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主办
中华医学会
100710,北京市东四西大街42号

安徽医科大学
230032,安徽省合肥市梅山路81号

编辑
中国基层医药编辑委员会
232001,中国安徽淮南市洞山中路16号
电话(传真):(0554)6664827
(0554)6665318
Email:cjpmvip@163.com
http://www.cjpm.com

总编辑
吴孟超 郑芙林

编辑部主任
黄政

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中国基层医药杂志社
232001,中国安徽淮南市洞山中路16号
电话(传真):(0554)6665318,6664827
Email:cjpmvip@163.com

广告代理
北京盛世太和影视广告有限公司
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电话(传真):(0554)6665318,6664827
Email:cjpmvip@163.com

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步行联合 Buerger 运动在 0 级糖尿病足治疗中的应用研究

蔡照红 朱瑜瑜 张峰 江培兰 陈雪玲 周雅芬 鲍红丹

315700 浙江省宁波,宁波市第四医院内分泌科

通信作者:鲍红丹,Email:410725066@qq.com

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【摘要】 目的 探讨步行联合 Buerger 运动在 0 级糖尿病足治疗中的应用价值。方法 将 80 例 0 级糖尿病足患者按入院先后顺序随机分成观察组和对照组各 40 例,对照组采用步行运动进行训练,观察组采用步行联合 Buerger 运动进行训练。通过 12 个月的训练,观察两组的神经病变自觉症状量表(TSS)、踝肱指数(ABI)和足背动脉平均血流速度(dDAMV)的变化。结果 两组的临床自感症状明显减少(观察组:显效 15 例,有效 19 例;对照组:显效 5 例,有效 23 例),观察组的有效率高于对照组(观察组 85%;对照组 70%)($\chi^2 = 7.831, P < 0.05$);两组的 ABI 比值较治疗前增加,观察组的 ABI 比值高于对照组[观察组(0.889 ± 0.113);对照组(0.842 ± 0.124), $t = 1.772, P < 0.05$];两组的 DAWV 较治疗前增加,观察组的 DAWV 高于对照组[观察组(6.772 ± 0.435) cm/s;对照组(6.543 ± 0.552) cm/s] ($t = 2.061, P < 0.05$)。结论 步行联合 Buerger 运动有利于改善 0 级糖尿病足患者的下肢的侧支循环血流速度和血流量,同时改善患者的周围神经病变的自觉症状。

【关键词】 Buerger 运动; 糖尿病足,0 级; 踝肱指数; 平均血流速度,足背动脉

基金项目:国家卫生计生委医药卫生科技发展研究中心项目(ZX-01-C2015042);浙江省宁波市卫生和计划生育委员会科研基金项目(2016A56);浙江省象山县科技计划项目(2017C6007);浙江省宁波市科技惠民项目(2017C50069)

Application of walking combined with Buerger exercise in patients with grade 0 diabetic foot Cai Zhaohong, Zhu Yuyu, Zhang Feng, Jiang Peilan, Chen Xueling, Zhou Yafen, Bao Hongdan.

Department of Endocrinology, the Fourth People's Hospital of Ningbo, Ningbo, Zhejiang 315700, China

Corresponding author: Bao Hongdan, Email:410725066@qq.com

【Abstract】 Objective To study the application of walking combined with Buerger exercise in the treatment of grade 0 diabetic foot. **Methods** Eighty patients with grade 0 diabetic foot were randomly divided into observation group and control group. The control group was trained by walking exercise. The observation group was trained by walking combined with Buerger exercise through 12 months of training. The changes of self-sensory symptoms, ABI and DAWV were observed. **Results** The self-sensory symptoms of the two groups were significantly decreased (observation group: markedly effective 15 cases, effective 19 cases; control group: markedly effective 5 cases, effective 23 cases). The effective rate of the observation group was higher than that of the control group (85% vs. 70%, $\chi^2 = 7.831, P < 0.05$). The ABI ratio of the two groups were higher than those before treatment, and the ABI ratio of the observation group was higher than that of the control group[(0.889 ± 0.113) vs. (0.842 ± 0.124), $t = 1.772, P < 0.05$]. The ratio of DAWV in the observation group was higher than that in the control group[(6.772 ± 0.435) cm/s vs. (6.543 ± 0.552) cm/s, $t = 2.061, P < 0.05$]. **Conclusion** Walking combined with Buerger exercise can improve the blood flow velocity and blood flow of the collateral circulation of the lower limbs of patients with grade 0 diabetic foot, and improve the self-sensory symptoms of peripheral neuropathy.

【Key words】 Buerger exercise; Diabetic foot, grade 0; Ankle brachial index; Mean blood flow velocity, dorsalis pedis artery

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质子泵抑制剂治疗应激性溃疡的疗效观察

周琳

315000 浙江省宁波,宁波市医疗中心李惠利东部医院药剂科

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【摘要】 **目的** 探讨质子泵抑制剂治疗应激性溃疡疗效与安全性。**方法** 收集 100 例应激性溃疡患者,按照随机号码表法分为两组,对照组患者给予奥美拉唑治疗,观察组患者则给予泮托拉唑 40 mg 静脉滴注,2 次/d,治疗 10 d;后改雷贝拉唑 10 mg,2 次/d,口服 6 周。比较两组患者临床症状评分、溃疡面积、总体治疗效果、不良反应、复发率与生活质量。**结果** 观察组治疗后临床症状总分(8.87 ± 2.55)分与溃疡面积(19.46 ± 6.88)mm,均显著低于对照组[(12.68 ± 3.14)分、(34.20 ± 9.77)mm];显效率(70%)与总有效率(88%)均显著性高于对照组(28%、66%);6 个月复发率(6%)与 12 个月复发率(26%)均明显低于对照组(28%、52%);治疗后 12 个月生活质量总分(635.14 ± 55.83)分显著高于对照组[(578.94 ± 52.40)分];差异均有统计学意义(均 $P < 0.01$);两组患者总不良反应率差异无统计学意义($P > 0.05$)。**结论** 质子泵抑制剂治疗应激性溃疡疗效显著,安全性较高,具有借鉴意义。

【关键词】 质子泵抑制剂; 应激性溃疡; 不良反应; 生活质量

基金项目:浙江省卫生厅科研课题(Y16H310010)

Efficacy and safety of proton pump inhibitor in treatment of stress ulcer Zhou Lin.

Department of Pharmacy, Li Huili East Hospital of Ningbo Medical Center, Ningbo, Zhejiang 315000, China

【Abstract】 **Objective** To investigate the efficacy and safety of proton pump inhibitor in the treatment of stress ulcer. **Methods** 100 patients with stress ulcer were enrolled, and they were randomly divided into two groups according to the random number table. The patients in the control group were treated with omeprazole. The patients in the observation group were treated with pantoprazole 40mg intravenous infusion, 2 times/day, 10 days after treatment, modified to rabeprazole 10mg, 2 times/day, oral 6 weeks. The clinical symptoms score, ulcer area, the overall treatment, adverse reactions, recurrence rate and quality of life were compared between the two groups. **Results** After treatment, the clinical symptom score and ulcer area of the observation group were (8.87 ± 2.55) points, (19.46 ± 6.88) mm, respectively, which were significantly lower than those of the control group [(12.68 ± 3.14) points, (34.20 ± 9.77) mm]. The markedly effective rate and total effective rate of the observation group were 70%, 88%, respectively, which were significantly higher than those of the control group (28%, 66%). The recurrence rates of 6 months and 12 months of the observation group were 6% and 26%, respectively, which were significantly lower than those of the control group (28%, 52%). The total score of quality of life after 12 months of treatment in the observation group was (635.14 ± 55.83) points, which was significantly higher than that of the control group [(578.94 ± 52.40) points, $t = 5.190, P < 0.01$]. The incidence rate of overall adverse reaction had no statistically significant difference between the two groups ($P > 0.05$). **Conclusion** Proton pump inhibitor is effective in the treatment of stress ulcer with high safety and has reference significance.

【Key words】 Proton pump inhibitors; Stress ulcers; Adverse reactions; Quality of life

Fund program: Zhejiang Provincial Health Department Research Project(Y16H310010)

正常碘摄入水平下妊娠特异性甲状腺指标参考值建立研究

李彩球 范冬春 王晓迪

321300 浙江省永康,永康市第一人民医院产科

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【摘要】 **目的** 建立正常碘摄入水平下妊娠特异性甲状腺指标的参考值范围。**方法** 选取接受常规产检的妊娠妇女 716 例为试验组,并以年龄匹配的非妊娠女性 307 例为对照组,采用化学发光微粒子免疫法检测血清促甲状腺激素(TSH)、游离甲状腺素(FT₄)、游离三碘甲状腺原氨酸(FT₃)水平,分析不同妊娠期特异性甲状腺指标的变化,制定特异性甲状腺各指标的参考值范围。**结果** 非妊娠女性、不同妊娠期女性血清 TSH、FT₃ 和 FT₄ 的表达水平差异均有统计学意义($F=78.901, 249.571, 137.090$, 均 $P<0.05$),其中 TSH 值随孕周增加呈上升趋势,而 FT₃ 和 FT₄ 随孕周增加呈降低趋势;早、中、晚妊娠期血清 TSH 参考范围分别为 $0.12 \sim 4.82$ mIU/L, $0.60 \sim 4.25$ mIU/L, $0.37 \sim 4.03$ mIU/L, FT₃ 参考范围分别为 $3.81 \sim 6.10$ pmol/L, $3.40 \sim 5.20$ pmol/L, $3.00 \sim 5.00$ pmol/L, FT₄ 参考范围分别为 $12.85 \sim 22.12$ pmol/L, $10.81 \sim 17.66$ pmol/L, $10.96 \sim 18.20$ pmol/L;该研究建立的参考值、非妊娠参考值、美国甲状腺学会(ATA)制定的参考值对妊娠期甲状腺功能异常的总检出率分别为 5.17% 、 5.45% 、 6.01% ,差异无统计学意义($\chi^2=0.498, P>0.05$),但对亚临床甲减的检出率差异有统计学意义($\chi^2=9.661, P<0.05$)。**结论** 妊娠期甲状腺各功能指标与健康人群存在显著差异,且在不同妊娠阶段亦存在差异,建立地区特异性的参考值范围能够有效避免甲状腺疾病的误诊或漏诊,减少妊娠不良结局。

【关键词】 妊娠; 促甲状腺素; 游离甲状腺素; 游离三碘甲状腺原氨酸

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Study on the establishment of trimester - specific reference intervals of thyroid hormones for pregnancy under normal iodine intake

Li Caiqiu, Fan Dongchun, Wang Xiaodi.

Department of Obstetrics, the First People's Hospital of Yongkang, Yongkang, Zhejiang 321300, China

【Abstract】 **Objective** To establish trimester - specific reference intervals of thyroid hormones for pregnancy in normal iodine intake. **Methods** A total of 716 pregnant women were selected as research subjects, and another 307 normal women without pregnancy were served as control group. The serum thyroid stimulating hormone (TSH), free thyroxine (FT₄), free three iodine thyroid gland original acid (FT₃) were measured by chemiluminescent microparticle immunoassay. The changes of thyroid indicators in different gestational period were analyzed, and the thyroid reference range during pregnancy was established. **Results** The levels of TSH, FT₃ and FT₄ in non - pregnant women and women in different pregnancy were significantly different ($F=78.901, 249.571, 137.090$, all $P<0.05$), in which the TSH increased with the increase of gestational age, while the FT₃ and FT₄ decreased with the increase of gestational age. The reference range of TSH in the early, middle and late gestational weeks were $0.12 \sim 4.82$ mIU/L, $0.60 \sim 4.25$ mIU/L, $0.37 \sim 4.03$ mIU/L; the reference range of FT₃ in the early, middle and late gestational weeks were $3.81 \sim 6.10$ pmol/L, $3.40 \sim 5.20$ pmol/L, $3.00 \sim 5.00$ pmol/L; and the reference range of FT₄ in the early, middle and late gestational weeks were $12.85 \sim 22.12$ pmol/L, $10.81 \sim 17.66$ pmol/L, $10.96 \sim 18.20$ pmol/L, respectively. The diagnostic rates for thyroid dysfunction of reference values, non - pregnancy reference values and reference values established by American Thyroid Society (ATA) were 5.17% , 5.45% and 6.01% , respectively, which showed no statistically significant difference among the three groups ($\chi^2=0.498, P>0.05$). However, the difference among the three diagnostic criteria for subclinical hypothyroidism was statistically significant ($\chi^2=9.661, P<0.05$). **Conclusion** The thyroid function indicators of pregnant women are significantly different from those of normal people, and there are differences in different stages of pregnancy. Establishing a region - specific reference range can effectively prevent misdiagnosis or missed diagnosis of thyroid disease and reduce adverse pregnancy outcome.

【Key words】 Pregnancy; Thyroid stimulating hormone; Free thyroxine; Free triiodothyronine

Fund program: The Medical and Health Science and Technology Program of Zhejiang Province (201423)

右半结肠癌腹腔镜下完整结肠系膜切除的临床效果

叶甫波 朱雄文 吴贵阳 陈再平 金晓燕

318000 浙江省台州, 台州市立医院胃肠外科

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【摘要】 目的 探讨右半结肠癌腹腔镜下完整结肠系膜切除的临床效果。**方法** 将 45 例腹腔镜右半结肠癌完整系膜切除患者作为研究组(腹腔镜组),选取同期 40 例右半结肠癌开腹完整结肠系膜切除(CME)作为对照组(开腹组),观察两组临床治疗效果。**结果** 腹腔镜组 45 例患者均顺利完成手术,按照手术质量等级判定系统判定优 40 例。腹腔镜组术后肛门排气时间(3.43 ± 0.72)d,低于开腹组的(4.10 ± 0.99)d($P = 0.039, P < 0.05$),下床活动时间(3.39 ± 0.66)d,明显短于开腹组的(4.20 ± 0.79)d($P = 0.005, P < 0.05$),手术时间(160.93 ± 20.91)min,较开腹组的(103.00 ± 24.29)min 明显延长($P = 0.000, P < 0.05$)。腹腔镜组切除淋巴结数目(23.16 ± 8.21)个,略高于开腹组的(19.06 ± 7.48)个,但组间差异无统计学意义($P = 0.102, P > 0.05$)。腹腔镜组术后并发症发生率为 13.33%,低于开腹组的 22.50%,两组差异无统计学意义($P = 0.268, P > 0.05$)。**结论** 腹腔镜右半结肠癌完整结肠系膜切除是安全可行的。

【关键词】 右半结肠癌; 腹腔镜; 完整结肠系膜切除

基金项目:浙江省医学会临床科研基金项目(2013ZYC-A138),浙江省台州市椒江区科技局立项(153048)

Effect of laparoscopic complete mesocolic excision (CME) for right colon cancer Ye Fubo, Zhu Xiongwen, Wu Guiyang, Chen Zaiping, Jin Xiaoyan.

Department of Gastrointestinal Surgery, Taizhou Municipal Hospital, Taizhou, Zhejiang 318000, China

【Abstract】 Objective To evaluate the experience of laparoscopic complete mesocolic excision (CME) for right colon cancer. **Methods** 45 patients with right colon cancer underwent laparoscopic CME were selected as research subjects(laparoscopy group), and 40 patients with right colon cancer underwent open CME were selected as control group(open group). The clinical effects of the two groups were observed. **Results** All the 45 cases were successfully performed with laparoscopic CME and 40 specimens were evaluated pathologically as mesocolic plane surgery. The average time for passage of flatus in the laparoscopy group [(3.43 ± 0.72) d] was less than that in the open group [(4.10 ± 0.99) d, $P = 0.039, P < 0.05$]. The average time of leaving bed [(3.39 ± 0.66) d] in the laparoscopy group was significantly less than that in the open group [(4.20 ± 0.79) d, $P = 0.005, P < 0.05$]. The mean operative time of the laparoscopy group [(160.93 ± 20.91) min] was longer than that of the open group [(103.00 ± 24.29) min, $P = 0.000, P < 0.05$]. The average number of total lymph nodes removed of the laparoscopy group [(23.16 ± 8.21)] was higher than that of the open group [(19.06 ± 7.48)], but the difference was not statistically significant between the two groups ($P = 0.102, P > 0.05$). The overall postoperative complication rate of the laparoscopy group was 13.33%, which was lower than 22.50% of the open group, but the difference was not statistically significant between the two groups($P = 0.268, P > 0.05$). **Conclusion** Laparoscope complete mesocolic excision for right colon cancer is safe and feasible.

【Key words】 Right colon cancer; Laparoscopy; Complete mesocolic excision

Fund program: Project of Clinical Research of Zhejiang Medical Association(2013ZYC-A138); Project of Jiaojiang Science and Technology Bureau of Zhejiang Province(153048)

苦参素对实验性自身免疫性脑脊髓炎大鼠钙蛋白酶和微管相关蛋白 2 表达的影响

张凤 朱琳 张明亮 宣自学

310014 浙江省杭州, 浙江省人民医院 杭州医学院附属人民医院药学部(张凤、宣自学)

450000 河南省郑州, 郑州大学第一附属医院药学部(朱琳、张明亮)

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【摘要】 目的 研究苦参素对实验性自身免疫性脑脊髓炎(EAE)大鼠钙蛋白酶(Calpain)和微管相关蛋白 2(MAP-2)表达的影响。**方法** 采用随机数字表法将 60 只大鼠分为正常对照组、模型组、地塞米松组(1 mg/kg)、苦参素高剂量组(250 mg/kg)、苦参素中剂量组(200 mg/kg)及苦参素低剂量组(150 mg/kg)。除正常对照组外,其他各组大鼠接受豚鼠全脊髓匀浆及完全弗氏佐剂制成的抗原乳剂干预并制备 EAE 模型。地塞米松组及苦参素高、中、低剂量组大鼠连续药物干预 16 d,记录大鼠发病症状,观察脊髓病理改变,半定量聚合酶链反应(RT-PCR)法测定脊髓中 μ -钙蛋白酶(μ -Calpain)和 m-钙蛋白酶(m-Calpain)含量的变化,免疫组织化学法检测脊髓中 MAP-2 的表达。**结果** 苦参素高、中、低剂量组大鼠神经功能评分分别为(1.28 ± 0.59)分、(1.45 ± 0.64)分、(2.09 ± 0.71)分,较模型组的(2.85 ± 0.78)分显著降低($t = 5.345, 4.314, 2.869$, 均 $P < 0.05$)。与模型组[(2.49 ± 0.29)分]相比,苦参素高剂量组[(1.04 ± 0.26)分]、苦参素中剂量组[(1.29 ± 0.20)分]、苦参素低剂量组[(1.77 ± 0.24)分]HE 评分均显著降低,差异均有统计学意义($t = 5.185, 4.274, 3.629$, 均 $P < 0.01$)。苦参素高、中、低剂量组 μ -Calpain mRNA 含量均低于模型组($t = 10.656, 9.418, 7.044$, 均 $P < 0.01$);m-Calpain mRNA 含量均低于模型组($t = 6.332, 5.416, 3.978$, 均 $P < 0.01$);MAP-2 蛋白含量均高于模型组($t = 12.841, 9.924, 7.038$, 均 $P < 0.01$)。**结论** 苦参素可能通过抑制 EAE 大鼠 Calpain 过度表达、上调 MAP-2 水平,发挥对 EAE 大鼠的保护作用。

【关键词】 苦参素; 脑脊髓炎,自身免疫性,实验性; 钙蛋白酶; 微管相关蛋白 2; 大鼠

基金项目:河南省教育厅科研项目(15A350003)

Effect of matrine on Calpain/MAP - 2 of experimental autoimmune encephalomyelitic rats Zhang Su, Zhu Lin, Zhang Mingliang, Xuan Zixue.

Department of Pharmacy, the People's Hospital of Zhejiang Province, Hangzhou, Zhejiang 310014, China (Zhang S, Xuan ZX); Department of Pharmacy, the People's Hospital Affiliated to Hangzhou Medical College, Hangzhou, Zhejiang 310014, China (Zhang S, Xuan ZX); Department of Pharmacy, the First Affiliated Hospital of Zhengzhou University, Zhengzhou, He'nan 450000, China (Zhu L, Zhang ML)

【Abstract】 Objective To study the effect of matrine on Calpain and MAP - 2 in rats with experimental autoimmune encephalomyelitis (EAE). **Methods** In accordance with the random number table, 60 Wistar rats were divided into 6 groups randomly: normal group, model group, dexamethasone (DEX) - treated group (1 mg/kg), high - dose matrine (MAT) - treated group (250 mg/kg), middle - dose MAT - treated group (200 mg/kg) and low - dose MAT - treated group (150 mg/kg). The EAE models were induced by immunized spinal cord extracts of guinea pig with complete Freund's adjuvant. Rats of three MAT - treated groups and DEX - treated group were injected intraperitoneally with MAT and DEX daily for 16 days respectively, whereas rats of normal group and model group were injected intraperitoneally with normal saline. Clinical signs of rats in six groups were observed daily. Hematoxylin - eosin (HE) was used to analyze histopathological evaluation of spinal cord. μ - Calpain, m - Calpain and MAP - 2 in spinal cord were determined using RT - PCR and immunohistochemistry respectively. **Results** Compared with the model group [(2.85 ± 0.78) points], the clinical scores were significantly decreased in high - dose - MAT group [(1.28 ± 0.59) points], middle - dose - MAT group [(1.45 ± 0.64) points] and low - dose - MAT group [(2.09 ± 0.71) points] ($t = 5.345, 4.314, 2.869$, all $P < 0.05$). The HE score of rats in model group [(2.49 ± 0.29) points]

was significantly higher than that in high-dose-MAT group [(1.04 ± 0.26) points], middle-dose-MAT group [(1.29 ± 0.20) points] and low-dose-MAT group [(1.77 ± 0.24) points] ($t = 5.185, 4.274, 3.629$, all $P < 0.01$). The levels of μ -Calpain mRNA and m-Calpain mRNA in the three MAT-treated groups were significantly lower than those in model group ($t = 10.656, 9.418, 7.044$, all $P < 0.01$; $t = 6.332, 5.416, 3.978$, all $P < 0.01$). In addition, the expression of MAP-2 in the spinal cord of EAE rats showed a marked elevation after MAT treatment ($t = 12.841, 9.924, 7.038$, all $P < 0.01$). **Conclusion** Matrine may be an effective therapeutic approach for EAE by inhibiting Calpain and increase MAP-2 expression.

【Key words】 Matrine; Encephalomyelitis, autoimmune, experimental; Calpain; Microtubule associated protein-2; Rats

Fund program: Research Project of Henan Provincial Education Department(15A350003)

帕利哌酮缓释片治疗精神分裂症的临床效果及安全性

王群芬

315336 浙江省慈溪, 慈溪市第七人民医院精神科

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【摘要】 **目的** 探讨帕利哌酮缓释片治疗精神分裂症的临床效果及安全性。**方法** 选取 80 例精神分裂症患者为研究对象, 遵循单盲随机分配原则分为两组, 每组 40 例, 对照组采用利培酮治疗, 观察组采用帕利哌酮缓释片治疗, 比较两组总有效率、阳性和阴性症状评分 (PANSS 评分)、精神残疾评分 (WHO-DAS II 评分) 以及不良反应发生率。**结果** 观察组的临床总有效率 (95.00%) 明显高于对照组 (80.00%) ($\chi^2 = 4.114$, $P < 0.05$); 治疗后, 观察组的 PANSS 评分、WHO-DAS II 评分相对于治疗前均明显降低 ($t = 8.002$ 、 7.761 , 均 $P < 0.05$), 且其均低于对照组治疗后 ($t = 4.114$ 、 3.702 , 均 $P < 0.05$); 两组不良反应发生率差异无统计学意义 (7.50% 比 10.00%, $\chi^2 = 0.157$, $P > 0.05$)。**结论** 采用帕利哌酮缓释片治疗精神分裂症的临床疗效显著, 可有效缓解患者的精神障碍, 且安全性可靠。

【关键词】 精神分裂症; 帕利哌酮缓释片; 利培酮; 安全性

基金项目: 浙江省慈溪市科技计划项目 (CN2010028)

Efficacy and safety of paliperidone extended - release tablets in the treatment of schizophrenia

Wang Qunfen.

Department of Psychiatry, the Seventh People's Hospital of Cixi, Cixi, Zhejiang 315336, China

【Abstract】 **Objective** To study the clinical effect and safety of paliperidone extended - release tablets in the treatment of schizophrenia. **Methods** 80 patients with schizophrenia were selected as the research subjects. According to randomized single blind, the patients were divided into two groups, 40 cases in each group. The control group was given risperidone treatment, the observation group used paliperidone extended - release tablets treatment. The total effective rate, positive and negative symptoms score (PANSS score), mental disability score (WHO - DAS score II) and the incidence of adverse reactions were compared between the two groups. **Results** The clinical total effective rate (95.00%) in the observation group was significantly higher than the control group (80.00%, $\chi^2 = 4.114$, $P < 0.05$). After treatment, the PANSS score and WHO - DAS II score in the observation group were significantly decreased compared with before treatment ($t = 8.002$, 7.761 , all $P < 0.05$), which were lower than those in the control group after treatment ($t = 4.114$, 3.702 , all $P < 0.05$). The incidence rate of adverse reaction between the two groups had no statistically significant difference (7.50% vs. 10.00%, $\chi^2 = 0.157$, $P > 0.05$). **Conclusion** The clinical efficacy of paliperidone extended - release tablets in the treatment of schizophrenia is significant, which can effectively relieve patients with mental disorders, and it is safe and reliable.

【Key words】 Schizophrenia; Paliperidone extended - release tablets; Risperidone; Safety

Fund program: Project of Cixi Science and Technology Program of Zhejiang Province (CN2010028)

腹部穴位按摩配合贴敷疗法治疗胸腰椎骨折后便秘的临床研究

黄李红

315400 浙江省余姚,余姚市中医医院骨伤科

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【摘要】 目的 探讨腹部穴位按摩配合贴敷疗法治疗胸腰椎骨折后便秘的临床应用效果。**方法** 选择 50 例胸腰椎骨折后便秘患者作为研究对象,按照计算机随机分组法将患者分为两组,每组 25 例,对照组接受酚酞片治疗,疗程 7 d,观察组患者接受腹部穴位按摩配合贴敷疗法治疗,疗程 7 d。比较两组治疗后排便感觉、大便秘结、临床疗效、排便次数及矢气次数。**结果** 治疗后,观察组排便畅快、费力与软便、干结占比分别为 76.00%、24.00%、88.00%、12.00%,与对照组比较差异均有统计学意义($\chi^2 = 6.65, 6.35$, 均 $P < 0.01$);治疗后观察组临床总好转率为 96.00%,明显高于对照组的 72.00% ($\chi^2 = 5.36, P = 0.02$);观察组治疗后 48 h 与 72 h 的排便次数与矢气次数均高于对照组($t = 6.22, 22.37, 10.29, 8.97$, 均 $P < 0.05$)。**结论** 腹部穴位按摩配合贴敷疗法治疗胸腰椎骨折后便秘的临床应用效果显著。

【关键词】 便秘; 酚酞片; 穴位按摩; 贴敷疗法; 胸腰椎骨

基金项目:浙江省余姚市科技计划项目(2016YYB05)

Clinical study of abdominal acupoint massage combined with sticking therapy in the treatment of constipation after thoracolumbar fracture Huang Lihong.

Department of Orthopaedics and Traumatology, Yuyao Hospital of Traditional Chinese Medicine, Yuyao, Zhejiang 315400, China

【Abstract】 Objective To investigate the clinical effect of massage combined with abdominal acupoint sticking therapy in the treatment of constipation after thoracolumbar fractures. **Methods** 50 thoracolumbar fracture patients with constipation were selected as the research subjects. According to the computer random grouping, all patients were divided into two groups, 25 cases in each group. The control group received phenolphthalein tablets. The observation group underwent abdominal acupoint massage and sticking therapy treatment. The two groups were treated for a course of 7 days. The clinical curative effect, defecation feeling, stool, defecation frequency and number of vector gas were compared between the two groups. **Results** After treatment, the proportions of defecation and carefree, laborious and soft, dry in the observation group were 76.00%, 24.00%, 88.00%, 12.00%, respectively, compared with the control group, there were statistically significant differences ($\chi^2 = 6.65, 6.35$, all $P < 0.01$). The total improvement rate after treatment in the observation group was 96.00%, which was significantly higher than 72.00% in the control group ($\chi^2 = 5.36, P = 0.02$). After treatment for 48 hours and 72 hours, the frequency of defecation and the number of vector gas times in the observation group were higher than the control group ($t = 6.22, 22.37, 10.29, 8.97$, all $P < 0.05$). **Conclusion** Abdominal acupoint massage combined with sticking therapy in the treatment of constipation after thoracolumbar fractures has significant clinical effect.

【Key words】 Constipation; Phenolphthalein tablets; Acupoint sticking therapy; Massage; Lumbar vertebrae

Fund program: Science and Technology Planning Project of Yuyao City, Zhejiang Province (2016YYB05)

双相气道内正压通气对支气管哮喘患者肺功能及血清细胞炎性因子的影响

苗雨春

030006 山西省太原, 山西省煤炭中心医院呼吸内科

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【摘要】 目的 探讨双相气道内正压通气(BiPAP)对支气管哮喘患者的肺功能及血清细胞炎性因子的影响。**方法** 采用随机数字表法将 107 例中重度支气管哮喘患者分为对照组($n=54$)和观察组($n=53$),对照组给予常规的对症支持治疗,包括祛痰、吸氧、纠正水电解质、抗感染治疗等,观察组在对照组治疗方案的基础上给予 BiPAP 无创通气,治疗 7 d 后比较两组的临床疗效、肺功能改善情况及血清细胞炎性因子变化情况。**结果** 观察组显效率为 88.68%,高于对照组的 72.22%,差异有统计学意义($\chi^2=4.592, P=0.032$),观察组总有效率为 96.23%,高于对照组的 83.64%,差异有统计学意义($\chi^2=4.677, P=0.031$)。观察组治疗后的第一秒用力呼气容积(FEV_1)、第一秒用力呼气容积/用力肺活量(FEV_1/FVC)、呼气峰流速(PEF)水平分别为(1.95 ± 0.27)L、(65.33 ± 6.21)%、(5.55 ± 0.34)L/s,均高于对照组的(1.66 ± 0.24)L、(58.24 ± 6.09)%、(4.70 ± 0.39)L/s,差异均有统计学意义($t=-5.872, -5.961, -12.016$, 均 $P<0.05$)。观察组治疗后的血清白细胞介素-4(IL-4)、白细胞介素-5(IL-5)、白细胞介素-13(IL-13)、白细胞介素-17(IL-17)、 γ -干扰素(IFN- γ)水平分别为(136.77 ± 84.63)ng/L、(145.06 ± 67.33)ng/L、(12.67 ± 4.02)ng/L、(7.15 ± 0.87)ng/L、(507.51 ± 169.33)ng/L,低于对照组的(186.95 ± 81.36)ng/L、(193.35 ± 63.20)ng/L、(14.59 ± 3.97)ng/L、(7.76 ± 0.99)ng/L、(655.76 ± 183.95)ng/L,差异均有统计学意义($t=3.136, P=0.000; t=3.832, P=0.000; t=2.497, P=0.015; t=3.389, P=0.000; t=4.341, P=0.000$)。**结论** BiPAP 能有效改善中重度支气管哮喘患者的肺功能,降低细胞炎性因子水平,临床有重要的参考价值。

【关键词】 双相气道内正压通气; 支气管哮喘; 肺功能; 细胞因子

Influence of biphasic positive airway pressure ventilation on lung function and serum cytokines in patients with bronchial asthma Miao Yuchun.

Department of Respiratory Diseases, Shanxi Coal Central Hospital, Taiyuan, Shanxi 030006, China

【Abstract】 Objective To explore the influence of biphasic positive airway pressure (BiPAP) ventilation on lung function and serum cytokines in the treatment of patients with bronchial asthma. **Methods** 107 patients with moderate to severe bronchial asthma were divided into two groups according to the random number table method. The control group ($n=54$) received general supportive treatment such as expectorant, suck oxygen, balancing the water and electrolyte, anti-infection treatment. The observation group ($n=53$) was given BiPAP non-invasive ventilation based on the treatment of the control group. After treatment for 7 days, the clinical efficacy, improvement of lung function and serum cytokines between the two groups were compared. **Results** The effective rate of the observation group was 88.68%, which was higher than 72.22% of the control group, the difference was statistically significant ($\chi^2=4.592, P=0.032$). The total effective rate of the observation group was 96.23%, which was higher than 83.64% of the control group, the difference was statistically significant ($\chi^2=4.677, P=0.031$). The FEV_1 , FEV_1/FVC , PEF levels of the observation group after treatment were (1.95 ± 0.27)L, (65.33 ± 6.21)%, (5.55 ± 0.34)L/s, respectively, which were higher than those of the control group [(1.66 ± 0.24) L, (58.24 ± 6.09)%, (4.70 ± 0.39)L/s], the differences were statistically significant ($t=-5.872, -5.961, -12.016$, all $P<0.05$). The serum levels of IL-4, IL-5, IL-13, IL-17, IFN- γ of the observation group after treatment were (136.77 ± 84.63)pg/mL, (145.06 ± 67.33)pg/mL, (12.67 ± 4.02)ng/mL, (7.15 ± 0.87)ng/L, (507.51 ± 169.33)ng/L, respectively, which were lower than those of the control group [(186.95 ± 81.36) pg/mL, (193.35 ± 63.20)pg/mL, (14.59 ± 3.97)ng/mL, (7.76 ± 0.99)ng/L, (655.76 ± 183.95)ng/L], the differences were statistically significant ($t=3.136, P=0.000; t=3.832, P=0.000; t=2.497, P=0.015; t=3.389, P=0.000; t=4.341, P=0.000$). **Conclusion** BiPAP non-invasive ventilation in the treatment of patients with moderate to severe bronchial asthma can effectively improve the lung function and reduce inflammatory cytokines, which has important reference value in clinic.

【Key words】 Biphasic positive airway pressure; Bronchial asthma; Lung function; Cytokines

大剂量尿激酶用于脑室出血的效果观察 及对患者血清炎性因子的影响比较

雷军

610200 四川省成都,成都市双流区第一人民医院神经外科

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【摘要】 **目的** 观察大剂量尿激酶用于脑室出血的临床效果及对患者血清肿瘤坏死因子- α (TNF- α)、白细胞介素-6(IL-6)的影响。**方法** 选择脑室出血患者 96 例,采用随机数字表法将其分为研究组和对照组,每组 48 例。两组均行双侧脑室微创穿刺引流术治疗,对照组术后经引流管注入小剂量尿激酶 2 万 U/d。研究组术后经引流管注入尿激酶 5 万 U/d。观察对比两组患者每日血肿排出量、脑室血肿消失时间、脑脊液持续引流时间、术后并发症情况,以及不同时间段 TNF- α 与 IL-6 水平。**结果** 研究组脑室血肿消失时间与脑脊液持续引流时间分别为(5.03 \pm 1.52)d、(3.58 \pm 1.32)d,均低于对照组的(10.65 \pm 3.62)d、(4.82 \pm 1.40)d,研究组每日血肿排出量为(8.13 \pm 0.84)mL,显著高于对照组的(5.32 \pm 0.65)mL($t = 3.462, 2.793, 3.083$, 均 $P < 0.05$)。研究组术后并发症发生率为 2.08%,低于对照组的 16.67% ($\chi^2 = 6.008, P < 0.05$)。研究组治疗后 24 h TNF- α 与 IL-6 水平分别为(68.26 \pm 14.20) $\mu\text{g/L}$ 、(68.52 \pm 10.20) $\mu\text{g/L}$,与对照组的(68.25 \pm 12.65) $\mu\text{g/L}$ 、(68.50 \pm 8.65) $\mu\text{g/L}$ 比较差异均无统计学意义($t = 0.382, 0.306$, 均 $P > 0.05$);研究组治疗 3 d 及 7 d 后 TNF- α 与 IL-6 水平分别为(88.52 \pm 18.62) $\mu\text{g/L}$ 、(135.60 \pm 24.52) $\mu\text{g/L}$ 、(81.33 \pm 22.52) $\mu\text{g/L}$ 、(97.52 \pm 16.63) $\mu\text{g/L}$,均低于对照组的(185.65 \pm 27.41) $\mu\text{g/L}$ 、(256.65 \pm 28.65) $\mu\text{g/L}$ 、(90.20 \pm 18.50) $\mu\text{g/L}$ 、(134.52 \pm 27.65) $\mu\text{g/L}$ ($t = 12.038, 15.023, 7.028, 10.048$, 均 $P < 0.05$)。**结论** 大剂量尿激酶在脑室出血患者中具有显著的应用效果,能够快速溶解血肿,抑制 TNF- α 与 IL-6 因子水平,保护脑组织,且未增加并发症概率,适于临床推广。

【关键词】 大剂量尿激酶; 脑室出血; 止血; 肿瘤坏死因子- α ; 白细胞介素-6

Effect of high dose urokinase on intraventricular hemorrhage and its influence on inflammatory cytokines in patients Lei Jun.

Department of Neurosurgery, the First People's Hospital of Shuangliu District, Chengdu, Sichuan, 610200, China

【Abstract】 **Objective** To observe the effect of high dose urokinase on hemostasis, tumor necrosis factor - α (TNF - α) and interleukin - 6 (IL - 6) in patients with intraventricular hemorrhage. **Methods** 96 patients with intraventricular hemorrhage were selected. They were randomly divided into study group and control group according to the digital table, 32 cases in each group. The two groups were treated by bilateral minimally invasive puncture and drainage, the control group was injected with urokinase 20 000U/d through the drainage tube, and the study group were injected with urokinase 50 000U/d through the drainage tube. The daily hematoma output volume, the time of ventricular hematoma disappearance, the duration of cerebrospinal fluid drainage, the postoperative complications and the levels of TNF - α and IL - 6 in different periods were observed and compared between the two groups. **Results** The time of ventricular hematoma disappearance and the duration of cerebrospinal fluid drainage in the study group were (5.03 \pm 1.52)d and (3.58 \pm 1.32)d, respectively, which were shorter than those in the control group [(10.65 \pm 3.62)d, (4.82 \pm 1.40)d]. The daily hematoma output volume in the study group was (8.13 \pm 0.84)mL, which was significantly higher than that of the control group [(5.32 \pm 0.65)mL], the differences between the two groups were statistically significant ($t = 3.462, 2.793, 3.083$, all $P < 0.05$). The incidence rate of postoperative complications in the study group was 2.08%, which was lower than that of the control group (16.67%, $\chi^2 = 6.008, P < 0.05$). The levels of TNF - α and IL - 6 24h after treatment in the study group were (68.26 \pm 14.20) $\mu\text{g/L}$, (68.52 \pm 10.20) $\mu\text{g/L}$, respectively, which of the control group were (68.25 \pm 12.65) $\mu\text{g/L}$, (68.50 \pm 8.65) $\mu\text{g/L}$, respectively, and there were no statistically significant differences between the two groups ($t = 0.382, 0.306$, all $P > 0.05$). The levels of TNF - α and IL - 6 3d and 7d after treatment in the study group were (88.52 \pm 18.62) $\mu\text{g/L}$, (135.60 \pm 24.52) $\mu\text{g/L}$,

(81.33 ± 22.52) μg/L, (97.52 ± 16.63) μg/L, respectively, which were lower than those in the control group [(185.65 ± 27.41) μg/L, (256.65 ± 28.65) μg/L, (90.20 ± 18.50) μg/L, (134.52 ± 27.65) μg/L, $t = 12.038, 15.023, 7.028, 10.048$, all $P < 0.05$]. **Conclusion** High dose urokinase is effective in the treatment of intraventricular hemorrhage, it can rapidly dissolve hematoma, inhibit TNF-α and IL-6 levels, protect the brain tissue, and the incidence rate of complication is not increased, which is suitable for clinical promotion.

【Key words】 High dose urokinase; Intraventricular hemorrhage; Hemostasis; Tumor necrosis factor-α; Interleukin-6

持续质量改进对降低血液透析患者 静脉导管相关血流感染的效果

王建财

324100 浙江省江山, 江山市人民医院血透室

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【摘要】 **目的** 探讨持续质量改进对降低血液透析患者静脉导管相关血流感染(CRBSI)的效果。**方法** 选取血液透析患者 90 例作为研究对象,该院 2016 年 5 月开始实施持续质量改进,将 2015 年 5 月至 2016 年 5 月期间 45 例血液透析患者作为对照组,将 2016 年 6 月至 2017 年 2 月期间 45 例作为研究组,对比两组患者的 CRBSI 发生率、住院时间等指标。**结果** 研究组 CRBSI 发生率为 2.22%,明显低于对照组的 17.78% ($\chi^2 = 5.921, P < 0.05$);研究组投诉事件、死亡事件、CRBSI 持续时间、治疗费用、住院天数均优于对照组 [0.00% 比 6.67%, 0.00% 比 8.89%, (5.96 ± 0.52) d 比 (16.35 ± 0.24) d, (26.98 ± 1.85) d 比 (43.62 ± 2.58) d, (0.85 ± 0.03) 万元比 (2.53 ± 0.01) 万元, $\chi^2 = 3.857, 3.987, t = 5.821, 5.821, 5.741$, 均 $P < 0.05$]。**结论** 应用持续质量改进可以降低血液透析患者静脉 CRBSI 发生率,缩短住院时间及置留时间,降低病死率,具有较高的应用价值。

【关键词】 血液透析滤过; 导管插入术,外周; 感染; 护理

Effect of continuous quality improvement in reducing intravenous catheter – related bloodstream infection in patients with hemodialysis Wang Jiancai.

Department of Hemodialysis, the People's Hospital of Jiangshan, Jiangshan, Zhejiang 324100, China

【Abstract】 **Objective** To explore the effect of continuous quality improvement in reducing intravenous catheter – related bloodstream infection (CRBSI) in patients with hemodialysis. **Methods** 90 patients with hemodialysis were selected as the research subjects. The hospital began to implement continuous quality improvement in May 2016, 45 hemodialysis patients from May 2015 to May 2016 were selected as the control group, and 45 hemodialysis patients from June 2016 to February 2017 were selected as the study group. The incidence of CRBSI, length of hospital stay, etc were compared between the two groups. **Results** The incidence rate of CRBSI in the study group was 2.22%, which was obviously lower than 17.78% in the control group ($\chi^2 = 5.921, P < 0.05$). The complaints and death events, duration of CRBSI, treatment costs and length of stay of the study group were better than those of the control group [0.00% vs. 6.67%, 0.00% vs. 8.89%, (5.96 ± 0.52) d vs. (16.35 ± 0.24) d, (26.98 ± 1.85) d vs. (43.62 ± 2.58) d, (0.85 ± 0.03) million yuan vs. (2.53 ± 0.01) million yuan, $\chi^2 = 3.857, 3.987, t = 5.821, 5.821, 5.741$, all $P < 0.05$]. **Conclusion** The application of continuous quality improvement can reduce the incidence of venous CRBSI in hemodialysis patients, shorten the length of hospital stay and the indwelling time, reduce the mortality rate, and it has higher application value.

【Key words】 Hemodiafiltration; Catheterization, peripheral; Infection; Nursing care

内蒙古地区蒙古族与汉族患者中下段食管癌胸腹腔镜联合根治术临床疗效的对比研究

洪智攀 张仁泉 闫文强 郭峰 刘伟男 王静怡 王学智

024000 内蒙古自治区赤峰,赤峰市医院肿瘤外一科(洪智攀、闫文强、郭峰、刘伟男、王静怡、王学智);

230022 安徽省合肥,安徽医科大学第一附属医院普胸外科一病区(张仁泉)

通信作者:王学智,Email:hongzhipan@126.com

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【摘要】 目的 前瞻性研究对比分析内蒙古地区蒙古族与汉族患者中下段食管癌胸腹腔镜联合根治术的临床效果,进一步明确胸腹腔镜联合食管癌根治术可行性。**方法** 收集行胸腹腔镜联合食管癌根治术 92 例蒙古族、汉族中下段食管癌患者,其中蒙古族 41 例(蒙古族组),汉族 51 例(汉族组)。比较两民族患者术后第 1~14 天视觉模拟评分法(VAS)评估术后疼痛情况、术后并发症、术后住院时间及术后病理情况。**结果** 术后第 1~5 天,蒙古族组术后疼痛明显轻于汉族组($P < 0.05$),且术后第 2 天转为轻微疼痛,而汉族组术后第 4 天才转为轻微疼痛;术后 6~14 d 蒙古族组术后疼痛与汉族组差异无统计学意义($P > 0.05$);蒙古族组术后总并发症发生率明显低于汉族组(9.8% 比 27.5%, $\chi^2 = 4.522, P < 0.05$),其中蒙古族组呼吸系统并发症,如肺部感染、肺不张及需要处理的胸腔积液发生率明显低于汉族组(7.3% 比 23.5%、2.4% 比 15.7%、4.9% 比 19.6%, $P < 0.05$),其他并发症发生率差异无统计学意义($P > 0.05$);蒙古族组术后住院时间较汉族组明显缩短[(11.9 ± 1.2) d 比 (15.5 ± 1.0) d, $t = -15.811, P < 0.05$];蒙古族组较汉族组总淋巴结清扫数目、腹腔淋巴结清扫数目、胸腔淋巴结清扫数目差异无统计学意义($P > 0.05$),而蒙古族组出现区域淋巴结转移数目明显高于汉族组(3.9 ± 0.7 比 1.8 ± 0.7, $t = 13.460, P < 0.05$),分化程度多为中低分化(6/25/10 比 20/20/11, $\chi^2 = 7.139, P < 0.05$),同时脉管内癌栓及神经侵犯明显高于汉族组(75.6% 比 47.1%、70.7% 比 17.6%, $\chi^2 = 7.706, 26.418$, 均 $P < 0.05$)。**结论** 蒙古族患者较汉族更耐受胸腹腔镜联合食管癌根治术,术后减少疼痛创伤,恢复快,根治效果满意,并发症少,值得临床推广;同时蒙古族患者食管癌恶性程度较汉族高,需加大对蒙古族食管癌患者早发现早治疗,需进一步研究其相关差异原因。

【关键词】 蒙族; 食管肿瘤; 胸腔镜; 腹腔镜; 淋巴结清扫; 术后并发症

Comparison of the clinical efficacy of thoracoscopic combined with laparoscopic esophagectomy (TLE) in the middle and lower stages of esophageal cancer patients between Mongolian and Han nationalities in Inner Mongolia Hong Zhipan, Zhang Renquan, Yan Wenqiang, Guo Feng, Liu Weinan, Wang Jingyi, Wang Xuezhi.

Department of Tumor Surgery, Chifeng Hospital, Chifeng, Inner Mongolia, 024000 China (Hong ZP, Yan WQ, Guo F, Liu WN, Wang JY, Wang XZ); Department of General Thoracic Surgery, the First Affiliated Hospital of Anhui Medical University, Hefei, Anhui, 230022 China (Zhang RQ)

Corresponding author: Wang Xuezhi, Email: hongzhipan@126.com

【Abstract】 Objective To prospectively study the clinical diversity of the middle and lower segment of stage of esophageal cancer patients who accepted the thoracoscopic combined with laparoscopic esophagectomy (TLE) between Mongolian and Han nationalities in Inner Mongolia, to further clarify the feasibility of TLE. **Methods** 92 consecutive cases of middle and lower segment of stage of esophageal cancer patients of Mongolian and Han were selected, and the patients accepted the TLE, including 41 cases of Mongolian and 51 cases of Han. The postoperative pain was evaluated with the visual analog scale (VAS) at 1-14d after operation, and the postoperative complication, the hospitalization of postoperation and the postoperative pathological situation were compared. **Results** Compared with the Han patients, the postoperative pain of Mongolian significantly reduced, duration of postoperative of pain

significantly shorter in the 1 – 5 d after surgery ($P < 0.05$). Mongolian patients turned to mild pain in the second day of the postoperative period, and Han turned to mild pain in the fourth day after surgery. The postoperative pain in the 6 – 14 d after surgery of the Mongolian was not significantly different from Han ($P > 0.05$). The Mongolian had lower incidence rate of postoperative complication compared with Han (9.8% vs. 27.5%, $\chi^2 = 4.522$, $P < 0.05$). For example, the incidence rates of respiratory complications in Mongolian patients, such as pulmonary infection, atelectasis and the occurrence of pleural effusion that need to be treated were significantly lower than those in Han (7.3% vs. 23.5%, 2.4% vs. 15.7%, 4.9% vs. 19.6%, $P < 0.05$). There was no statistically significant difference in the incidence of other complications ($P > 0.05$). The postoperative hospitalization of Mongolian was significantly shorter than that of Han [(11.9 ± 1.2) d vs. (15.5 ± 1.0) d, $t = -15.811$, $P < 0.05$]. No significant difference in the total number of cases of lymph node dissection, the abdominal lymph node dissection and the chest lymph node dissection. The number of the regional lymph nodes metastasis of Mongolian was higher than that of Han [(3.9 ± 0.7) vs. (1.8 ± 0.7), $t = 13.460$, $P < 0.05$], most of which were poorly differentiated (6/25/10 vs 20/20/11, $\chi^2 = 7.139$, $P < 0.05$). Meanwhile, the incidence rates of cancer embolus in the vasculature and nerve invasion of Mongolian were higher than those of Han (75.6% vs. 47.1%, 70.7% vs. 17.6%, $\chi^2 = 7.706$, 26.418, all $P < 0.05$). **Conclusion** The Mongolian were more easily tolerant to the TLE, which has the advantages of reducing pain, trauma, rapid recovery, satisfactory curative effect and the lesser postoperative complications. The degree of the malignancy of esophageal cancer of Mongolian was higher than Han. Mongolian who suffered from esophageal cancer needed earlier discovery, earlier treatment and further research of the causes of difference.

【Key words】 Mongolian nationality; Esophageal tumour; Thoracoscope; Laparoscope; Lymph node dissection; Postoperative complication

64 排螺旋 CT 上腹部增强扫描 200 例分析

胡云波 龚超明

315300 浙江省慈溪,慈溪市人民医院放射科

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【摘要】 **目的** 探讨 64 排螺旋 CT 上腹部增强扫描技术要点。**方法** 选取拟进行 CT 检查的患者 200 例,对上腹部进行 CT 扫描,造影剂使用按照 1.5 mL/kg,经手背静脉用高压注射器注射,其压力为 300 磅,流速 2.5 mL/s,注药前扫描 1 次,注药后不同时相扫描 2~3 次。**结果** 180 例能很好的显示出腹主动脉、肝动脉、脾动脉、肝门区血管分支、门静脉、下腔静脉。20 例因门脉高压导致造影结果不理想,3 例失败。**结论** 64 排螺旋 CT 的上腹部增强扫描可获得满意的图像以满足临床需要。

【关键词】 64 排螺旋 CT; CT 增强扫描; 上腹部检查; CT 图像

An analysis of 200 cases of abdominal enhancement scan on the 64 – row CT scan Hu Yunbo, Gong Chaoming.

Department of Radiology, the People's Hospital of Cixi, Cixi, Zhejiang 315300, China

【Abstract】 **Objective** To discuss the main points of abdominal enhancement scanning on the 64 – row spiral CT. **Methods** 200 patients with CT scan were selected. For patients with abdominal CT scan, the contrast agent was used in accordance with the 1.5mL/kg, handle and dorsal vein with high pressure syringe injection, the pressure of 300 pounds, flow rate of 2.5mL/s, note medicine before scanning, note after the drug was not phase scanning 2 – 3 times at the same time. **Results** 180 cases showed the abdominal aorta, hepatic artery, splenic artery, hepatic portal vein branch, portal vein, and inferior vena cava. In 20 cases, the results were not ideal, and 3 cases failed. **Conclusion** The upper abdomen enhancement scan of the 64 – row CT scan can obtain satisfactory images to meet clinical needs.

【Key words】 64 – row CT; CT enhancement scan; Abdominal examination; CT image

抗菌敷料填塞联合封闭负压引流治疗坏死性筋膜炎 52 例疗效观察

李扬 郭晓东 李子国 崔会专 许爱国 王辉

072750 河北省涿州,涿州市医院普外一科

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【摘要】 目的 观察抗菌敷料填塞联合封闭负压引流治疗坏死性筋膜炎的临床效果。**方法** 对 52 例坏死性筋膜炎患者用一种带有抗菌特性的敷料——纳米银抗菌敷料,在充分清除筋膜炎坏死组织后,将其填塞于整个创面,在创面底部放置负压引流管,后用透明贴将创面封闭,隔绝空气,让抗菌敷料既抗菌又可刺激创面生长的作用充分发挥,同时对创面内的组织渗液通过负压管及时引流,起到加快创面愈合,减少抗菌素使用。**结果** 52 例患者中,除 1 例因患者个人原因放弃治疗死于感染中毒性休克外,其余均治愈,平均住院时间(29 ± 15.3)d,抗菌素应用天数(3.8 ± 1.6)d,90% 病例在 1 周内就停止使用抗菌素。**结论** 用抗菌敷料填塞联合负压封闭式引流的方法治疗坏死性筋膜炎,可减少换药次数、降低抗菌素使用强度、缩短愈合时间。

【关键词】 坏死性筋膜炎; 填塞封闭; 引流

Clinical observation of antimicrobial dressings tamponade combined with seal negative pressure drainage in the treatment of 52 cases of necrotizing fasciitis Li Yang, Guo Xiaodong, Li Ziguo, Cui Huizhuan, Xu Aiguo, Wang Hui. Department of the First General Surgery, Zhuozhou Municipal Hospital, Zhuozhou, Hebei 072750, China

【Abstract】 Objective To observe the effect of antibacterial dressing tamponade combined with seal negative pressure drainage in the treatment of necrotizing fasciitis. **Methods** 52 patients with necrotizing fasciitis were selected. After full scavenging of fasciitis and necrotic tissue, then filled the whole wound with a kind of dressings with antibacterial properties - Nano silver antiseptic dressing, and a negative pressure drainage tube was placed at the bottom of the wound. Then the wound was closed with a transparent paste, and the air was cut off, in order to make the antibacterial dressing could not only anti bacteria, but also play a role in the growth of the wound, and at the same time, the tissue leachate in the wound was drained through the negative pressure tube in time, so as to accelerate the wound healing and reduce the use of antibiotics. **Results** Among the 52 cases, the rest were cured except for 1 case of individual cause of abandonment of treatment died of toxic shock. , the average hospitalization time was (29.0 ± 15.3) days, days of using antimicrobial was (3.8 ± 1.6) days, 90% cases stopped using antibiotics within 1 week. **Conclusion** Antibacterial dressing tamponade combined with seal negative pressure drainage in the treatment of necrotizing fasciitis can reduce the switching frequency, reduced antibiotic using intensity, shorten the healing time, it is a kind of very good method.

【Key words】 Necrotizing fasciitis; Stuffing closed; The drainage

地塞米松治疗重度妊娠高血压合并血小板减少综合征的临床疗效观察

鲍南男 蔡惠燕

315700 浙江省宁波,宁波市第四人民医院妇产科(鲍南男)

315700 浙江省象山县中医院妇产科(蔡惠燕)

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【摘要】 目的 评价地塞米松对重度妊娠高血压合并血小板减少综合征患者的临床疗效。**方法** 选取 50 例重度妊娠高血压合并血小板减少综合征患者,采用随机数字表法将所有的患者分为硫酸镁组和地塞米松组,每组 25 例,硫酸镁组给予硫酸镁治疗,地塞米松组采用地塞米松治疗,对比两组的治疗效果、新生儿死亡率、早产率、新生儿窒息率、剖宫产率、并发症发生率以及预后情况。**结果** 地塞米松组的治疗效果(92.00%)明显优于硫酸镁组(68.00%)($\chi^2 = 5.164, P < 0.05$)。地塞米松组的并发症发生率(4.00%)明显低于硫酸镁组(20.00%)($\chi^2 = 4.287, P < 0.05$)。地塞米松组的肝功能恢复时间[(3.12 ± 1.23)d]、谷丙转氨酶(ALT)恢复时间[(2.09 ± 0.26)d]、血小板恢复时间[(2.45 ± 0.25)d]较硫酸镁组明显缩短($t = 3.011, 3.872, 3.456$, 均 $P < 0.05$)。**结论** 采用地塞米松治疗重度妊娠高血压合并血小板减少综合征患者,治疗效果突出,新生儿死亡率、早产率、新生儿窒息率、剖宫产率以及并发症发生率较低,预后情况较好,值得临床进一步研究。

【关键词】 地塞米松; 重度妊娠高血压; 血小板减少综合征; 临床疗效

Clinical effect of dexamethasone in the treatment of severe pregnancy induced hypertension with thrombocytopenia syndrome Bao Nannan, Cai Huiyan.

Department of Obstetrics and Gynecology, the Fourth People's Hospital of Ningbo, Ningbo, Zhejiang 315700, China (Bao NN); Department of Obstetrics and Gynecology, Xiangshan Hospital of Traditional Chinese Medicine, Zhejiang 315700, China (Cai HY)

【Abstract】 Objective To evaluate the clinical efficacy of dexamethasone in the treatment of severe pregnancy induced hypertension with thrombocytopenia syndrome. **Methods** 50 cases of severe pregnancy induced hypertension with thrombocytopenia syndrome were selected. The patients were randomly divided into the magnesium sulfate group and dexamethasone group according to the digital table, 25 cases in each group. The magnesium sulfate group was given magnesium sulfate treatment, the dexamethasone group was treated with dexamethasone. The treatment effect, the neonatal mortality rate, premature delivery rate, neonatal asphyxia rate, cesarean section rate, incidence of symptoms and prognosis were compared between the two groups. **Results** The effective rate of the dexamethasone group(92%) was higher than that of the magnesium sulfate group(68%, $\chi^2 = 5.164, P < 0.05$). The incidence rate of concurrent symptoms in the dexamethasone group(4%) was significantly lower than that in the magnesium sulfate group(20%, $\chi^2 = 4.287, P < 0.05$). The liver function recovery time, ALT recovery time, platelet recovery time in the dexamethasone group were (3.12 ± 1.23)d, (2.09 ± 0.26)d, (2.45 ± 0.25)d, respectively, which were obviously shorter than those in the magnesium sulfate group($t = 3.011, 3.872, 3.456$, all $P < 0.05$). **Conclusion** Dexamethasone in the treatment of severe pregnancy induced hypertension with thrombocytopenia syndrome has prominent treatment effect, the neonatal mortality, premature birth, neonatal asphyxia rate, cesarean section rate and incidence rate of complications are low, the prognosis is good, it is worthy of further study.

【Key words】 Dexamethasone; Severe pregnancy hypertension; Thrombocytopenia syndrome; Clinical efficacy

巴戟天寡糖胶囊联合心理辅导 治疗产后抑郁疗效研究

郝瑞军 邓怀丽

030012 山西省太原,太原市精神病医院门诊部

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【摘要】 **目的** 观察巴戟天寡糖胶囊联合心理辅导治疗产后抑郁的临床疗效。**方法** 将明确诊断为产后抑郁的 60 例患者按照入组先后顺序随机分为治疗组(巴戟天寡糖胶囊联合心理辅导)和对照组(单用心理辅导)各 30 例,进行开放、随机、对照研究。治疗前及治疗 2、4、6 周末,均通过汉密尔顿抑郁量表(HAMD)和中医肾虚症量化评分量表减分率评价疗效;采用药物不良反应症状量表(TESS)评价不良反应。**结果** 治疗前两组 HAMD 和中医肾虚症量化评分量表评分差异无统计学意义($P > 0.05$);治疗后,两组 HAMD 和中医肾虚症量化评分量表的减分值差异均有统计学意义(均 $P < 0.05$);治疗后两组 HAMD 和中医肾虚症量化评分量表的有效率(减分值 $\geq 25\%$)分别为 67.62% 和 70.00%,两组比较差异有统计学意义($P < 0.01$);两组不良反应发生率比较差异无统计学意义($P > 0.05$)。**结论** 巴戟天寡糖胶囊联合心理辅导治疗产后抑郁,临床效果显著,不良反应小,是一种值得推广的治疗方案。

【关键词】 产后抑郁; 巴戟天寡糖胶囊; 心理辅导

Clinical effect of Morinda officinalis How oligosaccharide capsule combined with psychological therapy in the treatment of postpartum depression Hao Ruijun, Deng Huaili.

Department of Out Patient, Taiyuan Psychiatric Hospital, Taiyuan, Shanxi 030012, China

【Abstract】 **Objective** To observe the clinical effect of Morinda officinalis How oligosaccharide capsule (MOs) combined with psychological therapy in the treatment of postpartum depression. **Methods** 60 patients with postpartum depression were randomly divided into two groups, 30 cases in each group. The control group was adopted the psychological therapy, and the observation group received combined treatment of MOs and psychological therapy. The HAMD-17 and Chinese medicine scale for the quality of kidney deficiency syndrome (CMSKDS) were used to assess the treatment effect after 2, 4, 6 weeks treatment. The TESS was adopted to evaluate the side effect of treatment. **Results** There were no statistically significant differences between the two groups on HAMD and CMSKDS before treatment (all $P > 0.05$). After treatment, the effective rates of HAMD and CMSKDS (reducing score $\geq 25\%$) of the two groups were 67.62% (control group) and 70.00% (observation group), the differences between the two groups were statistically significant (all $P < 0.01$). There was no statistically significant difference in TESS result ($P > 0.05$). **Conclusion** The clinical effect of combined MOs and psychological therapy in the treatment of postnatal depression is remarkable, with little side effect, which can be strongly recommended.

【Key words】 Postnatal depression; Morinda officinalis How oligosaccharide capsule (MOs); Psychological therapy

阿替普酶溶栓对急性缺血性脑卒中患者炎症因子及同型半胱氨酸水平的影响

张斌 张霞

252000 山东省聊城,聊城市第三人民医院神经内科

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【摘要】 **目的** 观察阿替普酶溶栓治疗急性缺血性脑卒中 (ACIS) 的临床疗效及其对患者血清白细胞介素 6 (IL-6)、肿瘤坏死因子 α (TNF- α)、同型半胱氨酸 (Hcy) 水平的影响。**方法** 选取接受救治的 ACIS 患者 84 例为观察对象。采用随机数字表法分为对照组和观察组各 42 例。对照组给予 ACIS 常规治疗,观察组在对照组的基础上联用阿替普酶溶栓治疗。比较两组的临床疗效,观察两组治疗前、治疗后 24 h、治疗后 14 d 美国国立卫生研究院卒中量表 (NIHSS) 评分、Barthel 指数变化,以及治疗前、治疗后 14 d 血清 IL-6、TNF- α 、Hcy 水平。**结果** 观察组总有效率为 95.24%,明显高于对照组的 78.57% ($\chi^2 = 5.126, P < 0.05$)。观察组治疗后 24 h、治疗后 14 d 的 NIHSS 评分分别为 (7.41 \pm 1.52) 分、(5.48 \pm 0.93) 分,均显著低于对照组的 (9.69 \pm 2.08) 分、(8.07 \pm 1.35) 分 ($t = 5.736, 10.239$, 均 $P < 0.05$)。观察组治疗后 24 h、治疗后 14 d 的 Barthel 指数评分分别为 (79.48 \pm 5.83) 分、(86.21 \pm 4.33) 分,均显著高于对照组的 (54.87 \pm 5.51) 分、(67.22 \pm 4.27) 分 ($t = 19.882, 20.237$, 均 $P < 0.05$)。治疗后 14 d,观察组的 IL-6、TNF- α 、Hcy 水平分别为 (7.61 \pm 1.39) ng/L、(5.05 \pm 0.66) ng/L、(11.19 \pm 2.81) μ mol/L,均显著低于对照组的 (9.29 \pm 1.57) ng/L、(8.79 \pm 0.93) ng/L、(15.67 \pm 2.32) μ mol/L ($t = 5.192, 21.254, 7.968$, 均 $P < 0.05$)。**结论** 阿替普酶溶栓治疗 ACIS 患者疗效显著,能有效改善患者神经缺损以及提高患者生活能力,降低血清 IL-6、TNF- α 及 Hcy 水平,值得临床推广。

【关键词】 阿替普酶; 卒中; 血栓溶解疗法; 炎症趋化因子类; 高半胱氨酸

Effect of thrombolytic therapy with alteplase on inflammatory cytokines and Hcy levels in patients with acute cerebral ischemic stroke Zhang Bin, Zhang Xia.

Department of Neurology, the Third People's Hospital of Liaocheng, Liaocheng, Shandong 252000, China

【Abstract】 **Objective** To study the clinical curative effect of thrombolytic therapy with alteplase on acute cerebral ischemic stroke (ACIS) and its effect on serum interleukin - 6 (IL - 6), tumor necrosis factor - α (TNF - α) and homocysteine (Hcy) levels. **Methods** 84 patients with ACIS were selected as observation subjects, and they were divided into observation group and control group according to the random table method, 42 cases in each group. The control group was given conventional treatment of ACIS, and the observation group was given thrombolytic therapy with alteplase on the basis of conventional treatment. The clinical efficacy of the two groups was compared, the National Institutes of Health Stroke Scale (NIHSS) scores, Barthel index changes before treatment and 24h, 14d after treatment, the IL - 6, TNF - α and Hcy levels before treatment and 14d after treatment of the two groups were observed and compared. **Results** The total effective rate of the observation group was 95.24%, which was significantly higher than 78.57% of the control group ($\chi^2 = 5.126, P < 0.05$). The NIHSS scores of the observation group 24h and 14d after treatment were (7.41 \pm 1.52) points and (5.48 \pm 0.93) points, respectively, which were significantly lower than (9.69 \pm 2.08) points and (8.07 \pm 1.35) points of the control group ($t = 5.736, 10.239$, all $P < 0.05$). The Barthel index scores of observation group 24h and 14d after treatment were (79.48 \pm 5.83) points and (86.21 \pm 4.33) points, respectively, which were significantly higher than (54.87 \pm 5.51) points and (67.22 \pm 4.27) points of the control group ($t = 19.882, 20.237$, all $P < 0.05$). 14d after treatment, the levels of IL - 6, TNF - α and Hcy in the observation group were (7.61 \pm 1.39) ng/L, (5.05 \pm 0.66) ng/L, (11.19 \pm 2.81) μ mol/L, respectively, which were significantly lower than (9.29 \pm 1.57) ng/L, (8.79 \pm 0.93) ng/L, (15.67 \pm 2.32) μ mol/L in the control group ($t = 5.192, 21.254, 7.968$, all $P < 0.05$). **Conclusion** The effect of thrombolytic therapy with alteplase for ACIS patients is significant, which can effectively improve the NIHSS and Barthel index scores, and reduce the serum levels of IL - 6, TNF - α and Hcy. It is worthy of clinical promotion.

【Key words】 Alteplase; Stroke; Thrombolytic therapy; Chemokines; Homocysteine

丙酸氟替卡松联合无创正压通气治疗慢性阻塞性肺疾病急性加重期的临床效果观察

杨安维 刘舜象 林久座 袁日明 陈爱素

325802 浙江省苍南县第二人民医院急诊科

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【摘要】 **目的** 探讨丙酸氟替卡松联合无创正压通气治疗慢性阻塞性肺疾病急性加重期(AECOPD)的临床效果。**方法** 选择急诊科收治的88例AECOPD患者,采用随机数字表法分为两组,每组44例,对照组采用常规治疗,观察组采用丙酸氟替卡松联合无创正压通气治疗,对比两组疗效。**结果** 观察组总有效率为100.0%,显著高于对照组的70.5% ($\chi^2 = 10.827, P = 0.000$);治疗后观察组用力肺活量(FVC)为(2.50 ± 0.32)L,第一秒用力呼气容积(FEV₁)为(1.36 ± 0.20)L,第一秒用力呼气容积占预计值比例(FEV₁%)为(51.23 ± 4.32),动脉血氧分压(PaO₂)为(10.51 ± 2.10)kPa,动脉血二氧化碳分压(PaCO₂)为(5.15 ± 1.19)kPa;对照组FVC为(2.00 ± 0.30)L,FEV₁为(1.08 ± 0.12)L,FEV₁%为(40.6 ± 4.03),PaO₂为(9.32 ± 2.11)kPa,PaCO₂为(6.06 ± 1.23)kPa,两组差异均有统计学意义($t = 7.940, 9.192, 8.102, 8.920, 9.920, P = 0.023, 0.006, 0.011, 0.008, 0.005$);观察组再入院率为4.5%,显著低于对照组的13.6% ($\chi^2 = 9.298, P = 0.000$)。**结论** AECOPD患者采用丙酸氟替卡松联合无创正压通气治疗,能够有效改善肺功能,降低疾病复发率,疗效显著。

【关键词】 丙酸氟替卡松; 无创正压通气; 肺疾病,慢性阻塞性

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Clinical effect of fluticasone propionate combined with noninvasive positive pressure ventilation in the emergency treatment of AECOPD Yang Anwei, Liu Shunxiang, Lin Jiuzuo, Yuan Riming, Chen Aisu.

Department of Emergency, the Second People's Hospital of Cangnan County, Zhejiang 325802, China

【Abstract】 **Objective** To explore the clinical effect of fluticasone propionate combined with noninvasive positive pressure ventilation in the emergency treatment of AECOPD. **Methods** 88 AECOPD patients were selected, and they were divided into two groups by digital random method, 44 cases in each group. The control group received conventional treatment, the observation group received fluticasone propionate and noninvasive positive pressure ventilation treatment. The curative effect of the two groups was compared. **Results** The total effective rate of the observation group was 100.0%, which was higher than 70.5% of the control group ($\chi^2 = 10.827, P = 0.000$). After treatment, in the observation group, the FVC was (2.50 ± 0.32)L, forced expiratory volume in one second (FEV₁) was (1.36 ± 0.20)L, the first second forced expiratory solvent percentage of predicted value ratio (FEV₁%) was (51.23 ± 4.32), the arterial oxygen pressure (PaO₂) was (10.51 ± 2.10)kPa, arterial partial pressure of carbon dioxide (PaCO₂) was (5.15 ± 1.19)kPa, and in the control group, the FVC was (2.00 ± 0.30)L, FEV₁ was (1.08 ± 0.12)L, FEV₁% was (40.6 ± 4.03), PaO₂ was (9.32 ± 2.11)kPa, PaCO₂ was (6.06 ± 1.23)kPa, the differences between the two groups were statistically significant ($t = 7.940, 9.192, 8.102, 8.920, 9.920, P = 0.023, 0.006, 0.011, 0.008, 0.005$). The readmission rate of the observation group was 4.5%, which was significantly lower than 13.6% of the control group ($\chi^2 = 9.298, P = 0.000$). **Conclusion** Fluticasone propionate combined with noninvasive positive pressure ventilation in the treatment of AECOPD patients can effectively improve lung function, reduce the relapse rate of the disease.

【Key words】 Fluticasone propionate; Noninvasive positive pressure ventilation; Pulmonary disease, chronic obstructive

Fund program: Science and Technology Planning Project of Cangnan County, Zhejiang Province (2015S13)

肉毒杆菌毒素治疗痉挛型小儿脑瘫的临床效果及其对预后的影响

段风焕 张振祥

271500 山东省东平县人民医院儿科

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【摘要】 目的 探讨肉毒杆菌毒素治疗痉挛型小儿脑瘫的临床效果,并分析其对患者预后的影响。**方法** 收集 80 例脑瘫患者作为研究对象,采用随机数字表法分为研究组与对照组,每组 40 例。对照组给予常规治疗,研究组在常规治疗基础上加用肉毒杆菌毒素治疗,观察对两组患儿的临床治疗效果,并分析其预后情况。**结果** 治疗后研究组与对照组患儿 Ashworth 评分、粗大运动功能量表(GMFM)评分分别为(1.21 ± 0.04)分比(2.12 ± 0.08)分、(63.17 ± 6.37)分比(56.12 ± 7.13)分,两组差异均有统计学意义($t = 4.215, 11.042$, 均 $P < 0.05$);治疗后研究组与对照组患儿腓窝角、足外展角、足背屈角的活动度分别为(100.31 ± 9.42)°比(117.21 ± 10.26)°、(118.35 ± 9.33)°比(101.13 ± 9.22)°、(70.12 ± 8.41)°比(83.16 ± 9.37)°,两组差异均有统计学意义($t = 13.217, 11.473, 7.295$, 均 $P < 0.05$);治疗后研究组与对照组患儿运动、认知、社交和言语方面的生存质量评分分别为(67.93 ± 3.51)分比(52.12 ± 3.09)分、(56.23 ± 4.21)分比(45.21 ± 3.01)分、(58.35 ± 3.11)分比(42.68 ± 3.06)分、(54.13 ± 3.74)分比(38.12 ± 3.27)分,两组差异均有统计学意义($t = 5.093, 4.337, 4.012, 3.972$, 均 $P < 0.05$)。**结论** 临床中对于脑瘫患儿应用肉毒杆菌毒素治疗是可行的,改善运动功能,且可以有效改善患儿的预后。

【关键词】 脑性瘫痪; 痉挛; A 型肉毒毒素

Clinical effect of botulinum toxin in the treatment of spastic pediatric cerebral palsy and its effect on prognosis

Duan Fenghuan, Zhang Zhenxiang.

Department of Pediatrics, the People's Hospital of Dongping County, Shandong 271500, China

【Abstract】 Objective To investigate the clinical effect of botulinum in the treatment of spastic pediatric cerebral palsy, and to analyze its effect on the prognosis of patients. **Methods** 80 patients with cerebral palsy were enrolled in this study. The patients were divided into study group and control group according to the random number table method, 40 cases in each group. The control group was given routine treatment. The study group was treated with botulinum toxin on the basis of routine treatment. The clinical treatment effect of the two groups was observed and the prognosis was analyzed. **Results** The Ashworth scores and GMFM scores of the study group and the control group were (1.21 ± 0.04) points vs. (2.12 ± 0.08) points, (63.17 ± 6.37) points vs. (56.12 ± 7.13) points, the differences between the two groups were statistically significant ($t = 4.215, 11.042$, all $P < 0.05$). The activities of popliteal fossa angle, foot abduction angle and dorsiflexion angle in the study group and the control group were (100.31 ± 9.42)° vs. (117.21 ± 10.26)°, (118.35 ± 9.33)° vs. (101.13 ± 9.22)°, (70.12 ± 8.41)° vs. (83.16 ± 9.37)°, the differences between the two groups were statistically significant ($t = 13.217, 11.473, 7.295$, all $P < 0.05$). The scores of life, cognition, social and verbal quality of life of the study group and the control group were (67.93 ± 3.51) points vs. (52.12 ± 3.09) points, (56.23 ± 4.21) points vs. (45.21 ± 3.01) points, (58.35 ± 3.11) points vs. (42.68 ± 3.06) points, (54.13 ± 3.74) points vs. (38.12 ± 3.27) points, the differences between the two groups were statistically significant ($t = 5.093, 4.337, 4.012, 3.972$, all $P < 0.05$). **Conclusion** The clinical application of botulinum to children with cerebral palsy is feasible, it can improve motor function, and effectively improve the prognosis of children.

【Key words】 Cerebral palsy; Spasm; Botulinum toxins, type A

剖宫产术后再次妊娠的分娩方式选择分析

张静 张英

030012 山西省太原,太原市第八人民医院妇产科

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【摘要】 目的 分析剖宫产再次妊娠中剖宫产分娩与阴道分娩的效果及安全性。**方法** 将 600 例剖宫产再次妊娠患者根据分娩方法不同分成两组各 300 例,剖宫产分娩组采用剖宫产分娩,阴道分娩组采用阴道分娩。分析阴道分娩的成功率;比较两组产时出血量、总产程时间、术后住院平均时间、平均住院费用、新生儿 Apgar 评分、新生儿体质量;新生儿窒息发生率、产后出血发生率、产褥期感染、切口愈合不良发生率的差异。**结果** 阴道分娩组新生儿窒息、产后出血、产褥期感染、切口愈合不良各有 1 例、2 例、2 例、1 例,剖宫产分娩组新生儿窒息、产后出血、产褥期感染、切口愈合不良各有 5 例、10 例、9 例、6 例,两组差异均有统计学意义(χ^2 分别为 4.356、5.662、5.332、4.924,均 $P < 0.05$)。阴道分娩组产时出血量、总产程时间、术后住院平均时间、平均住院费用分别为(123.51 ± 11.41)mL、(7.51 ± 2.61)h、(7.62 ± 1.21)d、(2 316.51 ± 121.61)元,均显著优于剖宫产分娩组的(263.39 ± 12.77)mL、(9.39 ± 3.57)h、(9.61 ± 2.59)d、(3 847.39 ± 222.57)元(t 分别为 8.271、9.020、10.701、12.134,均 $P < 0.05$);阴道分娩组新生儿 Apgar 评分、新生儿体质量等方面与剖宫产分娩组差异均无统计学意义(t 分别为 0.274、1.255,均 $P > 0.05$)。**结论** 剖宫产再次妊娠中对于符合阴道分娩指征的产妇采用阴道分娩的效果及安全性更好,可有效减少产后出血的发生,缩短产程,缩短产妇产后住院时间,减轻医疗负担,减少母婴并发症的发生,值得推广应用。

【关键词】 剖宫产; 再次妊娠; 分娩; 安全性

Analysis of the effect and safety of cesarean section and vaginal delivery in cesarean section Zhang Jing, Zhang Ying.

Department of Obstetrics and Gynecology, the Eighth People's Hospital of Taiyuan, Taiyuan, Shanxi 030012, China

【Abstract】 Objective To study the effect and safety of cesarean section delivery and vaginal delivery in cesarean section pregnancy. **Methods** 600 cases of maternal cesarean section were divided into two groups according to the delivery method. The cesarean section delivery group used cesarean section delivery, the vaginal delivery group used vaginal delivery. The average rate of postoperative hospitalization, the average hospitalization cost, neonatal Apgar score, neonatal body weight, neonatal asphyxia, postpartum hemorrhage, puerperal infection, the incidence rate of incision poor healing were compared between the two groups. **Results** 1 case of neonatal asphyxia, 2 cases of postpartum hemorrhage, 2 cases of puerperal infection and 1 case of incision poor healing were found in the vaginal delivery group, which in the cesarean section group were 5 cases, 10 cases, 9 cases, 6 cases, respectively, the differences between the two groups were statistically significant ($\chi^2 = 4.356, 5.662, 5.332, 4.924$, all $P < 0.05$). The blood loss, total duration of labor, average time of hospitalization, the average hospitalization cost in the vaginal delivery group were (123.51 ± 11.41)mL, (7.51 ± 2.61)h, (7.62 ± 1.21)d and (2 316.51 ± 121.61) yuan, respectively, which were significantly better than those of the cesarean section group [(263.39 ± 12.77)mL, (9.39 ± 3.57)h, (9.61 ± 2.59)d, (3 847.39 ± 222.57) yuan, $t = 8.271, 9.020, 10.701, 12.134$, all $P < 0.05$]. The Apgar score, neonatal weight between the two groups had no statistically significant differences ($t = 0.274, 1.255$, all $P > 0.05$). **Conclusion** Cesarean section pregnancy in pregnant women with vaginal delivery indications for the use of vaginal delivery has better safety, can effectively reduce the occurrence of postpartum hemorrhage, shorten the labor, shorten the maternity hospitalization time, reduce the burden of medical care, reduce the mother infant complications, it is worthy of promoting.

【Key words】 Cesarean section; Repregnancy; Delivery; Safety

盐酸氨溴索注射液联合肺表面活性物质对新生儿呼吸窘迫综合征患儿动脉血气指标改善及机械通气时间的影响

毛丽贇 吴延雷 伍建刚

311600 浙江省建德, 建德市第一人民医院儿科

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【摘要】 目的 探讨盐酸氨溴索注射液联合肺表面活性物质(PS)对新生儿呼吸窘迫综合征(NRDS)患儿动脉血气指标改善及机械通气时间的影响。方法 选取 82 例 NRDS 患儿,采用随机数字表法分为两组各 41 例。对照组雾化吸入 100 mg/kg PS,研究组静脉注射 7.5 mg/kg 盐酸氨溴索注射液 + 雾化吸入 100 mg/kg PS。比较两组动脉血气指标[血氧分压(PaO_2)、动脉血二氧化碳分压(PaCO_2)、pH 值]变化情况、机械通气时间、给氧时间、住院时间。结果 治疗后 12 h 研究组 PaO_2 [(89.38 ± 4.72) mmHg]、pH 值(7.40 ± 0.02) 高于对照组 [(66.42 ± 5.58) mmHg、(7.32 ± 0.04)], PaCO_2 [(29.04 ± 4.63) mmHg] 低于对照组 [(35.38 ± 5.67) mmHg], 差异均有统计学意义($t = 20.115, 11.454, 5.545$, 均 $P = 0.000$); 研究组住院时间、给氧时间、机械通气时间均低于对照组 [(11.10 ± 3.47) d 比 (18.61 ± 8.72) d, (7.49 ± 5.31) d 比 (14.32 ± 11.61) d, (56.21 ± 11.78) h 比 (78.22 ± 18.31) h], 差异均有统计学意义($t = 5.123, 3.425, 6.473$, 均 $P = 0.000$)。结论 盐酸氨溴索注射液联合 PS 可改善 NRDS 患儿动脉血气指标,缩短机械通气时间、住院时间、给氧时间。

【关键词】 呼吸窘迫综合征, 新生儿; 肺表面活性物质相关蛋白质类; 盐酸氨溴索注射液

Effects of ambroxol hydrochloride injection combined with pulmonary surfactant on the improvement of arterial blood gas index and the time of mechanical ventilation in neonates with respiratory distress syndrome

Mao Liyun, Wu Yanlei, Wu Jiangang.

Department of Pediatrics, the First People's Hospital of Jiande, Jiande, Zhejiang 311600, China

【Abstract】 Objective To investigate the effects of ambroxol hydrochloride injection combined with pulmonary surfactant(PS) on the improvement of arterial blood gas index and the time of mechanical ventilation in neonates with respiratory distress syndrome(NRDS). **Methods** 82 children with NRDS were selected, and they were randomly divided into two groups according to the digital table, 41 cases in each group. The control group received 100mg/kg PS inhalation, and the study group received intravenous injection of 7.5mg/kg ambroxol hydrochloride + 100mg/kg PS inhalation. The changes of arterial blood gas index [PaO_2 , arterial carbon dioxide pressure (PaCO_2), pH value], mechanical ventilation time, oxygen supply time and hospitalization time were statistically compared between the two groups. **Results** The PaO_2 [(89.38 ± 4.72) mmHg] and pH value (7.40 ± 0.02) of the study group were higher than those of the control group [(66.42 ± 5.58) mmHg, (7.32 ± 0.04)] at 12h after treatment, while PaCO_2 [(29.04 ± 4.63) mmHg] was lower than that in the control group [(35.38 ± 5.67) mmHg], and the differences were statistically significant ($t = 20.115, 11.454, 5.545$, all $P = 0.000$). The hospitalization time, oxygen supply time and mechanical ventilation time of the study group were lower than those of the control group [(11.10 ± 3.47) d vs. (18.61 ± 8.72) d, (7.49 ± 5.31) d vs. (14.32 ± 11.61) d, (56.21 ± 11.78) h vs. (78.22 ± 18.31) h], and the differences were statistically significant ($t = 5.123, 3.425, 6.473$, all $P = 0.000$). **Conclusion** Ambroxol hydrochloride injection combined with PS can improve the arterial blood gas index in children with NRDS and shorten the time of mechanical ventilation, hospitalization and oxygen supply.

【Key words】 Respiratory distress syndrome, newborn; Pulmonary surfactant - associated proteins; Ambroxol hydrochloride injection

复方甘草酸苷治疗酒精性脂肪肝效果观察

王红卫

030600 山西省晋中,晋中市第一人民医院消化科

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【摘要】 目的 观察复方甘草酸苷治疗酒精性脂肪肝的临床效果。**方法** 选择酒精性脂肪肝患者 68 例,按照治疗方法不同分为两组,对照组 34 例采用常规治疗,观察组 34 例在常规治疗基础上应用复方甘草酸苷治疗。比较两组临床疗效。**结果** 观察组总有效率为 91.18%,高于对照组的 64.71%,差异有统计学意义($\chi^2 = 6.928, P < 0.05$)。治疗后,观察组总胆红素(TBIL)、谷氨酰转肽酶(GGT)、天门冬氨酸氨基转移酶(AST)、丙氨酸氨基转移酶(ALT)分别为(6.39 ± 1.15) $\mu\text{mol/L}$ 、(157.79 ± 17.39) U/L、(37.49 ± 2.61) U/L、(24.45 ± 2.16) U/L,对照组分别为(26.14 ± 2.79) $\mu\text{mol/L}$ 、(417.59 ± 45.89) U/L、(97.28 ± 11.39) U/L、(54.33 ± 4.05) U/L,两组差异均有统计学意义($t = 41.392, 33.482, 32.361, 41.171$, 均 $P < 0.05$)。观察组不良反应发生率为 5.88%,低于对照组的 26.47% ($\chi^2 = 4.250, P < 0.05$)。**结论** 与常规治疗比较,复方甘草酸苷治疗酒精性脂肪肝,能有效改善患者 TBIL、GGT、AST、ALT 指标,提高临床疗效。

【关键词】 脂肪肝,酒精性; 复方甘草酸苷

Effect of compound glycyrrhizin on alcoholic fatty liver disease Wang Hongwei.

Department of Gastroenterology, the First People's Hospital of Jinzhong, Jinzhong, Shanxi 030600, China

【Abstract】 Objective To observe the clinical effect of compound glycyrrhizin in the treatment of alcoholic fatty liver disease(AFLD). **Methods** 68 AFLD patients according to the different treatment methods were divided into two groups. 34 cases in the control group received conventional therapy, 34 cases in the observation group were given compound glycyrrhizin based on the conventional treatment. The clinical effect of the two groups was compared. **Results** The total effective rate of the observation group was 91.18%, which was higher than 64.71% of the control group, the difference was statistically significant ($\chi^2 = 6.928, P < 0.05$). The TBIL, GGT, AST, ALT of the observation group were (6.39 ± 1.15) $\mu\text{mol/L}$, (157.79 ± 17.39) U/L, (37.49 ± 2.61) U/L, (24.45 ± 2.16) U/L, respectively, which of the control group were (26.14 ± 2.79) $\mu\text{mol/L}$, (417.59 ± 45.89) U/L, (97.28 ± 11.39) U/L, (54.33 ± 4.05) U/L, respectively, the differences between the two groups after treatment were statistically significant ($t = 41.392, 33.482, 32.361, 41.171$, all $P < 0.05$). The incidence rate of adverse reactions of the observation group was 5.88%, which was lower than 26.47% of the control group ($\chi^2 = 4.250, P < 0.05$). **Conclusion** Compared with conventional treatment, compound glycyrrhizin in the treatment of AFLD can effectively improve the patients' TBIL, GGT, AST, ALT index, improve the clinical efficacy.

【Key words】 Fatty liver, alcoholic; Compound glycyrrhizin

莫沙必利联合雷贝拉唑治疗老年人反流性食管炎的临床疗效研究

江文华 石晓红

313306 浙江省安吉县第二人民医院内科(江文华)

313306 浙江省安吉县人民医院消化内科(石晓红)

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【摘要】 目的 探索莫沙必利联合雷贝拉唑治疗老年人反流性食管炎的临床效果。**方法** 回顾性研究 126 例反流性食管炎老年患者的临床资料,将采用莫沙必利联合雷贝拉唑治疗的 64 例患者纳入研究组,采用莫沙必利联合奥美拉唑治疗的 62 例患者纳入对照组。比较两组临床疗效。**结果** 治疗前两组烧心、反酸和胸骨后疼痛的评分差异均无统计学意义($t=0.512, 0.181, 0.228$, 均 $P>0.05$), 治疗后研究组的症状评分显著低于对照组($t=3.689, 4.892, 5.571$, 均 $P<0.01$)。研究组临床症状和食管黏膜总体有效率均显著高于对照组(96.88% 比 87.10%, 93.75% 比 80.65%, $\chi^2=4.121, 4.479$, 均 $P<0.05$)。治疗后研究组生活质量量表得分在认知功能、心理功能、躯体功能和社会功能上均显著高于对照组($t=4.920, 6.853, 4.153, 6.163$, 均 $P<0.01$)。**结论** 莫沙必利联合雷贝拉唑治疗老年人反流性食管炎能够有效缓解患者烧心、反酸和胸骨后疼痛的临床症状,帮助患者黏膜尽快恢复,提高患者生活质量,值得在临床上推广应用。

【关键词】 食管炎,消化性; 莫沙必利; 雷贝拉唑; 生活质量

Clinical effect of mosapride combined with rabeprazole in the treatment of elderly patients with reflux esophagitis Jiang Wenhua, Shi Xiaohong.

Department of Internal Medicine, the Second People's Hospital of Anji County, Zhejiang 313306, China (Jiang WH);

Department of Gastroenterology, the People's Hospital of Anji County, Zhejiang 313306, China (Shi XH)

【Abstract】 Objective To explore the clinical effect of mosapride combined with rabeprazole in the treatment of elderly patients with reflux esophagitis. **Methods** Clinical data of 126 elderly patients with reflux esophagitis were retrospectively studied. 64 cases in the study group were treated with mosapride combined with rabeprazole, 62 cases in the control group were treated with mosapride combined with omeprazole. The clinical effects between the two groups were compared. **Results** Before treatment, there were no statistically significant differences in the scores of pain of patients with heartburn, acid reflux and chest between the two groups ($t=0.512, 0.181, 0.228$, all $P>0.05$). After treatment, the symptom scores of the study group were significantly lower than those of the control group ($t=3.689, 4.892, 5.571$, all $P<0.01$). The clinical symptoms and esophageal mucosal total effective rate in the study group were significantly higher than those in the control group (96.88% vs. 87.10%, 93.75% vs. 80.65%, $\chi^2=4.121, 4.479$, all $P<0.05$). The scores of quality of life scale of the study group were significantly higher than those of the control group in cognitive function, mental function, physical function and social function ($t=4.920, 6.853, 4.153, 6.163$, all $P<0.01$). **Conclusion** Mosapride combined with rabeprazole in the treatment of elderly patients with reflux esophagitis can effectively relieve symptoms of heartburn, acid reflux and chest pain, help patients with mucosa recovery as soon as possible, improve the quality of life of patients, and it is worthy of clinical application.

【Key words】 Esophagitis, peptic; Mosapride; Rabeprazole; Quality of life

动脉瘤夹闭术后行脑脊液引流对患者脑积水、脑血管痉挛及血清类胰岛素 1 号生长因子、可溶性血管细胞黏附分子-1 的影响

张自发 陈来照 仝海波

030000 山西省太原,山西大医院神经外科

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【摘要】 目的 探讨颅内动脉瘤合并蛛网膜下腔出血患者行动脉瘤夹闭术后进行脑脊液引流的应用价值。**方法** 选取颅内动脉瘤合并蛛网膜下腔出血患者 84 例,将入选患者按照随机数字表法分为研究组($n=42$)与对照组($n=42$),对照组动脉瘤夹闭术后不放置腰大池引流,研究组动脉瘤夹闭术后在腰大池放置引流管进行引流。比较分析两组脑积水和脑血管痉挛变化情况、治疗前后血清类胰岛素 1 号生长因子(insulin-like growth factor-1, IGF-1)与可溶性血管细胞黏附分子-1(soluble vascular cell adhesion molecule-1, sVCAM-1)水平变化。**结果** 研究组脑积水发生率为 4.8%,明显低于对照组的 14.3%($\chi^2=9.743, P<0.05$);研究组脑血管痉挛发生率为 7.1%,明显低于对照组的 19.0%($\chi^2=11.802, P<0.05$);两组颅内感染及切口脑脊液漏等其他并发症发生率差异均无统计学意义($\chi^2=2.074, 2.125, 均 P>0.05$)。术前两组患者血清 IGF-1、sVCAM-1 水平比较差异均无统计学意义($t=0.417, 0.603, 均 P>0.05$);术后第 8 天,研究组患者血清 IGF-1、sVCAM-1 水平明显均低于对照组($t=7.335, 6.856, 均 P<0.05$)。**结论** 动脉瘤夹闭术后在腰大池放置引流管进行引流,有益于减少脑积水与脑血管痉挛的发生率,抑制血清 IGF-1、sVCAM-1 的表达,不良反应少,值得应用。

【关键词】 动脉瘤夹闭术; 蛛网膜下腔出血; 脑脊液引流; 脑积水; 脑血管痉挛

Effect of cerebrospinal fluid drainage after aneurysm clipping on hydrocephalus, cerebral vasospasm and serum IGF-1, sVCAM-1 Zhang Zifa, Chen Laizhao, Tong Haibo.

Department of Neurosurgery, Shanxida Hospital, Taiyuan, Shanxi 030000, China

【Abstract】 Objective To investigate the value of cerebrospinal fluid drainage after aneurysm clipping in patients with intracranial aneurysm complicated with subarachnoid hemorrhage. **Methods** 84 intracranial aneurysms patients with subarachnoid hemorrhage were selected, and they were randomly divided into study group ($n=42$) and control group ($n=42$). The control group used simple suture after aneurysm clipping, the study group was given lumbar cistern drainage by implementation of the dural suture tube after aneurysm clipping. Before and after hydrocephalus and cerebral vasospasm, treatment changes of serum insulin-like growth factor 1 (IGF-1) and soluble vascular cell adhesion molecule-1 (sVCAM-1) levels were compared between the two groups. **Results** The incidence rate of hydrocephalus of the study group was 4.8%, which was significantly lower than the 14.3% of the control group ($\chi^2=9.743, P<0.05$). The incidence rate of cerebral vasospasm of the study group was 7.1%, which was significantly lower than 19.0% of the control group ($\chi^2=11.802, P<0.05$). The incidence rates of intracranial infection, cerebrospinal fluid leakage and other complications between the two groups had no statistically significant differences ($\chi^2=2.074, 2.125, all P>0.05$). The serum levels of IGF-1 and sVCAM-1 between the two groups had no statistically significant differences before operation ($t=0.417, 0.603, all P>0.05$). At the 8th day after operation, the serum levels of sVCAM-1 and IGF-1 of the study group were significantly lower than those of the control group ($t=7.335, 6.856, all P<0.05$). **Conclusion** After aneurysm clipping, the lumbar cistern drainage tube drainage is beneficial to reduce hydrocephalus and cerebral vasospasm incidence, inhibit the expression of serum IGF-1, sVCAM-1, with less adverse reactions, it is worthy of application.

【Key words】 Aneurysm clipping; Subarachnoid hemorrhage; Cerebrospinal fluid drainage; Hydrocephalus; Cerebral vasospasm

卡马西平联合恩必普治疗癫痫的疗效及对患者智力与脑电图的影响

栗兵霞

046000 山西省长治, 长治市人民医院神经内科

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【摘要】 目的 探讨卡马西平联合恩必普治疗癫痫的疗效及对智力与脑电图的影响。**方法** 选取86例癫痫患者,采用随机数字表法分为观察组和对照组,每组43例。观察组使用卡马西平联合恩必普治疗,对照组使用卡马西平治疗。比较两组患者临床疗效,癫痫发作持续时间和发作次数,智力情况,P300波幅值和波潜伏期,不良反应。**结果** 观察组临床总有效率显著高于对照组[93.02% (40/43)比74.42% (32/43), $\chi^2 = 5.460, P < 0.05$]。观察组的癫痫发作持续时间短于对照组[(2.31 ± 0.26)次/min比(3.16 ± 0.38)次/min, $t = 12.106, P < 0.05$]、发作次数少于对照组[(0.82 ± 0.11)次/年比(1.34 ± 0.15)次/年, $t = 18.332, P < 0.05$]。观察组的自觉辨别能力、类同比较能力、比较推理能力、系列关系能力、抽象推理能力评分均显著高于对照组($t = 7.557, 13.075, 2.082, 7.615, 9.903$, 均 $P < 0.05$)。观察组的SPM分级水平改善效果优于对照组($t = 4.705, P < 0.05$)。观察组的P300波幅值显著高于对照组[(6.87 ± 0.68) μV 比(5.24 ± 0.51) μV , $t = 12.575, P < 0.05$]、P300波潜伏期显著低于对照组[(305.32 ± 17.34)ms比(326.45 ± 19.15)ms, $t = 5.363, P < 0.05$]。观察组和对照组的不良反应率比较差异无统计学意义($P > 0.05$)。**结论** 卡马西平联合恩必普治疗癫痫,能减少患者的发作持续时间和发作次数,可有效改善患者智力水平和脑电图情况,临床疗效良好,安全性高。

【关键词】 癫痫; 智力; 脑电描记术; 卡马西平; 恩必普

Efficacy of carbamazepine combined with ENP in the treatment of epilepsy patients and its influence on intelligence and electroencephalogram Li Bingxia.

Department of Neurology, the People's Hospital of Changzhi, Changzhi, Shanxi 046000, China

【Abstract】 Objective To study the effect of carbamazepine and ENP in the treatment of epilepsy and its influence on intelligence and electroencephalogram. **Methods** Eighty - six patients with epilepsy were enrolled. According to the random number method, they were divided into observation group and the control group, 43 cases in each groups. The observation group was given carbamazepine combination with ENP, while the control group was given carbamazepine. The duration of epileptic seizure and the number of seizures, intelligence, P300 wave amplitude and wave latency, and adverse effects were compared between the two groups. **Results** The total effective rate in the observation group was significantly higher than that in the control group [93.02% (40/43) vs. 74.42% (32/43)] ($\chi^2 = 5.460, P < 0.05$). The duration of seizure of the observation group was shorter than that of the control group [(2.31 ± 0.26) times/min vs. (3.16 ± 0.38) times/min] ($t = 12.106, P < 0.05$), and the frequency of seizures of the observation group was shorter than that of the control group [(0.82 ± 0.11) time/year vs. (1.34 ± 0.15) time/year] ($t = 18.332, P < 0.05$). The ability of self - discernment, analogical comparison, comparative reasoning, series relation and abstract reasoning ability of the observation group were significantly higher than those of the control group ($t = 7.557, 13.075, 2.082, 7.615, 9.903$, all $P < 0.05$). The improvement of SPM level in the observation group was better than that in the control group ($t = 4.705, P < 0.05$). The amplitude of P300 wave of the observation group was significantly higher than that of the control group [(6.87 ± 0.68) μV vs. (5.24 ± 0.51) μV] ($t = 12.575, P < 0.05$). The latency of P300 wave of the observation group was significantly lower than that of the control group [(305.32 ± 17.34)ms vs. (326.45 ± 19.15)ms] ($t = 5.363, P < 0.05$). There was no statistically significant difference in the incidence rate of adverse reaction between the observation group and the control group ($P > 0.05$). **Conclusion** The combination of carbamazepine and ENP in the treatment of epilepsy can reduce the duration and frequency of seizures, and improve the intelligence level and electroencephalogram. The clinical efficacy is good and the safety is high.

【Key words】 Epilepsy; Intelligence; Electroencephalography; Carbamazepine; ENP

血清内脂素、血栓前体蛋白对腔隙性脑梗死的诊断价值

曹正松

317600 浙江省玉环县中医院内二科

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【摘要】 目的 探讨腔隙性脑梗死患者的血清内脂素、血栓前体蛋白(TpP)水平变化及其与颈动脉粥样硬化斑块的关系,确定 2 种因子对腔隙性脑梗死的预测价值。**方法** 95 例多发性腔隙性脑梗死患者均存在颈动脉粥样硬化斑块,分别入组不稳定斑块组 56 例和稳定斑块组 39 例;另选取同期体检健康者 70 例作为对照组。测定血清内脂素、超敏 C 反应蛋白(hs-CRP)、白介素-6(IL-6)、TpP 水平;采用颈动脉彩色多普勒超声检查颈动脉粥样硬化斑块。**结果** 不稳定斑块组、稳定斑块组的内脂素、hs-CRP、IL-6 水平均高于对照组($t = 10.886, 9.180, 11.889, 4.990, 5.084, 9.703$, 均 $P < 0.05$);不稳定斑块组的内脂素、hs-CRP、IL-6 水平分别为 $(29.10 \pm 8.85) \mu\text{g/L}$ 、 $(6.15 \pm 2.78) \text{mg/L}$ 、 $(5.98 \pm 2.66) \text{ng/L}$, 均高于稳定斑块组的 $(21.47 \pm 8.39) \mu\text{g/L}$ 、 $(4.37 \pm 2.09) \text{mg/L}$ 、 $(4.64 \pm 2.03) \text{ng/L}$ ($t = 4.222, 3.385, 2.652$, 均 $P < 0.05$)。Pearson 直线相关分析、多元线性逐步回归分析显示,患者的血清内脂素水平与 hs-CRP、IL-6 水平均呈正相关。不稳定斑块组、稳定斑块组在脑梗死发作后 3 h、6 h、12 h 的 TpP 水平均高于对照组($t = 17.342, 21.770, 18.138, 11.228, 15.245, 14.306$, 均 $P < 0.05$);不稳定斑块组在脑梗死发作后 3 h、6 h、12 h 的 TpP 水平分别为 $(18.52 \pm 6.43) \text{mg/L}$ 、 $(25.95 \pm 7.98) \text{mg/L}$ 、 $(18.43 \pm 6.10) \text{mg/L}$, 均高于稳定斑块组的 $(12.40 \pm 5.37) \text{mg/L}$ 、 $(20.81 \pm 8.60) \text{mg/L}$ 、 $(13.86 \pm 5.04) \text{mg/L}$ ($t = 3.282, 2.991, 3.850$, 均 $P < 0.05$)。**结论** 血清内脂素、TpP 水平均有较强的特异性,可作为预测和诊断腔隙性脑梗死的重要指标,且两者均与患者颈动脉粥样硬化斑块的稳定性有关。

【关键词】 腔隙性脑梗死; 血清内脂素; 血栓前体蛋白; 颈动脉粥样硬化斑块

Clinical values of serum visfatin and thrombus precursor protein in the diagnosis of lacunar infarction

Cao Zhengsong.

Department of Second Internal Medicine, the Traditional Chinese Medicine Hospital of Yuhuan County, Zhejiang 317600, China

【Abstract】 Objective To explore the changes of serum visfatin and thrombus precursor protein(TpP) levels in patients with lacunar infarction, and the relationship with carotid atherosclerotic plaque, and to determine the values of the two factors to predict lacunar infarction. **Methods** Carotid atherosclerosis plaques were detected in 95 cases with lacunar infarction, including 56 cases in unstable plaque group, 39 cases in stable plaque group, and another 70 healthy persons were selected as control group. Serum visfatin, high-sensitivity C reactive protein(hs-CRP), interleukin-6(IL-6) and TpP levels were measured. The carotid atherosclerotic plaque was examined by color Doppler ultrasonography. **Results** The levels of visfatin, hs-CRP and IL-6 in the unstable plaque group and stable plaque group were higher than those in the control group($t = 10.886, 9.180, 11.889, 4.990, 5.084, 9.703$, all $P < 0.05$). The levels of visfatin, hs-CRP and IL-6 in the unstable plaque group were $(29.10 \pm 8.85) \mu\text{g/L}$ 、 $(6.15 \pm 2.78) \text{mg/L}$ and $(5.98 \pm 2.66) \text{pg/mL}$, respectively, which were higher than those in the stable plaque group [$(21.47 \pm 8.39) \mu\text{g/L}$ 、 $(4.37 \pm 2.09) \text{mg/L}$ and $(4.64 \pm 2.03) \text{pg/mL}$, $t = 4.222, 3.385, 2.652$, all $P < 0.05$]. Pearson linear correlation analysis and multiple linear stepwise regression analysis showed that serum visfatin levels were positively correlated with hs-CRP and IL-6. The TpP levels of 3h, 6h and 12h after cerebral infarction in the unstable plaque group and stable plaque group were higher than those in the control group($t = 17.342, 21.770, 18.138, 11.228, 15.245, 14.306$, all $P < 0.05$). The TpP levels of 3h, 6h and 12h after cerebral infarction in the unstable plaque group were $(18.52 \pm 6.43) \text{mg/L}$ 、 $(25.95 \pm 7.98) \text{mg/L}$ 、 $(18.43 \pm 6.10) \text{mg/L}$, respectively, which were higher than those in the stable plaque group [$(12.40 \pm 5.37) \text{mg/L}$ 、 $(20.81 \pm 8.60) \text{mg/L}$ 、 $(13.86 \pm 5.04) \text{mg/L}$, $t = 3.282, 2.991, 3.850$, all $P < 0.05$]. **Conclusion** The serum levels of visfatin and TpP are highly specific, can be used as important indicators for prediction and diagnosis of lacunar infarction, and they are related to the stability of carotid atherosclerotic plaque.

【Key words】 Lacunar infarction; Serum visfatin; Thrombus precursor protein; Carotid atherosclerotic plaque

吲哚菁绿联合亚甲蓝染色在乳腺癌前哨淋巴结活检中的应用价值

雷双根 谢春伟 余小芬 戴锋 雷秋模 支小勇

330009 江西省南昌, 南昌市第三医院乳腺肿瘤科(雷双根、谢春伟、雷秋模、支小勇), 肿瘤内科(余小芬), 科教科(戴锋)

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【摘要】 目的 探讨吲哚菁绿联合亚甲蓝注射液染色在乳腺癌前哨淋巴结活检(SLNB)中的可行性及其应用价值。**方法** 选择经联合检测确诊为乳腺癌的患者 196 例为研究对象, 采用吲哚菁绿联合亚甲蓝染色法进行 SLNB, 并对全部检出的前哨淋巴结(SLN)进行术中冰冻及术后石蜡切片病理检查。参照美国 Louisville 大学对 SLNB 技术的评价标准判定检出率、准确率、假阴性率、灵敏度。**结果** 该组 196 例患者中, 发现 SLN 196 例(检出率 100.0%), 未发现 0 例。SLN 全部染色显影 196 例, SLN 转移 56 例, 无转移 140 例, 未发现跳跃式转移。而腋窝淋巴结清扫(ALND)转移 61 例, 无转移 135 例, 灵敏度为 91.8% (56/61)。SLN 与腋窝淋巴结(ALN)经病理检查完全符合 191 例, 准确率为 97.5% (191/196); 假阴性 5 例, 假阴性率为 8.2% (5/61); 假阳性 0 例。活检出 SLN 总数为 705 枚, 平均为 3.59 枚(2~6 枚), ALN 总数为 1 011 枚, 平均为 17.66 枚(12~26 枚)。**结论** 吲哚菁绿联合亚甲蓝作为淋巴结示踪剂具有实时可视、定位精确、无放射性污染、降低手术难度等优点, 可获得更高的检出率、准确率, 具有较高的临床应用价值。

【关键词】 乳腺肿瘤; 吲哚菁绿; 亚甲蓝; 前哨淋巴结活组织检查

Application of indocyanine green combined with methylene blue in sentinel lymph node biopsy in early breast cancer Lei Shuanggen, Xie Chunwei, Yu Xiaofen, Dai Feng, Lei Qiumo, Zhi Xiaoyong.

Department of Breast Oncology, the Third Hospital of Nanchang, Nanchang, Jiangxi 330009, China (Lei SG, Xie CW, Lei QM, Zhi XY); Department of Oncology, the Third Hospital of Nanchang, Nanchang, Jiangxi 330009, China (Yu XF); Science and Education Section, the Third Hospital of Nanchang, Nanchang, Jiangxi 330009, China (Dai F)

【Abstract】 Objective To discuss the feasibility and value of indocyanine green combined with methylene blue in sentinel lymph node biopsy (SLNB) for patients with breast cancer. **Methods** 196 breast cancer patients who received surgery were studied. SLNB was performed by indocyanine green combined with methylene blue. Frozen section was performed, followed by conventional histopathology. The evaluation criterion of Louisville University on SLNB was adopted to judge the detection rate, accuracy rate, sensitivity, false negative rate. **Results** Among the 196 cases, 196 cases were detected with SLN (detection rate was 100.0%). SLN was all stained in 196 cases. Furthermore, 56 cases had ALND metastasis, 140 cases had no metastasis, and the sensitivity was 91.8% (56/61). The SLN and ALN fully complied with pathological examination in 191 cases, and the accuracy rate was 97.5% (191/196). Five cases were false negative, and the false negative rate was 8.2% (5/61). No case was false positive. The total SLNs was 705, and average number of detected SLNs was 3.59 pieces (2-6 pieces). The average ALN was 17.66 pieces (12-26 pieces). **Conclusion** With the advantages of real-time visual, precise positioning, no radioactive pollution and reduce the operation difficulty, indocyanine green joint methylene blue as lymph tracer shows high detection rate, accuracy when it is used for SLNB in patients with breast cancer, it is worthy of clinical application.

【Key words】 Breast neoplasms; Indocyanine green; Methylene blue; Sentinel lymph node biopsy

腹腔镜下根治性膀胱切除乙状结肠原位新膀胱术的疗效观察

杨志国 苗发陈 任庆芹 马勇 黄诗桥 王尚任 张波

274300 山东省单县中心医院泌尿外科

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【摘要】 目的 观察腹腔镜下根治性膀胱切除乙状结肠原位新膀胱术治疗肌层浸润性尿路上皮膀胱癌的效果。方法 21 例肌层浸润性尿路上皮膀胱癌病例,先行腹腔镜下根治性膀胱切除并盆腔淋巴结清扫,然后下腹部小切口行乙状结肠原位新膀胱术,术后对其并发症及疗效进行分析。结果 21 例患者手术均获得成功,手术时间(245 ± 125)min,术中出血(98 ± 45)mL。术后均进行随访 3~24 个月,平均 12 个月,双侧轻度肾积水 6 例(28.6%),单侧肾积水 1 例(0.5%),储尿囊容量为(548.8 ± 221.6)mL,新膀胱储尿期压力(2.26 ± 0.24)kPa,新膀胱排尿期压力(6.18 ± 0.29)kPa,残余尿量(87 ± 52)mL,最大尿流率(83.2 ± 5.6)mL/s,昼尿控率 90.4%,夜尿控率 76.1%,1 例尿道狭窄,行尿道扩张后好转,无明显的电解质及酸碱平衡紊乱。结论 腹腔镜下根治性膀胱切除乙状结肠原位新膀胱术临床效果可靠,无严重手术并发症,患者生活质量较高,容易被患者所接受,临床可以推广应用。

【关键词】 腹腔镜; 膀胱肿瘤; 根治性膀胱切除术; 乙状结肠原位新膀胱术

Clinical effect of laparoscopic radical cystectomy with orthotopic neobladder Yang Zhiguo, Miao Fachen, Ren Qingqin, Ma Yong, Huang Shiqiao, Wang Shangren, Zhang Bo.

Department of Urology, the Central Hospital of Shan County, Shandong 274300, China

【Abstract】 Objective To investigate the clinical therapeutic effect of sigmoid neobladder after laparoscopic radical cystectomy in the treatment of invasive bladder cancer. **Methods** 21 patients with invasive bladder cancer accepted sigmoid neobladder after laparoscopic radical cystectomy and pelvic lymphadenectomy. The postoperative complications and clinical therapeutic effect were analyzed. **Results** All surgeries were completed successfully. The operation time was (245 ± 125) min, blood lost was (98 ± 45) mL. All the 21 patients were followed up for 3 – 24 months, mean of 12 months. Both side mild hydronephrosis in 6 cases (28.6%) and unilateral hydronephrosis in 1 case(0.5%). Average bladder reservoir was (548.8 ± 221.6) mL, the maximum bladder pressure during the new bladder urine storage period was (2.26 ± 0.24) kPa, the maximum bladder pressure during voiding period was (6.18 ± 0.29) kPa, volume of residual urine was (87 ± 52) mL. The mean maximum uroflow rate was (83.2 ± 5.6) mL/s. The continence of micturition was 90.4% in day – time and 76.1% in night – time. 1 case had urethral stricture and got better after the urethral dilatation. **Conclusion** The sigmoid neobladder after laparoscopic radical cystectomy has more reliable results, without serious postoperative complications and patients with high quality of life after operation. This operation may be applied in clinical practice.

【Key words】 Laparoscopy; Bladder neoplasms; Radical cyatectomy; Sigmoid orthotopic neobladder

青年脑梗死患者神经功能缺损程度与血浆白蛋白及纤维蛋白原水平的关系探讨

郝羽

030012 山西省太原, 太原市第八人民医院神经内科

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【摘要】 目的 研究并探讨青年脑梗死患者神经功能缺损程度与血浆白蛋白(albumin, ALB)及纤维蛋白原(fibrinogen, FIB)水平的关系。方法 选取 83 例青年脑梗死患者作为观察组,另随机选取同期接受健康体检质量检查的 62 例体检正常者作为对照组,比较两组受检者的 ALB、FIB 以及神经功能缺损评分,并按照神经功能缺损程度将观察组划分为轻度组、中度组、重度组,比较不同神经功能缺损程度患者的 ALB、FIB 水平。结果 相比于对照组,观察组 ALB(51.64 ± 13.91)g/L、FIB(6.59 ± 2.93)g/L、神经功能缺损评分(22.95 ± 14.32)分均明显更高($t = 8.132, 10.764, 10.888$, 均 $P < 0.05$);观察组不同神经功能缺损程度患者 ALB、FIB 差异均有统计学意义($F = 9.959, 7.192$, 均 $P < 0.05$),且 ALB、FIB 与神经功能缺损程度呈正相关($r = 0.635, 0.726$, 均 $P < 0.05$)。结论 青年脑梗死患者机体内 ALB、FIB 表达水平出现异常增高,其表达水平与神经功能缺损程度密切相关,可作为病情监测、预后评估的重要指标。

【关键词】 脑梗死; 神经功能缺损; 血浆白蛋白; 纤维蛋白原

Study on the relationship between the level of serum albumin (ALB) and fibrinogen (FIB) in patients with cerebral infarction Hao Yu.

Department of Neurology, the Eighth People's Hospital of Taiyuan, Taiyuan, Shanxi 030012, China

【Abstract】 Objective To study and explore the relationship between neural function defect and plasma albumin (ALB) and fibrinogen (FIB) level in young patients with cerebral infarction. **Methods** 83 young patients with cerebral infarction were selected as the observation group, 62 healthy people were randomly selected as the control group. The serum albumin, fibrinogen and neurological deficit scores were compared between the two groups. According to the degree of nervous function defect, the patients of the observation group were divided into mild group, moderate group and severe group, the plasma albumin in patients with different neurologic impairment and the level of fibrinogen were compared. **Results** Compared to the control group, the plasma albumin [(51.64 ± 13.91) g/L], fibrinogen [(6.59 ± 2.93) g/L] and neurological deficit scores [(22.95 ± 14.32) points] in the observation group were significantly higher ($t = 8.132, 10.764, 10.888$, all $P < 0.05$). In the observation group, the plasma albumin and fibrinogen levels had statistically significant differences in patients with different degree of neural function defect ($F = 9.959, 7.192$, all $P < 0.05$), and plasma albumin, fibrinogen were positively correlated with neurological deficits ($r = 0.635, 0.726$, all $P < 0.05$). **Conclusion** The serum albumin and fibrinogen levels in young patients with cerebral infarction are abnormally increased, their expression levels are closely related with neural function defect degree, and can be used as important indicators of disease monitoring, assessment of prognosis.

【Key words】 Cerebral infarction; Neurological deficit; Plasma albumin; Fibrinogen

左半结直肠癌致急性肠梗阻 急诊治疗策略分析

陈革 李文春

321200 浙江省武义县第一人民医院外二科

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【摘要】 **目的** 探讨左半结直肠癌致急性肠梗阻的急诊治疗策略。**方法** 选取左半结直肠癌致急性肠梗阻患者 50 例,回顾分析该类患者的病例资料。**结果** 50 例患者中 I 期切除吻合手术的患者术后切口发生感染 6 例,无吻合口瘘发生。行肠梗阻导管减压之后 I 期切除切口吻合的患者 21 例,术后无任何并发症发生。50 例患者在实施手术后均痊愈出院,在随后的回访中无死亡病例。**结论** 左半结肠癌致急性肠梗阻 I 期切除手术是最安全的,可以作为治疗左半结肠癌的首选方式;但对于无法耐受急诊手术的患者,则需要结肠镜帮助下,通过肛门插入型导管结肠减压、灌洗和清洗污物。

【关键词】 左半结直肠癌; 急性肠梗阻; 急诊治疗; 策略分析

Emergency treatment strategy analysis of acute intestinal obstruction induced by left colorectal cancer

Chen Ge, Li Wenchun.

Department of the Second Surgery, the First People's Hospital of Wuyi County, Zhejiang 321200, China

【Abstract】 **Objective** To evaluate the emergency treatment strategy of acute intestinal obstruction induced by left colorectal cancer. **Methods** 50 patients with acute intestinal obstruction caused by left colorectal cancer were selected as the research subjects. The clinical data were retrospectively analyzed. **Results** Of 50 patients, 6 cases of postoperative incision infection occurred in phase I excision anastomosis surgery, no anastomotic fistula. 21 cases received ileus tube decompression and phase I excision anastomosis of incision, there were no postoperative complications. 50 patients recovered after surgery, no patients died in the follow-up. **Conclusion** For acute intestinal obstruction caused by left half colon cancer, the method of I resection and heal surgery is the most safe, and can be used as the preferred way to make a diagnosis and treatment, but for patients can't tolerance emergency surgery, need the help of colonoscopy, through anal insertion catheter colon decompression and lavage and clean the dirt.

【Key words】 Left colorectal cancer; Acute intestinal obstruction; Emergency treatment; Strategy analysis

无覆盖带蒂颊脂垫组织瓣治疗 口腔黏膜缺损的疗效观察

王庆

274400 山东省菏泽, 山东省千佛山集团曹县人民医院口腔科

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【摘要】 **目的** 探究无覆盖带蒂颊脂垫组织瓣治疗口腔黏膜缺损的临床疗效及预后。**方法** 选择 65 例口腔黏膜缺损的患者作为研究对象, 通过无覆盖带蒂颊脂垫组织瓣移植的方法对缺损的口腔黏膜进行修复, 术后随访 1~12 个月, 观察术后并发症、成活率、疗效、发音清晰度等。**结果** 患者术后 3 个月口腔黏膜缺损部位的黏膜光滑且呈粉红色, 与周围正常的口腔黏膜形态类似; 术后并发症的发生率为 3.08%; 术后显效率为 58.46%, 有效率为 41.54%, 无效率为 0.00%, 总有效率为 100.00%; 术后发音清度 I 级率为 53.85%, II 级率为 30.77%, III 级率为 12.31%, IV 级率为 3.08%。**结论** 使用无覆盖带蒂颊脂垫组织瓣移植治疗口腔黏膜缺损具有操作简单, 成功率高, 并发症少, 术后疗效显著的特点, 是治疗口腔黏膜缺损较为理想的修复方法。

【关键词】 口腔粘膜; 外科皮瓣; 移植; 预后

Effect of uncovered pedicled buccal fat pad flap in the treatment of oral mucosal defect Wang Qing.

Department of Stomatology, the People's Hospital of Cao County of Shandong Provincial Qianfoshan Group, Heze, Shandong 274400, China

【Abstract】 **Objective** To explore the clinical efficacy and prognosis of uncovered pedicled buccal fat pad flap in the treatment of oral mucosal defect. **Methods** 65 patients with oral mucosal defects were selected as the subjects. The defects of the oral mucosa were repaired by the method of transplantation with uncovered pedicled buccal fat pad flap. All patients were followed up for 1 to 12 months. The postoperative complications, survival rate, curative effect and articulation were observed. **Results** 3 months after operation, the mucosa of the oral mucosa defect was smooth and pink, similar to the normal oral mucosa. The incidence rate of postoperative complications was 3.08%. The total effective rate was 100.00%. After operation, the rate of grade I was 53.85%, the rate of grade II was 30.77%, the rate of grade III was about 4.00%, and the rate of grade IV was about 3.08%. **Conclusion** The transplantation with uncovered pedicled buccal fat pad flap for the treatment of oral mucosal defect with simplified operation has high success rate, less postoperative complications, significant curative effect, and it is an ideal method for the treatment of the defect of oral mucosa.

【Key words】 Mouth mucosa; Surgical flaps; Transplantation; Prognosis

加味逍遥散治疗乳腺癌并围绝经期综合征 32 例临床分析

李永安 肖枚生 杨柳

232035 安徽省淮南,安徽理工大学附属肿瘤医院中医科

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【摘要】 **目的** 探讨加味逍遥散治疗乳腺癌患者围绝经期综合征的临床疗效。**方法** 选择乳腺癌患者围绝经期综合征 62 例,采用随机数字表法分为治疗组 32 例、对照组 30 例。对照组采用常规治疗,观察组采用加味逍遥散(柴胡、当归、白芍、白术、茯苓、党参、绿萼梅、佛手、香椽、甘草等组成)治疗,比较两组临床疗效。**结果** 治疗 3 个月后,观察组总有效率为 93.75%,对照组总有效率为 73.33%,观察组总有效率明显高于对照组($\chi^2 = 4.59, P < 0.01$)。**结论** 加味逍遥散治疗乳腺癌患者围绝经期综合征临床疗效显著。

【关键词】 乳腺肿瘤; 围绝经期综合征/中医药疗法; 逍遥散/治疗应用; 疏肝解郁

Clinical analysis of modified Xiaoyao powder in the treatment of 32 cases of perimenopausal syndrome

Li Yongan, Xiao Meisheng, Yang Liu.

Department of Traditional Chinese Medicine, Tumor Hospital Affiliated to Anhui University of Science and Technology, Huainan, Anhui 232035, China

自身免疫性胰腺炎一例

旺加

850000 西藏自治区拉萨,西藏自治区人民医院门诊部消化内科

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One case of autoimmune pancreatitis Wang Jia.

Department of Digestive Diseases, the People's Hospital of Xizang Autonomous Region, Lasa, Xizang 850000, China

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患者,女性,40岁,因“全身乏力、消瘦、间断腹痛半年”于2017年4月在西藏自治区人民医院门诊就诊。患者于5年前开始无明显诱发因素出现全身乏力、消瘦、间断腹痛、腹胀等症状,未引起重视,近来上述症状加重,给予藏药等对症治疗,症状未见明显好转,病程中体质量减轻15 kg。患者

曾因为诊断为自身免疫型肝炎、自身免疫性胰腺炎、消化性溃疡[幽门螺杆菌(Hp)阳性]而在西藏自治区人民医院住院治疗,给予对症治疗后症状好转(未用激素等药物治疗),出院后病情反复发作没有正规诊治。

药物代谢模型在创新药物研究中的应用进展

王明蕾

264400 山东省威海市中心医院物流中心科

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【摘要】 综述药物代谢模型研究现状。检索数据库相关文献,分析、汇总。药物代谢模型多种,机制多样。各模型均有其自身的优缺点,研究者应根据研究目的和实验室现有条件先行体外实验,对体外代谢特性良好的化合物进一步的进行体内实验,以对药物代谢特性作出合理准确的预测。

【关键词】 创新药物研究; 药物代谢; 体外模型; 体内模型

Application progress of drug metabolism model in the innovative drug research Wang Minglei.

Department of Logistics Center, the Center Hospital of Weihai, Weihai, Shandong 264400, China

【Abstract】 To review the current status of drug metabolism model. To retrieve, analyze and summarize the relevant literatures of the database. There are many kinds of drug metabolism models and mechanisms. Every model has its own advantages and disadvantages. The researchers should use in vitro experiments based on the purpose of the study and the existing laboratory conditions. If the compounds have good metabolic properties in vitro, they can be further tested in vivo to make a reasonable and accurate prediction for drug metabolic properties.

【Key words】 Drug research; Drug metabolism; Models in vitro; Models in vivo

健康教育路径在剖宫产围术期中的应用分析

张汉英 李建敏

315800 浙江省宁波,宁波市北仑区小港医院手术室

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【摘要】 **目的** 探讨健康教育路径在剖宫产围术期中的临床效果。**方法** 选取实施剖宫产手术的产妇 200 例,采用随机数字表法分成观察组和对照组,每组 100 例。对照组采用常规术前和术后护理,观察组在对照组基础上采用健康教育路径方式进行护理,比较两组临床效果。**结果** 观察组住院时间、护理满意度、相关知识掌握程度分别为(3.25 ± 1.42)d、98.0%、93.0%,均优于对照组的(5.13 ± 1.53)d、80.0%、79.0%,两组差异均有统计学意义($t=9.865$, $\chi^2=5.223$ 、7.268,均 $P<0.05$)。**结论** 健康教育路径对产妇的产后教育有着十分重要的作用,可缩短产妇住院时间,提高产妇护理满意度及相关知识掌握程度。

【关键词】 健康教育; 剖宫产术; 围手术期; 临床效果

Application of education pathway in the perioperative period of caesarean section Zhang Hanying,
Li Jianmin.

Operating Room, Xiaogang Hospital of Beilun District, Ningbo, Zhejiang 315800, China

品管圈护理模式对神经外科护理质量及患者满意度的影响

包红霞

317100 浙江省三门县人民医院神经外科

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【摘要】 目的 探讨品管圈护理模式应用在神经外科对护理质量影响及应用价值。方法 将神经外科治疗患者 118 例采用随机数字表法分为观察组和对照组,每组 59 例,对照组给予常规护理模式,观察组采取品管圈护理模式,对比两组临床护理效果。**结果** 观察组服务态度评分为(97.54 ± 1.23)分,安全管理评分为(98.06 ± 1.12)分,操作技能评分为(97.66 ± 1.03)分,健康教育评分为(96.97 ± 1.34)分;对照组服务态度评分为(90.06 ± 3.87)分,安全管理评分为(91.67 ± 3.54)分,操作技能评分为(90.18 ± 3.72)分,健康教育评分为(89.75 ± 3.93)分,两组差异均有统计学意义($t = 14.148$ 、 13.213 、 14.884 、 13.356 ,均 $P < 0.05$)。观察组护理满意度评分为(98.13 ± 1.25)分,护理风险事件发生率 3.39%,对照组护理满意度评分为(91.59 ± 3.36)分,护理风险事件发生率 18.64%,两组差异均有统计学意义($t = 14.012$ 、 $\chi^2 = 7.002$,均 $P < 0.05$)。**结论** 品管圈护理模式应用在神经外科护理中能够提升基础护理质量,减少风险事件发生,提升临床护理满意度,值得在临床上推广应用。

【关键词】 品管圈; 神经外科手术; 护理质量审核

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Influence of quality control circle nursing model on nursing quality and patients' satisfaction in Department of Neurosurgery Bao Hongxia.

Department of Neurosurgery, the People's Hospital of Sanmen County, Zhejiang 317100, China

Fund program: Science and Technology Planning Project of Taizhou City, Zhejiang Province(1401ky56)

人性化护理干预对改善普外科患者情绪状态及生活质量效果评价

董丽萍

314300 浙江省海盐县中医院血液净化室

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【摘要】 目的 探讨人性化护理干预对改善普外科患者情绪状态及生活质量的效果。**方法** 选取普外科手术患者 114 例,采用随机数字表法将患者分为观察组和对照组,每组 57 例。对照组患者应用普外科常规护理措施,观察组患者住院期间应用人性化护理干预。比较两组患者护理前后负面情绪、生活质量、对护理工作的满意度等指标。**结果** 护理干预后,观察组和对照组患者的 SDS、SAS 评分水平均较干预前降低,差异均有统计学意义(均 $P < 0.05$),且护理干预后,观察组 SDS、SAS 评分[(59.23 ± 4.28)分、(22.09 ± 3.68)分]低于对照组[(60.98 ± 3.92)分、(23.65 ± 3.16)分],两组差异均有统计学意义($t = 2.276, P = 0.01$; $t = 2.428, P = 0.01$);两组 QOL 评分较干预前得到改善($P < 0.05$),且护理干预后,观察组生活质量 QOL 评分[(35.94 ± 4.83)分]高于对照组[(34.34 ± 4.43)分],差异有统计学意义($t = 1.843, P = 0.03$);观察组患者在住院期间对于护理工作的满意度为 91.23%,对照组为 77.19%,观察组患者满意程度高于对照组,差异有统计学意义($\chi^2 = 6.996, P = 0.03$)。**结论** 对普外科患者进行人性化护理干预,可以有效的疏导患者住院期间的负面情绪、改善生活质量、提高患者对护理工作的满意度。

【关键词】 人性化护理; 普外科; 情绪状态; 生活质量; 满意度

Effect of humanized nursing intervention on improving the emotional state and quality of life of patients in department of general surgery Dong Liping.

Blood Purification Center, the Traditional Chinese Medicine Hospital of Haiyan County, Zhejiang 314300, China

优质护理对改善晚期肿瘤患者疼痛程度及心理状况的效果

邵琪

215500 江苏省常熟, 苏州大学附属常熟医院 常熟市第一人民医院肿瘤科

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【摘要】 **目的** 研究优质护理在肿瘤晚期疼痛护理中的应用价值。**方法** 选择 62 例恶性肿瘤晚期患者为观察对象,采用随机数字表法分配的方式将 62 例患者分为两组,常规组行常规护理,研究组行优质护理,分析两组护理的效果。**结果** 研究组护理后轻度疼痛比率高于常规组(轻度组 70.97%,常规组 51.61%),中度疼痛和重度疼痛比率都比常规组低(中度组 25.80%,重度组 3.22%),轻度疼痛和重度疼痛之间的比较存在统计学的意义(轻度组 70.97%,重度组 3.22%, $P < 0.05$)。另外,研究组护理后焦虑自评量表评分明显低于常规组的评分(护理前 $t = 0.186$,护理后 $t = 61.394$),两组之间的比较差异有统计学意义[(3.12 ± 4.96)分比(41.23 ± 5.13)分, $P < 0.05$]。**结论** 优质护理应用于肿瘤晚期患者,可以明显降低患者疼痛程度,改善患者心理状况,值得推广。

【关键词】 优质护理; 肿瘤晚期; 疼痛程度; 心理状况

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Clinical effect of high quality nursing on improving the degree of pain and psychological status of patients with advanced cancer Shao Qi.

Department of Oncology, Changshu Hospital Affiliated to Soochow University (the First People's Hospital of Changshu), Changshu, Jiangsu 215500, China

Fund program: Directing Project of Health and Family Planning Commission of the Changshu City, Jiangsu Province (CSW201615)