL-6 and IL-10 were significantly decreased and the IFN-γ level was significantly higher than before treatment ($t = 17.216, 20.051, 17.891, 15.417, 32.724, 26.709, 28.112, 26.708, \text{all } P < 0.05$). The levels of inflammatory cytokines in the peripheral blood of the observation group were significantly better than those of the control group ($t = 9.306, 4.150, 5.117, 4.124, \text{all } P < 0.05$). No serious adverse events occurred in the two groups during the treatment. **Conclusion** Pulmicort respules combined with tulobuterol is effective in the treatment of children with wheezing pneumonia. It can relieve the symptoms of cough and wheezing. The mechanism may be related to the imbalance of Th1/Th2 imbalance and the reduction of airway inflammation.

**Key words** Pneumonia; Administration, inhalation; Child; Pulmicort respules; Trolol
持续脑脊液引流在重度新生儿脑室内及蛛网膜下腔出血中的应用研究

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【摘要】目的：探讨持续脑脊液引流在重度新生儿脑室内及蛛网膜下腔出血中的临床效果。方法：按照随机数字表法，将136例重度脑室内及蛛网膜下腔出血新生儿分为两组，每组68例，对照组采用腰穿配合常规治疗，观察组采用冠状缝穿刺引流血性脑脊液配合常规治疗。分析比较两组疗效。结果：观察组脑脊液压力及脑脊液细胞学检查恢复正常时间分别为(7.0±1.4)d、(8.1±3.5)d，致残率为38.32%，均低于对照组的(9.0±1.8)d、(10.5±3.6)d、55.88% (t=9.17，10.29，χ²=21.99，均P<0.01)。观察组和对照组疗效评价差异有统计学意义(91.18% vs. 73.53%，χ²=8.39，P<0.05)。结论：持续脑脊液引流使重度脑室内及蛛网膜下腔出血的患儿脑脊液压力及细胞数恢复正常时间缩短，加快了神经系统的恢复，减少了并发症，降低了患儿的伤残率，疗效确切。

【关键词】蛛网膜下腔出血；脑脊髓液；引流术；婴儿，新生

Application of continuous cerebrospinal fluid drainage in severe intraventricular hemorrhage and subarachnoid hemorrhage of newborns  Zhou Xiaoheng. 

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【Abstract】Objective To investigate the clinical value of continuous cerebrospinal fluid (CSF) drainage in severe intraventricular hemorrhage (IVH) and subarachnoid hemorrhage (SAH) of newborns. Methods According to the digital table, 136 newborns with severe IVH and SAH were divided into two groups, 68 patients in each group. The control group was treated with lumbar puncture, while the observation group was treated with coronal suture puncture and CSF drainage. The efficacy of the two groups was analyzed and compared. Results The recovery time for CSF pressure and CSF cytology examination, disability rate of the observation group were (7.0±1.4)d, (8.1±3.5)d, 38.32%, respectively, which were higher than those of the control group[(9.0±1.8)d, (10.5±3.6)d, 55.88%] (t=9.17，10.29，χ²=21.99，all P<0.01). There was significant difference in efficacy evaluation between the observation group and the control group(91.18% vs. 73.53%，χ²=8.39，P<0.05). Conclusion The continuous CSF drainage treatment in severe IVH and SAH of newborns can significantly shorten the recovery time of patients' CSF pressure and CSF cell numbers, stimulate nervous system recovery and reduce complication and disability rate.

【Key words】Subarachnoid hemorrhage; Cerebrospinal fluid; Drainage; Infant, newborn
浙江绿城心血管病医院处方点评制度改进前后抗菌药物使用情况分析

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【摘要】目的 对浙江绿城心血管病医院处方点评制度改进前后抗菌药物使用情况进行分析。方法随机选取2014年1月至2015年1月医院门诊医生开出的1000例抗菌药物处方,作为研究干预前的资料,根据医院处方点评制度对其进行点评,并根据处方中存在的相应问题提出有效的干预手段,选取2015年2月至2016年1月医院门诊医生开出的1000例抗菌药物处方作为干预后资料,比较分析两年间抗菌药物处方使用不合理情况以及干预前后医生、护士及患者对处方的满意程度。结果干预后抗菌药物使用不合理所占百分比(2.10%)与干预前的(30.00%)相比明显降低,差异有统计学意义($\chi^2=288.857, P<0.05$)。2015年5月至2016年5月干预后医生、护士及患者对处方的满意度($93.23\pm 5.93$分、$95.29\pm 6.01$分、$68.99\pm 4.27$分与2014年4月至2015年4月干预前的($75.34\pm 5.32$分、$71.46\pm 5.13$分、$68.99\pm 4.27$分相比明显提高,差异均有统计学意义($t=110.706, 95.368, 123.711$, 均$P<0.05$)。结论处方点评制度改进后,抗菌药物使用不合理现象明显改善,满意度较高,避免药物滥用,效果显著,意义重大。

【关键词】处方点评制度; 改进; 抗菌药物

Analysis on the use of antimicrobial agents before and after improvement of prescription evaluation system in Green Town Cardiovascular Hospital 丁云。

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【Abstract】Objective To analyze the application of antimicrobial agents before and after the improvement of prescription evaluation system in Green Town Cardiovascular Hospital. Methods One thousand outpatient prescriptions of antimicrobial agents were randomly selected from our hospital from January 2014 to January 2016, serving as the data before intervention. These prescriptions were analyzed according to the prescription evaluation system and effective interventions were proposed according to the existing problems in prescriptions. Another 1000 effective prescriptions of antimicrobial agents during February 2015 to January 2016 in our hospital were taken as the data after intervention. Unreasonable use of antimicrobial agents and the satisfaction degree of physicians, nurses and patients towards the prescription were compared before and after intervention. Results After intervention, the percentage of unreasonable use of antimicrobial agents from May 2015 to May 2016 (2.10%) was significantly lower than that from April 2014 to April 2015 (30.00%), the difference was statistically significant ($\chi^2=288.857, P<0.05$). The satisfaction degree of physicians, nurses and patients towards the prescription from May 2015 to May 2016 [(93.23 ± 5.93) points, (95.29 ± 6.01) points, (68.99 ± 4.27) points] was significantly higher than that from April 2014 to April 2015 [(75.34 ± 5.32) points, (71.46 ± 5.13) points, (68.99 ± 4.27) points], the difference was statistically significant ($t=110.706, 95.368, 123.711$, all $P<0.05$). Conclusion The improvement of prescription evaluation system can obviously improve unreasonable use of antimicrobial agents, increase the satisfaction degree, avoid drug abuse, produce obvious effect and great significance.

【Key words】Prescription evaluation system; Improvement; Antimicrobial agents
【摘要】目的 探讨垂体后叶素在输卵管妊娠腹腔镜保守手术治疗中的临床疗效。方法 选取 120 例输卵管妊娠患者为研究对象,采用随机数字表法分为观察组和对照组各 60 例,对照组直接进行腹腔镜保守手术治疗,观察组患者在采用腹腔镜手术前于输卵管系膜中注射垂体后叶素,比较两组患者术中、术后情况,住院时间和术后血β-HCG 值变化情况以及临床疗效。结果 观察组术中出血量、止血时间、手术时间、术后体、住院时间分别为(21.12±7.86) min,(3.61±1.68) min,(35.23±10.45) min,(37.35 ± 0.65) ℃,(5.64±0.66) d,对照组分别为(97.63±12.11) min,(13.21±2.91) min,(67.97±20.13) min,(37.62 ± 0.48) ℃,(6.75 ± 0.75) d,两组差异均有统计学意义(t=41.049, z=13.11, t=1.181, z=8.528, t=0.06, P<0.05);观察组术后 1 d,4 d,7 d 血β-HCG 值分别为(587.54 ± 105.14) U/L, (141.28 ± 41.21) U/L,(52.47 ± 22.32) U/L,对照组分别为(609.45 ± 114.89) U/L,(238.43 ± 52.16) U/L,(115.33 ± 26.15) U/L,两组术后血β-HCG 值均低于术前,两组术后 4 d,7 d 血β-HCG 差异均有统计学意义(t=11.320, z=14.162, P<0.05);观察组有效率为 98.33%,对照组有效率为 86.67%,两组差异有统计学意义(χ2=5.885, P<0.05)。结论 对经腹腔镜手术治疗的输卵管妊娠患者术前注射垂体后叶素不仅能减少术中的出血量,缩短手术时间和住院时间,降低血β-HCG 值,还能提高临床疗效,值得推广和应用。

【关键词】腹腔镜检查; 输卵管妊娠; 垂体后叶素

Curative effect of pituitrin in laparoscopic conservative surgery of tubal pregnancy  Zhang Hui.
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【Abstract】Objective To explore the curative effect of pituitrin in laparoscopic conservative surgery in the treatment of 60 patients with tubal pregnancy. Methods 120 eggs tube pregnancy patients were selected as the research subjects. According to the random blind points method, they were divided into the observation group and control group, 60 cases in each group. The control group was undergoing laparoscopic conservative surgery directly, the observation group was injected pituitrin in the mesosalpinx before laparoscopic surgery. The intraoperative and postoperative condition, postoperative hospitalization days and blood β – hCG level changes and clinical curative effect were observed and compared in the two groups. Results The intraoperative blood loss, hemostatic time, operation time, postoperative body temperature, hospitalization days of the observation group were (21.12 ± 7.86) min,(3.61 ± 1.68) min,(35.23 ± 10.45) min,(37.35 ± 0.65) ℃,(5.64 ± 0.66) d, respectively, which of the control group were (97.63 ± 12.11) min,(13.21 ± 2.91) min,(67.97 ± 20.13) min,(37.62 ± 0.48) ℃,(6.75 ± 0.75) d, respectively, the differences between the two groups were statistically significant (t = 41.049, z=13.11, t=1.181, z=8.528, t=0.06, P<0.05). The serum β – HCG at 1d,4d,7d after operation of the observation group were (587.54 ± 105.14) U/L, (141.28 ± 41.21) U/L,(52.47 ± 22.32) U/L, respectively, which of the control group were (609.45 ± 114.89) U/L,(238.43 ± 52.16) U/L,(115.33 ± 26.15) U/L, respectively, the serum – HCG values of the two groups were lower than before operation, there were significant difference between the two groups in serum – HCG after operation at 4d and 7d(t = 14.162, z=8.606, all P<0.05). The effective rate of the observation group was 98.33%, which of the control group was 86.67%, and the difference between the two groups was statistically significant(χ2 = 5.885, P<0.05)。Conclusion The laparoscopic surgical treatment of tubal pregnancy patients with preoperative injection of pituitrin can not only reduce the bleeding in the operation and shorten the operation time and hospital stay, lower blood β – HCG level, also can improve the clinical curative effect, it is worthy of popularization and application.

【Key words】Laparoscopy; Tubal pregnancy; Pituitrin
Observation of the efficacy of CRRT in the treatment of severe pancreatitis  Lin Ju, Xu Xiaodong.
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【Abstract】 Objective To investigate the clinical efficacy of CRRT in the treatment of severe pancreatitis. 
Methods 120 patients with severe pancreatitis were divided into two groups according to the treatment. All the patients were given basic treatment in all groups. The Pa arterial oxygen pressure (PaO₂), oxygenation index (PaO₂/FiO₂), and C - reactive protein (CRP) in the two groups after 72 hours of treatment were observed. The levels of blood lactate (Lac), APACHEII, tumor necrosis factor α (TNF-α), interleukin - 6 (IL - 6) and interleukin - 1β (IL - 1β) were measured before and after treatment 72 hours. A comparison of mortality and hospitalization time was
observed in 28 days of treatment. **Results** After treatment, Lac [the control group (3.32 ± 0.85) mmol/L, the observation group (2.55 ± 0.65) mmol/L], APACHEII score [the control group (13.30 ± 2.80) points, the observation group (12.01 ± 2.60) points], CRP [the control group (24.30 ± 2.80) mg/L, the observation group (12.33 ± 1.60) mg/L] were significantly lower than before treatment [Lac; the control group (4.85 ± 1.05) mmol/L, the observation group (4.90 ± 1.02) mmol/L; APACHEII score; the control group (16.62 ± 2.95) points, the observation group (16.90 ± 3.01) points; CRP; the control group (40.32 ± 3.10) mg/L, the observation group (40.40 ± 3.51) mg/L; the control group: $t_{\text{Lac}}=1.67, P=0.004, t_{\text{APACHEII}}=6.32, P=0.000, t_{\text{CRP}}=29.71, P=0.000$; the observation group; $t_{\text{Lac}}=15.05, P=0.005, t_{\text{APACHEII}}=9.52, P=0.000, t_{\text{CRP}}=56.36, P=0.000$]. PaO$_2$ [the control group (75.30 ± 4.80) mmHg, the observation group (84.31 ± 4.60) mmHg], PaO$_2$/FiO$_2$ [the control group (225.30 ± 14.83) mmHg, the observation group (256.31 ± 14.65) mmHg] were significantly higher than before treatment [PaO$_2$; the control group (60.32 ± 4.15) mmHg, the observation group (60.40 ± 4.01) mmHg; PaO$_2$/FiO$_2$; the control group (130.39 ± 11.15) mmHg; the observation group (130.90 ± 11.01) mmHg; the control group; $t_{\text{PaO}_2}=18.29, P=0.000, t_{\text{PaO}_2/\text{FiO}_2}=39.62, P=0.000$; the observation group; $t_{\text{PaO}_2}=30.35, P=0.000, t_{\text{PaO}_2/\text{FiO}_2}=53.01, P=0.000$]. Those in the observation group were significantly improved than the control group ( $t_{\text{Lac}}=5.574, P=0.000, t_{\text{APACHEII score}}=2.615, P=0.005, t_{\text{PaO}_2}=3.646, P=0.0002, t_{\text{PaO}_2/\text{FiO}_2}=11.523, P=0.000, t_{\text{CRP}}=28.751, P=0.000$). After treatment, the TNF-α, IL-6 and IL-1β levels in the two groups [the control group; IL-1β (70.32 ± 6.85) ng/mL, IL-6 (103.30 ± 8.80) ng/mL, TNF-α (89.30 ± 8.80) ng/mL; the observation group; IL-1β (48.55 ± 6.62) ng/mL, IL-6 (92.01 ± 8.60) ng/mL, TNF-α (57.31 ± 7.60) ng/mL] were significantly improved than before treatment [the control group; IL-1β (82.85 ± 7.05) ng/mL, IL-6 (173.62 ± 9.95) ng/mL, TNF-α (105.32 ± 9.15) ng/mL; the observation group; IL-1β (83.90 ± 7.32) ng/mL, IL-6 (175.90 ± 10.01) ng/mL, TNF-α (106.40 ± 9.01) ng/mL; the control group; $t_{\text{IL-1β}}=9.66, P=0.000, t_{\text{IL-6}}=41.01, P=0.000, t_{\text{TNF-α}}=9.77, P=0.000$; the observation group; $t_{\text{IL-1β}}=27.74, P=0.000, t_{\text{IL-6}}=49.23, P=0.000, t_{\text{TNF-α}}=32.26, P=0.000$]. And those of the observation group improved more significantly than the control group ( $t_{\text{IL-1β}}=17.702, P=0.000, t_{\text{IL-6}}=7.107, P=0.000, t_{\text{TNF-α}}=21.311, P=0.000$). The mortality rate and hospitalization time of the observation group were 18.33% and (10.97 ± 2.92) days, which were significantly lower than those of the control group [36.67%, (13.63 ± 3.26) days; $\chi^2=5.058, P=0.025, t=4.708, P=0.000$]. **Conclusion** The use of CRRT in the treatment of severe pancreatitis can improve the vital signs, reduce the inflammation index, improve the serum levels of inflammatory factors and lactic acid, reduce the mortality and hospital stay.

**Key words** Renal replacement therapy; Pancreatitis; Cytokines
安徽省合肥市城镇家庭居民用药和就医行为调查

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【摘要】目的了解安徽省合肥市城镇家庭居民用药的种类、用药习惯、就医行为、药品管理等,为有针对性地开展公众用药安全教育和科学就医教育提供背景资料。方法设计涵盖32个问题的调查问卷,对2个培训机构的老师和家长、2个行政事业单位的部分职工和3个住宅小区居民进行调查,发放调查问卷320份,回收有效问卷306份。结果96.1%的合肥城镇家庭有常备药品,抗感冒药比例最高(87.3%),其次为抗菌药(51.0%),主要购药渠道是药房(89.2%)和医院(36.3%)。当居民患病时,65.7%的调查对象先服常备药;选择去大医院就诊比例高达83.3%。74.5%的调查对象认为抗菌药被滥用。有高达83.3%的调查对象患病时进行过静脉输液治疗,55.9%的被调查者认为静脉输液大多数没必要,仅5.9%的调查对象认为静脉输液有风险。用药遇到问题时主要咨询医生(67.7%),其次是上网查询(44.1%)和到药店咨询(14.7%)。有40.2%的调查对象希望自学医药知识。结论安徽省合肥市城镇家庭有常备药品的比例很高,购药途径正规,患病时首先吃家中常备药物,就医首选大医院,大部分认为大多数静脉输液没有必要;想了解医药知识,希望能建立咨询渠道。【关键词】城镇居民;家庭用药;就医行为;调查

AsurveyofstandingdrugsandmedicaltreatmentbehaviorinurbanfamilyofHefei city of Anhui province
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【Abstract】Objective To understand the types of drug use, medication habits, medical treatment behavior and drug management of urban families in Hefei, and to provide background information for drug safety education and scientific medical education. Methods The questionnaire design covers 32 issues, some teachers and parents of 2 training institutions, part of the staff of the 2 administrative institutions and the residents of the 3 residential areas were investigated. 320 questionnaires were distributed, and valid questionnaires were collected from 306 copies. Results 96.1% of Hefei urban family had standing drugs, anti cold drugs was the highest proportion (87.3%) , followed by antibacterial drugs (51.0%) , the main channel was the purchase pharmacy (89.2%) and hospital (36.3%). When the family was ill, 65.7% of the respondents first ate home medicine; the proportion of choosing a large hospital up to 83.3%. 74.5% of respondents believed that antibiotics abuse. Up to 83.3% of respondents had been performed intravenous infusion therapy when illness, 55.9% of the respondents thought intravenous infusion therapy most unnecessary, and only 5.9% of the respondents thought intravenous infusion therapy was dangerous. Consulting a doctor when they had a problem in 67.7%, followed by the internet query (44.1%) and to the pharmacy consultation (14.7%). 40.2% of the respondents hoped to learn medical knowledge. Conclusion Hefei city of Anhui province has a high proportion of urban family with standing drugs, the purchase way is regular, and when the disease, first of all to eat home standing drugs, medical treatment prefers large hospital, most think most intravenous infusion is not necessary; They want to understand the medical knowledge, and hope to establish consultation channels.【Key words】 Urban residents; Family medication; Medical seeking behavior; Investigation
不同途径暴露喉返神经在甲状腺手术中的临床应用
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【摘要】目的 探讨甲状腺手术中不同途径暴露喉返神经对喉返神经损伤的预防效果。方法 选择甲状腺手术的患者130例为研究对象,采用随机数字表法分为甲状软骨下角及甲状腺下动脉区组,比较两组手术时间、术中出血量及术后住院时间的差异,分析两组患者喉返神经损伤的发生情况。结果 两组的手术时间、术中失血量及术后住院时间差异均无统计学意义(\(t=1.294\), \(0.967\), \(1.008\),均 \(P>0.05\)),甲状腺下动脉组喉返神经损伤发生率为4.61%,高于甲状软骨下角组的1.54%(\(\chi^2=4.203, P<0.05\))。甲状腺次全切除术喉返神经损伤发生率分别为15.38%和5.26%,甲状腺全切除术喉返神经损伤发生率分别为12.5%和0.0%,组间比较差异均有统计学意义(\(\chi^2=5.729,8.237, \text{均} P<0.05\)),而甲状腺部分切除两组喉返神经损伤发生率差异无统计学意义(\(\chi^2=1.182, P>0.05\))。结论 经甲状软骨下角途径暴露喉返神经较经甲状腺下动脉途径能更好地保护喉返神经,并且不会增加手术时间、术中出血量及术后住院时间,值得进一步推广应用。

【关键词】甲状腺; 喉返神经; 手术方式

The clinical observation of exposure recurrent laryngeal nerve through different ways in thyroid operation
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【Abstract】Objective To explore the prevention of recurrent laryngeal nerve injury through the exposure recurrent laryngeal nerve by different ways in thyroid operation. Methods The patients with thyroid surgery were selected as study objects, and they were randomly divided into the inferior horn of thyroid cartilage and the inferior thyroid artery group according to the digital table. The operation time, amount of bleeding and the time of postoperative hospitalization were compared between the two groups, and the incidence of recurrent laryngeal nerve injury was analyzed. Results The differences were not statistically significant in the operation time, amount of bleeding and the time of postoperative hospitalization between the two groups (\(t=1.294,0.967,1.008, \text{均} P>0.05\)). The incidence rate of recurrent laryngeal nerve injury in the inferior thyroid artery group(4.61%) was higher than that in the thyroid cartilage angle group (1.54%) (\(\chi^2=4.203, P<0.05\)}. The incidence rates of recurrent laryngeal nerve injury in subtotal thyroidectomy were 15.38% and 5.26% respectively, and the incidence rates of recurrent laryngeal nerve injury in subtotal thyroidectomy were 12.5% and 0.0%, the differences were statistically significant (\(\chi^2=5.729,8.237, \text{均} P<0.05\)), but there was no statistically significant difference in partial thyroidectomy (\(\chi^2=1.182, P>0.05\)). Conclusion The exposure recurrent laryngeal nerve through the inferior horn of thyroid cartilage in thyroid operation can protect the recurrent laryngeal nerve, and can not increase the operation time, bleeding volume and the hospitalization time after surgery, which is worthy of further application.

【Key words】Thyroid gland; Recurrent laryngeal nerve; Operation mode
腹腔镜远端胃大部切除术对进展期胃癌患者血清白细胞介素 2、4 的影响

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【目的】探讨腹腔镜远端胃大部切除术对进展期胃癌患者血清白细胞介素 2 (IL-2) 和白细胞介素 4 (IL-4) 的影响。

【方法】142 例进展期胃癌患者按照随机数字表法分为对照组和观察组,每组 71 例。对照组采用开腹手术治疗,观察组采用腹腔镜治疗。记录两组手术时间、术中出血量、手术切口长度、淋巴结清扫个数、术后疼痛评分、术后平均住院日等;术前、术后分别测定患者的血清 IL-2 和 IL-4。对照组手术时间、术中出血量、手术切口长度、淋巴结清扫个数、术后平均住院日分别为(141.3 ± 29.7) min,(177.6 ± 26.8) mL,(13.2 ± 2.8) cm,(18.1 ± 2.6) d,(8.5 ± 2.0) 分,(15.9 ± 3.3) d;观察组分别为(196.4 ± 31.6) min,(100.7 ± 21.3) mL,(5.9 ± 1.6) cm,(17.9 ± 2.8) 个,(3.0 ± 1.1) d,(10.5 ± 1.9) d。观察组手术时间明显长于对照组(t = 3.264, P < 0.05);术中出血量、手术切口长度、术后肛门排气时间、术后疼痛程度评分、术后平均住院日方面,观察组均明显低于对照组(t = 3.910, 3.019, 142.6 ± 3.264, 100.7 ± 21.3, 5.9 ± 1.6, 177.6 ± 26.8, 13.2 ± 2.8, 18.1 ± 2.6, 8.5 ± 2.0, 15.9 ± 3.3, 141.3 ± 29.7, 177.6 ± 26.8, 3.0 ± 1.1, 10.5 ± 1.9, 15.9 ± 3.3, 141.3 ± 29.7)。

【结论】腹腔镜远端胃大部切除术对进展期胃癌患者创伤较小,对患者免疫抑制较轻,有利于患者术后恢复。

【关键词】胃肿瘤; 腹腔镜检查; 白细胞介素-2; 白细胞介素-4

Effects of laparoscopic distal gastrectomy on serum IL-2 and IL-4 levels in patients with advanced gastric cancer

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【Objective】To study the effects of the laparoscopic distal gastrectomy on serum interleukin-2 (IL-2) and interleukin-4 (IL-4) levels in patients with advanced gastric cancer.

【Methods】142 patients with advanced gastric cancer were randomly divided into the control group (71 cases) and the observations group (71 cases) according to the table. The control group was treated with open surgery, while the observation group was treated with laparoscopy. The operation time, intraoperative blood loss, incision length, number of lymph node dissection, postoperative pain score, average postoperative hospital stay were recorded in the two groups. The serum IL-2 and IL-4 levels were measured before operation and 24 h, 36 h after operation.

【Results】The operation time, intraoperative blood loss, incision length, number of lymph node dissection, postoperative anal exhaust time, postoperative pain score, postoperative hospitalization days of the control group were (141.3 ± 29.7) min, (177.6 ± 26.8) mL, (13.2 ± 2.8) cm, (18.1 ± 2.6), (5.9 ± 1.6) d, (8.5 ± 2) and (15.9 ± 3.3) d, respectively, which of the observation group were (196.4 ± 31.6) min, (100.7 ± 21.3) mL, (5.9 ± 1.6) cm, (17.9 ± 2.8), (3.0 ± 1.1) d, (5.2 ± 1.6) and (10.5 ± 1.9) d, respectively. The operation time of the observation group was significantly longer than that of the control group (t = 3.264, P < 0.05). The amount of intraoperative blood loss, incision length, postoperative anal exhaust time, postoperative pain score, average postoperative hospital stay of the observation group were significantly less than those of the control group (t = 4.779, 4.069, 2.916, 3.142, 6.904, all P < 0.05). There was no significant difference in the number of
lymph node dissection between the two groups (t = 1.076, P > 0.05). In the control group, the IL-2 levels of preoperation and 24h, 36h, 72h postoperation were (87.26 ± 4.63) μg/mL, (51.26 ± 3.31) μg/mL, (62.18 ± 4.08) μg/mL, (71.66 ± 3.81) μg/mL, respectively, which of the observation group were (87.01 ± 3.91) μg/mL, (69.82 ± 3.09) μg/mL, (80.14 ± 4.24) μg/mL and (82.26 ± 3.47) μg/mL, respectively. There was no significant difference in serum IL-2 level between the two groups (t = 0.548, P > 0.05). The postoperative serum IL-2 was significantly reduced, and the serum IL-2 levels of postoperative 24h, 36h, 72h of the observation group were significantly higher than those of the control group (t = 3.926, 4.867, 3.019, all P < 0.05). There was no significant difference in serum IL-4 level between the two groups (t = 0.416, P > 0.05). Postoperative serum IL-4 level was significantly reduced, and the serum IL-4 level of postoperative 24h, 36h, 72h of the observation group were significantly higher than those of the control group (t = 4.012, 4.114, 3.726, all P < 0.05).

**Conclusion** Laparoscopic distal subtotal gastrectomy for advanced gastric cancer patients has less trauma, less immunosuppression, it is conducive to postoperative recovery.

**Key words** Stomach neoplasms; Laparoscopy; Interleukin −2; Interleukin −4
运动想象疗法对脑卒中后患者上肢运动功能障碍的疗效观察

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【摘要】目的 探讨运动想象疗法对脑卒中后患者上肢运动功能障碍的临床疗效。方法 选择 120 例脑卒中后上肢功能障碍患者,按照随机数字表法分为观察组及对照组,每组 60 例。两组均治疗原发病同时行康复治疗,观察组采用运动想象疗法,两组均治疗 3 个月。采用四肢简化 Fugl-Meyer 评分量表 (FMA) 以及生活自理能力 Barthel 指数 (MBI) 评价患者治疗前后的运动功能以及自理能力;采用上肢动作研究量表 (ARAT) 对患者治疗前后上肢动作进行评价;观察两组治疗前后生存质量评分变化。结果 治疗前两组 FMA 及 MBI 评分差异均无统计学意义 (t = 0.13, P > 0.05 ),且观察组于治疗 1 个月时, B1 评分低于对照组,差异有 Statistical significance (t = 3.36, 5.61, P < 0.05)。治疗后观察组 ARAT 各项评分均优于对照组,差异有 Statistical significance (t = 3.56, 2.87, 3.17, 2.98, P < 0.05)。结论 运动想象疗法能有效改善上肢功能障碍患者生活自理能力,提高上肢活动能力,提高生活质量,安全性好,值得临床推广。

【关键词】脑卒中; 运动疗法; 心理疗法; 上肢; 康复

Clinical effect of motor imagery therapy on upper limb motor dysfunction after stroke  Tang Yan, Wang Ningning.

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【Abstract】Objective To investigate the clinical effect of motor imagery therapy on upper limb motor dysfunction in stroke patients. Methods 120 patients with post stroke upper limb disability were selected. According to the digital table, they were divided into observation group and control group, 60 cases in each group. Two groups were treated with primary disease and rehabilitation treatment, the observation group used motor imagery therapy, the two groups were treated for 3 months. Limb simplified Fugl–Meyer rating scale (FMA) and self-care ability Barthel index (MBI) were used to evaluate the motor function and self-care ability of the patients before and after treatment. The upper limb movement was evaluated by ARAT before and after treatment. The quality of life score before and after treatment was observed. Results Before treatment, there were no statistically significant differences in FMA and MBI between the two groups (t = 0.13, 0.23, all P > 0.05). After treatment, the FMA score of the control group was (29.74 ± 4.04) points, the BI score was (57.29 ± 4.23) points, the FMA and BI scores of the observation group was (33.29 ± 4.14) points, (63.12 ± 4.21) points, respectively, the differences were statistically significant between before and after treatment in the self-care ability (t = 3.36, 5.61, all P < 0.05), and the degree of elevation of the observation group was more significant than that of the control group, the differences were statistically significant (t = 2.38, 4.14, all P < 0.05). After treatment, the degrees of elevation of the scores of ARAT in the observation group were significantly higher than those in the control group, the differences were statistically significant (t = 3.45, 2.87, 3.17, 2.98, all P < 0.05). After treatment, the rise degree of the scores of quality of life in the observation group were significantly higher than that in the control group, the differences were statistically significant (t = 3.45, 2.87, 3.17, 2.98, all P < 0.05). Conclusion The use of motor imagery therapy can improve the patient's ability, improve the quality of life, and is safe and effective, which is worthy of clinical promotion.
The effect of exercise therapy on the upper limb of patients after stroke has significantly clinical efficacy, and it can help patients to restore limb motor function, improve self-care ability and quality of life, it is safe and worthy of clinical promotion.

**Conclusion**

**Keywords** Stroke; Exercise Therapy; Psychotherapy; Upper Extremity; Rehabilitation
经腹膜后腔腹腔镜治疗回肠膀胱术后输尿管嵌顿性结石五例临床分析

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【摘要】目的探讨经腹膜后腔腹腔镜（以下简称后腹腔镜）治疗回肠膀胱术后输尿管嵌顿性结石的临床疗效与安全性。方法回顾性分析5例回肠膀胱术后并发输尿管嵌顿性结石患者接受后腹腔镜切开取石治疗患者的临床资料，总结手术方式、手术时间、并发症及住院时间等指标，评价治疗效果。结果5例患者均采取后腹腔镜输尿管切开取石术顺利完成手术，手术时间平均（82.0±27.7）min，引流管拔除时间平均（5.4±1.14）d，术后住院时间（10.0±2.9）d，术后随访6～48个月，未见严重远期并发症。结论后腹腔镜治疗回肠膀胱术后输尿管嵌顿性结石疗效满意，安全性高。

【关键词】腹腔镜检查；输尿管切开取石术；回肠膀胱术

Retroperitoneal laparoscopic ureterolithotomy for impacted ureteral calculi after radical cystectomy and ileal conduit (report of 5 cases) Dong Yi, Shen Hongfeng, He Geng, Li Wei, Huang Wei.

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【Abstract】Objective To evaluate the clinical efficacy and security of retroperitoneal laparoscopic ureterolithotomy (RLUL) for impacted ureteral calculi after radical cystectomy and ileal conduit. Methods 5 patients with unilateral impacted ureteral calculi after radical cystectomy and ileal conduit received RLUL were selected, and a retrospective study was performed for manner, duration of surgery, complications and length of stay and other indicators, and the treatment effect was evaluated. Results All procedures were successful and the mean operation time was (82.0 ± 27.7) min, the extubation time was (5.4 ± 1.1) d, hospitalization time was (10.0 ± 2.9) d. Postoperative follow up for 6 ~ 48 months, there were no obvious complications. Conclusion The RLUL showed satisfactory availability and security for management ureteral calculi after radical cystectomy and ileal conduit.

【Key words】Laparoscopes; Ureterolithotomy; Ileal conduit
低位小切口甲状腺切除术与传统甲状腺手术在甲状腺结节治疗中的应用效果比较

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【摘要】目的 比较低位小切口甲状腺切除术与传统甲状腺手术治疗甲状腺结节的临床疗效。方法 选择 84 例甲状腺结节患者纳入本研究, 按照就诊顺序编号, 其中编为单号者 42 例为对照组, 接受传统甲状腺手术治疗, 编为双号者 42 例为观察组, 采取低位小切口甲状腺切除术, 分析临床治疗效果。结果 观察组切口长度 (3.72±0.59) cm、术中出血量 (41.68±3.57) mL、手术时间 (38.27±4.16) min、住院时间 (4.32±1.07) d, 与对照组差异均有统计学意义 (t = 6.886、7.429、7.280、6.775, 均 P < 0.05)。观察组治疗总有效率为 92.86%, 高于对照组的 73.81%, 差异有统计学意义 (χ^2 = 7.445, P < 0.05)。观察组术后并发症发生率为 7.14%, 低于对照组的 26.19%, 差异有统计学意义 (χ^2 = 8.564, P < 0.05)。结论 与传统甲状腺手术治疗相比, 低位小切口甲状腺切除术治疗甲状腺结节效果更好, 可减少术中出血量, 缩短手术时间和住院时间, 且手术创伤小、术后恢复快、并发症发生率低, 可作为临床治疗的首选。

【关键词】甲状腺结节; 甲状腺切除术

Comparison of applied effect of low incision thyroidectomy and traditional thyroid surgery in the treatment of thyroid nodules Ding Jingshan.

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【Abstract】Objective To compare the clinical efficacy of low incision thyroidectomy and traditional thyroid surgery in the treatment of thyroid nodules. Methods 84 patients with thyroid nodules were included in the study. According to the order of treatment, 42 cases who were compiled as single number were selected as the control group, and they were given traditional thyroid surgical treatment. While 42 cases who were compiled as double number were selected as the observation group, and they were given low incision thyroidectomy. The clinical effects were compared between the two groups. Results The incision length [(3.72±0.59) cm], the intraoperative blood loss [(41.68±3.57) mL], the operation time [(38.27±4.16) min], the hospitalization time [(4.32±1.07) d] in the observation group had statistically significant differences compared with the control group (t = 6.886, 7.429, 7.280, 6.775, all P < 0.05). The total effective rate in the observation group was 92.86%, which was higher than 73.81% in the control group, the difference was statistically significant (χ^2 = 7.445, P < 0.05). The incidence rate of postoperative complications in the observation group was 7.14%, which was lower than 26.19% in the control group, the difference was statistically significant (χ^2 = 8.564, P < 0.05). Conclusion Compared with traditional thyroid surgery, the low incision thyroidectomy is effective in the treatment of thyroid nodules, which can reduce the amount of intraoperative blood loss, shorten the operation time and hospitalization time, and has less trauma, quick recovery and low incidence of complication, and it can be used as the first choice for clinical treatment.

【Key words】Thyroid nodule; Thyroidectomy
闭合复位带锁髓内钉与经皮微创锁定加压钢板内固定治疗胫骨骨折的效果比较

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【摘要】目的 比较闭合复位带锁髓内钉与经皮微创锁定加压钢板内固定治疗胫骨骨折的效果。方法 选取胫骨骨折患者70例为研究对象，采用随机数字表法分为对照组35例、观察组35例，对照组采用闭合复位带锁髓内钉固定治疗，观察组采用经皮微创锁定加压钢板固定治疗，观察两组患者相关手术指标、治疗后并发症、治疗效果。结果 观察组手术时间、住院时间、骨折愈合时间分别为（70.37±11.06）min、（3.02±0.61）个月，均短于对照组的（82.13±12.15）min、（4.21±0.70）个月（t=4.234, 3.852, 7.582, 全P<0.05）；观察组并发症发生率为14.28%（5/35），低于对照组的51.42%（18/35）（χ²=10.943, P<0.05）；观察组优良率为94.28%（33/35），高于对照组的74.28%（26/35）（χ²=5.285, P<0.05）。结论 闭合复位带锁髓内钉和经皮微创锁定加压钢板内固定均能成功治疗胫骨骨折，但带锁髓内钉容易导致延迟愈合，并发症和二次手术率较高，经皮微创锁定加压钢板内固定能够缩短愈合时间，疗效更佳。

【关键词】胫骨骨折；骨折固定术，髓内；骨钉；外科手术，微创性

Comparison of the effects of closed reduction and interlocking intramedullary nail and percutaneous minimally invasive locking compression plate in treatment of tibial fractures  Cui Jianping, Liu Jiandong, Gao Siyu.

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【Abstract】Objective To compare the effects of closed reduction and interlocking intramedullary nail and percutaneous minimally invasive locking compression plate in treatment of tibial fractures. Methods 70 patients with tibial fractures were selected as research subjects, and they were randomly divided into the control group and the observation group according to the digital table, each group in 35cases. The control group was treated with closed reduction and interlocking intramedullary nail, while the observation group was treated with percutaneous minimally invasive locking compression plate. Then, the operation index, postoperative complications, treatment effect after treatment between two groups were compared. Results The operation time, fracture healing time, length of stay in the observation group were less than those in the control group[70.37±11.06) min vs. (82.13±12.15) min, (3.02±0.61) month vs. (4.21±0.70) month, (13.39±3.02) d vs. (16.26±3.21) d] (t=4.234, 3.852, 7.582, all P<0.05). The incidence rate of complication in the observation group was lower than that in the control group[14.28% (5/35) vs. 51.42% (18/35)] (χ²=10.943, P<0.05). The excellent rate in the observation group was statistically higher than that in the control group[94.28% (33/35) vs. 74.28% (26/35)] (χ²=5.285, P<0.05). Conclusion Closed reduction and interlocking intramedullary nail and minimally invasive percutaneous locking compression plate are successful in the treatment of tibial fracture, but interlocking intramedullary nail easily leads to delayed healing, complications and higher rate of surgery two times, while minimally invasive percutaneous locking compression plate can promote healing, curative effect is better.

【Key words】Tibial fractures; Fracture fixation, intramedullary; Bone nails; Surgical procedures, minimally invasive
【摘要】目的探讨复方甘草酸苷联合非索非那定治疗慢性荨麻疹的疗效及对患者血浆组胺水平的影响。方法选择100例慢性荨麻疹患者为研究对象，按照随机数字表法分为对照组（50例）和观察组（50例），对照组给予盐酸非索非那定治疗，观察组在对照组的基础上给予复方甘草酸苷治疗，比较两组的临床治疗效果以及血浆组胺水平之间的差异。结果观察组总有效率96.0%，明显高于对照组的84.0%（$\chi^2 = 7.951, P < 0.05$）。治疗后观察组血浆组胺含量（2.38±0.26）ng/mL，明显低于对照组的（3.10±0.29）ng/mL，两组差异有统计学意义（$t = 3.084, P < 0.05$）。结论复方甘草酸苷联合非索非那定治疗慢性荨麻疹，可有效地缓解患者的症状，减少患者风团的数量。而且可以有效地降低患者血浆组胺的水平，具有较好的临床治疗效果以及应用价值，值得临床上大力推广使用。

【关键词】荨麻疹；组胺；复方甘草酸苷；非索非那定

Effect of compound glycyrrhizin combined with fexofenadine hydrochloride in the treatment of chronic urticaria and its influence on plasma histamine Zhang Zhiqiang.

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【Abstract】Objective To investigate the effect of compound glycyrrhizin combined with fexofenadine hydrochloride in the treatment of chronic urticaria and its effect on plasma histamine. Methods 100 patients with chronic urticaria were selected as study objects, and they were divided into the control group (50 cases) and observation group (50 cases) according to the random number table method. The control group was treated with fexofenadine hydrochloride, while the observation group was treated with compound glycyrrhizin on the basis of the control group. The clinical effect and plasma histamine level were compared between the two groups. Results The effective rate of the observation group was 96.0%, which was significantly higher than 84.0% of the control group ($\chi^2 = 7.951, P < 0.05$). After treatment, the plasma histamine content of the observation group was (2.38 ± 0.26) ng/mL, which was lower than (3.10 ± 0.29) ng/mL of the control group, and the difference between the two groups was statistically significant ($t = 3.084, P < 0.05$). Conclusion The compound glycyrrhizin combined with fexofenadine hydrochloride in the treatment of chronic urticaria can reduce the symptoms of the patients, reduce the number and size of the patients and effectively control the clinical symptoms of the patients. And it can effectively reduce the level of plasma histamine in patients with good clinical effect and application value, it is worth to be promoted in clinical.

【Key words】Urticaria; Histamine; Compound glycyrrhizin; Fexofenadine hydrochloride
冠状动脉旁路移植术后围术期心肌梗死的诊断及病因分析

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【摘要】 目的 探讨冠状动脉旁路移植术后围术期心肌梗死的诊断标准及病因。方法 选取行冠状动脉旁路移植术患者 258 例,分别在术后即刻,术后 6,12,24,48 h 测定心肌肌钙蛋白 I (Cardiac troponin-I, cTnI) 值,以 95 百分位 (P95) 为界值,任意一次测量值 >P95,认定为围术期心肌梗死,归为 I 组 (13 例),其余归为 II 组 (245 例),将年龄、性别、体外循环时间、主动脉阻断时间、射血分数、左室舒张末直径、搭桥根数、前降支闭塞病变、近期心肌梗死 (<3 个月)、严重血管病变等可能导致围术期心肌梗死的原因进行对比分析。结果 术后 cTnI 值 P95 为 3.47,两组体外循环时间 (t =3.268, P <0.05),主动脉阻断时间 (t = 2.047, P <0.05),严重血管病变差异有统计学意义 (χ² = 19.846, P <0.05)。结论 cTnI > P95 (3.47) 预示术中心肌损伤较重,体外循环时间、主动脉阻断时间、严重血管病变与导致冠状动脉旁路移植术围术期心肌梗死相关。

【关键词】 冠状动脉旁路移植术; 肌钙蛋白 I; 冠状动脉疾病; 心肌梗死

The diagnostic criteria of perioperative myocardial infarction in patients undergoing coronary artery bypass grafting and analysis of related factors  Li Ruibing, Guo Yu, Huo Yizhong, Fu Changjiang, He Yan, Guo Lixin. Department of Cardiac Surgery, the Third Hospital of Xingtai, Xingtai, Hebei 054000, China

【Abstract】 Objective To explore the related factors and diagnostic criteria of perioperative myocardial infarction (PMI) after on – pump coronary artery bypass grafting (CABG). Methods 258 CABG patients were selected. The cardiac troponin – I in immediately,6,12,24, and 48 hours after surgery were measured. 95 percentile (P95) was used as the boundary, any measured value greater than P95 was identified PMI, as group I (13 cases), the rest as group II (245 cases). The age, sex, cardiopulmonary bypass time, aortic cross – clamp time, LV ejection fraction, left ventricular end diastolic diameter, grafted vessels, left anterior descending coronary artery occlusion, recent myocardial infarction (<3 months), severe complex coronary artery disease and other risk factors that may lead to PMI were analyzed. The data were analyzed using Student’s t test for continuous variables and the χ² test for discontinuous variables. Results P95 value was 3.47, the cardiopulmonary bypass time (t =3.268, P <0.05), aortic cross – clamp time (t = 2.047, P <0.05), severe complex coronary artery disease between the two groups had statistically significant difference (χ² = 19.846, P <0.05). Conclusion cTnI > P95 (3.47) indicates that the myocardium injury is serious, cardiopulmonary bypass time, aortic cross – clamp time and severe complex coronary artery disease are associated with PMI in patients undergoing CABG.

【Key words】 Coronary artery bypass graft; Cardiac troponin – I; Coronary artery disease; Myocardial infarction
不同抗凝药物对血液透析患者凝血功能的影响

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【摘要】目的 探讨不同抗凝药物对血液透析患者凝血指标及出血发生情况的影响。方法 选择40例血液透析患者作为研究对象,按照随机数字表法将所有患者分为三组,20例应用普通肝素的患者为A组,10例应用低分子肝素的患者为B组,10例应用阿加曲班为C组,同时选取10例体检健康者作为对照组,分析各组玻璃珠激活的凝血时间(gbACT)、凝血速度(CR)、血小板功能(PF)、前凝血酶原片段1+2(PF1+2)和血小板表面α颗粒膜蛋白(GMF-140)。结果 A组与对照组相比,上机前CR、PF、PF1+2和GMF-140均有明显的增高,分别为(31.1±5.5) sig/min,(3.1±0.5),(478.2±74.3) pmol/L,(36.9±6.6) pmol/L,gbACT 明显延长(196.1±27.3)s;A组上、下机前相比,下机前 CR、PF、PF1+2 和 GMF-140 有明显降低,分别为(10.6±3.2) sig/min,(1.8±0.4),(400.1±85.5) pmol/L,(30.9±6.8) pmol/L,gbACT 显著延长(252.5±50.4)s;差异有统计学意义(F=112.64,28.38,81.40,18.11,21.63,均 P<0.05);B组与对照组相比,上机前 CR、PF、PF1+2 和 GMF-140 均有明显的增高,分别为(29.5±6.6) sig/min,(2.9±1.2),(475.5±97.0) pmol/L,(37.5±7.0) pmol/L,gbACT 明显延长(193.9±32.8)s;B组上、下机前相比,下机前 CR、PF、PF1+2 和 GMF-140 均有明显的降低,分别为(22.3±6.8),(407.8±90.3) pmol/L,(30.2±8.3) pmol/L,gbACT 显著延长(207.5±31.5)s;差异有统计学意义(F=9.11,11.81,5.99,16.37,均 P<0.05);C组与对照组相比,上机前 CR、PF、PF1+2 和 GMF-140 均有明显的增高,分别为(26.1±3.3) sig/min,(2.5±0.5),(443.5±64.1) pmol/L,(32.2±8.3) pmol/L,下机前 CR (23.7±4.1) 大于对照组(18.5±3.6),差异有统计学意义(F=11.14,3.04,120.30,8.63,均 P<0.05);40例血液透析患者均顺利完成透析,治疗过程中无静脉压升高的情况发生,治疗后管路无或有轻微的血液残留,穿刺时间明显延长。结论 使用普通肝素有较强的抗凝血作用,血液透析时和结束后,均有较大的出血风险,达肝素钠虽有较强的抗凝作用,但在血液透析过程中有较大的出血风险,使用阿加曲班有助于改善出血发生状况。

【关键词】血液透析;抗凝药物;肝素;达肝素;阿加曲班

Effects of different anticoagulants on coagulation function in hemodialysis patients  Shan Dewei, Wang Jijun.
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【Abstract】Objective To investigate the effect of different anticoagulant drugs on the changes of coagulation index and the incidence of hemorrhage in hemodialysis patients. Methods 40 patients with hemodialysis were selected as study objects, according to the random number table method they were divided into three groups, 20 cases received heparin in A group, 10 cases received low molecular heparin in B group; 10 cases received argatroban in C group. At the same time, 10 healthy persons were selected as control group. The activated glass bead clotting time (gbACT), blood velocity (CR), platelet function (PF), prothrombin fragment 1+2 (PF1 +2) and the surface of platelet alpha granule membrane protein (GMF – 140) were observed and analyzed in all patients. Results Compared with the control group, the CR, PF, PF1 + 2 and GMF – 140 before taking to machine in A group were significantly increased, which were (31.1 ± 5.5) sig/min, (3.1 ± 0.5), (478.2 ± 74.3) pmol/L, (36.9 ± 6.6) pmol/L, respectively, gbACT was significantly prolonged [(196.1 ± 27.3) s]. In A group, compared with before taking to machine, the CR, PF, PF1 + 2 and the GMF – 140 before taking off machine were significantly decreased, which were (10.6 ± 3.2) sig/min, (1.8 ± 0.4), (400.1 ± 85.5) pmol/L, (30.9 ± 6.8) pmol/L, respectively, gbACT was significantly prolonged [(252.5 ± 50.4) s], there were statistically significant differences (F = 112.64, 28.38, 81.40, 18.11, 21.63 0.05, all P< 0.05); B group compared with the control group, the CR, PF, PF1 + 2 and GMF – 140 before taking to machine were significantly increased, which were (29.5 ± 6.6) sig/min, (2.9 ± 1.2), (475.5 ± 97.0) pmol/L, (37.5 ± 7.0) pmol/L, respectively, gbACT was significantly prolonged [(193.9 ± 32.8) s], there were statistically significant differences (F = 9.11, 11.81, 5.99, 16.37, all P< 0.05); C group compared with before taking to machine, the CR, PF, PF1 + 2 and GMF – 140 before taking off machine were significantly decreased, which were (26.1 ± 3.3) sig/min, (2.5 ± 0.5), (443.5 ± 64.1) pmol/L, (32.2 ± 8.3) pmol/L, respectively, gbACT was significantly prolonged [(207.5 ± 31.5) s], there were statistically significant differences (F = 11.14, 3.04, 120.30, 8.63, all P< 0.05). Conclusion The use of heparin had a strong anticoagulant effect, and there was a large risk of hemorrhage during dialysis and after dialysis, dalteparin sodium had a stronger anticoagulant effect, but the risk of hemorrhage in the dialysis process was relatively large. Arrogatorban was helpful to improve the hemorrhage inci- dence.
7.0 pmol/L, respectively, gbACT was significantly prolonged \( (193.9 \pm 32.8) s \). In B group, the CR and PF1 + 2 before taking off machine were significantly decreased, which were \( (22.3 \pm 6.8) \), \( (407.8 \pm 90.3) \) pmol/L, respectively, gbACT was significantly prolonged \( (207.5 \pm 31.5) s \), there were statistically significant differences \( (F = 9.11, 57.81, 5.99, 16.37, \text{all } P < 0.05) \); C group compared with the control group, the CR, PF, PF1 + 2 and GMF - 140 before taking to machine were significantly increased, which were \( (26.1 \pm 3.3) \) sig/min, \( (2.5 \pm 0.5) \), \( (443.5 \pm 64.1) \) pmol/L, \( (32.2 \pm 8.3) \) pmol/L, respectively, before taking off machine, the CR\( (23.7 \pm 4.1) \) was higher than \( (18.5 \pm 3.6) \) of the control group, there were statistically significant differences \( (F = 11.14, 3.041, 20.30, 8.63, \text{all } P < 0.05) \). 40 hemodialysis patients were successfully treated without the occurrence of elevated venous pressure during and after treatment pipeline no or slight residual blood, puncture time and no significant prolongation.

**Conclusion** Unfractionated heparin has strong anti-clotting effect, during and after hemodialysis has greater risk of bleeding, dalteparin has anticoagulant effect, but there is greater risk of bleeding during hemodialysis, the use of argatroban helps to improve the condition of bleeding.

**【Key words】** Hemodialysis; Anticoagulant drugs; Heparin; Heparin sodium; Aplus
绿茶诱导乳腺癌细胞凋亡的研究

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【摘要】 目的 研究绿茶诱导乳腺癌细胞凋亡的情况, 了解绿茶预防肿瘤的作用。方法 培养人乳腺癌细胞株 (MDA-MB-231), 加入不同浓度绿茶的主要成分-儿茶酚胺 (EGCG), 通过 MTT 法, 彗星试验, 流式细胞仪, Caspase-3 活性测定来对人乳腺癌细胞株 (MDA-MB-231) 进行检测。结果 MTT 比色法中, 在用 0.2 mmol/L 的 EGCG 处理细胞 48 h 后观察到实验组的细胞增殖受到抑制 (最低吸光度值 0.391 ± 0.041, t = 4.223, P < 0.01)。彗星实验中, 0.2 mmol/LECGG 处理细胞 48 h 的实验组呈现出相当长的拖尾 [对照组平均 (4.92 ± 0.64) μm, 实验组平均 (18.76 ± 1.37) μm, P = 0.003]。流式细胞仪检测 MDA-MB-231 细胞株暴露于 EGCG 后细胞凋亡率显著上升 [29.37 ± 1.485, t = 11.125, P < 0.01]。EGCG 诱导细胞凋亡及 Caspase-3 活性率均依赖于时间和剂量 (Caspase 3 比色法: 0.2 mmol/L EGCG 处理细胞 48 h 的实验组 OD 值 0.144 ± 0.045, t = 5.321, P < 0.01)。结论 EGCG 通过影响细胞凋亡对乳腺癌的治疗及预防可能会有作用。 【关键词】 茶; 细胞凋亡; Caspase-3

Study on apoptosis of breast cancer cells induced by green tea  Guo Zhiqiang, Tian Honggang.

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【Abstract】 Objective To study the apoptosis of breast cancer cells induced by green tea and the preventive effect of green tea on cancer. Methods Catecholamine, the main components of green tea was added into human breast cancer cell line (MDA-MB-231) with different concentrations, and then human breast cancer cell line was measured by MTT assay, comet assay, flow cytometry and caspase –3 activity assay respectively. Results After treatment with 0.2 mmol/L EGCG for 48 h, the cell proliferation was inhibited in the experimental group in MTT assay [minimum absorbance value (0.391 ± 0.041), t = 4.223 P < 0.01]. In comet assay, cells treated with 0.2 mmol/L EGCG for 48 h in the experimental group showed a fairly long tail [control group average value (4.92 ± 0.64) μm, the experimental group average value (18.76 ± 1.37) μm, P = 0.003]. The rate of cell apoptosis increased significantly by testing MDA-MB-231 exposed to EGCG with flow cytometry. The apoptotic rate of the cells exposed to 0.2 mmol/L EGCG for 48 h in the experimental group was (29.37 ± 1.485) (t = 11.125, P < 0.01). EGCG induced apoptosis and caspase –3 activity rate was dependent on time and dose. The OD value of caspase –3 observed by the colorimetric method in cells exposed to 0.2 mmol/L EGCG for 48 h in the experimental group was (0.144 ± 0.045) (t = 5.321, P < 0.01). Conclusion EGCG may play a role in the treatment and prevention of breast cancer by affecting apoptosis. 【Key words】 Tea; Apoptosis; Caspase –3
循环管理模式干预肾内科抗菌药物使用强度效果分析

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【摘要】目的 通过循环管理模式对干预前后抗菌药物使用强度 (AUD) 进行对比分析,提高肾内科抗菌药物临床合理使用水平。方法 运用循环管理模式进行现状分析、找出原因、确定目标、制定对策并实施干预;统计循环管理模式实施前(2016 年 4~6 月)与干预后(2016 年 7~9 月)住院患者临床抗菌药物的 AUD 及抗菌药物不合理用药情况进行并比较分析。结果 经过 PDCA 循环后抗菌药物 AUD 由 2016 年 4 月的 87.62 下降至 2016 年 9 月的 38.46;肾内科经干预后抗菌药物使用强度比干预前显著下降,达到考核标准;抗菌药物不合理使用率由第二季度的 41.66% 降至第三季度的 10.93%。结论 通过 PDCA 模式有效降低了抗菌药物使用强度,促进了抗菌药物在肾内科的合理应用。

【关键词】抗菌药;使用强度;循环管理模式;肾内科
儿童误服沙丁胺醇中毒一例报告

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患儿，女，2 岁。在家趁奶奶不注意时误服沙丁胺醇约 20 片（2 mg/片，3.3 mg/kg）。于 2016 年 5 月 15 日晚 17:50 送入本院急诊，患儿出现面色发红，轻度烦躁等症状。患儿 3 d 前因咳嗽喘息曾在本院门诊就诊，给予口服沙丁胺醇治疗。急诊室给予 0.9% 氯化钠注射液洗胃后，收住入院治疗。入院体格检查：T 37.7℃，P 170 次/min，R 36 次/min，BP 105/70 mmHg（1 mmHg = 0.133 kPa），体质量 14 kg，烦躁，气平，精神可，双瞳孔等大等圆，直径 3 mm，对光反射灵敏。颈软，咽部充血不明显，双肺呼吸音粗，可闻及哮鸣音，心率 170 次/min，律齐，音适中，未闻及杂音，腹平软，肝肋下未及，脾未及肿大，未扪及包块，肠鸣音 3～5 次/min，四肢肌张力正常，神经系统检查阴性。
头孢美唑钠致迟发型全身弥漫性红斑一例

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One case of delayed systemic diffuse erythema caused by cefmetazole sodium  Wang Qi, Jiang Yinglan, Liu Ting, Ke Gang, Li Jie, Li Rong, Zeng Jinghuai.

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患者,女,61岁,因“反复便时肛门疼痛，出血伴肛门肿物脱出1年余，加重1周”于2016年7月25日入院。既往史有高血压4年，口服马来酸依那普利片10mg，每天1次，1994年行卵巢切除术，2012年行肛裂切除术，2013年行血栓性外痔切除术，否认肝炎、结核等传染病史，否认冠心病、糖尿病病史，无外伤史，无输血史，否认药物及食物过敏史。入院时体检: T 37.2℃，BP 136/87 mmHg，P 72次/min，R 27次/min，心肺无异常，腹部无特殊。辅助检查: 心电图: 正常心电图。尿常规: WBC: 43.2/μL(正常值: 0 ~ 25/μL)，SRC: 7.7/μL(正常值: 0 ~ 3/μL)。入院诊断为: 肛裂, 混合痔, 尿路感染。
弥散峰度成像在胶质瘤术前分级与 Ki-67 表达相关性的研究进展

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【摘要】 近年来多种影像技术被研究应用于胶质瘤的等级评估, 其均建立在组织内水分子呈高斯分布扩散理论基础上, 而弥散峰度成像作为新兴磁共振成像技术是 DWI 和 DTI 技术的拓展, 通过非高斯分布模型真实反映肿瘤及周边组织水分子真实扩散情况, 在术前预判胶质瘤级别的作用更为突出, 且与 Ki-67 等免疫组化指标有一定关联, 已成为国内外学者的研究热点。

【关键词】 神经胶质瘤; 弥散峰度成像; 术前分级; Ki-67 表达

The research progress in preoperative evaluation of diffusion kurtosis imaging in glioma grading and correlation with Ki – 67 expression  Yun Ruirui, Chen Shengli.
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【Abstract】 Recently diverse magnetic resonance imaging technology is used in glioma grading, which based on the theory of Gaussian distribution. Diffusion kurtosis imaging emerges as an extension of DWI and DTI, which could reflect the real and actual hydron – Gaussian distribution of tumor and peritumoral microenvironment. Displaying the correlation with immunohistochemical label Ki – 67, DKI convinces more scholars inland and abroad with its practicability.

【Key words】 Opticnerre glioma; Diffusion kurtosis imaging; Preoperative grading; Ki – 67 expression
健康教育在改善腹腔镜下胃穿孔修补术患者预后中的作用

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【摘要】目的 探讨健康教育在改善腹腔镜下胃穿孔修补术患者预后中的作用。方法 选择行腹腔镜下胃穿孔修补术患者96例,按随机数字表法分为两组,对照组48例患者,行常规护理干预,观察组48例患者,在常规护理基础上实施健康教育,采用问卷调查的形式,了解患者对疾病知识掌握情况,并比较两组治疗依从性及术后相关并发症发生情况。结果 观察组对疾病相关知识知晓率95.83%,明显高于对照组的72.92%,差异有统计学意义(χ² = 19.906, P < 0.05),观察组治疗依从率93.75%,显著高于对照组的79.17%,差异有统计学意义(χ² = 9.079, P < 0.05),观察组术后并发症发生率4.17%,显著低于对照组的16.67%,差异有统计学意义(χ² = 8.370, P < 0.05)。结论 在腹腔镜下胃穿孔修补术中开展健康教育,能提高患者知识掌握度,同时能降低术后相关并发症发生。

【关键词】腹腔镜检查; 胃穿孔修补术; 健康教育

Role of health education in improving the prognosis of patients with laparoscopic gastric perforation repair

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PDCA 在住院医师规范化培训病历书写中应用效果分析

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【摘要】目的 探讨 PDCA 在住院医师规范化培训期间病历书写管理中的应用效果。方法 回顾性收集 2015 级住院医师规范化培训期间病历登记真实率。结果 通过 PDCA 循环法对 2015 级住院医师规范化培训期间病历登记情况进行干预, 并针对相关问题实施相应的整改措施, 最终提高了住院医师规范化培训学员病历的书写质量。结论 PDCA 应用于住院医师病历书写可提高真实率、合格率, 提高了住院医师培训质量。

【关键词】住院医师; PDCA; 规范化培训; 合格率
基金项目:江苏省常熟市卫计委科技计划项目(CWS201620)

Analysis of the effects of applying PDCA in keeping detailed medical records during standardized resident training  Wang Hongwei, Fu Wei, Yuan Wenyan.
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Fund Program: Science and technology planning project of health and family planning commission of Changshu City, Jiangsu province (CSWS201620)
眼科患者医院内跌倒事件的原因分析及对策

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【摘要】 目的 探讨眼科患者医院内跌倒事件的特点,为制订眼科防跌倒护理对策提供参考。方法 对某医院近 3 年内上报护理部 17 例眼科患者在医院发生跌倒的原因和特点进行分析。结果 女性多于男性,70 岁以上为高危年龄,合并内科疾病平时服用药物为高危人群,厕所、床边为高危地点,0:00~8:00 为高发时段。结论 针对眼科患者医院内跌倒事件的特点,建立完善的管理制度,加强护理评估,制订有效措施,可有效防范眼科患者医院内跌倒事件的发生,保证护理安全。
【关键词】 意外跌倒; 眼科; 医院; 护理

Cause analysis and countermeasures of hospitalized fall events in ophthalmic patients  Fu Haiying, Huang Shaolan, Li Jing, Wang Wei, Zhang Jing.
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急诊护理路径与传统护理用于急性心肌梗死抢救的效果分析

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【摘要】 目的 分析急诊护理路径与传统护理用于急性心肌梗死抢救中的效果。方法 选取84例急性心肌梗死患者作为观察对象。采用随机数字表法分为两组,观察组42例,对照组42例。对照组使用传统护理,观察组采用急诊护理路径进行干预。护理后,对比两组患者的抢救、康复的效果以及对急救护理的满意度。结果 观察组急性心肌梗死患者在护理后急诊分诊时间、急诊停留时间、急救时间、确定治疗方案时间、卧床时间、疼痛缓解时间均短于对照组,治疗费用少于对照组(t = 3.05、8.94、4.92、5.43、5.44、8.23、6.58, P < 0.05);观察组护理满意度95.24%,明显优于对照组(78.57%) (χ² = 4.85, P < 0.05)。结论 采用急诊护理路径干预急性心肌梗死抢救,抢救效果显著,护理满意度高。

【关键词】 急诊护理路径; 满意度; 心肌梗死; 抢救

Analysis of the effect of emergency nursing pathway and traditional nursing in the treatment of acute myocardial infarction  Su Juanjuan, Chen Yufen.
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