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目次

儿科疾病

- 哮喘患儿血清白细胞介素 13、鳞状细胞癌抗原的水平变化及意义 817
张惜妍 张敏 宋会军
- 阿奇霉素序贯疗法治疗小儿支原体肺炎的随机对照研究 820
冯宇婧 张凤 朱海娇
- 3% 氯化钠注射液在儿童脓毒性休克液体复苏中的作用 824
杨海明 宫英方
- 血清铁检测在儿童肺部感染性疾病诊疗中的价值 827
李雪宁 刘颖 成晓君 程士凯 付大军
- 匹多莫德在小儿哮喘治疗中的效果分析 830
肖钢
- 颅脑超声与 CT 在新生儿颅脑疾病检查中的应用价值比较 834
王颖
- 热毒宁治疗疱疹性咽峡炎患儿的临床评价和对血清肌酸激酶、磷酸肌酸激酶同工酶活性及其质量、心肌肌钙蛋白 I 的影响研究 838
叶卫平
- 妊娠期糖代谢异常对新生儿出生结局及远期体质量的影响研究 842
朱雯 沈方方 滕懿群 侯秋英
- 心肌酶谱和脐动脉血气分析在新生儿窒息诊治中的临床价值 847
智升文 白庆芯 程敏 崔杰
- 血铅、锌水平与儿童抽动障碍的相关性分析 850
祝雪英 郁峰 毛春发
- 托吡酯治疗婴幼儿症状性癫痫的长期随访研究 854
毛艳 汤继宏 柴建农 王海红
- 低出生体质量早产儿三种喂养方式对其体格生长的影响 859
冯燕

红霉素联合阿奇霉素治疗小儿支原体肺炎的临床疗效分析	862
包荷女 罗会萍	

论 著

瑞舒伐他汀对急性脑梗死患者血清 C 反应蛋白和血管细胞黏附分子-1 的影响	867
王俐滢 胡日光 王亚男 臧业峰 张瑞莲 高美香	
不同血液净化方式对维持性血液透析患者炎症因子清除效果的比较	871
高晓琴 于为民	
带锁髓内钉与钢板置入内固定治疗胫骨骨折的效果比较	874
董宏朋	
多西他赛联合洛铂治疗转移性乳腺癌的临床效果分析	878
杨丽娟	
右美托咪定对老年全身麻醉手术患者术后认知功能的影响	881
王必铭 马灵芝 项万红 李娟	
慢性阻塞性肺疾病患者血清正五聚蛋白 3 和高敏 C 反应蛋白水平变化及意义	886
叶军红 王建文 何仁增	
早期连续性肾脏替代治疗联合血液灌流对急性重症胰腺炎患者肺功能及预后的影响	890
马舰 赵智 杜昌	
槲皮素纳米脂质体药物的制备及其抗肿瘤作用研究	894
高立明 李健 姜丽 栗坤 曹军丽 郑磊 石明 程少会 高庆壮	
螺旋 CT 三维薄层重建 III 期矽肺的 CT 表现分析	898
赵红梅 方立挺	
重组人血管内皮抑制素联合顺铂治疗肺癌恶性胸腔积液的临床观察	902
陈曦	
序贯透析联合羟乙基淀粉治疗肾病综合征顽固性水肿的疗效分析	906
王丽霞 徐惠	
阿司匹林联合氯吡格雷治疗短暂性脑缺血发作的疗效及对凝血功能的影响	911
张斌	
腹腔镜胆囊切除术中不同气腹压力对患者肝肾功能及呼吸功能的影响	915
陈华	

研究与实践

采用人工种植牙修复牙列缺损或缺失的应用效果	920
董斌 张兵	
远眺、护眼操对小学生视力影响的调查分析	923
舒辰卓	

病例报告

急性自身免疫性溶血性贫血伴双侧足背动脉血栓性闭塞一例	925
郭婧 吴涛 毛东锋 白海 王存邦	

健康教育

- 健康教育路径预防高压氧治疗中耳气压伤的效果观察 927
陈春梅 虞柯静

护理学

- 围术期疼痛规范化管理对手足外伤术后疼痛的影响 930
李薇薇 张东红
- 针对性护理在人工肝血浆置换治疗重型肝炎患者中的应用效果 933
张文娣
- 机械通气患者发生呼吸机相关性肺炎的原因分析 937
徐文立
- 人文关怀联合临床护理路径在护理管理模式中的应用 940
黄燕君

综 述

- 小儿脑性瘫痪的中西医治疗进展 944
周陶成 童光磊
- 慢性扁桃体炎的中医外治法研究 950
王婵 梁毫

读者·作者·编者

- 《中国基层医药》杂志关于参考文献著录格式要求 846

《中国基层医药》杂志可直接用的缩略语 对英文目次二

《中国基层医药》杂志协办单位 823

《中国基层医药》杂志 2017 年相关指标一览表 858

本期广告目次 922

本刊稿约见本卷第 1 期后插 3

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哮喘患儿血清白细胞介素 13、鳞状细胞癌抗原的水平变化及意义

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DOI:10.3760/cma.j.issn.1008-6706.2018.07.001

【摘要】 目的 分析哮喘患儿血清白细胞介素 13(IL-13)、鳞状细胞癌抗原(SccAg)的水平变化及临床意义。方法 选取哮喘患儿 45 例为观察组,另选择同期体检的健康小儿 45 例为对照组,采用酶联免疫吸附测定(ELISA)法对两组 IL-13、SccAg 水平进行检测,探讨哮喘与血清 IL-13、SccAg 水平的相关性。结果 观察组发作期 IL-13、SccAg 分别为(148.96 ± 24.56) ng/L、(3.36 ± 0.69) μg/L,缓解期分别为(90.65 ± 20.14) ng/L、(2.58 ± 0.34) μg/L,对照组分别为(76.48 ± 17.54) ng/L、(2.30 ± 0.36) μg/L,差异均有统计学意义($F = 5.36, 6.39$, 均 $P < 0.05$)。观察组中重度 IL-13、SccAg 分别为(135.48 ± 21.69) ng/L、(2.86 ± 0.36) μg/L,轻度分别为(160.38 ± 22.45) ng/L、(3.30 ± 0.41) μg/L,对照组分别为(76.48 ± 17.54) ng/L、(2.30 ± 0.36) μg/L,差异均有统计学意义($F = 5.78, 6.78$, 均 $P < 0.05$)。哮喘患儿发作期、缓解期血清 IL-13、SccAg 水平均呈明显的正相关性($r = 0.982, 0.965$, 均 $P < 0.05$)。结论 血清 IL-13、SccAg 与哮喘的发病有相关性,对判断哮喘发生、发展及转归有一定的临床意义。

【关键词】 哮喘; 白细胞介素 13; 鳞状细胞癌抗原; 儿童

Changes of serum levels of interleukin - 13 and squamous cell carcinoma antigen in children with asthma and its clinical significance Zhang Xiyan, Zhang Min, Song Huijun.

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【Abstract】 Objective To explore the changes of serum interleukin - 13 (IL - 13) and squamous cell carcinoma antigen (SccAg) levels in pediatric asthma and its clinical significance. **Methods** 45 children with pediatric asthma were selected as observation group, 45 healthy children at the same time were selected as control group. IL - 13 and SccAg levels in the two groups were detected by ELISA. The correlation between the serum IL - 13, SccAg levels and pediatric asthma was analyzed. **Results** In the observation group, the IL - 13, SccAg levels at the attack stage were (148.96 ± 24.56) ng/L, (3.36 ± 0.69) μg/L, respectively, the IL - 13, SccAg levels at the remission stage were (90.65 ± 20.14) ng/L, (2.58 ± 0.34) μg/L, respectively, which in the control group were (76.48 ± 17.54) ng/L, (2.30 ± 0.36) μg/L, respectively, the differences were statistically significant ($F = 5.36, 6.39$, all $P < 0.05$). In the observation group, the IL - 13, SccAg levels in the patients with moderate or severe disease were (135.48 ± 21.69) ng/L, (2.86 ± 0.36) μg/L, respectively, the IL - 13, SccAg levels in the patients with mild disease were (160.38 ± 22.45) ng/L, (3.30 ± 0.41) μg/L, respectively, which in the control group were (76.48 ± 17.54) ng/L, (2.30 ± 0.36) μg/L, respectively, the differences were statistically significant ($F = 5.78, 6.78$, all $P < 0.05$). The serum IL - 13 and SccAg levels had significantly positive correlation with pediatric asthma during the attack stage and remission stage ($r = 0.982, 0.965$, all $P < 0.05$). **Conclusion** The serum IL - 13 and SccAg levels have certain association with the incidence of asthma, which play an important role in determining the development and reorientation of asthma.

【Key words】 Asthma; Interleukin-13; Squamous cell carcinoma antigen; Child

阿奇霉素序贯疗法治疗小儿支原体肺炎的随机对照研究

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【摘要】 目的 探讨阿奇霉素序贯疗法治疗小儿支原体肺炎的疗效及不良反应发生情况。**方法** 将 2016 年 1~12 月收治的 84 例支原体肺炎患儿采用随机数字表法分为研究组和对照组,每组 42 例。研究组采用阿奇霉素序贯疗法治疗,对照组采用红霉素治疗,比较两组患儿的临床疗效及不良反应发生率。**结果** 研究组总有效率(97.62%)明显高于对照组(76.19%),差异有统计学意义($\chi^2 = 11.95, P < 0.05$)。研究组退热时间[(3.78 ± 1.57)d]、咳嗽好转时间[(3.29 ± 0.74)d]、啰音消失时间[(5.88 ± 2.35)d]、平均住院时间[(8.89 ± 1.76)d]均较对照组[(4.49 ± 1.71)d、(4.28 ± 0.77)d、(7.69 ± 2.54)d、(10.05 ± 2.27)d]明显缩短,差异均有统计学意义($t = 2.01, 6.33, 3.29, 2.46$, 均 $P < 0.05$)。研究组恶心、腹胀、腹部不适、局部注射痛、丙氨酸氨基转移酶升高、皮疹等不良反应总发生率(4.76%)明显低于对照组(19.05%),差异有统计学意义($\chi^2 = 4.86, P < 0.05$)。**结论** 阿奇霉素序贯疗法治疗小儿支原体肺炎疗效显著,可有效缩短临床症状、体征消失时间和平均住院时间,不良反应发生率低,值得临床推广使用。

【关键词】 支原体肺炎; 阿奇霉素; 儿童; 疗效; 不良反应

Efficacy and adverse reaction of azithromycin sequential therapy for the treatment of mycoplasma pneumonia in children

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【Abstract】 Objective To investigate the efficacy and adverse reactions of azithromycin sequential therapy for the treatment of children with mycoplasma pneumonia. **Methods** 84 children with mycoplasma pneumonia were randomly divided into study group and control group according to the digital table, with 42 cases in each group. The study group was given azithromycin treatment, and the control group was given erythromycin treatment. The clinical curative effect and adverse reaction were compared between the two groups. **Results** The total effective rate of the study group (97.62%) was significantly higher than that of the control group (76.19%), and the difference was statistically significant ($\chi^2 = 11.95, P < 0.05$). The pyretolysis time [(3.78 ± 1.57) d], cough improvement time [(3.29 ± 0.74) d], rale disappearance time [(5.88 ± 2.35) d], average hospitalization time [(8.89 ± 1.76) d] of the study group were significantly shorter than those of the control group [(4.49 ± 1.71) d, (4.28 ± 0.77) d, (7.69 ± 2.54) d, (10.05 ± 2.27) d], and the differences were statistically significant ($t = 2.01, 6.33, 3.29, 2.46$, all $P < 0.05$). The incidence rate of adverse reactions such as nausea, abdominal distention, abdominal discomfort, local injection pain, rash, elevated alanine aminotransferase of the study group (4.76%) was significantly lower than that of the control group (19.05%), and the difference was statistically significant ($\chi^2 = 4.86, P < 0.05$). **Conclusion** Azithromycin sequential therapy is effective in the treatment of children with mycoplasma pneumonia. It can effectively shorten the disappearance time of clinical symptoms and signs, and average hospitalization time, and has low incidence rate of adverse reactions. It is worthy of clinical use.

【Key words】 Mycoplasma pneumonia; Azithromycin; Children; Curative effect; Adverse reaction

3% 氯化钠注射液在儿童脓毒性休克液体复苏中的作用

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【摘要】 目的 探讨 3% 氯化钠注射液在儿童脓毒性休克液体复苏中的作用。**方法** 选择重症监护室收治的脓毒症患儿 84 例, 采用随机数字表法分为两组各 42 例。对照组应用 0.9% 氯化钠注射液进行液体复苏, 观察组则静脉缓慢给予 3% 氯化钠注射液进行液体复苏, 观察两组容量复苏相关指标变化情况, 比较两组容量复苏成功时间、住院时间及救治成功率。**结果** 治疗后, 观察组收缩压、中心静脉压、24 h 尿量分别为 (85.6 ± 4.3) mmHg、 (7.1 ± 0.5) cmH₂O、 (250.8 ± 11.9) mL, 对照组分别为 (66.9 ± 2.6) mmHg、 (4.6 ± 0.2) cmH₂O、 (50.1 ± 5.0) mL, 两组差异均有统计学意义 ($t = 23.536, 29.361, 98.339$, 均 $P < 0.05$); 观察组容量复苏成功时间 $[(6.7 \pm 1.1) \text{ h}]$ 短于对照组 $[(18.5 \pm 2.3) \text{ h}]$ ($t = 29.272, P < 0.05$), 住院时间 $[(4.1 \pm 0.2) \text{ d}]$ 短于对照组 $[(6.3 \pm 0.5) \text{ d}]$ ($t = 25.838, P < 0.05$), 救治成功率 (95.0%) 高于对照组 (65.0%) ($\chi^2 = 7.941, P < 0.05$)。**结论** 针对儿童脓毒性休克, 应用 3% 氯化钠注射液可有效地进行液体复苏, 改善组织灌注, 缩短住院时间, 提高救治成功率。

【关键词】 氯化钠注射液; 脓毒症; 休克, 脓毒性; 儿童

Effect of 3% sodium chloride injection in the treatment of fluid resuscitation in children with sepsis shock

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【Abstract】 Objective To investigate the effect of 3% sodium chloride injection on fluid resuscitation in children with septic shock. **Methods** Eighty-four children with sepsis in intensive care unit were selected and divided into two groups according to random number table method, 42 cases in each group. The control group was treated with 0.9% sodium chloride injection for fluid resuscitation. The observation group was slowly given 3% sodium chloride injection for fluid resuscitation. The changes of the two groups were observed. The success time of fluid resuscitation, hospitalization time and success rate of the two groups were compared. **Results** After intervention, the systolic blood pressure, central venous pressure and 24h urine output in the observation group were (85.6 ± 4.3) mmHg, (7.1 ± 0.5) cmH₂O, (250.8 ± 11.9) mL, respectively, which in the control group were (66.9 ± 2.6) mmHg, (4.6 ± 0.2) cmH₂O, (50.1 ± 5.0) mL, respectively, the differences between the two groups were statistically significant ($t = 23.536, 29.361$ and 98.339 , all $P < 0.05$). The success time of fluid resuscitation, hospitalization time of the observation group were $(6.7 \pm 1.1) \text{ h}$, $(4.1 \pm 0.2) \text{ d}$, respectively, which were significantly shorter than those of the control group $[(18.5 \pm 2.3) \text{ h}, (6.3 \pm 0.5) \text{ d}, t = 29.272, 25.838, \text{ all } P < 0.05]$. The success rate of treatment of the observation group (95.0%) was higher than that of the control group (65.0%) ($\chi^2 = 7.941, P < 0.05$). **Conclusion** 3% sodium chloride injection can effectively treat fluid resuscitation, improve tissue perfusion, shorten the hospitalization time and improve the success rate of treatment for children with septic shock.

【Key words】 Sodium chloride injection; Sepsis; Shock, septic; Children

血清铁检测在儿童肺部感染性疾病诊疗中的价值

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【摘要】 目的 观察血清铁在支气管肺炎(细菌感染、肺炎支原体感染)治疗前后变化,并对其是否可以作为感染指标在临床应用进行初步探讨。**方法** 选取 81 例确诊为支气管肺炎的患儿为研究对象,其中细菌感染 40 例、肺炎支原体感染 41 例,对细菌感染组、肺炎支原体感染组患儿治疗前后血清铁水平分别进行比较,以及对两组间血清铁水平进行分析。同时对两组患儿治疗前血常规白细胞数、中性粒细胞比例、CRP 水平与血清铁及治疗前后血清铁变化值分别进行相关性分析。**结果** 细菌感染组血清铁水平治疗后 $[(16.28 \pm 5.81) \mu\text{mol/L}]$ 明显高于治疗前 $[(4.83 \pm 2.12) \mu\text{mol/L}]$ ($t = -11.19, P < 0.001$),肺炎支原体感染组血清铁水平治疗后 $[(15.17 \pm 5.31) \mu\text{mol/L}]$ 同样明显高于治疗前 $[(4.77 \pm 1.99) \mu\text{mol/L}]$ ($t = -11.29, P < 0.001$)。治疗前两组间血清铁水平、治疗后两组间血清铁水平差异均无统计学意义($t = 0.135, 0.898, P = 0.893, 0.373$)。治疗前血常规白细胞数、中性粒细胞比例、CRP 与治疗前血清铁(细菌感染组 r 值分别为 $-1.87, -0.219, -0.152$;肺炎支原体感染组 r 值分别为 $-0.032, -0.302, -0.274$)及治疗前后变化值(细菌感染组 r 值分别为 $0.098, 0.062, 0.205$;肺炎支原体感染组 r 值分别为 $0.011, 0.171, -0.105$)均无相关性(均 $P > 0.05$)。**结论** 血清铁在儿童肺部感染时出现明显下降,抗感染治疗后恢复至正常水平。血清铁尚不能作为儿童感染监测指标应用于临床。

【关键词】 支气管肺炎; 血清铁; 儿童

Clinical value of serum iron in the diagnosis and treatment of children with pulmonary infectious diseases

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【Abstract】 Objective To observe the changes of serum iron in patients with bronchopneumonia (bacterial pneumonia, mycoplasmal pneumonia) before and after treatment, and to discuss whether it can be used as an indicator of infection. **Methods** Forty cases with bacterial pneumonia and 41 cases with mycoplasmal pneumonia were recruited. The serum iron levels before and after treatment in bacterial pneumonia group and mycoplasmal pneumonia group were compared and analyzed. The correlation between white blood cell count, percentage of neutrophils, serum C-reactive protein (CRP) levels and the serum iron levels before treatment, and changes of the serum iron before and after treatment were analyzed. **Results** The level of serum iron after treatment in the bacterial pneumonia group $[(16.28 \pm 5.81) \mu\text{mol/L}]$ was significantly higher than that before treatment $[(4.83 \pm 2.12) \mu\text{mol/L}]$ ($t = -11.19, P < 0.001$). The level of serum iron after treatment in the mycoplasmal pneumonia group $[(15.17 \pm 5.31) \mu\text{mol/L}]$ was also significantly higher than that before treatment $[(4.77 \pm 1.99) \mu\text{mol/L}]$ ($t = -11.29, P < 0.001$). The serum iron levels between the two groups before and after treatment had no statistically significant differences ($t = 0.135, 0.898, P = 0.893, 0.373$). There was no correlation between white blood cell count, percentage of neutrophils, CRP and serum iron levels before treatment (bacterial pneumonia group: $r = -1.87, -0.219, -0.152$; mycoplasmal pneumonia group: $r = -0.032, -0.302, -0.274$) and changes of the serum iron before and after treatment (bacterial pneumonia group: $r = 0.098, 0.062, 0.205$; mycoplasmal pneumonia group: $r = 0.011, 0.171, -0.105, P > 0.05$). **Conclusion** The serum iron level is significantly decreased in children with pulmonary infectious diseases and increased to normal level after anti-infection treatment. Serum iron can not be used as an indicator of infection in children.

【Key words】 Bronchopneumonia; Children; Serum iron

匹多莫德在小儿哮喘治疗中的效果分析

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【摘要】 **目的** 研究匹多莫德在小儿哮喘临床治疗中的应用效果。**方法** 选取小儿哮喘患儿 100 例作为研究对象,采用随机数字表法将患儿分为对照组、观察组,每组 50 例,对照组患儿采取常规治疗,观察组患儿在常规治疗基础上加用匹多莫德治疗,比较两组患儿的哮喘控制效果、症状缓解时间、住院时间、肺通气功能指标、不良反应发生率。**结果** 观察组的哮喘控制总有效率为 96%,高于对照组($P < 0.05$);观察组的咳嗽、咳痰、气促、哮鸣音等症状缓解时间以及住院时间均明显短于对照组(均 $P < 0.05$);治疗后,两组患儿的 FEV_1 、 $FEV_1/FVC\%$ 等肺通气功能指标均较治疗前明显增高($P < 0.05$),而在治疗后比较,观察组肺通气功能指标均高于对照组($P < 0.05$);观察组不良反应发生率为 8%,对照组为 6%,两组差异无统计学意义($P > 0.05$)。**结论** 在小儿哮喘患儿的临床治疗中加用匹多莫德治疗,可有效提高其哮喘控制效果,更加有效地促使其临床症状得到缓解,促使其肺部通气功能改善,且不良反应较少,安全性可靠。

【关键词】 儿科; 哮喘; 匹多莫德

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Effect of pidotimod in the treatment of pediatric asthma Xiao Gang.

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【Abstract】 **Objective** To study the effect of pidotimod in the treatment of children with asthma. **Methods** 100 children with asthma were selected and randomly divided into control group and observation group, 50 cases in each group. The control group received routine treatment, the observation group was given pidotimod on the basis of routine treatment. The asthma control effects, symptoms remission time, hospitalization time, pulmonary function index, the incidence rate of adverse reactions were compared between the two groups. **Results** The total effective rate of asthma control in the observation group (96%) was significantly higher than that in the control group ($P < 0.05$). The cough, expectoration, shortness of breath, wheezing and other symptoms remission time and hospitalization time in the observation group were significantly shorter than those in the control group (all $P < 0.05$). After treatment, FEV_1 , $FEV_1/FVC\%$, pulmonary ventilation function indices of the two groups were significantly increased (all $P < 0.05$), and after treatment, the pulmonary function indices of the observation group were significantly higher than those of the control group (all $P < 0.05$). The incidence rate of adverse reaction of the observation group was 8%, which of the control group was 6%, the difference between the two groups was not statistically significant ($P > 0.05$). **Conclusion** Pidotimod in the treatment of children with asthma can effectively improve the asthma control effect, promote the alleviation of clinical symptoms, improve the pulmonary ventilation function, and with less adverse reactions, it is safe and reliable.

【Key words】 Pediatrics; Asthma; Pi do Maude

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颅脑超声与 CT 在新生儿颅脑疾病检查中的应用价值比较

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【摘要】目的 比较颅脑超声与头部 CT 在诊断新生儿颅脑疾病中的应用价值。**方法** 选取 106 例高危新生儿为研究对象,所有患儿进行颅脑超声及头部 CT 检查,比较两种检查方法的诊断效应。**结果** 106 例疑似颅脑疾病的患儿中,颅脑超声诊断出阳性病例 83 例,阴性病例 23 例,其中误诊、漏诊 14 例;头部 CT 诊断出阳性病例 66 例,阴性病例 40 例,其中误诊、漏诊 37 例。颅脑超声的诊断敏感性为 87.91%,特异性为 80.00%,阳性预测值为 96.39%,阴性预测值为 52.17%,诊断准确率为 86.79%;头部 CT 敏感性为 65.93%,特异性为 60.00%,阳性预测值为 90.91%,阴性预测值为 22.50%,诊断准确率为 65.09%;两种检查方法诊断效应的比较,颅脑超声的诊断敏感性、准确性明显高于头部 CT,差异均有统计学意义($\chi^2 = 12.381, P = 0.00$; $\chi^2 = 13.658, P = 0.00$),两种检查方法的特异性、阳性预测值及阴性预测值比较,差异均无统计学意义($\chi^2 = 1.429, P = 0.23$; $\chi^2 = 1.943, P = 0.16$; $\chi^2 = 2.759, P = 0.10$);颅脑超声检出蛛网膜及硬脑膜下腔出血患儿 10 例,脑实质内出血患儿 13 例,脑室扩张患儿 25 例,缺氧缺血性脑病患儿 17 例,脑水肿患儿 18 例,与实际诊断结果比较,差异无统计学意义($\chi^2 = 1.134, P = 0.89$);头部 CT 检出蛛网膜及硬脑膜下腔出血患儿 18 例,脑实质内出血患儿 10 例,脑室扩张患儿 16 例,缺氧缺血性脑病患儿 8 例,脑水肿患儿 14 例,与实际诊断结果、颅脑超声诊断结果比较,差异均有统计学意义($\chi^2 = 15.091, P = 0.00$; $\chi^2 = 15.879, P = 0.00$)。**结论** 颅脑超声对新生儿颅脑疾病的诊断敏感性、准确性均优于头部 CT,颅脑超声对于新生儿多种颅脑疾病的检出与实际诊断的符合情况更好,可以在临床中大力推广。

【关键词】 脑疾病; 超声检查; 体层摄影术, X 线计算机; 新生儿筛查

Comparison of the clinical value of cranial ultrasonography and CT in the diagnosis of neonatal brain diseases Wang Ying.

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【Abstract】Objective To compare the clinical value of cranial ultrasound and head CT in the diagnosis of neonatal brain diseases. **Methods** One hundred and six high risk newborns were selected. All the newborns underwent cranial ultrasonography and head CT examination, and the diagnostic effects of the two methods were compared. **Results** Of the 106 newborns, there were 83 cases of positive ultrasonic examination and 23 cases of negative, including 14 cases of misdiagnosis and missed diagnosis that diagnosed by cranial ultrasound. There were 66 cases of positive head CT examination and 40 cases of negative, including 37 cases of misdiagnosis and missed diagnosis that diagnosed by CT. The diagnostic sensitivity of the cranial ultrasound was 87.91%, the specificity was 80.00%, the positive predictive value was 96.39%, the negative predictive value was 52.17%, and the diagnostic accuracy was 86.79%. The sensitivity of head CT was 65.93%, the specificity was 60.00%, the positive predictive value was 90.91%, the negative predictive value was 22.50%, and the diagnostic accuracy was 65.09%. The diagnostic sensitivity and accuracy of cranial ultrasound were higher than those of head CT, and the differences were statistically significant ($\chi^2 = 12.381, P = 0.00$; $\chi^2 = 13.658, P = 0.00$). The specificity, positive predictive value and negative predictive value between the two methods had no statistically significant differences ($\chi^2 = 1.429, P = 0.23$; $\chi^2 = 1.943, P = 0.16$; $\chi^2 = 2.759, P = 0.10$). In addition, 10 cases of subarachnoid and subdural hemorrhage, 13 cases of intracerebral hemorrhage, 25 cases of ventricular dilatation, 17 cases of hypoxic-ischemic encephalopathy, and 18 cases of hydrocephalus were detected by cranial ultrasound. Compared with the actual diagnosis, the difference was not statistically significant ($\chi^2 = 1.134, P = 0.89$). Head CT showed 18 cases of subarachnoid and subdural hemorrhage, 10 cases of intracerebral hemorrhage, 16 cases of ventricular dilatation, 8 cases of hypoxic-ischemic encephalopathy, and 14 cases of hydrocephalus. Compared with the actual diagnostic results and the results of cranial ultrasonic diagnosis, the differences were statistically significant ($\chi^2 = 15.091, P = 0.00$; $\chi^2 = 15.879, P = 0.00$). **Conclusion** The diagnostic sensitivity and accuracy of cranial ultrasound are higher than CT. The diagnosis of cranial ultrasound is consistent with the actual diagnosis. Cranial ultrasound can be widely promoted in clinical practice.

【Key words】 Brain diseases; Ultrasonography; Tomography, X-ray computed; Neonatal screening

热毒宁治疗疱疹性咽峡炎患儿的临床评价 和对血清肌酸激酶、磷酸肌酸激酶同工酶活性 及其质量、心肌肌钙蛋白 I 的影响研究

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【摘要】 目的 探讨热毒宁治疗疱疹性咽峡炎患儿的临床效果及其对血清肌酸激酶(CK)、磷酸肌酸激酶同工酶(CK-MB)活性、CK-MB 质量、心肌肌钙蛋白 I(cTnI)的影响。**方法** 选择疱疹性咽峡炎患儿 104 例,采用抽签法分为对照组与研究组,每组 52 例。对照组采用常规治疗,研究组在对照组治疗的基础上加用热毒宁治疗,比较两组临床疗效,临床表现消失时间,治疗前后 CK、CK-MB 活性、CK-MB 质量、cTnI 和不良反应。**结果** 研究组总有效率高于对照组(98.07% 比 84.61%),差异有统计学意义($P < 0.05$)。治疗前,两组 CK、CK-MB 活性、CK-MB 质量、cTnI 差异均无统计学意义($P > 0.05$);治疗后,研究组 CK、CK-MB 活性、CK-MB 质量、cTnI 低于对照组[(55.87 ± 6.98) U/L、(22.70 ± 2.84) U/L、(2.99 ± 0.37) μg/L、(0.16 ± 0.02) μg/L 比 (68.42 ± 8.55) U/L、(29.45 ± 3.65) U/L、(4.48 ± 0.56) μg/L、(0.74 ± 0.09) μg/L],差异均有统计学意义(均 $P < 0.05$)。研究组不良反应率低于对照组,差异有统计学意义($P < 0.05$)。**结论** 热毒宁治疗疱疹性咽峡炎患儿的临床效果肯定,能够利于临床表现的缓解,降低血清 CK、CK-MB 活性、CK-MB 质量、cTnI,且可缓解机体炎性反应及提高免疫功能。

【关键词】 疱疹性咽峡炎; 热毒宁; 肌酸激酶; 磷酸肌酸激酶同工酶活性; CK-MB 质量; 心肌肌钙蛋白 I

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Clinical effect of Reduning in the treatment of children with herpangina and its influence on serum creatine kinase (CK), CK - MB activity, CK - MB quality, cTnI Ye Weiping.

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【Abstract】 Objective To explore the clinical effect of Reduning in the treatment of children with herpangina, and its influence on serum creatine kinase (CK), creatine phosphate kinase isoenzyme (CK - MB) activity, CK - MB quality, cardiac troponin I (cTnI). **Methods** 104 children with herpangina were divided into control group and research group according to the draw method, with 52 cases in each group. The control group was given conventional treatment, the research group was treated with Reduning on the basis of conventional treatment. The clinical curative effect, clinical symptoms disappear time, CK, CK - MB activity, CK - MB quality, inflammation factors, immune function before and after treatment, and adverse reactions were compared between the two groups. **Results** The total effective rate of the research group was higher than that of the control group (98.07% vs. 84.61%), the difference was statistically significant ($P < 0.05$). Before treatment, the CK, CK - MB activity, CK - MB quality, cTnI of the two groups had no statistically significant differences (all $P > 0.05$). After treatment, the CK, CK - MB activity, CK - MB quality, cTnI of the research group were lower than those of the control group [(55.87 ± 6.98) U/L vs. (68.42 ± 8.55) U/L, (22.70 ± 2.84) U/L vs. (29.45 ± 3.65) U/L, (2.99 ± 0.37) μg/L vs. (4.48 ± 0.56) μg/L, (0.16 ± 0.02) μg/L vs. (0.74 ± 0.09) μg/L], the differences were statistically significant (all $P < 0.05$). The incidence rate of adverse reaction of the research group was lower than that of the control group, the difference was statistically significant ($P < 0.05$). **Conclusion** The clinical effect of Reduning in the treatment of children with herpangina is sure, it can help to relieve clinical manifestations, reduce serum levels of CK, CK - MB activity, CK - MB quality, cTnI, and can alleviate the body's inflammatory response and immune function.

【Key words】 Herpangina; Reduning; Creatine kinase; Creatine phosphate kinase isoenzyme activity; CK-MB quality; Cardiac troponin I

Fund program: Science and Technology Planning Project of Chinese Medicine of Zhejiang Province(2015A079)

妊娠期糖代谢异常对新生儿出生结局及远期体质量的影响研究

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【摘要】 **目的** 探讨妊娠期糖代谢异常对新生儿出生结局及远期体质量的影响。**方法** 选择妊娠期糖尿病(GDM)的孕产妇30例,妊娠期糖耐量受损(GIGT)孕产妇30例,挑选同期健康孕产妇(NGT)30例作为对照组。采集三组孕产妇新生儿出生体质量、身长,并计算重量指数(PI);采集三组新生儿不良结局发生率;追踪调查三组新生儿远期体质量情况,根据是否母乳喂养,分为母乳喂养组和非母乳喂养组。分别比较不同喂养方式婴儿期42 d、3个月、6个月、12个月时体质量指数(BMI)。**结果** GDM组与对照组新生儿除身长外,体质量、PI差异均有统计学意义($t=1.60, P=0.06; t=5.09, P=0.00; t=6.94, P=0.00$);GIGT组与对照组新生儿除身长外,体质量、PI差异均有统计学意义($t=1.57, P=0.06; t=4.21, P=0.01; t=5.88, P=0.00$);GDM组及GIGT组上述指标差异均无统计学意义(均 $P>0.05$);GDM组及GIGT组巨大儿发生率显著高于对照组($\chi^2=10.59, P=0.00$),三组早产儿、呼吸窘迫综合征、心血管疾病、高胆红素血症、产伤的发生率差异均无统计学意义($\chi^2=1.23, P=0.54; \chi^2=2.09, P=0.35; \chi^2=2.02, P=0.36; \chi^2=2.09, P=0.35; \chi^2=4.03, P=0.13$);出生42 d、3个月、6个月、12个月时GDM组及GIGT组新生儿BMI均略高于对照组,但三组母乳喂养新生儿在各个阶段的BMI指数差异均无统计学意义($F=0.71, P=0.28; F=0.97, P=0.12; F=0.98, P=0.12; F=0.77, P=0.22$);出生42 d、3个月、6个月、12个月时GDM组及GIGT组新生儿BMI均略高于对照组,但三组非母乳喂养新生儿在各个阶段的BMI指数差异均无统计学意义($F=0.77, P=0.34; F=0.89, P=0.10; F=1.12, P=0.09; F=0.55, P=0.67$)。**结论** 妊娠期糖代谢异常可导致新生儿巨大儿发生率显著增加,新生儿体质量及PI均高于无合并妊娠糖代谢异常孕产妇,但妊娠期母体糖代谢异常对新生儿远期体质量影响未见与NGT新生儿出现显著差异。

【关键词】 葡萄糖代谢障碍; 妊娠并发症; 糖尿病,妊娠

Influence of gestational abnormal glucose metabolism on the birth outcome and long-term weight of neonates Zhu Wen, Shen Fangfang, Teng Yiqun, Hou Qiuying.

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【Abstract】 Objective To investigate the influence of gestational abnormal glucose metabolism on the birth outcome and long-term weight of neonates. **Methods** Thirty pregnant women with gestational diabetes mellitus (GDM) were enrolled in this study. 30 pregnant women with gestational impaired glucose tolerance (GIGT) were selected, and 30 normal pregnant women (NGT) were selected as control group. The weight, length and weight index (PI) of the three groups were collected. The incidence rates of adverse outcomes were collected in the three groups. The long-term weight of the newborns was investigated. According to whether breastfeeding, they were divided into breastfeeding group and non-breastfeeding group. The body mass index (BMI) was compared between 42 days, 3 months, 6 months and 12 months, respectively. **Results** There were statistically significant differences in body weight and PI of neonates except length between the control group and the GDM group ($t=1.60, P=0.06; t=5.09, P=0.00; t=6.94, P=0.00$). There were statistically significant differences in body weight and PI of neonates except length between the control group and the GIGT group ($t=1.57, P=0.06; t=4.21, P=0.01; t=5.88, P=0.00$). There were no statistically significant differences in the above indices between the GDM group and the GIGT group (all $P>0.05$). The incidence rate of macrosomia in the GDM group and the GIGT group was significantly higher than that

of the control group ($\chi^2 = 10.59, P = 0.00$). The incidence rates of respiratory failure syndrome, cardiovascular disease, hyperbilirubinemia and birth injury among the three groups had no statistically significant differences ($\chi^2 = 1.23, P = 0.54; \chi^2 = 2.09, P = 0.35; \chi^2 = 2.02, P = 0.36; \chi^2 = 2.09, P = 0.35; \chi^2 = 4.03, P = 0.13$). At the birth of 42 days, 3 months, 6 months, 12 months, the BMI of neonates in the GDM group and the GIGT group were slightly higher than those in the control group, but there were no statistically significant differences in BMI index among the three groups of breastfed newborns ($F = 0.71, P = 0.28; F = 0.97, P = 0.12; F = 0.98, P = 0.12; F = 0.77, P = 0.22$). At the birth of 42 days, 3 months, 6 months, 12 months, the BMI of neonates in the GDM group and the GIGT group were slightly higher than those in the control group, but there were no statistically significant differences in BMI index among the three groups of breastfed newborns ($F = 0.77, P = 0.34; F = 0.89, P = 0.10; F = 1.12, P = 0.09; F = 0.55, P = 0.67$).

Conclusion Abnormal glucose metabolism in pregnant women can lead to a significant increase in the incidence of neonatal macrosomia. The body weight and PI of neonates are higher than those without abnormal glucose metabolism in pregnant women, but the abnormal maternal glucose metabolism in pregnant women has no significant influence on the long-term body weight of neonates, and there is no significant difference between NGT and neonates.

【Key words】 Glucose metabolism disorders; Pregnancy complications; Diabetes, gestational

心肌酶谱和脐动脉血气分析在新生儿窒息 诊治中的临床价值

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【摘要】 目的 探讨心肌酶谱和脐动脉血气分析用于新生儿窒息(HIE)诊断、治疗中的临床价值。方法 选择 HIE 患儿 87 例(观察组)与同期分娩的健康新生儿 94 例(对照组)为研究对象,检测并比较两组心肌酶谱[天门冬氨酸氨基转移酶(AST)、肌酸磷酸激酶(CK)、肌酸磷酸激酶同工酶(CK-MB)、羟丁酸脱氢酶(HB-DH)、乳酸脱氢酶(LDH)]和脐动脉血气分析[pH 值、碱剩余(BE)、动脉血氧分压(PaO₂)、动脉血二氧化碳分压(PaCO₂)]指标的差异。**结果** 观察组 AST、CK、CK-MB、HB-DH、LDH 分别为(123.54 ± 36.57) U/L、(1 786.83 ± 542.37) U/L、(584.63 ± 164.54) U/L、(652.31 ± 187.38) U/L、(956.38 ± 257.64) U/L,均显著高于对照组的(65.38 ± 20.34) U/L、(675.48 ± 240.32) U/L、(48.61 ± 12.15) U/L、(248.36 ± 51.69) U/L、(581.36 ± 102.67) U/L,两组差异均有统计学意义($t = 13.35, 17.75, 31.50, 20.10, 13.04$, 均 $P < 0.05$);观察组 pH、BE、PaO₂、PaCO₂ 分别为(7.02 ± 0.13)、(9.56 ± 1.74) mmol/L、(3.26 ± 0.26) kPa、(6.88 ± 1.24) kPa,对照组分别为(7.20 ± 0.16)、(8.96 ± 1.52) mmol/L、(3.21 ± 0.33) kPa、(6.58 ± 1.84) kPa,观察组 pH 显著低于对照组($t = 8.27, P < 0.05$),两组 BE、PaO₂、PaCO₂ 差异均无统计学意义(均 $P > 0.05$)。观察组预后理想患儿 AST、CK、CK-MB、HB-DH、LDH 分别为(59.68 ± 13.52) U/L、(542.36 ± 103.65) U/L、(49.37 ± 14.25) U/L、(275.36 ± 64.51) U/L、(567.35 ± 115.24) U/L,均显著低于预后较差患儿的(141.32 ± 36.24) U/L、(1 265.38 ± 362.74) U/L、(168.35 ± 50.01) U/L、(602.31 ± 205.34) U/L、(853.64 ± 212.54) U/L,而 pH 值(7.19 ± 0.21)则显著高于预后较差患儿的(7.01 ± 0.18),差异均有统计学意义($t = 14.67, 14.42, 17.22, 11.14, 7.14, 2.91$, 均 $P < 0.05$)。**结论** HIE 患儿的心肌酶谱和脐动脉血气分析等指标可用于早期诊断 HIE 的指标,同时可对 HIE 患儿的预后进行评估,具有较高的临床应用价值。

【关键词】 酶类; 心肌; 血气分析; 窒息,新生儿; 诊断

Clinical value of myocardial enzymes and umbilical artery blood gas analysis in diagnosis and treatment of neonatal asphyxia Zhi Shengwen, Bai Qingxin, Cheng Min, Cui Jie.

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【Abstract】 Objective To investigate the clinical value of myocardial enzymes and umbilical artery blood gas analysis in the diagnosis and treatment of neonatal asphyxia (HIE). **Methods** Eighty-seven neonates with HIE and 94 healthy neonates (control group) were selected and compared. The myocardial enzymes [aspartate aminotransferase (AST), creatine phosphokinase (CK), creatine phosphokinase isoenzyme (CK-MB), hydroxybutyrate dehydrogenase (HB-DH), lactate dehydrogenase (LDH)] and umbilical artery blood gas analysis [pH, alkali residue (BE), arterial oxygen pressure (PaO₂), arterial carbon dioxide partial pressure (PaCO₂)] of the two groups were detected and compared. **Results** The levels of AST, CK, CK-MB, HB-DH and LDH in the observation group were (123.54 ± 36.57) U/L, (1 786.83 ± 542.37) U/L, (584.63 ± 164.54) U/L, (652.31 ± 187.38) U/L, (956.38 ± 257.64) U/L, respectively, which were significantly higher than those in the control group [(65.38 ± 20.34) U/L, (675.48 ± 240.32) U/L, (48.61 ± 12.15) U/L, (248.36 ± 51.69) U/L, (581.36 ± 102.67) U/L] ($t = 13.35, 17.75, 31.50, 20.10, 13.04$, all $P < 0.05$). The pH, BE, PaO₂, PaCO₂ of the observation group were (7.02 ± 0.13), (9.56 ± 1.74) mmol/L, (3.26 ± 0.26) kPa, (6.88 ± 1.24) kPa, respectively, which of the control group were (7.20 ± 0.16), (8.96 ± 1.52) mmol/L, (3.21 ± 0.33) kPa, (6.58 ± 1.84) kPa, respectively. the pH value in the observation group was significantly lower than that in the control group ($t = 8.27, P < 0.05$). The BE, PaO₂ and PaCO₂ between the two groups had no statistically significant differences (all $P > 0.05$). In the observation group, the levels of AST, CK,

CK - MB, HB - DH and LDH of the neonates with ideal prognosis were (59.68 ± 13.52) U/L, (542.36 ± 103.65) U/L, (49.37 ± 14.25) U/L, (275.36 ± 64.51) U/L, (567.35 ± 115.24) U/L, respectively, which were significantly lower than those of the neonates with poor prognosis [(81.32 ± 36.24) U/L, (1265.38 ± 362.74) U/L, (168.35 ± 50.01) U/L, (602.31 ± 205.34) U/L, (853.64 ± 212.54) U/L], and the pH value of the observation group with ideal prognosis was significantly higher than that of the neonates with poor prognosis [(7.19 ± 0.21) vs. (7.01 ± 0.18)], the differences were statistically significant ($t = 14.67, 14.42, 17.22, 11.14, 7.14, 2.91$, all $P < 0.05$).

Conclusion The myocardial enzymes and umbilical artery blood gas analysis can be used in the early diagnosis of HIE and evaluation of the prognosis, and it has high clinical value.

[Key words] Enzymes; Myocardium; Blood gas analysis; Asphyxia neonatorum; Diagnosis

血铅、锌水平与儿童抽动障碍的相关性分析

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【摘要】 目的 分析血铅锌水平与儿童抽动障碍(TD)的相关性。方法 选取 114 例 TD 患者作为观察组,同期在该院进行健康体检者 100 例作为对照组,比较两组儿童的血铅及血锌水平,分析铅及锌与儿童 TD 的相关性。结果 观察组血铅为 $(70.8 \pm 14.9) \mu\text{g/L}$, 对照组为 $(50.9 \pm 13.8) \mu\text{g/L}$, 差异有统计学意义($t = 4.932, P < 0.05$); 观察组血锌为 $(461.4 \pm 33.2) \mu\text{g/L}$, 对照组为 $(501.5 \pm 34.1) \mu\text{g/L}$, 差异有统计学意义($t = 5.217, P < 0.05$)。血铅 $\geq 60 \mu\text{g/L}$ 及血锌 $< 470 \mu\text{g/L}$ 与 TD 具有显著相关性($OR = 2.192, 2.012$, 均 $P < 0.05$)。结论 血铅锌水平与儿童 TD 具有显著相关性。

【关键词】 抽搐性运动障碍; 铅; 锌; 儿童

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Correlation analysis of blood lead and zinc with tic disorders in children Zhu Xueying, Yu Feng, Mao Chunfa. Department of Pediatrics, the People's Hospital of Lanxi, Lanxi, Zhejiang 321100, China (Zhu XY, Mao CF); Department of Pediatrics, Huzhou Central Hospital, Huzhou, Zhejiang 313000, China (Yu F)

【Abstract】 Objective To analyze the correlation between blood lead, zinc levels and tic disorders(TD) in children. **Methods** One hundred and fourteen children with TD were chosen as observation group, and 100 healthy children were chosen as control group. The serum levels of lead and zinc were compared between the two groups, and the correlation between blood lead, zinc levels and TD was analyzed. **Results** The serum level of blood lead in the observation group was $(70.8 \pm 14.9) \mu\text{g/L}$, which was higher than $(50.9 \pm 13.8) \mu\text{g/L}$ in the control group, the difference was statistically significant($t = 4.932, P < 0.05$). The serum level of blood zinc in the observation group was $(461.4 \pm 33.2) \mu\text{g/L}$, which was lower than $(501.5 \pm 34.1) \mu\text{g/L}$ in the control group, the difference was statistically significant($t = 5.217, P < 0.05$). The serum level of blood lead $\geq 60 \mu\text{g/L}$ and the serum level of blood zinc $< 470 \mu\text{g/L}$ were significantly related with TD($OR = 2.192, 2.012$, all $P < 0.05$). **Conclusion** The blood lead and zinc levels are significantly correlated with TD in children.

【Key words】 Tic disorders; Lead; Zinc; Child

Fund program: Science and Technology Planning Project of Jinhua City, Zhejiang Province(2015-3-078)

托吡酯治疗婴幼儿症状性癫痫的长期随访研究

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【摘要】 目的 评价新型抗癫痫药物托吡酯治疗婴幼儿症状性癫痫的长期疗效和安全性。**方法** 选取 50 例症状性癫痫婴幼儿, 从 2012 年 4 月至 2013 年 4 月开始单药使用托吡酯治疗, 其中男性 26 例, 女性 24 例, 评估用药 1 年、2 年、3 年、4 年时有效率, 保留率及不良反应情况, 应用 Kaplan-Meier 及 Cox 比例风险回归模型计算保留率及讨论影响保留率的因素。**结果** 用药 1 年、2 年、3 年、4 年有效率分别为 66.00%、61.90%、58.33%、53.33%; 无发作率分别为 44.00%、42.86%、41.67%、36.67%; 在服用托吡酯治疗期间出现的不良反应主要包括嗜睡、乏力、体质量下降、食欲减退、呕吐、腹泻、少汗症、思维活动减慢、注意力障碍等。随访 1 年、2 年、3 年、4 年托吡酯的保留率分别为 84.00%、72.00%、60.00%、48.00%; 停药原因主要是单药治疗效果欠佳及药物不良反应。**结论** 托吡酯治疗婴幼儿症状性癫痫具有较好疗效, 较高安全性, 长期随访托吡酯单药治疗婴幼儿症状性癫痫, 具有较好保留率, 影响保留率的主要因素是治疗效果欠佳及其药物不良反应。缓慢加量及低剂量治疗可减少药物副作用, 提高依从性, 提高药物保留率。

【关键词】 癫痫; 托吡酯; 婴儿

基金项目: 江苏省常熟市卫计委资助性项目 (csws201512)

Long-term follow-up study of topiramate in the treatment of symptomatic epilepsy in infants Mao Yan, Tang Jihong, Chai Jiannong, Wang Haihong.

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【Abstract】 Objective To observe the long-term efficacy and safety of topiramate in the treatment of symptomatic epilepsy in infants. **Methods** Fifty infants with symptomatic epilepsy were collected. The monotherapy was started with topiramate from April 2012 to April 2013, including 26 males and 24 females. The effective rate, retention rate and adverse effects after using the medication at 1 year, 2 years, 3 years, 4 years were evaluated. Kaplan-Meier and Cox proportional hazards regression model were used to calculate the retention rate and analyze the risk factors for retention rate. **Results** From the beginning of using the medicine, the effective rate was 66.00% at 1 year, 61.90% at 2 years, 58.33% at 3 years, and 53.33% at 4 years, respectively. The rates of complete remission were 44.00%, 42.86%, 41.67%, 36.67% at 1 year, 2 years, 3 years, 4 years, respectively. The main adverse effects of topiramate were drowsiness, hypodynamia, weight loss, anepithymia, vomit, diarrhea, hypohidrosis, slowly thinking active, attention disorders, etc. The retention rate was 84.00% at 1 year, 72.00% at 2 years, 60.00% at 3 years, and 48.00% at 4 years. The main causes of stopping medication were lower curative effect of topiramate monotherapy and side effects. **Conclusion** Topiramate in the treatment of infants with symptomatic epilepsy has good effect and safety, with higher retention rate in a long-term follow-up. The major factors that affect the retention rate are lower curative effect and adverse reactions. Slowly add quantity and low dose treatment can reduce adverse drug reactions, improve compliance and increase retention rate.

【Key words】 Epilepsy; Topiramate; Infant

Fund program: Project Supported by Health Planning Commission of Changshou City, Jiangsu Province (csws201512)

低出生体质量早产儿三种喂养方式对其体格生长的影响

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【摘要】 目的 探讨低出生体质量早产儿出院后三种不同方式喂养对其体格生长指标的影响。方法 选取早产儿 90 例作为研究对象,根据喂养方式的不同将其分为 A、B、C 三组,A 组早产儿采用早产儿配方奶进行喂养,B 组早产儿采用母乳喂养,C 组早产儿采用足月儿配方奶粉进行喂养,观察比较三组早产儿出生后 30 d、60 d 及 90 d 的体格生长情况。**结果** A 组早产儿出生后 30 d、90 d 体质量、身长、头围指标均优于 B 组、C 组,差异有统计学意义($P < 0.05$);A 组早产儿出生后 60 d 体质量、身长、头围指标情况与 B 组相近,差异无统计学意义($P > 0.05$)、A 组、B 组早产儿出生后 60 d 体质量、身长、头围指标情况均优于 C 组,差异有统计学意义($P < 0.05$)。**结论** 采用早产儿配方奶对早产儿进行喂养,与母乳喂养及传统配方奶粉相比,更有益于早产儿获取生长所需营养,有效促进早产儿的体格生长,改善早产儿的预后及其生存质量。

【关键词】 低出生体质量; 早产儿; 喂养方式; 体格生长

Effects of three different ways of feeding on physical growth of low birth weight premature infants after discharge Feng Yan.

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【Abstract】 **Objective** To investigate the effects of three different ways of feeding on the physical growth of low birth weight premature infants discharged from hospital. **Methods** 90 premature infants were selected. According to the different feeding methods, the infants were divided into A, B, C groups. Premature infants of A group were fed with preterm infants formula milk after discharge. B group received breast feeding. C group was fed with term infants formula milk. The physical growth at postnatal 30d, 60d and 90d of three groups were observed and compared. **Results** The weight, length and head circumference of premature infants at postnatal 30d, 90d in A group were better than those of B group and C group, the differences were statistically significant (all $P < 0.05$). The weight, length and head circumference of premature infants at postnatal 60d in A group were similar to those in B group, the differences were not statistically significant (all $P > 0.05$). The weight, length and head circumference of premature infants at postnatal 60d in A group and B group were better than those in C group, the differences were statistically significant (all $P < 0.05$). **Conclusion** Compared with the breast feeding and traditional formula milk, formula milk for preterm infants is more conducive to the growth of premature infants to obtain nutrients, effectively promote the growth of premature infants, improve the prognosis and quality of life in preterm infants.

【Key words】 Low birth weight; Premature infant; Feeding pattern; Physical growth

红霉素联合阿奇霉素治疗小儿支原体肺炎的临床疗效分析

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【摘要】 目的 观察红霉素联合阿奇霉素治疗小儿支原体肺炎的临床效果。**方法** 选取支原体肺炎患儿 98 例作为研究对象,采用随机数字表法将其分为观察组和对照组各 49 例。在常规治疗的基础上,对照组采取阿奇霉素治疗,观察组采取红霉素联合阿奇霉素治疗。治疗结束后,观察两组患者的症状消失时间(发热、咳嗽、肺部啰音)、住院时间及不良反应发生情况,进而比较两组患儿的临床疗效。**结果** 观察组总有效率 95.91%,明显高于对照组的 79.5%,差异有统计学意义($\chi^2 = 4.721, P < 0.05$)。与对照组比较,观察组症状消失时间(发热、咳嗽、肺部啰音)及住院时间均明显缩短,差异均有统计学意义($t = 1.965, 1.943, 1.987, 1.952$, 均 $P < 0.01$)。对照组不良反应发生率为 8.16%,观察组不良反应发生率为 12.24%,差异无统计学意义($\chi^2 = 0.445, P > 0.05$)。**结论** 与单用阿奇霉素比较,红霉素联合阿奇霉素治疗小儿支原体肺炎疗效显著,安全性好,有利于缩短疗程,提高有效率。

【关键词】 儿童; 支原体肺炎; 红霉素; 阿奇霉素

Clinical efficacy of erythromycin combined with azithromycin in the treatment of children with mycoplasma pneumonia Bao Henv, Luo Huiping.

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【Abstract】 Objective To explore the clinical efficacy of erythromycin combined with azithromycin in the treatment of mycoplasma pneumonia in children. **Methods** 98 children with mycoplasma pneumonia were selected. According to the digital chart, the patients were randomly divided into the observation group and control group, with 49 cases in each group. On the basis of routine treatment, the control group was treated with azithromycin, and the observation group received erythromycin combined with azithromycin. After treatment, the disappearance time of the disease (fever, cough, pulmonary rale), hospitalization time and adverse reactions were observed in the two groups, and the clinical efficacy of the two groups was compared. **Results** The total effective rate in the observation group was 95.91%, which was significantly higher than that in the control group (79.5%), and the difference was statistically significant ($\chi^2 = 4.721, P < 0.05$). Compared with the control group, the disappearance time (fever, cough, pulmonary rales) and hospitalization time of the observation group were significantly decreased ($t = 1.965, 1.943, 1.987, 1.952$, all $P < 0.01$). The incidence rate of adverse reactions in the control group was 8.16%, which in the observation group was 12.24%, there was no statistically significant difference between the two groups ($\chi^2 = 0.445, P > 0.05$). **Conclusion** Compared with azithromycin alone, erythromycin combined with azithromycin is effective and safe in the treatment of children with mycoplasma pneumonia. It is beneficial to shorten the course of treatment and improve the efficacy, and is worthy of further popularization and application.

【Key words】 Children; Mycoplasma pneumoniae; Erythromycin; Azithromycin

瑞舒伐他汀对急性脑梗死患者血清 C 反应蛋白和血管细胞黏附分子-1 的影响

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【摘要】 **目的** 观察在急性脑梗死早期服用瑞舒伐他汀对患者血管细胞黏附分子-1 (VCAM-1)、CRP 和 TG、TC、LDC 等的影响。**方法** 采用随机数字表法将 90 例急性脑梗死患者分为瑞舒伐他汀治疗组和对照组, 每组 45 例。对照组采用常规西药(阿司匹林、甘露醇等)治疗, 治疗组在对照组基础上加用瑞舒伐他汀, 疗程均为 21 d 比较治疗前后患者的血浆 VCAM-1、CRP、TG、TC、LDLch 水平、临床疗效、调节血脂异常的疗效以及药物安全性能。**结果** 两组患者在治疗后 CRP 指标均有改善, 但治疗组在治疗 7 d $[(23.68 \pm 5.23) \text{mg/L}]$ 、14 d $[(16.68 \pm 6.76) \text{mg/L}]$ 后改善更为显著, 对照组 7 d $[(30.12 \pm 6.68) \text{mg/L}]$ 、14 d $[(21.12 \pm 6.35) \text{mg/L}]$, 两组比较差异有统计学意义($t=5.092, 3.230$, 均 $P < 0.05$), 治疗 21 d 后治疗组仍优于对照组, 但差异无统计学意义($P > 0.05$)。两组在治疗后 VCAM-1 指标也均有改善, 治疗组在治疗 7 d $[(1205.1 \pm 61.8) \text{mg/L}]$ 、14 d $[(852.1 \pm 60.2) \text{mg/L}]$ 后改善更为显著, 对照组 7 d $[(1415.6 \pm 62.9) \text{mg/L}]$ 、14 d $[(963.1 \pm 53.3) \text{mg/L}]$, 二组差异有统计学意义($t=21.815, 9.261$, 均 $P < 0.05$), 治疗 21 d 后差异无统计学意义($P > 0.05$)。TG、TC、LDC 治疗组和对照组指标在治疗后 7 d、14 d、21 d 均有下降, 治疗组改善更为明显, 二组比较差异有统计学意义($t=5.219, 7.303, 4.044, 2.232, 4.336, 3.612, 2.689, 7.817, 11.057$, 均 $P < 0.05$)。**结论** 与常规西药治疗相比, 瑞舒伐他汀可使血浆 CRP、VCAM-1、TG、TC、LDC 水平降低, 进一步改善缺血性脑血管病的病理基础, 消除危险因素, 更有利于急性脑梗死的预后和转归。

【关键词】 瑞舒伐他汀; 脑梗死; 血管细胞黏附分子-1; C 反应蛋白质

Effect of rosuvastatin on C - reactive protein and vascular cell adhesion molecule 1 in patients with acute cerebral infarction Wang Liying, Hu Riguang, Wang Yanan, Zang Yefeng, Zhang Ruilian, Gao Meixiang.

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【Abstract】 Objective To observe the effect of rosuvastatin on vascular cell adhesion molecule - 1 (VCAM - 1), C - reactive protein (CRP), TG, TC and LDC in patients with acute cerebral infarction at the early stage.

Methods According to the random number expression method, 90 patients with acute cerebral infarction were divided into rosuvastatin treatment group and control group, with 45 cases in each group. The course of treatment was 21 days. The control group was given conventional western medicine (aspirin, mannitol etc.), the treatment group received rosuvastatin on the basis of the control group. Before and after treatment, the plasma VCAM - 1, CRP, TG, TC, LDLch levels, clinical efficacy, efficacy of regulating dyslipidemia and drug safety were compared. **Results** After treatment, the CRP levels in the two groups were improved. After treatment for 7 days, 14 days, the CRP levels of the treatment group were $(23.68 \pm 5.23) \text{mg/L}$, $(16.68 \pm 6.76) \text{mg/L}$, respectively, which improved more significantly than those of the control group $[(30.12 \pm 6.68) \text{mg/L}, (21.12 \pm 6.35) \text{mg/L}]$, the differences were statistically significant ($t = 5.092, 3.230$, all $P < 0.05$). After 21 days of treatment, the CRP of treatment group was better than the control group, but the difference was not statistically significant ($P > 0.05$). The VCAM - 1 levels of the two groups after treatment were improved. After treatment for 7 days, 14 days, the VCAM - 1 levels of the treatment group were $(1205.1 \pm 61.8) \text{mg/L}$, $(852.1 \pm 60.2) \text{mg/L}$, respectively, which were improved more significantly than those of the control group $[(1415.6 \pm 62.9) \text{mg/L}, (963.1 \pm 53.3) \text{mg/L}]$, there were statistically significant differences between the two groups ($t=21.815, 9.261$, all $P < 0.05$), 21 days after treatment, there was no statistically significant difference ($P > 0.05$). The levels of TG, TC, LDC in the two groups were all decreased after treatment for 7 days, 14 days and 21 days, and the improvement in the treatment group was more obvious, the differences between the two groups were statistically significant ($t=5.219, 7.303, 4.044, 2.232, 4.336, 3.612, 2.689, 7.817, 11.057$, all $P < 0.05$). **Conclusion** Compared with the conventional western medicine treatment, rosuvastatin can decrease the plasma levels of CRP, VCAM - 1, TG, TC, LDC, further improve the pathological basis of ischemic cerebrovascular disease, eliminate the risk factors, it is more conducive to the prognosis of acute cerebral infarction.

【Key words】 Rosuvastatin; Cerebral infarction; Vascular cell adhesion molecule-1; C reactive protein

不同血液净化方式对维持性血液透析患者炎性因子清除效果的比较

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【摘要】 目的 比较不同血液净化方式对维持性血液透析患者炎性因子的清除效果。方法 回顾性分析维持性血液透析患者 50 例的临床资料,分别采用低通量透析、高通量透析,比较两种方法透析后超敏 C 反应蛋白(hs-CRP)、肿瘤坏死因子 α (TNF- α)、白细胞介素 1(IL-1)、白细胞介素 6(IL-6)的变化。结果 低通量透析后患者 hs-CRP、TNF- α 、IL-1、IL-6 分别为(6.58 \pm 3.69)mg/L、(1.54 \pm 0.42)g/L、(105.46 \pm 8.20)ng/L、(27.58 \pm 6.83)ng/L,高通量透析后患者 hs-CRP、TNF- α 、IL-1、IL-6 分别为(2.93 \pm 1.85)mg/L、(1.13 \pm 0.27)g/L、(97.21 \pm 7.14)ng/L、(20.35 \pm 5.76)ng/L,两者差异均有统计学意义($t=6.253, 5.806, 5.365, 5.722$,均 $P<0.05$)。结论 相比于低通量透析,高通量透析可更加有效清除维持性血液透析患者机体内的炎性因子。

【关键词】 血液透析滤过; C 反应蛋白质; 肿瘤坏死因子 α ; 白细胞介素; 临床对照试验

Comparison of the effects of different blood purification methods on inflammatory cytokines clearance in patients with maintenance hemodialysis Gao Xiaoqin, Yu Weimin.

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【Abstract】 **Objective** To compare the effects of different ways of blood purification on inflammatory cytokines clearance in patients with maintenance hemodialysis. **Methods** The clinical data of 50 patients with maintenance hemodialysis were retrospectively analyzed. The low flux dialysis, high flux dialysis were used respectively, and the changes of hypersensitive C-reactive protein (hs-CRP), tumor necrosis factor alpha (TNF- α), interleukin 1 (IL-1), interleukin 6 (IL-6) after dialysis were compared between the two methods. **Results** After low flux dialysis, the hs-CRP, TNF- α , IL-1, IL-6 levels were (6.58 \pm 3.69)mg/L, (1.54 \pm 0.42)g/L, (105.46 \pm 8.20)ng/L, (27.58 \pm 6.83)ng/L, respectively, which after high flux dialysis were (2.93 \pm 1.85)mg/L, (1.13 \pm 0.27)g/L, (97.21 \pm 7.14)ng/L, (20.35 \pm 5.76)ng/L, respectively, the differences were statistically significant ($t=6.253, 5.806, 5.365, 5.806$, all $P<0.05$). **Conclusion** Compared with the low flux dialysis, high flux dialysis is more effective in inflammatory cytokines clearance in patients with maintenance hemodialysis.

【Key words】 Hemodiafiltration; C-Reactive protein; Tumor necrosis factor-alpha; Interleukins; Controlled clinical trial

带锁髓内钉与钢板置入内固定 治疗胫骨骨折的效果比较

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【摘要】 目的 比较带锁髓内钉与钢板置入内固定在关节外胫骨创伤性骨折治疗中的应用效果。**方法** 选取关节外胫骨创伤性骨折患者 150 例为研究对象,根据内固定方案不同分为观察组与对照组各 75 例。观察组采用多功能带锁髓内钉固定,对照组采用锁定钢板固定,比较两组骨折修复效果、术中出血量、手术时间、出血时间及并发症发生情况。**结果** 观察组平均骨折愈合时间为 (9.17 ± 2.84) 个月,对照组为 (9.25 ± 2.65) 个月,两组差异无统计学意义($t=0.252, P>0.05$)。观察组修复效果明显优于对照组,差异有统计学意义($u=4.341, P<0.05$)。观察组手术时间较对照组长 $[(99.73 \pm 26.31) \text{ min}]$ 比 $[(83.18 \pm 13.94) \text{ min}]$ 、出血量较对照组少 $[(101.15 \pm 21.26) \text{ mL}]$ 比 $[(253.57 \pm 23.14) \text{ mL}]$ 、出血时间较对照组短 $[(44.25 \pm 15.63) \text{ min}]$ 比 $[(63.47 \pm 16.09) \text{ min}]$,差异均有统计学意义($t=4.814, 42.006, 7.420$, 均 $P<0.05$)。观察组神经血管损伤、外翻及内翻发生率均低于对照组,差异均有统计学意义($2=3.857, 5.042, 4.807$, 均 $P<0.05$)。观察组不愈合及感染发生率均低于对照组,但差异均无统计学意义($\chi^2=1.027, 1.714$, 均 $P>0.05$)。**结论** 多功能带锁髓内钉固定治疗关节外胫骨创伤性骨折出血量少,并发症发生率较低,骨折修复效果明显优于钢板置入内固定。

【关键词】 胫骨骨折; 骨折固定术,内; 骨钉

Application of locking intramedullary nail and locking plate in traumatic extraarticular proximal tibial fractures Dong Hongpeng.

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【Abstract】 Objective To investigate the application of locking intramedullary nail and locking plate in traumatic extraarticular proximal tibial fractures. **Methods** 150 patients with traumatic extraarticular proximal tibial fractures were chosen in the research. According to the internal fixation program, the patients were divided into observation group and control group, with 75 cases in each group. The observation group was treated with multifunctional locking intramedullary nail, the control group was treated with locking plate. After treatment for 3 months, the fracture repairing effects, blood loss, operation time, bleeding duration and adverse reaction between the two groups were compared. **Results** The patients were followed up after operation, the average fracture healing time of the observation group was (9.17 ± 2.84) months, which of the control group was (9.25 ± 2.65) months, there was no statistically significant difference between the two groups ($t=0.252, P>0.05$). The repairing effect of the observation group was better than that of the control group, the difference was statistically significant ($u=4.341, P<0.05$). The operation time $[(99.73 \pm 26.31) \text{ min}]$ vs. $[(83.18 \pm 13.94) \text{ min}]$ of the observation group was longer than that of the control group, blood loss $[(101.15 \pm 21.26) \text{ mL}]$ vs. $[(253.57 \pm 23.14) \text{ mL}]$ and bleeding duration $[(44.25 \pm 15.63) \text{ min}]$ vs. $[(63.47 \pm 16.09) \text{ min}]$ of the observation group were lower than those of the control group, the differences were statistically significant ($t=4.814, 42.006, 7.420$, all $P<0.05$). The incidence rates of nerve and vascular injuries, valgus and varus of the observation group were lower than those of the control group, the differences were statistically significant ($\chi^2=3.857, 5.042, 4.807$, all $P<0.05$). The incidence rates of unhealing and infection in the observation group were lower than those in the control group, but the differences were not statistically significant ($\chi^2=1.027, 1.714$, all $P>0.05$). **Conclusion** Multifunctional locking intramedullary nail can reduce the incidence rate of adverse reaction and blood loss in traumatic extraarticular proximal tibial fractures, the fracture repairing effect is better than locking plate internal fixation.

【Key words】 Tibial fractures; Fracture fixation, internal; Bone nails

多西他赛联合洛铂治疗转移性乳腺癌的临床效果分析

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【摘要】 **目的** 分析多西他赛联合洛铂治疗转移性乳腺癌的临床效果。**方法** 选择转移型乳腺癌患者 46 例为研究对象,患者均给予多西他赛联合洛铂治疗,观察临床治疗效果。**结果** 经 4 个周期的治疗,46 例患者中,完全缓解(CR)4 例,部分缓解(PR)25 例,临床治疗有效率为 63.0% (29/46)。对患者进行为期 12 个月的随访发现,患者的无进展生存时间平均为(8.1 ± 0.6)个月;2 例患者因肿瘤进展而死亡。不良反应主要为粒细胞减少、血小板减少、乏力、胃肠道反应、关节肌肉酸痛、黏膜炎、腹泻以及周围性水肿,主要为 I ~ II 度。**结论** 多西他赛联合洛铂对转移性乳腺癌患者具有比较理想的近期临床治疗效果,不良反应轻。

【关键词】 多西他赛; 洛铂; 乳腺肿瘤

Clinical effect of docetaxel combined with lobaplatin in the treatment of metastatic breast cancer

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【Abstract】 **Objective** To analyze the efficacy and safety of combination of docetaxel and lobaplatin in the treatment of metastatic breast cancer (MBC). **Methods** The clinical data of 46 patients with MBC who had been administered docetaxel and lobaplatin were retrospectively reviewed. **Results** All 46 patients were treated for 4 cycles, 4 cases achieved complete remission (CR), 25 cases achieved partial remission (PR), the effective rate was 63.0% (29/46). The patients were followed up for 12 months, the progression-free survival time was (8.1 ± 0.6) months, 2 patients died due to tumor progression. The adverse reactions were mainly granulocyte, thrombocytopenia, anemic, gastrointestinal reaction, articular muscle soreness, mucosa, diarrhea and peripheral edema, mainly I ~ II degree. **Conclusion** Docetaxel combined with lobaplatin is well-tolerated and safe for MBC patients, and has less adverse reactions.

【Key words】 Metastatic breast cancer; Docetaxel; Breast neoplasms

右美托咪定对老年全身麻醉手术患者术后认知功能的影响

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【摘要】 目的 探讨右美托咪定对老年全身麻醉手术患者术后认知功能的影响。方法 选取在全身麻醉下择期手术老年患者 100 例, 采用随机数字表法分为观察组和对照组, 每组 50 例, 观察组患者麻醉诱导前予右美托咪定 + 0.9% 氯化钠注射液, 对照组患者予 0.9% 氯化钠注射液, 均静脉滴注, 两组其余麻醉诱导和维持时间均相同。两组患者术前 1 d、术后 1 d、3 d、7 d 采用简易智力状态检查表 (MMSE) 量表评估患者认知功能及术后认知功能障碍 (POCD); 麻醉前、手术开始、手术结束时的血压和心率; 术前、手术结束时、术后 3 d、7 d 血清肿瘤坏死因子 (TNF- α) 水平。结果 观察组术后 1 d MMSE 评分 (24.6 \pm 0.7) 分、术后 3 d MMSE 评分 (27.2 \pm 1.1) 分, 均显著高于对照组的 (22.4 \pm 0.6) 分、(27.2 \pm 1.1) 分 ($t = 3.64, 3.97$, 均 $P < 0.05$); 且观察组发生认知功能障碍下降患者 6 例, 明显低于对照组的 20 例 ($\chi^2 = 5.38, P < 0.05$); 观察组血清 TNF- α 水平在手术结束时 (28.52 \pm 3.73) ng/L、术后 3 d 时 (28.82 \pm 4.13) ng/L, 均显著低于对照组的 (37.14 \pm 3.62) ng/L、(38.27 \pm 3.47) ng/L ($t = 5.21, 4.89, P < 0.05$); 手术开始时观察组收缩压 (124.53 \pm 3.84) mmHg、舒张压 (79.32 \pm 4.38) mmHg 和心率 (70.45 \pm 5.32) 次/min, 波动幅度显著小于对照组的 (145.36 \pm 4.72) mmHg、(93.17 \pm 3.82) mmHg、(86.79 \pm 4.26) 次/min, 差异均有统计学意义 ($t = 5.83, 4.97, 4.58$, 均 $P < 0.05$)。结论 在老年全身麻醉手术患者中采用泵注右美托咪定, 对其术后认知功能影响较小, 这可能与稳定血流动力, 降低 TNF- α 的高表达均有关系。

【关键词】 右美托咪定; 老年; 全身麻醉; 认知功能

Effects of dexmedetomidine on postoperative cognitive function in elderly patients undergoing general anesthesia Wang Biming, Ma Lingzhi, Xiang Wanhong, Li Juan.

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【Abstract】 Objective To investigate the effect of dexmedetomidine on postoperative cognitive function in elderly patients undergoing general anesthesia. **Methods** A total of 100 elderly patients undergoing elective surgery were enrolled. The patients were randomly divided into observation group and control group, with 50 patients in each group. The observation group was given dexmedetomidine + 0.9% sodium chloride injection before induction anesthesia. The control group was given 0.9% sodium chloride injection. The remaining anesthesia induction and maintenance time were same in the two groups. The cognitive function and postoperative cognitive dysfunction (POCD) were evaluated by MMSE scale. The blood pressure and heart rate before and after operation and at the end of the operation, the levels of serum tumor necrosis factor α (TNF- α) before operation, at the end of the operation and postoperative 3, 7 days were measured. **Results** At postoperative 1 day and 3 days, the MMSE scores of the observation group were (24.6 \pm 0.7) points and (27.2 \pm 1.1) points, respectively, which were significantly higher than those of the control group [(22.4 \pm 0.6) points, (27.2 \pm 1.1) points, $t = 3.64, 3.97$, all $P < 0.05$]. And 6 cases in the observation group occurred cognitive dysfunction, which was significantly lower than 20 cases of the control group ($\chi^2 = 5.38, P < 0.05$). At the end of the operation and postoperative 3 days, the serum levels of TNF- α in the observation group were (28.52 \pm 3.73) ng/L, (28.82 \pm 4.13) ng/L, respectively, which were significantly lower than those in the control group [(37.14 \pm 3.62) ng/L, (38.27 \pm 3.47) ng/L, $t = 5.21, 4.89$, all $P < 0.05$]. At the beginning of the operation, the systolic blood pressure, diastolic blood pressure, heart rate of the observation group were (124.53 \pm 3.84) mmHg, (79.32 \pm 4.38) mmHg, (70.45 \pm 5.32) times/min, respectively, which were significantly lower than those of the control group [(145.36 \pm 4.72) mmHg, (93.17 \pm 3.82) mmHg, (86.79 \pm 4.26) times/min], the differences were statistically significant ($t = 5.83, 4.97, 4.58$, all $P < 0.05$). **Conclusion** In the elderly patients undergoing general anesthesia, the use of pumped dexmedetomidine has little effect on the postoperative cognitive function. The mechanism may be related to stabilizing the blood flow dynamics, decrease the high expression of TNF- α , which is worthy of clinical application.

【Key words】 Dexmedetomidine; Elderly; General anesthesia; Cognitive function

慢性阻塞性肺疾病患者血清正五聚蛋白 3 和高敏 C 反应蛋白水平变化及意义

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【摘要】 目的 探讨正五聚蛋白 3 (PTX3) 和高敏 C 反应蛋白 (Hs-CRP) 在慢性阻塞性肺疾病中的水平变化及意义。**方法** 选择慢性阻塞性肺疾病急性加重期患者 70 例作为急性加重期组,慢性阻塞性肺疾病缓解期患者 70 例作为缓解期组,健康体检者 70 例作为对照组,慢性阻塞性肺疾病急性加重期 70 例患者根据肺功能分为轻-中度组 37 例和重-极重度组 33 例。测定患者血清 PTX3、Hs-CRP、白细胞计数 (WBC)、中性粒细胞 (NE) 水平。**结果** 急性加重期组和缓解期组患者血清 PTX3、Hs-CRP、WBC、NE [(0.89 ± 0.38) μg/L、(52.14 ± 4.25) mg/L、(12.13 ± 4.78) × 10⁹/L、(79.68 ± 9.02)% ; (0.47 ± 0.12) μg/L、(10.28 ± 3.42) mg/L、(8.02 ± 3.24) × 10⁹/L、(67.24 ± 8.02)%] 高于对照组 [(0.18 ± 0.04) μg/L、(4.42 ± 2.02) mg/L、(4.97 ± 2.57) × 10⁹/L、(63.38 ± 8.79)%] (*t* = 213.252、245.168、48.647、53.241; 121.426、124.352、21.425、24.352, 均 *P* < 0.05), 急性加重期组患者血清 PTX3、Hs-CRP、WBC、NE 高于缓解期组 (*t* = 89.435、93.214、18.325、16.325, 均 *P* < 0.05)。急性加重期慢性阻塞性肺疾病患者中,轻-中度组和重-极重度组患者血清 PTX3、Hs-CRP、WBC、NE [(0.77 ± 0.32) μg/L、(41.23 ± 3.74) mg/L、(8.24 ± 4.48) × 10⁹/L、(71.54 ± 8.73)% ; (1.13 ± 0.43) μg/L、(59.32 ± 4.65) mg/L、(14.21 ± 5.02) × 10⁹/L、(87.96 ± 9.36)%] 高于对照组 [(0.18 ± 0.04) μg/L、(4.42 ± 2.02) mg/L、(4.97 ± 2.57) × 10⁹/L、(63.38 ± 8.79)%] (*t* = 43.253、314.265、53.241、67.324; 47.315、289.253、46.572、63.241, 均 *P* < 0.05), 重-极重度组患者血清 PTX3、Hs-CRP、WBC、NE 均高于轻-中度组 (*t* = 38.942、267.425、46.537、58.932, 均 *P* < 0.05)。急性加重期慢性阻塞性肺疾病患者血清 PTX3 与 Hs-CRP、WBC、NE 均呈正相关 (*r* = 0.532、0.498、0.697, 均 *P* < 0.05), 血清 Hs-CRP 与 WBC、NE 呈正相关 (*r* = 0.542、0.713, 均 *P* < 0.05)。**结论** 慢性阻塞性肺疾病患者血清 PTX3 和 Hs-CRP 水平升高,血清 PTX3 和 Hs-CRP 水平和疾病严重程度有关。

【关键词】 正五聚蛋白 3; C 反应蛋白; 慢性阻塞性肺疾病

Levels and clinical significance of pentraxin 3 and C - reactive protein in patients with chronic obstructive pulmonary disease

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【Abstract】 Objective To investigate the levels and clinical significance of pentraxin 3 (PTX3) and high sensitive C - reactive protein (Hs - CRP) in patients with chronic obstructive pulmonary disease (COPD). **Methods** Seventy COPD patients at acute exacerbation stage were selected as the acute exacerbation group, 70 COPD patients at disease remission stage were selected as remission group, and 70 healthy subjects were selected as control group. According to pulmonary function, 70 COPD patients at acute exacerbation stage were divided into mild - to - moderate group (37 cases) and severe - to - very severe group (33 cases). The serum levels of PTX3, Hs - CRP, white blood cell count (WBC), neutrophils (NE) were measured. **Results** The serum levels of PTX3, Hs - CRP, WBC and NE of the acute exacerbation group and remission group [(0.89 ± 0.38) μg/L, (52.14 ± 4.25) mg/L, (12.13 ± 4.78) × 10⁹/L, (79.68 ± 9.02)% ; (0.47 ± 0.12) μg/L, (10.28 ± 3.42) mg/L, (8.02 ± 3.24) × 10⁹/L, (67.24 ± 8.02)%] were higher than those of the control group [(0.18 ± 0.04) μg/L, (4.42 ± 2.02) mg/L, (4.97 ± 2.57) × 10⁹/L, (63.38 ± 8.79)%] (*t* = 213.252, 245.168, 48.647, 53.241; 121.426, 124.352, 21.425, 24.352, all *P* < 0.05). The serum levels of PTX3, Hs - CRP, WBC and NE of the acute exacerbation group were higher than those of the remission group (*t* = 89.435, 93.214, 18.325, 16.325, all *P* < 0.05). In COPD patients at acute exacerbation stage, the serum levels of PTX3, Hs - CRP, WBC and NE of the mild - to - moderate group and severe - to - very severe group [(0.77 ± 0.32) μg/L, (41.23 ± 3.74) mg/L, (8.24 ± 4.48) × 10⁹/L, (71.54 ± 8.73)% ; (1.13 ±

0.43) $\mu\text{g/L}$, (59.32 \pm 4.65) mg/L , (14.21 \pm 5.02) $\times 10^9/\text{L}$, (87.96 \pm 9.36)%] were significantly higher than those of the control group [(0.18 \pm 0.04) $\mu\text{g/L}$, (4.42 \pm 2.02) mg/L , (4.97 \pm 2.57) $\times 10^9/\text{L}$, (63.38 \pm 8.79)%] ($t=43.253, 314.265, 53.241, 67.324; 47.315, 289.253, 46.572, 63.241$, all $P < 0.05$). The serum levels of PTX3, Hs-CRP, WBC and NE of the severe - to - very severe group were higher than those of the mild - to - moderate group ($t=38.942, 267.425, 46.537, 58.932$, all $P < 0.05$). There was positive correlation between serum PTX3 and Hs-CRP, WBC, NE in COPD patients at acute exacerbation stage ($r=0.532, 0.498, 0.697$, all $P < 0.05$). The serum Hs-CRP was positively correlated with WBC and NE ($r=0.542, 0.713, P < 0.05$). **Conclusion** Serum levels of PTX3 and Hs-CRP are elevated in patients with COPD. The serum levels of PTX3 and Hs-CRP are associated with disease severity.

【Key words】 Positive pentaglycerin 3; C-reactive protein; Chronic obstructive pulmonary disease

早期连续性肾脏替代治疗联合血液灌流对急性重症胰腺炎患者肺功能及预后的影响

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【摘要】 目的 观察早期连续性肾脏替代治疗(CRRT)联合血液灌流(HP)对急性重症胰腺炎(SAP)患者肺功能及预后的改善作用。**方法** 选取 SAP 患者 62 例为研究对象,采用随机数字表法分为 CRRT 组 31 例、CRRT + HP 组 31 例,比较两组患者治疗后的急性肺损伤/急性呼吸窘迫综合征(ALI/ARDS)发生率、病死率、血氧分压(PaO_2)、氧合指数($\text{PaO}_2/\text{FiO}_2$)及肿瘤坏死因子 α (TNF- α)、白细胞介素 18(IL-18)。**结果** CRRT + HP 组 ALI/ARDS 发生率为 22.58% (7/31)、病死率 6.45% (2/31),CRRT 组分别为 51.61% (16/31)、25.81% (8/31),两组差异均有统计学意义($\chi^2 = 5.599, 4.292$, 均 $P < 0.05$)。治疗后,CRRT + HP 组 PaO_2 、 $\text{PaO}_2/\text{FiO}_2$ 分别为(85.9 ± 7.6) mmHg、(245.8 ± 35.6) mmHg,均高于 CRRT 组的(69.8 ± 9.4) mmHg、(198.6 ± 31.2) mmHg($t = 5.912, 5.314$, 均 $P < 0.05$);CRRT + HP 组 TNF- α 、IL-18 分别为(11.95 ± 0.67) ng/L、(325.87 ± 84.17) ng/L,均低于 CRRT 组的(17.32 ± 0.54) ng/L、(441.08 ± 72.97) ng/L,两组差异均有统计学意义($t = 5.174, 6.771$, 均 $P < 0.05$)。**结论** HP 联合 CRRT 能够改善 SAP 患者的肺功能及预后。

【关键词】 肾替代疗法; 血液灌注; 胰腺炎,急性坏死性; 呼吸功能试验; 预后

Influence of continuous renal replacement therapy combined with hemoperfusion on the pulmonary function and prognosis of patients with severe acute pancreatitis

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【Abstract】 Objective To study the influence of continuous renal replacement therapy (CRRT) combined with hemoperfusion (HP) on the pulmonary function and prognosis of patients with severe acute pancreatitis (SAP).

Methods 62 patients were chosen as study objects, and they were divided into CRRT group (31 cases) and CRRT + HP group (31 cases) according to the digital table. After treatment, the incidence rate of acute liver injury (ALI)/acute respiratory distress syndrome (ARDS), mortality, PaO_2 , $\text{PaO}_2/\text{FiO}_2$, tumor necrosis factor α (TNF- α) and IL-18 levels were compared. **Results** The incidence rate of ALI/ARDS and mortality in the CRRT + HP group were 22.58% (7/31) and 6.45% (2/31), respectively, which in the CRRT group were 51.61% (16/31), 25.81% (8/31), respectively, the differences between the two groups were statistically significant ($\chi^2 = 5.599, 4.292$, all $P < 0.05$). After treatment, the PaO_2 and $\text{PaO}_2/\text{FiO}_2$ of the CRRT + HP group were (85.9 ± 7.6) mmHg and (245.8 ± 35.6) mmHg, respectively, which were higher than those of the CRRT group [(69.8 ± 9.4) mmHg, (198.6 ± 31.2) mmHg] ($t = 5.912, 5.314$, all $P < 0.05$). The TNF- α and IL-18 levels of the CRRT + HP group were (11.95 ± 0.67) ng/L and (325.87 ± 84.17) ng/L, respectively, which were lower than those of the CRRT group [(17.32 ± 0.54) ng/L, (441.08 ± 72.97) ng/L], and the differences were statistically significant ($t = 5.174, 6.771$, all $P < 0.05$).

Conclusion CRRT combined with HP can alleviate pulmonary function and prognosis of patients with SAP.

【Key words】 Renal replacement therapy; Hemoperfusion; Pancreatitis, acute necrotizing; Respiratory function tests; Prognosis

槲皮素纳米脂质体药物的制备及其抗肿瘤作用研究

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【摘要】 目的 制备槲皮素纳米脂质体药物, 并对其表征, 探究槲皮素纳米脂质体药物的体内抗肿瘤作用。方法 以胆固醇和卵磷脂为膜材, 采用薄膜-超声法制备槲皮素纳米脂质体药物。采用透射电镜观察所制备槲皮素纳米脂质体粒径及分散度, 利用马尔文粒度分析仪测定槲皮素纳米脂质体的 Zeta 电位。建立宫颈癌荷瘤小鼠模型, 探究槲皮素纳米脂质体的抗肿瘤作用, 采用尾静脉注射法给小鼠连续注射槲皮素纳米脂质体和原药 15 d。测定肿瘤抑制率、胸(脾)脏指数并对肿瘤组织进行病理学观察。结果 磷脂: 胆固醇: 槲皮素 = 8 : 2 : 1, 水化时间为 15 min, 超声时间为 15 min, 该条件下所制得槲皮素纳米脂质体粒径分布均匀, 电位良好; 槲皮素纳米脂质体的抑瘤率可达 54.16%, 显著高于槲皮素原药处理组 ($\chi^2 = 6.477, P < 0.05$); 病理结果显示, 槲皮素纳米化后对肿瘤的治疗效果显著优于槲皮素原药处理组。结论 槲皮素原药与槲皮素纳米脂质体均可显著抑制肿瘤生长, 且槲皮素纳米化后效果优于槲皮素原药。该研究将为槲皮素纳米脂质体在宫颈癌治疗中的应用提供理论依据和实验基础。

【关键词】 槲皮素; 纳米脂质体; 薄膜-超声法; 抗肿瘤作用

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Preparation and anti-tumor effect of quercetin nano-liposome Gao Liming, Li Jian, Jiang Li, Li Kun, Cao Junli, Zheng Lei, Shi Ming, Cheng Shaohui, Gao Qingzhuang.

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【Abstract】 **Objective** To prepare quercetin liposome and to explore the antitumor effect of quercetin liposome. **Methods** The cholesterol and lecithin were used as membrane materials, quercetin nano liposome was prepared by thin film ultrasound method. The zeta potential and particle size distribution of quercetin liposome were tested by Malvern laser particle size analyzer and transmission electron microscope respectively. In order to explore the anti-tumor effect of quercetin nano-liposome, the mouse model of cervical cancer was established. After tail vein injection of quercetin and quercetin nano-liposome for 15 days, the tumor inhibitory rate, the thymus (spleen) index were analyzed, and the pathology of tumor tissues was further observed. **Results** Under the condition of lecithin: cholesterol: quercetin = 8 : 2 : 1, the hydration time of 15 min and the ultrasonic time of 15 min, the quercetin nano-liposome was prepared, and the particle size distribution was uniform and the potential was -10.8 . The tumor inhibitory rate of quercetin nano-liposome treatment group was 54.16%, which was significantly higher than that of the quercetin treatment group ($\chi^2 = 6.477, P < 0.05$). The pathology results of the tumor tissues showed that nanocrystallization of quercetin could increase the anti-cancer effect of quercetin. **Conclusion** Both quercetin and quercetin nano-liposome exhibit significant effect on the tumor growth, and the inhibitory rate is increased after quercetin was nanocrystallization. Our study will provide theoretical basis for the application of quercetin nano-liposome in the treatment of cervical cancer.

【Key words】 Quercetin; Nano liposome; Thin film ultrasonic method; Antitumor effect

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螺旋 CT 三维薄层重建Ⅲ期矽肺的 CT 表现分析

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【摘要】 **目的** 观察分析Ⅲ期矽肺螺旋 CT 三维薄层重建的 CT 表现。**方法** 选取 60 例Ⅲ期矽肺患者为研究对象,所有患者进行螺旋 CT 扫描,并利用工作站进行图像多平面重建,分析患者螺旋 CT 表现。**结果** 该组患者中,肺部大阴影主要分布于中上肺野,占 93.33% (56/60);大阴影内部征象为钙化、含气支气管征、空洞;大阴影周围伴随征象较为复杂,有邻近胸膜增厚现象患者 40 例,占整体的 66.67% (40/60);并发症中合并结核 15 例,占患者总数的 25.00% (15/60);肺癌 3 例,占患者总数的 5.00% (3/60)。**结论** Ⅲ期矽肺螺旋 CT 三维薄层重建的 CT 表现呈多样化,具有肺部大阴影对称分布、邻近胸膜增厚、胸膜下肺大疱、纵隔及肺门淋巴结钙化等Ⅲ期矽肺的典型特征,可以为Ⅲ期矽肺诊断提供参考依据。

【关键词】 矽肺; 体层摄影术,螺旋计算机; 成像,三维

Analysis of the spiral CT performance of tertiary silicosis by three - dimension thin - slice reconstruction

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【Abstract】 Objective To study the spiral CT performance of tertiary silicosis by three - dimension thin - slice reconstruction. **Methods** Sixty patients with tertiary silicosis were selected in the research. All of the patients were given thin slice scan, and the images of patients with tertiary silicosis were reconstructed by workstation, the spiral CT performance was analyzed. **Results** In all patients, the pulmonary large shadow mainly distributed in the upper middle lung field, accounted for 93.33% (56/60). Big shadow internal signs for calcification, containing air bronchogram, empty. Big shadow around with signs of more complex, with 40 patients with adjacent pleural thickening phenomenon, accounted for 66.67% (40/60). 15 cases complicated with tuberculous, accounted for 25.00% (15/60) of the total number of patients. 3 cases with lung cancer, accounted for 5.00% (3/60) of the total number of patients.

Conclusion The spiral CT performance of tertiary silicosis by three - dimension thin - slice reconstruction is diversified, which included pulmonary large shadows with symmetric distribution, pleural thickening, bullae of lung in subintima, lymph gland swelling and calcification in mediastinum and hilus pulmonis. It can provide reference for the diagnosis of tertiary silicosis.

【Key words】 Silicosis; Tomography, spiral computed; Imaging, three-dimensional

重组人血管内皮抑制素联合顺铂治疗肺癌恶性胸腔积液的临床观察

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【摘要】 目的 探讨重组人血管内皮抑制素联合顺铂治疗肺癌恶性胸腔积液的临床疗效观察。**方法** 选择肺癌恶性胸腔积液患者 100 例, 采用随机数字表法分为观察组和对照组, 每组 50 例。对照组患者采用顺铂 40 mg/m² 单药胸腔灌注给药治疗, 观察组患者在顺铂 40 mg/m² 基础上给予重组人血管内皮抑制素 45 mg 治疗, 两组患者均每周 2 次, 连续治疗 3 周。比较两组患者临床疗效、不良反应、治疗前后免疫功能指标、生活质量改善状况。**结果** (1) 对照组治愈 10 例, 显效 24 例, 有效 12 例, 总有效率 92%, 观察组治愈 4 例, 显效 14 例, 有效 18 例, 总有效率 72%, 两组差异有统计学意义 ($\chi^2 = 9.15, P < 0.05$); (2) 对照组恶心呕吐发生 15 例, 白细胞减少发生 12 例, 中性粒细胞减少发生 11 例, 血小板减少发生 10 例, 观察组恶心呕吐发生 4 例, 白细胞减少发生 14 例, 中性粒细胞减少发生 10 例, 血小板减少发生 14 例, 两组差异无统计学意义 ($\chi^2 = 10.24, P > 0.05$), 但观察组发生不良反应例数少于对照组, 说明观察组安全性高; (3) 对照组和观察组治疗前 CD₄⁺ 细胞分数、CD₈⁺ 细胞分数、CD₄⁺/CD₈⁺ 细胞比值差异均无统计学意义 ($t = 0.03, 0.26, 0.67$, 均 $P > 0.05$), 治疗后观察组 CD₄⁺ 细胞分数及 CD₄⁺/CD₈⁺ 细胞比值均高于对照组, CD₈⁺ 细胞分数低于对照组, 差异有统计学意义 ($t = 11.58, 12.36, 10.84, P < 0.05$); (4) 观察组改善 31 例, 稳定 10 例, 下降 9 例, 对照组改善 25 例, 稳定 12 例, 下降 13 例, 两组差异有统计学意义 ($\chi^2 = 2.30, P < 0.05$)。**结论** 重组人血管内皮抑制素联合顺铂治疗肺癌恶性胸腔积液的临床疗效显著, 能增强患者的免疫功能, 有效改善患者的生活质量, 且安全性好, 不良反应少。

【关键词】 重组人血管内皮抑制素; 顺铂; 肺癌; 胸腔积液; 临床疗效

Clinical observation of recombinant human endostatin combined with cisplatin in the treatment of pleural effusion of lung cancer Chen Xi.

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【Abstract】 Objective To investigate the clinical effect of recombinant human endostatin combined with cisplatin in the treatment of malignant pleural effusion of lung cancer. **Methods** 100 lung cancer patients with malignant pleural effusion were selected and divided into observation group and control group according to the random number table method, with 50 cases in each group. The control group was treated with cisplatin 40mg/m² single - dose pleural perfusion. The observation group was treated with 40mg/m² of cisplatin on the basis of 45mg of recombinant human endostatin. All the patients were treated twice a week, treatment for 3 weeks. The clinical efficacy, adverse reactions, the immune function indicators before and after treatment, quality of life improvement were compared between the two groups. **Results** (1) In the control group, 10 cases were cured, markedly effective in 24 cases, effective in 12 cases, the total effective rate was 92%. In the observation group, 4 cases were cured, markedly effective in 14 cases, effective in 18 cases, the total effective rate was 72%, the difference between the two groups was statistically significant ($\chi^2 = 9.15, P < 0.05$). (2) In the control group, 15 cases occurred nausea and vomiting, 12 cases of leukopenia, 11 cases of neutropenia, 10 cases of thrombocytopenia. In the observation group, 4 cases of nausea and vomiting, 14 cases of leukopenia, 10 cases of neutropenia, 14 cases of thrombocytopenia. There was no statistically significant difference between the two groups ($\chi^2 = 10.24, P > 0.05$), but the number of adverse reactions in the observation group was less than that in the control group, which indicated that the safety of the observation group was high. (3) Before treatment, the CD₄⁺, CD₈⁺ and CD₄⁺/CD₈⁺ between the two groups had no statistically significant differences ($t = 0.03, 0.26, 0.67$, all $P > 0.05$). After treatment, the percentage of CD₄⁺ and CD₄⁺/CD₈⁺ in the

observation group were higher than those in the control group, the percentage of CD₈⁺ in the observation group was lower than that in the control group, the differences were statistically significant ($t = 11.58, 12.36, 10.84$, all $P < 0.05$). (4) In the observation group, improved in 31 cases, stable in 10 cases, decreased in 9 cases. In the control group, improved in 25 cases, stable in 12 cases, decreased in 13 cases. There was in statistically significant difference between the two groups ($\chi^2 = 2.30, P < 0.05$). **Conclusion** Recombinant human endostatin combined with cisplatin in the treatment of pleural effusion of lung cancer is significant, which can enhance the immune function of patients, improve the quality of life of patients, and with good safety, less adverse reactions.

【Key words】 Recombinant human vascular endothelin; Cisplatin; lung cancer; Pleural effusion; Clinical efficacy

序贯透析联合羟乙基淀粉治疗肾病综合征顽固性水肿的疗效分析

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【摘要】 目的 观察序贯透析联合羟乙基淀粉治疗肾病综合征顽固性水肿的疗效。**方法** 将 88 例肾病综合征顽固性水肿患者采用随机数字表法分为对照组($n=44$)和联合组($n=44$)。对照组采用羟乙基淀粉治疗,联合组采用序贯透析联合羟乙基淀粉治疗。比较两组治疗前后 24 h 尿量、24 h 尿蛋白及肾功能指标[血肌酐(Scr)、尿素氮(BUN)]、尿 NAG 酶及尿 KIM-1 及血清 ICAM-1、TNF- α 、IL-6 水平的变化。并评价两组临床疗效。**结果** 观察组临床症状开始改善时间显著短于对照组,平均下降体质量显著大于对照组($t=7.099, 9.279, P<0.05$)。治疗前,联合组 24 h 尿量、24 h 尿蛋白及 Scr、BUN 水平与对照组相比,差异无统计学意义($P>0.05$);与治疗前比较,两组治疗后 24 h 尿量上升($t_{\text{联合组}}=36.266, P<0.05$; $t_{\text{对照组}}=7.906, P<0.05$),而 24 h 尿蛋白、Scr、BUN 水平下降($t_{\text{联合组}}=21.031, 25.629, 26.099$, 均 $P<0.05$; $t_{\text{对照组}}=9.263, 6.544, 5.716$, 均 $P<0.05$),且联合组上述观察指标改善幅度更大($t=28.672, 17.639, 19.057, 16.507$, 均 $P<0.05$)。联合组治疗有效率较对照组更高($\chi^2=8.494, P<0.05$)。与治疗前比较,联合组尿 NAG 酶及尿 KIM-1 显著降低($t_{\text{联合组}}=29.146, 19.256$, 均 $P<0.05$)。而对照组治疗前后尿 NAG 酶及尿 KIM-1 较治疗前差异无统计学意义($P>0.05$)。治疗后,联合组患者血清 ICAM-1、TNF- α 、IL-1 β 水平显著低于治疗前及对照组($t_{\text{联合组}}=15.655, 16.882, 16.091$, 均 $P<0.05$);而对照组治疗前后 ICAM-1、TNF- α 、IL-1 β 水平差异无统计学意义($P>0.05$)。**结论** 采用序贯透析联合羟乙基淀粉治疗肾病综合征顽固性水肿,可明显提高临床疗效,改善患者肾功能,值得进一步推广。

【关键词】 序贯透析; 羟乙基淀粉; 肾病综合征, 顽固性水肿

Efficacy of sequential dialysis combined with hydroxyethyl starch in the treatment of refractory edema of nephrotic syndrome Wang Lixia, Xu Hui.

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【Abstract】 Objective To observe the efficacy of sequential dialysis combined with hydroxyethyl starch in the treatment of patients with refractory edema of nephrotic syndrome. **Methods** Eighty-eight patients with refractory edema of nephrotic syndrome were randomly divided into control group ($n=44$) and combination group ($n=44$) according to the digital table. The control group was treated with hydroxyethyl starch, and the combination group was treated with sequential dialysis combined with hydroxyethyl starch. The levels of urinary NAG, urinary KIM-1 and serum ICAM-1, TNF- α , IL-6 were compared. And the clinical efficacy of the two groups was evaluated. **Results** The improvement time of clinical symptoms in the observation group was significantly shorter than that in the control group, and the average weight loss of the observation group was significantly higher than that of the control group ($t=7.099, 9.279$, all $P<0.05$). Before treatment, the 24h urine, 24h urine protein, Scr and BUN between the two groups had no statistically significant differences (all $P>0.05$). Compared with before treatment, 24h urine of the two groups after treatment was increased ($t_{\text{combination group}}=36.266, P<0.05$; $t_{\text{control group}}=7.906, P<0.05$), and the 24h urine protein, Scr and BUN levels of two groups were decreased after treatment ($t_{\text{combination group}}=21.031, 25.629, 26.099, P<0.05$; $t_{\text{control group}}=9.263, 6.544, 5.716$, all $P<0.05$), and the improvement of the above indicators of the combination group was more significant ($t=28.672, 17.639, 19.057, 16.507$, all $P<0.05$). The effective rate of the combination group was higher than that of the control group ($\chi^2=8.494, P<0.05$). Compared with before treatment, the urinary NAG enzyme and urinary KIM-1 of the combination group were statistically significantly decreased ($t_{\text{combination group}}=29.146, 19.256$, all $P<0.05$). There were no statistically significant differences in urinary NAG and urinary KIM-1 between before treatment and after treatment in the control group (all $P>0.05$). After treatment, the serum levels of ICAM-1, TNF- α and IL-1 β in the combination group were significantly lower than those before treatment and those in the control group ($t_{\text{combination group}}=15.655, 16.882, 16.091$, all $P<0.05$), while there were no statistically significant differences in the serum levels of ICAM-1, TNF- α and IL-1 β between before treatment and after treatment in the control group (all $P>0.05$). **Conclusion** Sequential dialysis combined with hydroxyethyl starch in the treatment of refractory edema of nephrotic syndrome can improve the clinical curative effect and improve the renal function of patients. It is worthy to be further promoted.

【Key words】 Sequential dialysis; Hydroxyethyl starch; Nephrotic syndrome, refractory edema

阿司匹林联合氯吡格雷治疗短暂性脑缺血发作的疗效及对凝血功能的影响

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【摘要】 目的 探讨阿司匹林联合氯吡格雷治疗短暂性脑缺血发作(TIA)的疗效以及对凝血功能的影响。**方法** 选取 TIA 患者 96 例为研究对象,采用随机数字表法将患者分为对照组、观察组,每组 48 例。对照组予阿司匹林治疗,观察组予阿司匹林联合氯吡格雷治疗。比较两组治疗效果、治疗前后凝血指标变化以及不良反应发生情况。**结果** 观察组有效率为 91.67% (44/48),高于对照组的 68.75% (33/48) ($\chi^2 = 7.941$, $P < 0.05$)。治疗后,观察组、对照组纤维蛋白原(FIB)分别为(2.07 ± 0.32)g/L、(2.91 ± 0.31)g/L,均显著低于治疗前的(3.28 ± 0.41)g/L、(3.26 ± 0.39)g/L ($t_{\text{观察组}} = 5.546$, $t_{\text{对照组}} = 4.258$, $P < 0.05$),且观察组低于对照组 ($t = 11.481$, $P < 0.05$);治疗后,观察组、对照组凝血酶原时间(PT)、活化部分凝血活酶时间(APTT)分别为(15.04 ± 1.81)s、(36.98 ± 4.35)s 和(12.04 ± 1.68)s、(30.68 ± 4.46)s,显著长于治疗前的(9.68 ± 1.59)s、(9.71 ± 1.61)s 和(25.21 ± 4.48)s、(25.34 ± 4.36)s ($t_{\text{观察组}} = 6.994$, 6.425 , $t_{\text{对照组}} = 5.658$, 5.987 , $P < 0.05$),且观察组均长于对照组 ($t = 7.941$, 6.874 , 均 $P < 0.05$)。观察组不良反应发生率为 4.17% (2/48),对照组为 6.25% (3/48),两组差异无统计学意义 ($\chi^2 = 0.694$, $P > 0.05$)。**结论** 阿司匹林联合氯吡格雷治疗 TIA 疗效优于单独阿司匹林,且能够改善患者凝血功能,具有较高的安全性。

【关键词】 阿司匹林; 氯吡格雷; 脑缺血发作,短暂性; 纤维蛋白原; 凝血酶原时间; 活化部分凝血活酶时间

Effect of aspirin combined with clopidogrel in the treatment of transient ischemic attack and its influence on coagulation function Zhang Bin.

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【Abstract】 Objective To investigate the effect of aspirin combined with clopidogrel in the treatment of transient ischemic attack (TIA), and its influence on blood coagulation. **Methods** Ninety - six patients with TIA were selected and divided into observation group and control group by random number table method, with 48 cases in each group. The control group was treated with aspirin, and the observation group was treated with aspirin and clopidogrel. The treatment effect, coagulation index changes and adverse reactions were compared between the two groups. **Results** The effective rate of the observation group was 91.67% (44/48), which was higher than 68.75% (33/48) of the control group ($\chi^2 = 7.941$, $P < 0.05$). After treatment, the fibrinogen (FIB) levels in the observation group and the control group were (2.07 ± 0.32) g/L and (2.91 ± 0.31) g/L, respectively, which were significantly lower than before treatment [(3.28 ± 0.41) g/L, (3.26 ± 0.39) g/L] ($t_{\text{observation group}} = 5.546$, $t_{\text{control group}} = 4.258$, all $P < 0.05$), and FIB level of the observation group was lower than that of the control group ($t = 11.481$, $P < 0.05$). After treatment, the prothrombin time (PT) and activated partial thromboplastin time (APTT) in the observation group and the control group were (15.04 ± 1.81)s, (36.98 ± 4.35)s and (12.04 ± 1.68)s, (30.68 ± 4.46)s, respectively, which were significantly longer than before treatment [(9.68 ± 1.59)s, (9.71 ± 1.61)s and (25.21 ± 4.48)s, (25.34 ± 4.36)s] ($t_{\text{observation group}} = 6.994$, 6.425 , $t_{\text{control group}} = 5.658$, 5.987 , all $P < 0.05$), and PT and APTT of the observation group were longer than those of the control group ($t = 7.941$, 6.874 , all $P < 0.05$). The incidence rate of adverse reactions in the observation group was 4.17% (2/48), which in the control group was 6.25% (3/48), there was no statistically significant difference between the two groups ($\chi^2 = 0.694$, $P > 0.05$). **Conclusion** The curative effect of aspirin combined with clopidogrel is superior to aspirin alone in the treatment of TIA, and it can improve the coagulation function of patients, which has high security.

【Key words】 Aspirin; Clopidogrel; Ischemic attack, transient; Fibrinogen; Prothrombin time; Activated partial thromboplastin time

腹腔镜胆囊切除术中不同气腹压力对患者肝肾功能及呼吸功能的影响

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【摘要】 **目的** 探析腹腔镜胆囊切除术中不同气腹压力对患者肝肾及呼吸功能的影响。**方法** 收集行腹腔镜下胆囊切除术的患者 240 例,按数字表法随机分为低气压组($n=120$),高气压组($n=120$)。分别于术前 1 d、术后第 1 d、术后第 3 d 监测肝、呼吸功能相关指标包括:丙氨酸氨基转移酶(ALT)、谷草转氨酶(AST)、总胆红素(TBIL)、间接胆红素(IBIL)、直接胆红素(DBIL)、白蛋白(A)、球蛋白(G)、总蛋白(TP)、乳酸脱氢酶(LDH)、碱性磷酸酶(ALP)、谷氨酰转氨酶(GGT)、尿素氮(BUN)、血清肌酐(Scr)、 β_2 -微球蛋白(β_2 -MG)含量、深吸气量(IC)、用力肺活量(FVC)、第 1 秒用力呼吸容积(FEV_1)、最大呼气流速(PEF)、肺活量(VC)、最大通气量(MVV)、最大呼吸中段流速($FEF_{25\% \sim 75\%}$)水平;术前 10 min、术中第 1 小时、术后第 1 天监测肾功能相关指标,并分别进行比较。**结果** 肝功能指标:在术前 1 d,高压组与低压组 ALT、AST、TBIL 等肝功能指标均在参考值范围内,组间差异均无统计学意义(均 $P>0.05$);在术后第 1 天,高压组与低压组的 ALT、AST、TBIL、LDH 指标均较术前增高($t=4.132, P=0.023; t=4.231, P=0.021; t=3.615, P=0.043; t=4.561, P=0.331; t=4.645, P=0.014; t=4.793, P=0.012; t=4.135, P=0.025; t=4.561, P=0.037$),且高压组在 ALT、AST、TBIL、IBIL、A、LDH、GGT 指标上较低压组增高明显($t=3.429, P=0.045; t=3.656, P=0.041; t=3.144, P=0.043; t=4.014, P=0.041; t=2.947, P=0.032; t=3.415, P=0.039; t=2.893, P=0.029$);在术后第 3 天,高压组与低压组的 TBIL、DBIL、LDH、GGT 等各项指标与术前接近,基本上恢复正常($t=1.342, P=0.037; t=1.275, P=0.039; t=1.893, P=0.028; t=1.413, P=0.032; t=1.348, P=0.035; t=1.289, P=0.037; t=1.899, P=0.026; t=1.453, P=0.024$),且高压组在 ALT、AST、IBIL、LDH 指标上仍较低压组明显增高($t=4.132, P=0.036; t=4.653, P=0.029; t=3.567, P=0.038; t=4.112, P=0.031$)。呼吸功能指标:两组患者在不同气腹压力下,术前 1 d 呼吸功能指标均在参考值范围内,差异无统计学意义;术后第 1 天及术后第 3 天,与低压组相比差异均有统计学意义($t=1.786, P=0.017; t=1.823, P=0.014; t=1.463, P=0.012; t=1.855, P=0.011; t=1.931, P=0.018; t=1.991, P=0.013; t=2.314, P=0.019; t=1.427, P=0.021; t=1.721, P=0.019; t=1.854, P=0.018; t=1.775, P=0.023; t=1.764, P=0.022; t=1.938, P=0.019; t=1.897, P=0.020$)。肾功能指标:两组在术前 10 min、术中第 1 小时、术后第 1 天的 BUN、Scr、 β_2 -MG 水平差异均无统计学意义(均 $P>0.05$);BUN 的水平在围手术期变化无统计学意义($P>0.05$);高压组及低压组 Scr、 β_2 -MG 在术中第 1 小时、术后第 1 天均较术前 10 min 有明显升高($t=1.912, P=0.017, t=1.867, P=0.021; t=1.862, P=0.020, t=1.752, P=0.032; t=1.378, P=0.029, t=1.419, P=0.026; t=1.568, P=0.023, t=1.927, P=0.019$)。**结论** 二氧化碳(CO_2)气腹对患者的肝功能有一过性损害,适当降低气腹压力有利于患者肝功能的保护; CO_2 气腹会产生可逆性的肾损害,并且降低气腹压力对肾功能的改善无多大影响; CO_2 气腹压力较高时对患者呼吸功能影响较大,术中应密切监测患者呼吸功能。

【关键词】 气腹; 腹腔镜; 呼吸功能

Effects of different pneumoperitoneum pressure on liver, kidney and respiratory function during laparoscopic cholecystectomy Chen Hua.

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【Abstract】 Objective To investigate the effects of different pneumoperitoneum pressure on liver, kidney and respiratory function during laparoscopic cholecystectomy. **Methods** 240 patients who received laparoscopic cholecystectomy, were selected. They were divided into low pressure group ($n=120$) and high pressure group ($n=120$). The indicators of liver and respiratory function (ALT, AST, TBIL, IBIL, DBIL, A, G, TP, LDH, ALP, GGT, BUN,

Scr, β_2 -MG, IC, FVC, FEV₁, PEF, VC, MVV, FEF25% ~75%) were monitored on the 1st day before operation and on the 1st, 3rd day after operation. The indicators of kidney function were monitored at preoperative 10min, intraoperative 1h and postoperative 1 day. **Results** Liver function index: on the preoperative 1 day, the ALT, AST, TBIL were in the reference range, there were no statistically significant differences between the high pressure group and low pressure group (all $P > 0.05$). On the 1st day after operation, the AST, TBIL, ALT and LDH index in the two groups were increased ($t = 4.132, P = 0.023; t = 4.231, P = 0.021; t = 3.615, P = 0.043; t = 4.561, P = 0.331$) ($t = 4.645, P = 0.014; t = 4.793, P = 0.012; t = 4.135, P = 0.025; t = 4.561, P = 0.037$), and the ALT, AST, TBIL, IBIL, A, LDH, GGT in the high pressure group were higher than those in the low pressure group ($t = 3.429, P = 0.045; t = 3.656, P = 0.041; t = 3.144, P = 0.043; t = 4.014, P = 0.041; t = 2.947, P = 0.032; t = 3.415, P = 0.039; t = 2.893, P = 0.029$). On the 3rd day after operation, the TBIL, DBIL, LDH, GGT index in the two groups were closed to the normal value ($t = 1.342, P = 0.037; t = 1.275, P = 0.039; t = 1.893, P = 0.028; t = 1.413, P = 0.032; t = 1.348, P = 0.035; t = 1.289, P = 0.037; t = 1.899, P = 0.026; t = 1.453, P = 0.024$), and the ALT, AST, IBIL, LDH of the high pressure group were significantly higher than those of the low pressure group ($t = 4.132, P = 0.036; t = 4.653, P = 0.029; t = 3.567, P = 0.038; t = 4.112, P = 0.031$). Respiratory function index: at preoperative 1 day, the respiratory function indicators of the two groups were within the reference range, the differences between the two groups were not statistically significant (all $P > 0.05$). On the 1st and 3rd after operation, those indicators had statistically significant differences between the two groups ($t = 1.786, P = 0.017; t = 1.823, P = 0.014; t = 1.463, P = 0.012; t = 1.855, P = 0.011; t = 1.931, P = 0.018; t = 1.991, P = 0.013; t = 2.314, P = 0.019; t = 1.427, P = 0.021; t = 1.721, P = 0.019; t = 1.854, P = 0.018; t = 1.775, P = 0.023; t = 1.764, P = 0.022; t = 1.938, P = 0.019; t = 1.897, P = 0.020$). Renal function index: at preoperative 10 min, intraoperative 1 h, and the 1st day after operation, the BUN, Scr and β_2 -MG levels had no statistically significant differences between the two groups (all $P > 0.05$). The level of BUN had no obvious change in the perioperative period ($P > 0.05$). The Scr, β_2 -MG in the two groups were significantly increased at intraoperative 1 h and the 1st day after operation compared with preoperative 10min ($t = 1.912, P = 0.017, t = 1.867, P = 0.021; t = 1.862, P = 0.020, t = 1.752, P = 0.032; t = 1.378, P = 0.029, t = 1.419, P = 0.026; t = 1.568, P = 0.023, t = 1.927, P = 0.019$). **Conclusion** CO₂ pneumoperitoneum has transient damage to the patients' liver function, and lower pneumoperitoneum pressure is useful to the protection of liver function; CO₂ pneumoperitoneum can lead to reversible kidney damage and reducing the pneumoperitoneum pressure has little effect on renal function; higher CO₂ pneumoperitoneum pressure should influence respiratory function, therefore respiratory function should be closely monitored.

【Key words】 Pneumoperitoneum; Laparoscope; Respiratory function

采用人工种植牙修复牙列缺损或缺失的应用效果

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【摘要】 **目的** 探讨采用人工种植牙对牙列缺损或缺失进行修复的临床效果。**方法** 选取牙列缺损或缺失行修复治疗患者 94 例,按照修复方式的不同将其分为观察组和对照组各 47 例,观察组患者采用人工种植牙进行修复,对照组患者则行传统义齿修复,对两组患者的修复效果及其修复后口腔功能进行评估分析。**结果** 观察组总治疗有效率(91.49%)明显高于对照组(72.34%),两组差异有统计学意义($\chi^2 = 5.817, P = 0.016$);观察组患者牙列修复的舒适程度[(18.7 ± 2.6)分]、咀嚼功能[(19.0 ± 2.1)分]、美观程度[(18.9 ± 2.2)分]、固位功能[(18.4 ± 3.2)分]、语言功能[(18.5 ± 2.7)分]满意度评分均明显高于对照组[(15.2 ± 2.7)分、(14.8 ± 2.4)分、(16.7 ± 1.9)分、(14.9 ± 2.8)分、(16.3 ± 2.1)分],差异均有统计学意义($t_{\text{舒适程度}} = 6.401, P = 0.000; t_{\text{咀嚼功能}} = 9.029, P = 0.000; t_{\text{美观程度}} = 5.189, P = 0.000; t_{\text{固位功能}} = 5.643, P = 0.000; t_{\text{语言功能}} = 4.409, P = 0.000$);观察组患者随访期间桩核脱落(6.38%)、刺激痛发生率(0.00%)均明显低于对照组(23.40%、14.89%),差异均有统计学意义($\chi^2_{\text{桩核脱落}} = 5.371, P = 0.020; \chi^2_{\text{刺激痛}} = 7.563, P = 0.006$)。**结论** 采用人工种植牙对牙列缺损或缺失进行修复,可实现满意的固定效果和美观效果,可有效促进患者口腔咀嚼功能和舒适度的改善,对于提高患者生活质量具有十分积极的意义,建议在临床推广应用。

【关键词】 人工种植牙; 牙列缺损; 修复效果

Application effect of artificial dental implant in repair of dentition defect or deletion Dong Bin, Zhang Bing.
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远眺、护眼操对小学生视力影响的调查分析

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【摘要】 **目的** 调查 2015 年北京市某小学部学生视力与远眺和护眼操的关系,为预防学生近视工作提供科学依据。**方法** 采用整体随机抽样方法抽取北京市某小学部四、五年级学生进行问卷调查,对照本学身体格检查中视力检查结果进行因果分析。**结果** 调查 266 人,仅有远眺习惯学生的近视率为 52.5%;仅认真做护眼操的学生的近视率为 51.3%;有远眺习惯且做护眼操认真学生的近视率为 5.3%;无远眺习惯且不认真做护眼操学生的近视率为 52.7%。**结论** 培养学生的远眺习惯,做好护眼操对预防学生近视有极大帮助。

【关键词】 学生; 远眺; 护眼操; 视力

Analysis of the effect of overlooking and eye exercise on visual acuity of students Shu Chenzhuo.

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急性自身免疫性溶血性贫血伴双侧足背动脉血栓性闭塞一例

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患者,男,50岁。因“乏力、纳差1月,加重1周,双足肿痛2d”入院。该患者于2015年12月1日无诱因出现乏力、纳差,无发热、骨痛、鼻衄、牙龈渗血、黑便、腹痛、腹泻等症状,患者未予重视。病情逐渐加重,于2016年1月1日出现双足肿痛,并进行性加重,无法行走,自觉双足痛温觉消失,双足背冰凉。查体:重度贫血貌,颈静脉怒张,皮肤巩膜黄

染,心尖搏动位于第五肋间左锁骨中线外1cm,搏动范围弥散,心相对浊音界向两侧扩大以左侧扩大为著。双下肢水肿,双侧足背趾端皮肤可见散在分布的瘀斑,双足背动脉未触及搏动,足背皮肤温度低,双足痛温觉消失。双侧股动脉搏动正常。

Acute autoimmune hemolytic anemia complicated with double dorsal artery of foot thrombosis occlusion: a case report Guo Jing, Wu Tao, Mao Dongfeng, Bai Hai, Wang Cunbang.

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健康教育路径预防高压氧治疗中耳气压伤的效果观察

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【摘要】 **目的** 探讨健康教育路径预防高压氧治疗患者中耳气压伤的效果。**方法** 选取高压氧治疗患者 100 例,采用随机数字表法将患者分成观察组和对照组,每组 50 例,对照组采用常规健康教育方式,观察者采用健康教育路径方式,比较分析两组患者的临床效果。**结果** 观察组患者在中耳气压伤发生率(4.0%)和临床护理满意度(98.0%)均优于对照组(22.%,70.0%),两组患者在临床效果方面相比,差异均有统计学意义($\chi^2 = 15.425, 9.842$,均 $P < 0.05$)。**结论** 健康教育路径不但能够促进高压氧治疗的顺利进行,而且能够预防与减少中耳气压伤的发生率,同时提升患者对治疗的满意度,因此健康教育路径属于一种值得广泛推广的治疗方法。

【关键词】 健康教育路径; 预防; 高压氧; 中耳气压伤

Effect of health education pathway in the prevention of ear pressure injury during hyperbaric oxygen therapy

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围术期疼痛规范化管理对手足外伤术后疼痛的影响

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【摘要】 目的 探讨以护士为主体的疼痛规范化管理模式对手足创伤围术期患者疼痛管理的效果。**方法** 选择需要急诊手术的骨折及肢体离断伤患者 149 例, 根据病情不同, 按单、双号分为两组。对照组 73 例采用常规方法进行疼痛干预, 观察组 76 例采用以护士为主体的疼痛规范化管理模式进行干预, 术后静息痛应用疼痛数字评价量表(NRS)评定, 活动痛应用功能活动评分法(FAS)评定。**结果** 比较两组患者 6 h、12 h、24 h、48 h、72 h NRS 和 FAS 评分值, 以及 24 h 睡眠时间。观察组 6 h、12 h、24 h、48 h、72 h NRS 评分分别为(3.28 ± 1.15)分、(2.66 ± 0.62)分、(2.61 ± 0.73)分、(3.12 ± 1.50)分、(1.47 ± 0.72)分, 对照组为(3.90 ± 1.46)分、(3.49 ± 1.42)分、(3.26 ± 1.55)分、(3.78 ± 1.69)分、(1.73 ± 0.69)分, 两组差异均有统计学意义($t = -2.917、-4.693、-3.327、-2.533、-2.178$, 均 $P < 0.05$); 观察组 6h、12 h、24 h、48 h、72 h FAS 评分分别为(1.64 ± 0.67)分、(1.72 ± 0.45)分、(1.68 ± 0.47)分、(1.91 ± 0.70)分、(0.88 ± 0.43)分, 对照组为(1.88 ± 0.69)分、(2.00 ± 0.67)分、(1.97 ± 0.53)分、(2.15 ± 0.66)分、(1.04 ± 0.54)分, 两组差异均有统计学意义($t = -2.092、-2.976、-3.538、-2.183、-2.000$, 均 $P < 0.05$)。观察组患者 24 h、48 h、72 h 睡眠时间分别为(7.46 ± 1.19)h、(6.51 ± 1.40)h、(8.15 ± 1.36)h, 对照组为(6.8 ± 1.45)h、(5.78 ± 1.73)h、(7.68 ± 1.34)h, 差异均有统计学意义($t = 3.035、2.821、2.109$, 均 $P < 0.05$)。**结论** 以护士为主体的疼痛规范化管理可以明显缓解急性手足创伤患者的围术期疼痛, 提高患者的夜间睡眠质量, 值得临床推广。

【关键词】 疼痛管理; 护士; 手足外科; 围术期

Effect of standardized management of perioperative pain management on postoperative pain in patients undergoing hand and foot surgery Li Weiwei, Zhang Donghong.

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针对性护理在人工肝血浆置换治疗 重型肝炎患者中的应用效果

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【摘要】 目的 探讨针对性护理干预对人工肝血浆置换治疗重型肝炎患者的影响。**方法** 将 65 例接受人工肝血浆置换治疗的重型肝炎患者采用随机数字表法分为观察组(33 例)和对照组(32 例),对照组仅进行常规护理,观察组采取针对性护理。**结果** 观察组发生不良反应(出血,低血钙,低血压和过敏反应)明显少于对照组[2 例(6.1%)比 6 例(18.8%),5 例(15.2%)比 21 例(65.6%),10 例(30.3%)比 19 例(59.4%),3 例(9.1%)比 9 例(28.1%)],差异均有统计学意义($\chi^2 = 10.186, P = 0.000$; $\chi^2 = 19.714, P = 0.000$; $\chi^2 = 12.253, P = 0.000$; $\chi^2 = 11.712, P = 0.000$);观察组总满意度明显高于对照组[31 例(93.9%)比 21 例(65.6%), $\chi^2 = 8.875, P = 0.010$]。**结论** 对接受人工肝血浆置换治疗的重型肝炎患者,采取并发症预防措施和针对性的临床护理,明显降低患者相关并发症发生率,提高患者满意度。

【关键词】 血浆置换; 肝,人工; 肝炎; 护理

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Application effect of targeted nursing in plasma exchange therapy for patients with severe hepatitis by artificial liver support system Zhang Wendi.

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机械通气患者发生呼吸机相关性肺炎的原因分析

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【摘要】 **目的** 探讨重症医学科(ICU)患者发生呼吸机相关性肺炎(VAP)的原因,提出针对性的对策。**方法** 选取机械通气患者 80 例为研究对象。根据患者是否出现 VAP 将其分为 VAP 组(38 例)和非 VAP 组(42 例)。对两组患者相关临床资料进行回顾性分析,分析指标:患者年龄、机械通气时间、住院时间和血清白蛋白含量比较;两组患者临床治疗情况比较,包括静脉穿刺插管、意识障碍、留置胃管、H₂受体拮抗以及抗生素联合使用。**结果** 80 例患者发生 VAP 38 例(47.5%);VAP 组患者年龄(65.94 ± 5.86)岁,大于非 VAP 组(51.42 ± 4.73)岁,差异有统计学意义($t = 8.64, P < 0.05$);VAP 组使用呼吸机时间(8.86 ± 3.82)d 及住院时间(28.09 ± 7.42)d,均显著长于非 VAP 组的(3.23 ± 1.45)d、(9.32 ± 6.15)d($t = 4.23, 15.49$,均 $P < 0.05$);VAP 组血清白蛋白含量(25.15 ± 3.69)g/L,显著低于非 VAP 组的(34.64 ± 2.78)g/L($t = 12.56, P < 0.05$);VAP 组发生静脉穿刺插管 21 例(55.26%)、意识障碍 17 例(44.74%)、留置胃管 23 例(60.53%)、H₂受体拮抗使用 25 例(65.79%)、抗生素联合使用 28 例(73.68%),非 VAP 组发生静脉穿刺插管 10 例(23.81%)、意识障碍 11 例(26.19%)、留置胃管 12 例(28.57%)、H₂受体拮抗使用 14 例(33.33%)、抗生素联合使用 17 例(40.48%),两组差异均有统计学意义($\chi^2 = 7.89, 5.16, 4.82, 7.94, 10.43$,均 $P < 0.05$)。**结论** VAP 发生的相关因素复杂,主要与较长机械通气时间、静脉穿刺置管及意识障碍等有关,医护人员需要根据相关因素加强针对性的预防护理对策,保证患者的临床疗效及预后,提高生活质量。

【关键词】 重症医学科; 呼吸机; 肺炎; 原因; 对策

Analysis of the causes of ventilator – associated pneumonia in patients with mechanical ventilation Xu Wenli.
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人文关怀联合临床护理路径在护理管理模式中的应用

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【摘要】 **目的** 探讨人文关怀联合临床护理路径在护理管理模式中的应用价值。**方法** 选择浙江大学医学院附属二院建德分院 2015 年 2 月至 2016 年 12 月骨科收治拟行骨折内固定术患者 160 例,采用随机数字表法分为观察组和对照组,各 80 例,同时随机配备两组护理人员 36,每组 18 人。两组患者均由同一组医护人员完成手术。对照组患者给予临床护理路径护理方式,观察组患者在此基础上联合人文关怀,并对观察组护理人员给予人文关怀。于管理前后对两组护理人员对骨折类疾病的理论相关知识掌握情况及专业操作技能熟练程度进行考核,观察两组患者术后恢复情况评价包括平均住院时间、术后伤口感染、院内感染及静脉血栓等并发症发生率。观察两组护理工作人员的护理工作质量,包括整体护理工作、病房管理、基础护理工作、健康知识普及工作、护理病历书写、护理差错缺陷等,观察两组患者对护理人员的满意度。**结果** 两组护理人员经管理后理论相关知识及专业操作技能考核平均均较管理前提高, ($t = 9.55, P = 0.00; t = 12.64, P = 0.00; t = 11.70, P = 0.00; t = 12.62, P = 0.00$), 观察组护理人员理论相关知识考核评分高于对照组, ($t = 2.87, P = 0.004$)。两组患者术后总不良事件发生率相当,差异无统计学意义 ($\chi^2 = 0.08, P = 0.77$), 但观察组患者平均住院时间短于对照组患者 ($t = 1.83, P = 0.03$); 观察组护理人员整体护理工作、病房管理、基础护理工作、健康知识普及、护理病历书写、护理差错缺陷等各方面评分均高于对照组,其中在整体护理工作、病房管理、健康知识普及、护理差错缺陷评分方面与对照组护理人员相比差异显著 ($t = 1.35, P = 0.09; t = 2.97, P = 0.00; t = 3.27, P = 0.00; t = 2.76, P = 0.01$); 观察组患者总满意度为 100.00%, 显著高于对照组患者的 87.50%, ($\chi^2 = 10.67, P = 0.001$)。**结论** 人文关怀联合临床护理路径不仅可以提高护理人员护理工作质量,缩短患者平均住院时间,还能显著提高患者对护理服务满意度,因此值得临床推广应用。

【关键词】 临床护理路径; 人文关怀; 护理管理; 护理满意度

Application of humanistic care combined with clinical nursing pathway in nursing management mode

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小儿脑性瘫痪的中西医治疗进展

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【摘要】 小儿脑瘫是由于发育中胎儿或婴幼儿脑的非进行性损伤所致的以持续性运动和姿势发育异常,也是造成小儿残疾的常见疾患之一。迄今脑瘫尚无特效的治疗方法,而是以康复治疗为主,临床上分为传统中医康复疗法和现代西医康复疗法,现就脑性瘫痪的中西医治疗做一综述。

【关键词】 脑性瘫痪; 中西医治疗; 综述

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Progress in the treatment of infantile cerebral palsy with traditional Chinese and western medicine

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【Abstract】 Cerebral palsy is due to the development of the fetus or infant brain damage caused by non progressive, and the performance of continuous movement and postural abnormalities, which is one of the most common causes of disability in children. So far there is no specific treatment for cerebral palsy, mainly rehabilitation, which divided into traditional Chinese medicine rehabilitation therapy and modern western medicine rehabilitation therapy. This article reviews the research progress of traditional Chinese medicine and western medicine in the treatment of cerebral palsy.

【Key words】 Cerebral palsy; Traditional Chinese medicine and western medicine; Overview

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慢性扁桃体炎的中医外治法研究

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030013 山西省太原,山西省中西医结合医院耳鼻喉科(梁毫)

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【摘要】 慢性扁桃体炎是临床耳鼻喉科较为常见的疾病,在中医学称为“慢乳蛾”,中医学治疗慢性扁桃体炎除口服药物治疗外,外治方法疗效更为显著,本研究为探讨中医外治法在治疗慢性扁桃体炎中的作用机制及疗效,研究总结了近年来中医外治法治疗慢性扁桃体炎临床研究进展。

【关键词】 扁桃体炎; 医学,中国传统

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【Abstract】 Chronic tonsillitis is a high frequency disease. Chronic tonsillitis is called “Chronic Ru e” in traditional Chinese medicine (TCM), In addition to oral medicine treatment, the effect of external treatment for chronic tonsillitis is more significant. This article summarizes the clinical research progress of TCM external therapy in the treatment of chronic tonsillitis in recent years.

【Key words】 Tonsillitis; Medicine, Chinese traditional