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改良负压封闭引流技术在眼镜蛇咬伤 早期溃疡治疗中的应用研究

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【摘要】 目的 观察改良负压封闭引流(VSD)技术在眼镜蛇咬伤早期溃疡患者治疗中的临床效果。**方法** 选择眼镜蛇咬伤出现早期溃疡患者 60 例为研究对象,采用随机数字表法分为两组。观察组 30 例,采用 VSD 技术结合糜蛋白酶持续冲洗治疗;对照组 30 例,采用常规换药加压包扎方法治疗。观察两组患者达到二期植皮时间、创面愈合时间、并发症、致残率、住院时间、C 反应蛋白(CRP)水平变化,比较治疗效果。**结果** 观察组并发症、致残发生率分别为 0.00%、3.33%,均明显低于对照组的 16.67%、26.67%,两组差异均有统计学意义($\chi^2=4.356,6.405$,均 $P<0.05$)。观察组 3 d、7 d 时 CRP 分别为 (15.8 ± 1.7) mg/L、 (6.9 ± 1.6) mg/L,对照组分别为 (18.6 ± 2.3) mg/L、 (13.8 ± 1.9) mg/L,两组差异均有统计学意义($t=5.362,15.214$,均 $P<0.01$);观察组二期植皮、创面愈合、住院时间分别为 (9.5 ± 1.8) d、 (24.0 ± 1.8) d、 (25.3 ± 1.9) d,均明显短于对照组的 (16.2 ± 2.6) d、 (32.0 ± 3.2) d、 (33.2 ± 3.7) d,差异均有统计学意义($t=11.604,11.934,10.403$,均 $P<0.01$)。**结论** 对于眼镜蛇咬伤早期溃疡患者,采用 VSD 技术联合糜蛋白酶持续冲洗,可明显降低 CRP 水平、并发症与致残率,缩短二期植皮时间、创面愈合时间、住院时间,是一种减轻患者痛苦,加速康复的较好治疗方法。

【关键词】 蛇咬伤; 溃疡; 引流术; 糜蛋白酶

基金项目: 广西壮族自治区医药卫生自筹经费计划课题项目(Z2014508)

Application of modified negative pressure closed drainage technique in early treatment of cobra bite ulcer

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【Abstract】 Objective To investigate the application of modified negative pressure closure drainage in early stage of snakebite. **Methods** 60 patients with early bite ulcer were selected as study objects, and they were randomly divided into two groups according to the digital table. 30 patients in the observation group received vacuum sealing drainage(VSD) combined with chymotrypsin continuous rinsing treatment. 30 patients in the control group were given conventional dressing bandaging treatment. The two stage skin grafting time, wound healing time, complications, disability rate, hospitalization time and C reactive protein(CRP) levels of the two groups were observed. And the treatment effect was analyzed. **Results** The incidence rates of complications and disability in the observation group were 0.00% and 3.33%, respectively, which were significantly lower than 16.67% and 26.67% in the control group, and the differences between the two groups were statistically significant($\chi^2=4.356,6.405$, all $P<0.05$). The CRP levels of 3 d and 7 d in the observation group were (15.8 ± 1.7) mg/L, (6.9 ± 1.6) mg/L, respectively, which in the control group were (18.6 ± 2.3) mg/L, (13.8 ± 1.9) mg/L, respectively, there were statistically significant differences between two groups($t=5.362,15.214$, all $P<0.01$). The two stage skin grafting, wound healing, hospital stay of the observation group were (9.5 ± 1.8) d, (24 ± 1.8) d, (25.3 ± 1.9) d, respectively, which were significantly shorter than those of the control group [(16.2 ± 2.6) d, (32.0 ± 3.2) d, (33.2 ± 3.7) d], the differences were statistically significant($t=11.604,11.934,10.403$, all $P<0.01$). **Conclusion** For patients with injury of cobra bite to early ulcer, using VSD technology combined with chymotrypsin continuous irrigation, can significantly reduce the level of CRP and the occurrence of complications and disability rate, shorten the time of two stage skin grafting, wound healing time, hospitalization time, reduce the pain of patients, it is the best treatment to accelerate recovery.

【Key words】 Snake bites; Ulcers; Drainage; Chymotrypsin

Fund program: Scientific Research Project of Health Department of Guangxi Zhuang Autonomous Region

(Z2014508)

腰硬联合麻醉在剖宫产麻醉中的应用效果观察

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DOI:10.3760/ema.j.issn.1008-6706.2018.08.002

【摘要】 **目的** 探讨腰硬联合麻醉在剖宫产术中的应用效果及并发症发生情况。**方法** 将 82 例拟行剖宫产的孕妇采用随机数字表法分为观察组与对照组,每组 41 例。观察组行腰硬联合麻醉;对照组行硬膜外麻醉。评价两组麻醉效果、围术期血流动力学变化及术后并发症发生率。**结果** 观察组麻醉优良率 100.00%,明显高于对照组的 87.80% ($\chi^2 = 5.325, P < 0.05$);观察组感觉阻滞平面固定(T1)、手术开始(T2)、胎儿娩出(T3)、手术结束(T4)时平均动脉压(MAP)均明显低于对照组($t = 3.893, 3.934, 3.991, 2.231$, 均 $P < 0.05$);观察组麻醉起效时间、麻醉持续时间、Bromage 评分均显著优于对照组($t = 14.425, 15.791, 4.655$, 均 $P < 0.05$);观察组仰卧位综合征发生率 26.83%,明显高于对照组的 4.88% ($\chi^2 = 7.405, P < 0.05$)。**结论** 相比硬膜外麻醉,剖宫术中腰硬联合麻醉起效快、麻醉维持时间长,麻醉效果明确,但在血流动力学方面相对不稳定,仰卧位综合征发生率明显高。

【关键词】 剖宫产术; 麻醉,硬膜外; 麻醉,脊椎; 血流动力学

基金项目:浙江省卫生厅立项科研项目(Y14H062530)

The application value of combined spinal – epidural anesthesia in cesarean section Chen Liangqiao, Guo Chen.
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【Abstract】 **Objective** To explore the application effect and complications of combined spinal – epidural anesthesia in cesarean section. **Methods** 84 pregnant women who planned to undergo cesarean section were divided into the observation group and the control group by the random number table method, 41 cases in each group. The observation group was given combined spinal – epidural anesthesia, while the control group was given epidural anesthesia. The anesthetic effects, perioperative hemodynamic changes and the incidence of postoperative complications were evaluated. **Results** The excellent and good rate of anesthesia in the observation group was significantly higher than that in the control group (100.00% vs. 87.80%) ($\chi^2 = 5.325, P < 0.05$). The mean arterial pressure (MAP) of the observation group when the plane of sensory block was fixed (T1), at the beginning of operation (T2), at fetal delivery (T3) and at the end of operation (T4) were significantly lower than those of the control group ($t = 3.893, 3.934, 3.991, 2.231$, all $P < 0.05$). The onset time of anesthesia, duration of anesthesia and Bromage score of the observation group were significantly better than those of the control group ($t = 14.425, 15.791, 4.655$, all $P < 0.05$). The incidence rate of supine syndrome in the observation group was significantly higher than that in the control group (26.83% vs. 4.88%) ($\chi^2 = 7.405, P < 0.05$). **Conclusion** Compared with epidural anesthesia, combined spinal – epidural anesthesia has characteristics of fast onset and long duration, and the anesthetic effect is clear. However, it is relatively unstable in terms of hemodynamics, and the incidence of supine syndrome is significantly higher.

【Key words】 Cesarean section; Anesthesia, epidural; Anesthesia, spinal; Hemodynamics

Fund program: Research Project of Zhejiang Provincial Health Department (Y14H062530)

咪达唑仑对小儿包皮环切术后苏醒期躁动及苏醒时间的影响

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【摘要】 目的 探讨咪达唑仑对小儿包皮环切术后苏醒期躁动和苏醒时间的影响。**方法** 回顾性分析 170 例行小儿包皮环切术治疗患儿的临床资料,根据麻醉方法不同分为对照组和观察组,每组 85 例。对照组采取七氟烷复合氯胺酮进行麻醉,观察组采取七氟烷、氯胺酮联合咪达唑仑进行麻醉,对比两组麻醉效果。**结果** 观察组手术开始 10 min 心率为(99.64 ± 5.97)次/min,平均动脉压为(65.81 ± 5.63)mmHg;对照组手术开始 10 min 心率为(122.38 ± 12.54)次/min,平均动脉压为(86.49 ± 12.35)mmHg,组间差异均有统计学意义($t = 8.749, 9.438$, 均 $P < 0.05$)。观察组氯胺酮使用总量为(42.33 ± 5.85)mg,苏醒时间为(5.56 ± 2.03)min,疼痛评分为(2.16 ± 1.05)分,Watcha 评分为(1.65 ± 0.59)分,PAED 评分为(5.23 ± 1.04)分;对照组氯胺酮使用总量为(72.53 ± 16.58)mg,苏醒时间为(13.29 ± 4.66)min,疼痛评分为(4.29 ± 2.35)分,Watcha 评分为(2.84 ± 1.46)分,PAED 评分为(8.75 ± 2.19)分,组间差异均有统计学意义($t = 11.698, 8.239, 7.763, 6.997, 8.168$, 均 $P < 0.05$)。观察组呼吸抑制、烦躁苦恼和恶心呕吐发生率分别为 1.18%、3.53% 和 3.53%,对照组分别为 9.41%、15.29% 和 16.47%,组间差异均有统计学意义($\chi^2 = 4.174, 3.589, 4.281$, 均 $P < 0.05$)。**结论** 应用咪达唑仑在小儿包皮环切术中对患儿生命体征影响小,减轻术后苏醒躁动,缩短了苏醒时间,减少麻醉并发症发生,值得在临床推广应用。

【关键词】 包皮环切术; 男性; 麻醉; 苏醒室; 咪达唑仑

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Effects of midazolam on the agitation and wake time of the postoperative resuscitation in pediatric circumcision

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【Abstract】 Objective To explore the effect of midazolam on the agitation and wake time of the postoperative resuscitation in pediatric circumcision. **Methods** Clinical data of 170 cases of pediatric circumcision were retrospectively analyzed. They were divided into control group and observation group according to the anesthesia scheme, 85 cases in each group. The control group was anesthetized with sevoflurane compound ketamine, and the observation group was given trifluorothane and ketamine combined with midazolam. The effects of the two groups were compared. **Results** The cardiac rhythm and the central arterial pressure at first 10min of operation in the observation group were (99.64 ± 5.97) times/min, (65.81 ± 5.63) mmHg, respectively, which in the control group were (122.38 ± 12.54)times/min, (86.49 ± 12.35) mmHg, respectively, the differences between the two groups were statistically significant($t = 8.749, 9.438$, all $P < 0.05$). The total amount of ketamine, waking time, pain score, Watcha score, PAED score in the observation group were (42.33 ± 5.85)mg, (5.56 ± 2.03)min, (2.16 ± 1.05)points, (1.65 ± 0.59)points, (5.23 ± 1.04)points, respectively, which in the control group were (72.53 ± 16.58)mg, (13.29 ± 4.66)min, (4.29 ± 2.35)points, (2.84 ± 1.46)points, (8.75 ± 2.19)points, respectively, the differences between the two groups were statistically significant($t = 11.698, 8.239, 7.763, 6.997, 8.168$, all $P < 0.05$). The incidence rates of respiratory inhibition, fidgety, nausea and vomiting of the observation group were 1.18%, 3.53%, 3.53%, respectively, which of the control group were 9.41%, 15.29%, 16.47%, respectively, the differences between the two groups were statistically significant($\chi^2 = 4.174, 3.589, 4.281$, all $P < 0.05$). **Conclusion** Application of midazolam in pediatric prepuce intraoperatively has little influence on the vital signs of children, and can relieve postoperative awaken agitation, reduce the time of awakening and anesthesia complications, and it is worthy of popularizing in clinical application.

【Key words】 Circumcision; male; Anesthesia; Recovery room; Midazolam

Fund program:Public Welfare Science and Technology Planning Projects of Wenzhou City, Zhejiang Province (Y20160385)

视网膜光凝术联合药物治疗糖尿病视网膜病变疗效及其对血管内皮生长因子、类胰岛素一号增长因子水平的影响

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【摘要】 目的 探讨视网膜光凝术联合复方樟柳碱治疗糖尿病视网膜病变的效果及对患者血管内皮生长因子(VEGF)、类胰岛素一号增长因子(IGF-1)的影响。**方法** 选取糖尿病视网膜病变患者 116 例,采用随机数字表法分为观察组和对照组,每组 58 例,对照组给予视网膜光凝手术治疗,观察组联合复方樟柳碱治疗,比较两组治疗效果;并比较两组 VEGF、IGF-1 水平变化。**结果** 观察组治疗总有效率为 93.10%,显著高于对照组的 77.59%,组间差异有统计学意义($\chi^2 = 5.582, P < 0.05$)。观察组水肿吸收时间(4.19 ± 1.24)d, 出血吸收时间(2.19 ± 1.01)d, 渗出吸收时间(9.48 ± 2.13)d; 对照组水肿吸收时间(5.83 ± 2.85)d, 出血吸收时间(3.25 ± 1.88)d, 渗出吸收时间(13.54 ± 3.88)d, 组间差异均有统计学意义($t = 4.018, 3.782, 6.985$, 均 $P < 0.05$)。观察组治疗后 VEGF(85.12 ± 4.64)ng/L, IGF-1(90.17 ± 4.95)μg/L; 对照组治疗后 VEGF(100.48 ± 9.26)ng/L, IGF-1(132.69 ± 10.04)μg/L, 组间差异均有统计学意义($t = 11.294, 28.928$, 均 $P < 0.05$)。**结论** 视网膜光凝术联合复方樟柳碱联合方案应用在糖尿病视网膜病变中可以提升临床疗效,促进患者视力恢复,调节血管内皮生长因子水平,值得在临床推广应用。

【关键词】 激光凝固术; 糖尿病视网膜病变; 血管内皮生长因子; 类胰岛素样生长因子 1

基金项目:浙江省医药卫生科技计划项目(2011KYB136)

Clinical effect of retinal photocoagulation combined with drug on retinopathy of diabetic retinopathy and its effect on VEGF and IGF - 1 level Li Gaochun, Lin Xianping, Wang Ledan, Li Enhui.

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【Abstract】 Objective To explore the effect and application value of retinal photocoagulation combined with compound anisodine in the treatment of diabetic retinopathy, and its effect on vascular endothelial growth factor (VEGF) and insulin-like growth factor-1 (IGF-1) level. **Methods** 116 patients with diabetic retinopathy were selected, and they were randomly divided into observation group and control group according to the digital table, 58 cases in each group. The control group was given retinal photocoagulation treatment, and the observation group was given retinal photocoagulation combined with compound anisodine treatment. The therapeutic effect was compared between the two groups. **Results** The total effective rate of the observation group was 93.10%, which was significantly higher than 77.59% of the control group, and the difference between the two groups was statistically significant ($\chi^2 = 5.582, P < 0.05$). The edema absorption time, bleeding absorption time, exudate absorption time of the observation group were (4.19 ± 1.24) d, (2.19 ± 1.01) d, (9.48 ± 2.13) d, respectively, which of the control group were (5.83 ± 2.85) d, (3.25 ± 1.88) d, (13.54 ± 3.88) d, respectively, and the differences between the two groups were statistically significant ($t = 4.018, 3.782, 6.985$, all $P < 0.05$). After treatment, the VEGF and IGF-1 levels in the observation group were (85.12 ± 4.64) ng/L, (90.17 ± 4.95) μg/L, respectively, which in the control group were (100.48 ± 9.26) ng/L, (132.69 ± 10.04) μg/L, respectively, the differences between the two groups were statistically significant ($t = 11.294, 28.928$, all $P < 0.05$). **Conclusion** Retinal photocoagulation surgery combined with compound anisodine in the treatment of diabetic retinopathy can improve clinical curative effect, promote the patients' visual acuity, adjust the concentration of VEGF, the effect is remarkable, it is worthy of popularizing in clinical application.

【Key words】 Laser coagulation; Diabetic retinopathy; Vascular endothelial growth factors; Insulin-like growth factor-1

Fund program: The Medical and Health Science and Technology Project in Zhejiang Province(2011KYB136)

合理情绪疗法在夜班护士应对压力中的效果分析

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【摘要】 **目的** 探讨合理情绪疗法应用在夜班护士中对焦虑和抑郁等负性情绪的影响。**方法** 选取值夜班护士 36 例作为研究对象,按照干预方式不同将护士分为两组,每组 18 例,对照组给予心理辅导,观察组给予合理情绪疗法,记录两组护士焦虑和抑郁等负性情绪变化情况。**结果** 观察组干预后焦虑自评量表(48.05 ± 2.54)分,抑郁自评量表(44.65 ± 2.03)分;对照组干预后焦虑自评量表(54.02 ± 4.93)分,抑郁自评量表(48.77 ± 4.26)分,组间差异均有统计学意义($t = 4.567, 3.704$, 均 $P < 0.05$)。观察组干预后去人格化评分(10.05 ± 1.32)分,情绪衰竭(14.43 ± 2.13)分,个人成就感(20.09 ± 2.23)分,总职业倦怠感(44.65 ± 3.76)分;对照组干预后去人格化评分(20.03 ± 3.27)分,情绪衰竭(34.65 ± 5.19)分,个人成就感(31.83 ± 3.87)分,总职业倦怠感(75.54 ± 8.71)分,组间差异均有统计学意义($t = 12.007, 15.291, 11.151, 13.814$, 均 $P < 0.05$)。观察组护士应对方式得分中解决问题得分(0.92 ± 0.14)分,自责得分(0.76 ± 0.18)分,求助得分(0.88 ± 0.19)分,幻想得分(0.67 ± 0.13)分,退避得分(0.54 ± 0.19)分,合理化得分(0.85 ± 0.21)分,均高于对照组($t = 9.300, 11.392, 7.499, 15.944, 9.104, 6.800$, 均 $P < 0.05$)。**结论** 采取合理情绪疗法能够有效降低夜班护士心理上的抵触情绪,减轻心理压力,增强会应对处理压力能力,提升护士幸福感。

【关键词】 情绪; 焦虑; 抑郁

基金项目:浙江省余姚市科技计划项目(2010Y09)

Application of rational emotive therapy in response to stress in night shift nurses Chen Xiaoya, Chen Liwen, Feng Peijun.

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【Abstract】 **Objective** To explore the effect of rational emotion therapy on negative emotional effects such as anxiety and depression in night nurses. **Methods** 36 night shift nurses were selected as the research subjects. According to the different means of intervention, the nurses were divided into two groups, 18 cases in each group. The control group was not given psychological guidance, the observation group was given reasonable mood therapy. The negative emotions such as anxiety and depression were recorded in the nurses. **Results** After intervention, the anxiety self-rating scale, depression self-rating scale of the observation group were (48.05 ± 2.54) points and (44.65 ± 2.03) points, respectively, which of the control group were (54.02 ± 4.93) points and (48.77 ± 4.26) points, respectively, the differences were statistically significant ($t = 4.567, 3.704$, all $P < 0.05$). After intervention, the depersonalization score, emotional exhaustion, personal achievement, total occupational burnout feeling of the observation group were (10.05 ± 1.32) points, (14.43 ± 2.13) points, (20.09 ± 2.23) points and (44.65 ± 3.76) points, respectively, which of the control group were (20.03 ± 3.27) points, (34.65 ± 5.19) points, (31.83 ± 3.87) points, (75.54 ± 8.71) points, respectively, the differences between the two groups were statistically significant ($t = 12.007, 15.291, 11.151, 13.814$, all $P < 0.05$). The solve problems score, remorse score, help score, fantasy score, retreat score, rationalization score in the observation group were (0.92 ± 0.14) points, (0.76 ± 0.18) points, (0.88 ± 0.19) points, (0.67 ± 0.13) points, (0.54 ± 0.19) points, (0.85 ± 0.21) points, which were higher than those in the control group, the differences between the two groups were statistically significant ($t = 9.300, 11.392, 7.499, 15.944, 9.104, 6.800$, all $P < 0.05$). **Conclusion** Adopting rational emotion therapy can effectively reduce the psychological resistance of night nurses, relieve psychological pressure, enhance the ability to cope with stress, and improve the well-being of nurses.

【Key words】 Emotions; Anxiety; Depression

Fund program: Science and Technology Planning Project of Yuyao City, Zhejiang Province(2010Y09)

外周血中性粒细胞计数变化与突发性聋患者预后的关系

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【摘要】 目的 探讨突发性聋患者外周血中性粒细胞水平与患者预后的关系。**方法** 将 160 例突发性聋患者进行纯音听阈测定听力损失,分型进行治疗,同时治疗前和治疗中每隔一天检测血常规中性粒细胞水平,按治疗前中性粒细胞水平分为高水平组和低水平组,记录两组患者中性粒细胞水平变化,对患者进行预后评估。**结果** 突发性聋患者分型治疗后其总有效率为 70.64%,治疗前有 72 例患者外周血中性粒细胞水平偏高,并且其随着治疗的进行逐渐降低为正常范围。将外周血中性粒细胞高水平组和低水平组进行预后比较,发现高水平组总有效率为 38.85%,而低水平组总有效率为 31.79%,差异有统计学意义($\chi^2 = 9.194, P < 0.01$)。**结论** 突发性聋患者治疗前外周血中性粒细胞水平越高,患者预后效果越好。

【关键词】 耳聋; 中性粒细胞; 预后

基金项目:浙江省苍南县科技计划项目(2016S03)

The relationship between peripheral blood neutrophil count and prognosis of patients with sudden deafness

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【Abstract】 Objective To investigate the relationship between peripheral blood neutrophil levels and prognosis in patients with sudden deafness. **Methods** 160 patients with sudden deafness were treated with pure tone hearing threshold to determine hearing loss, type of treatment, before treatment and treatment every other day the blood neutrophil level was detected. According to the level of neutrophil before treatment, the patients were divided into high - level group and low - level group. The neutrophil levels in two groups were recorded, and the prognosis of patients was analyzed. **Results** The total effective rate was 70.64% in patients with sudden deafness after treatment, and 72 patients had high level of neutrophil in the peripheral blood before treatment, and gradually decreased to normal range as the treatment progressed. The prognosis of peripheral blood neutrophils in high - level group and low - level group was compared, we found that the total effective rate was 38.85% in the high level group and 31.79% in the low level group, and the high - level group had a better prognosis than the low - level group, the difference was statistically significant ($\chi^2 = 9.194, P < 0.01$). **Conclusion** The higher the level of neutrophils in patients with sudden deafness before treatment, the better the prognosis of patients.

【Key words】 Deafness; Neutrophils; Prognosis

Fund program: Cangnan Zhejiang County Science and Technology Plan Project(2016S03)

玻璃酸钠关节腔注射配合口服阳和汤治疗膝骨关节炎的疗效分析

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【摘要】 目的 探讨玻璃酸钠关节腔注射配合口服阳和汤治疗膝骨关节炎的疗效。**方法** 将 80 例膝骨关节炎患者采用随机数字表法分为两组,每组 40 例。对照组患者给予玻璃酸钠关节腔注射,研究组患者则加服阳和汤,比较两组患者中医症状评分、膝关节指标、总体治疗效果与生活质量。**结果** 研究组患者治疗后中医症状总分为(7.08 ± 1.18)分,显著低于对照组的(10.42 ± 2.01)分($t = 9.063, P < 0.01$);研究组治疗后疼痛视觉模拟评分和骨关节炎指数评分分别为(1.48 ± 0.59)分、(19.10 ± 3.08)分,均显著低于对照组的(3.70 ± 1.12)分、(23.40 ± 3.56)分($t = 11.091, 5.777$, 均 $P < 0.01$);研究组治疗后膝关节功能评分为(83.04 ± 10.49)分,显著高于对照组的(71.81 ± 9.67)分($t = 4.978, P < 0.01$);研究组治疗 6 个月后生理机能、生理职能、躯体疼痛、精神健康与精力评分均显著高于对照组($t = 5.190, 8.535, 4.569, 3.266, 6.694$, 均 $P < 0.01$);研究组显效率和总有效率分别为 72.5%、95.0%,均明显高于对照组的 50.0%、77.5%,差异均有统计学意义($\chi^2 = 4.266, 5.165$, 均 $P < 0.05$)。**结论** 玻璃酸钠关节腔注射配合口服阳和汤治疗膝骨关节炎的疗效显著。

【关键词】 骨关节炎; 膝; 关节囊; 玻璃酸钠; 医学, 中国传统

基金项目:浙江省温州市科技计划项目(Y20160530)

Analysis of therapeutic effect of sodium hyaluronate intra-articular injection combined with oral Yanghe decoction in the treatment of knee osteoarthritis Zhao Yina, Zhou Jiangtao.

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【Abstract】 Objective To investigate the curative effect of sodium hyaluronate intraperitoneal injection combined with oral Yanghe decoction in the treatment of knee osteoarthritis. **Methods** 80 patients with knee osteoarthritis were randomly divided into two groups, 40 cases in each group. The control group was given intra-articular injection of sodium hyaluronate, and the study group was treated with Yanghe decoction in addition. The TCM symptom score, knee joint index, overall treatment effect and quality of life were compared between the two groups. **Results** The total score of TCM symptoms after treatment in the study group was (7.08 ± 1.18) points, which was significantly lower than (10.42 ± 2.01) points in the control group ($t = 9.063, P < 0.01$). The VAS score and WOMAC score after treatment in the study group were (1.48 ± 0.59) points, (19.10 ± 3.08) points, respectively, which were significantly lower than (3.70 ± 1.12) points and (23.40 ± 3.56) points in the control group ($t = 11.091, 5.777$, all $P < 0.01$). The HSS score after treatment in the study group was (83.04 ± 10.49) points, which was significantly higher than (71.81 ± 9.67) points in the control group ($t = 4.978, P < 0.01$). The physiological function, physical function, physical pain, mental health and energy scores after 6 months treatment in the study group were significantly higher than those in the control group ($t = 5.190, 8.535, 4.569, 3.266, 6.694$, all $P < 0.01$). The effective rate and total effective rate of the study group were 72.5% and 95.0%, respectively, which were significantly higher than those of the control group (50.0%, 77.5%), the differences were statistically significant ($\chi^2 = 4.266, 5.165$, all $P < 0.05$).

Conclusion Sodium hyaluronate injection combined with oral Yanghe decoction is effective in the treatment of knee osteoarthritis.

【Key words】 Osteoarthritis, knee; Joint capsule; Sodium hyaluronate; Medicine, Chinese traditional

Fund program: Science and Technology Planning Project of Wenzhou City, Zhejiang Province (Y20160530)

制川乌粉体粒径与其破壁率和溶出度的相关性研究

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【摘要】 **目的** 探讨制川乌粉体粒径与其破壁率和溶出度的相关性。**方法** 采用光学显微镜测定 4 种制川乌粉体(40 目、60 目、80 目和 300 目)的粒径、细胞破壁率;采用桨法考察上述 4 种粉体的溶出特征。**结果** 不同粉碎程度的制川乌粉体的粒径分布、破壁率和溶出度相关性强,0~15 h 内,随着制川乌分体粒径的增加,溶出率由 81.2% 上升至 90.5%,表明随着粉体粒径的减小细胞破壁率和溶出率提高。**结论** 适度的改变粉碎程度可提高制川乌细胞破壁率和有效成分溶出的速率和程度。

【关键词】 制川乌; 粒径; 破壁率; 溶出

基金项目:浙江省中医药科技计划项目(2014ZB129)

Study on the correlation between the particle size and cell-wall breaking ratio,dissolution rate of Zhichuanwu powder Huang Wei, Ye Yingxiang.

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【Abstract】 Objective To study the correlation between the particle size and cell-wall breaking ratio, dissolution rate of Zhichuanwu powder. **Methods** The particle size and cell breaking rate of four kinds of Chuanwu powder (40 mesh, 60 mesh, 80 mesh and 300 mesh) were determined by optical microscope. The dissolution characteristics of the above four kinds of powders were investigated by paddle method. **Results** The results showed that the particle size distribution, fracture rate and dissolution rate of the Chuanwu powder were different, within 0-15 hours, with the increase of particle size of the prepared aconite root divided, the dissolution rate increased from 81.2% to 90.5%, and the cell breaking rate and dissolution rate increased with the decrease of the particle size. **Conclusion** Moderate changes in the degree of crushing can improve the rate of cell-wall breaking and rate of dissolution of active cells.

【Key words】 Zhichuanwu; Particle Size; Breaking Ratio; Dissolution

Fund program: Zhejiang Provincial Traditional Chinese Medicine Technology Project(2014ZB129)

医养结合模式下不同的药学服务对老年患者用药依从性的影响

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【摘要】 **目的** 分析医养结合模式下不同的药学服务对老年患者用药依从性的影响。**方法** 选取入住养护中心的能自理老年患者 640 例作为研究对象,依据提供的药学服务模式不同将老年患者分为研究组和对照组,每组 320 例。对照组老年患者为其提供传统的药学综合服务模式,研究组老年患者则给予全面的用药咨询、用药指导及与药物相关的系列药学服务。观察两组老年患者的用药依从性和整体满意度情况。**结果** 研究组完全依从率、总的依从率分别为 96.25%、99.37%,对照组分别为 81.87%、94.37%,研究组完全依从率和总依从率均明显高于对照组($\chi^2 = 33.94, 13.21$, 均 $P < 0.05$);研究组老年患者调查中满意度明显高于对照组($\chi^2 = 8.23, P < 0.05$);两组用药依从性与其自身学历、年龄差异均无统计学意义($\chi^2 = 1.16, 0.77$, 均 $P > 0.05$)。**结论** 医养结合模式下,优质的药学服务模式能有效提高老年患者用药依从性。

【关键词】 病人依从; 药学服务; 医养结合; 老年人

Effect of different pharmaceutical care on medication compliance of elderly patients under the mode of medical care Peng Jun, Zhang Lirong, Li Hailing.

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【Abstract】 **Objective** To analyze the effect of different pharmaceutical care on medication compliance of elderly patients under the mode of medical care. **Methods** 640 elderly patients in the nursing center for self-care were selected as the research subjects. The elderly patients were divided into study group and control group according to the pharmaceutical care model, 320 cases in each group. The control group was given traditional pharmaceutical service mode, the study group was given comprehensive drug counseling, medication guidance and drug related pharmacy services. The medication compliance and satisfaction of the two groups were observed. **Results** The compliance rate and total compliance rate of the study group were 96.25%, 99.37%, respectively, which were significantly higher than 81.87%, 94.37% of the control group ($\chi^2 = 33.94, 13.21$, all $P < 0.05$). The satisfaction of the study group was significantly higher than that of the control group ($\chi^2 = 8.23, P < 0.05$). In the two groups, there were no statistically significant differences between medication compliance and record of formal schooling, age ($\chi^2 = 1.16, 0.77$, all $P > 0.05$). **Conclusion** Under the mode of medical care, high quality pharmaceutical care can effectively improve the medication compliance of elderly patients.

【Key words】 Patient compliance; Pharmaceutical services; Combination of medicine and nursing; Aged

重度烧伤患者纤维蛋白原和 D-二聚体水平变化及其与预后的关系

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【摘要】 目的 探讨重度烧伤患者纤维蛋白原和 D-二聚体水平变化及其与预后的关系。**方法** 选取重度烧伤患者 90 例为研究对象, 根据患者预后分为死亡组(30 例)和存活组(60 例)。比较两组患者入院后同时间点纤维蛋白原及 D-二聚体的差异及变化规律。**结果** 入院后各时间点比较, 死亡组纤维蛋白原均显著高于同时间点存活组[(5.9 ± 1.5)g/L 比(5.1 ± 1.3)g/L, (8.8 ± 2.2)g/L 比(7.4 ± 2.5)g/L, (7.6 ± 2.8)g/L 比(5.7 ± 1.2)g/L, (7.1 ± 2.5)g/L 比(4.3 ± 1.7)g/L], 差异均有统计学意义($t = 3.892, 4.762, 5.436, 6.987$, 均 $P < 0.05$)。入院后各时间点比较, 死亡组 D-二聚体均显著高于同时间点存活组[(743.4 ± 226.2)ng/mL 比(704.1 ± 214.6)ng/mL, (935.4 ± 256.9)ng/mL 比(834.6 ± 256.2)ng/mL, (846.3 ± 291.5)ng/mL 比(712.1 ± 251.3)ng/mL, (756.7 ± 232.8)ng/mL 比(601.5 ± 168.7)ng/mL], 差异均有统计学意义($t = 3.895, 5.477, 4.743, 5.746$, 均 $P < 0.05$)。存活组 D-二聚体水平自入院后呈先升高后降低趋势, 而死亡组纤维蛋白原及 D-二聚体水平则呈双峰改变。**结论** 重度烧伤患者体内凝血功能存在明显的障碍, D-二聚体和纤维蛋白原水平越高, 患者预后越差。

【关键词】 烧伤学; D-二聚体; 纤维蛋白原; 预后

Changes of fibrinogen and D - dimer in patients with severe burns and their relationship with prognosis

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【Abstract】 Objective To investigate the changes of fibrinogen and D - dimer levels in patients with severe burn and their relationship with prognosis. **Methods** 90 patients with severe burn were selected as the subjects. The patients were divided into the dead group (30 cases) and the survival group (60 cases) according to the prognosis of the patients. The differences and changes of fibrinogen and D - dimer at the same time after admission were compared between the two groups. **Results** At each time point after admission, the fibrinogen levels of the death group were significantly higher than those of the survival group at the same time[(5.9 ± 1.5)g/L vs. (5.1 ± 1.3)g/L, (8.8 ± 2.2)g/L vs. (7.4 ± 2.5)g/L, (7.6 ± 2.8)g/L vs. (5.7 ± 1.2)g/L, (7.1 ± 2.5)g/L vs. (4.3 ± 1.7)g/L], the differences were statistically significant($t = 3.892, 4.762, 5.436, 6.987$, all $P < 0.05$). At each time point after admission, the D - dimer levels of the death group were significantly higher than those of the survival group at the same time[(743.4 ± 226.2)ng/mL vs. (704.1 ± 214.6)ng/mL, (935.4 ± 256.9)ng/mL vs. (834.6 ± 256.2)ng/mL, (846.3 ± 291.5)ng/mL vs. (712.1 ± 251.3)ng/mL, (756.7 ± 232.8)ng/mL vs. (601.5 ± 168.7)ng/mL], the differences were statistically significant($t = 3.895, 5.477, 4.743, 5.746$, all $P < 0.05$). The level of D - dimer in the survival group showed a rise firstly, then showed a decrease trend after admission, while the levels of fibrinogen and D - dimer of the death group were altered in double - peak change. **Conclusion** There is an obvious impairment of coagulation function in severe burn patients, and the level of D - dimer and fibrinogen is higher, the prognosis of patients is worse.

【Key words】 Burns; D-two dimer; Fibrinogen; Prognosis

双切口双钢板内固定术治疗胫骨平台复杂骨折的效果分析

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【摘要】 **目的** 研究双切口双钢板内固定术治疗胫骨平台复杂骨折的临床疗效和安全性。**方法** 按治疗方法的不同,将 83 例胫骨平台复杂骨折患者分成双钢板组(51 例)与锁定钢板组(32 例),比较两组的手术指标、治疗疗效以及并发症发生情况。**结果** 观察组的负重时间、住院时间以及骨折愈合时间明显短于对照组[(9.36±2.14)d 比(13.24±2.99)d, (11.71±1.32)d 比(13.41±2.23)d, (13.27±1.83)周比(15.82±2.18)周],两组差异均有统计学意义($t=6.813, 4.368, 5.736$, 均 $P<0.05$);观察组、对照组的膝关节功能评分表(HSS)评分优良率分别是 94.12%、93.75%,差异无统计学意义($\chi^2=0.746, P>0.05$);观察组的并发症发生率明显低于对照组(5.88% 比 21.88%),差异有统计学意义($\chi^2=4.746, P<0.05$)。**结论** 双切口钢板内固定手术治疗胫骨平台复杂骨折疗效好,术后恢复快,安全性高,值得在临床进行推广应用。

【关键词】 胫骨骨折; 骨折固定术,内

Analysis of the effect of double incision double plate internal fixation in the treatment of complex fractures of tibial plateau Ma Xuezhong, Wang Jian, Zhao Zhicai, Liu Xinghua, Shi Jinzhu.

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【Abstract】 **Objective** To study the clinical efficacy and safety of double incision double plate internal fixation in the treatment of complex fractures of tibial plateau. **Methods** According to the different treatment methods, 83 patients with tibial plateau complex fractures were divided into double plate group (51 cases) and locking plate group (32 cases). The surgical indicators, treatment efficacy and complications were compared between the two groups. **Results** The time of implantation, hospital stay and fracture healing time in the observation group were significantly shorter than those in the control group [(9.36±2.14)d vs. (13.24±2.99)d; (11.71±1.32)d vs. (13.41±2.23)d; (13.27±1.83) weeks vs. (15.82±2.18) weeks], the differences were statistically significant ($t=6.813, 4.368, 5.736$, all $P<0.05$). The excellent rates of HSS score in the observation group and the control group were 94.12% and 93.75%, respectively, and there was no statistically significant difference ($\chi^2=0.746, P>0.05$). The incidence rate of complications in the observation group was significantly lower than that in the control group (5.88% vs. 21.88%) ($\chi^2=4.746, P<0.05$). **Conclusion** Double-incision plate internal fixation surgery for tibial plateau complex fractures is effective, has fast postoperative recovery, high safety, and it is worthy of clinical application in a wide range of popularization.

【Key words】 Tibial fractures; Fracture fixation, internal

核磁共振动态增强技术用于检测青年人 乳腺浸润性导管癌的影像学特征分析

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【摘要】 目的 探讨核磁共振(MRI)动态增强技术对青年人乳腺浸润性导管癌的影像学特征及诊断价值。**方法** 选取乳腺导管癌手术治疗患者 75 例,根据年龄分为青年组(≤ 40 岁)22 例和中老年组(> 40 岁)53 例,分析两组患者病变形态、位置、大小、边界、边缘有无分叶及毛刺、时间信号强度曲线(Time signal intensity curve, TIC)情况。**结果** 青年组非肿块型乳腺浸润性导管癌患者占 54.55%,高于老年组的 30.19%,差异有统计学意义($\chi^2 = 3.94, P = 0.04$)。青年组乳腺浸润性导管癌边界不清楚的比例为 63.64%,高于老年组的 37.74%,差异有统计学意义($\chi^2 = 4.21, P = 0.04$)。青年组乳腺浸润性导管癌病灶分叶的比例为 59.09%,老年组为 62.26%,差异无统计学意义($\chi^2 = 2.19, P = 0.14$)。青年组乳腺浸润性导管癌病灶边缘光滑的比例为 63.64%,老年组为 54.72%,差异无统计学意义($\chi^2 = 2.26, P = 0.13$)。青年组乳腺导管癌 TIC 比较 I、II、III 型患者分别为 0、14、8 例,老年组分别为 0、36、17 例,两组患者 TIC 分级差异无统计学意义($\chi^2 = 0.13, P = 0.72$)。**结论** 青年乳腺浸润型导管癌患者多为非肿块型,肿瘤边界不清;MRI 动态增强技术用于检测乳腺浸润型导管癌能够减少漏诊误诊情况。

【关键词】 磁共振血管造影术; 乳腺肿瘤; 年轻成人

Analysis of imaging features of dynamic contrast – enhanced MRI in the detection of invasive ductal carcinoma of breast cancer

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【Abstract】 Objective To investigate the imaging features of MRI in patients with invasive ductal carcinoma of breast cancer. **Methods** 75 patients with breast ductal carcinoma treated by surgical treatment were selected. According to the age, 75 patients were divided into young group (≤ 40 years) with 22 cases and elderly group (> 40 years) with 53 cases. The morphology, location, size, border and edge of the two groups were analyzed. The time signal intensity curve (TIC) was analyzed. **Results** The proportion of patients with non – luminal invasive ductal carcinoma of the young group was 54.55%, which was higher than 30.19% of the elderly group, the difference was statistically significant ($\chi^2 = 3.94, P = 0.047$). The proportion of breast cancer infiltrating ductal carcinoma in the young group was 63.64%, which was higher than 37.74% in the elderly group, the difference was statistically significant ($\chi^2 = 4.21, P = 0.040$). The proportion of the infarcted ductal carcinoma in the young group was 59.09%, and that in the elderly group was 62.26%, the difference was not statistically significant ($\chi^2 = 2.19, P = 0.14$). The proportion of breast invasive ductal carcinoma in the young group was 63.64%, which in the elderly group was 54.72%, the difference was not statistically significant ($\chi^2 = 0.13, P = 0.72$). I, II and III type of breast ductal carcinoma TIC in the young group were 0 cases, 14 cases, 8 cases, respectively, which in the elderly group were 0 cases, 36 cases, 17 cases, respectively, there was no statistically significant difference in TIC grade between the two groups ($\chi^2 = 2.26, P = 0.13$). **Conclusion** Breast infiltrating ductal carcinoma is mostly pulmonary lump type, tumor border is unclear; MRI dynamic enhancement technique for the detection of breast invasive ductal carcinoma can reduce misdiagnosis.

【Key words】 Magnetic resonance angiography; Breast neoplasms; Young adult

比伐卢定与肝素用于急性冠状动脉综合征患者急诊经皮冠状动脉介入术的疗效比较

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【摘要】 目的 比较比伐卢定与肝素分别用于急性冠状动脉综合征患者急诊经皮冠状动脉介入术(PCI)的疗效。**方法** 将90例急性冠状动脉综合征患者纳入该次研究,按照随机信封法将其分为两组(研究组和参照组),每组45例。研究组患者在PCI术中应用比伐卢定予以辅助治疗,参照组患者则应用普通肝素予以辅助治疗,观察两组纤维蛋白原、活化部分凝血酶时间、凝血酶时间、血浆凝血酶原时间的变化,并分析两组不良事件发生率(心力衰竭、心源性死亡、血小板减少、消化道出血)。**结果** 经过治疗后,在凝血功能指标的对比上,两组差异均无统计学意义(均 $P > 0.05$);研究组不良事件发生率为4.44%,参照组不良事件发生率为24.44%,研究组明显低于参照组,且差异有统计学意义($\chi^2 = 7.28, P < 0.05$)。**结论** 在实施急诊经皮冠状动脉介入术时,应用比伐卢定与肝素具有相同的疗效,但比伐卢定具有更可靠的安全性。

【关键词】 急性冠脉综合征; 肝素; 比伐卢定

Comparison of the clinical effects of heparin and bivalirudin on percutaneous coronary intervention in patients with acute coronary syndrome Sun Yanbo, Teng Siyong, Zhang Guoying, Li Bing, Xue Xiaojian, Guo Hui. Emergency Center of Yuncheng, Yuncheng, Shanxi 044000, China (Sun YB, Zhang GY, Li B, Xue XJ, Guo H); Chinese Academy of Medical Sciences Fuwai Hospital, Beijing 100037, China (Teng SY)

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【Abstract】 Objective To compare the efficacy of heparin and bivalirudin in patients with acute coronary syndrome undergoing emergency percutaneous coronary intervention (PCI). **Methods** A total of 90 patients with acute coronary syndrome were included in this study. They were divided into the study group and control group according to the requirements of random envelope method, 45 cases in each group. The study group received bivalirudin during PCI, the control group was given heparin. The Fbg, APTT, TT and PT were detected in the two groups, and the incidence of adverse reactions (heart failure, cardiac death, platelet reduction, hemorrhage of digestive tract) was analyzed. **Results** After treatment, there were no statistically significant differences between the two groups in various blood coagulation indicators (all $P > 0.05$). The incidence rate of adverse events of the study group was 4.44%, which was significantly lower than 24.44% of the control group, and the difference was statistically significant ($\chi^2 = 7.28, P < 0.05$). **Conclusion** Application of heparin and bivalirudin in PCI has similar efficacy, but the safety of bivalirudin is higher, which is worthy of clinical promotion.

【Key words】 Acute coronary syndrome; Heparin; Bivalirudin

椎弓根钉内固定治疗 II 型齿状突骨折术中植骨融合与非植骨融合的临床疗效比较

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【摘要】 目的 比较植骨与否在椎弓根螺钉内固定治疗 II 型齿状突骨折的近期临床疗效。方法 对 14 例 II 型齿状突骨折 8 例(A 组)行后入路椎弓根钉复位固定,椎板间自体髂骨植骨;6 例(B 组)单纯行后入路椎弓根螺钉内固定。观察手术时间、手术出血量及术后第 3 个月颈椎屈伸及旋转功能,并随访 5~45 个月。结果 所有患者获得随访时间 5~45 个月,平均 26.5 个月。植骨组手术时间(1.83 ± 0.50)h,非植骨组手术时间(1.58 ± 0.90)h,两组差异有统计学意义($t=2.842, P>0.05$)。植骨组出血(150 ± 16)mL,非植骨组出血(120 ± 14)mL,两组差异有统计学意义($t=3.57, P>0.05$)。3 个月后植骨组颈椎屈曲(31.2 ± 4.6)°,非植骨组颈椎屈曲(32.3 ± 5.7)°,两组差异有统计学意义($t=0.675, P<0.05$)。植骨组旋转(40.6 ± 4.5)°,非植骨组旋转(41.3 ± 3.5)°,两组差异有统计学意义($t=0.278, P<0.05$)。两组均无椎动脉和脊髓损伤,伤口一期愈合。随访期间两组患者颈椎复位良好,无内固定松动、断裂、骨折愈合好,A 组植骨块融合。结论 对于该类型骨折单纯行寰枢椎椎弓根内固定相比较联合自体髂骨植骨融合治疗,可节省手术时间、减少出血量。

【关键词】 骨折; 椎弓根钉; 颈椎骨

Clinical analysis of pedicle screw fixation in the treatment of type II odontoid fracture with bone grafting and non - bone grafting Li Hongbiao, Sun Xiuqin, Nie Wenbo, Zhai Xicheng, Qin Lei, Liu Baoshuai.

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【Abstract】 Objective To explore the clinical efficacy of bone grafting in the treatment of type II odontoid fracture with pedicle screw fixation. **Methods** Of 14 cases with type II odontoid fractures, 8 patients in group A received pedicle screw, lamina autologous bone grafts, 6 cases of group B received simple posterior pedicle screw fixation. The operative time, the amount of surgical bleeding and the postoperative cervical spine flexion and rotation were observed at 3 months postoperatively, and the patients were followed up for 5 - 45 months. **Results** All patients were followed up for 5 - 45 months, with an average of 26.5 months. The operation time was (1.83 ± 0.5)h in the bone graft group, and (1.58 ± 0.9)h in the non - bone graft group, the difference was statistically significant ($t = 2.842, P>0.05$). The blood loss of the bone graft group was (150 ± 16)mL, which of the non - bone graft group was (120 ± 14)mL, the difference between the two groups was statistically significant ($t = 3.57, P>0.05$). After 3 months, the flexion of the cervical spine of the bone graft group was (31.2 ± 4.6)°, which in the non - grafted group was (32.3 ± 5.7)°, the difference was statistically significant ($t=0.675, P<0.05$). The rotation of the bone graft group was (40.6 ± 4.5)°, which in the non - graft group was (41.3 ± 3.5)°, the difference was statistically significant ($t=0.278, P<0.05$). Both two groups had no vertebral artery and spinal cord injury, wound healing. During the follow - up period, the two groups of patients had a good reduction of cervical spine, no internal fixation loosening, fracture, fracture healing well, group A bone graft fusion. **Conclusion** For this type of fracture, simple atlantoaxial pedicle screw fixation compared with autologous iliac bone graft fusion treatment, can save the operation time, reduce the amount of bleeding.

【Key words】 Fracture, bone; Pedicle screw; Cervical vertebrae

不同治疗方案对慢性盆腔炎临床疗效及炎症因子水平的影响比较

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【摘要】 目的 比较不同抗生素治疗方案对慢性盆腔炎的临床疗效及炎症因子水平的影响。**方法** 选取慢性盆腔炎患者 78 例,采用电脑产生试验病例随机号码法分为观察组(抗生素序贯法)和对照组(抗生素序贯转化法),每组 39 例。治疗 10 d 后,观察两组的临床疗效,对比治疗前后血清中 IL-1(白介素-1)、IL-2(白介素-2)水平表达情况;并比较两组患者经济成本、用药期间不良反应发生情况,并于治疗结束 6 个月后随访两组患者复发情况。**结果** 经过 10 d 治疗后,观察组总有效率 94.59%,对照组的总有效率为 86.49%,观察组总缓解率高于对照组,差异有统计学意义($\chi^2 = 5.41, P = 0.00$)。治疗前,观察组 IL-1 表达为(413.47 ± 38.59) μg/L, IL-2 表达水平为(489.43 ± 44.58) ng/L,对照组 IL-1 表达为(419.47 ± 40.46) μg/L, IL-2 表达水平为(490.47 ± 47.40) ng/L,两组治疗前 IL-1($t = 0.65, P = 0.52$)及 IL-2($t = 0.10, P = 0.92$)表达水平差异无统计学意义;治疗后,观察组 IL-1 表达为(288.53 ± 32.48) μg/L,低于治疗前($t = 15.07, P = 0.00$), IL-2 表达水平为(288.53 ± 32.48) ng/L,高于治疗前($t = 14.65, P = 0.00$)。治疗后,对照组 IL-1 表达为(358.41 ± 43.47) μg/L,低于治疗前($t = 15.07, P = 0.00$), IL-2 表达水平为(550.46 ± 32.90) ng/L,高于治疗前($t = 14.65, P = 0.00$)。观察组 IL-1($t = 7.83, P = 0.00$)及 IL-2($t = 9.66, P = 0.00$)改善情况均优于对照组。观察组药品成本及给药费用分别为(115.47 ± 3.48)元、(27.45 ± 2.01)元,对照组分别为(120.45 ± 3.39)元、(27.45 ± 2.01)元,两组药品成本($t = 2.44, P = 0.17$)及给药费用($t = 0.00, P = 1.00$)差异无统计学意义。观察组中 2 例患者出现胃肠道不适反应,对照组为 1 例,差异无统计学意义($\chi^2 = 0.35, P = 0.56$)。两组发生的不良反应均较为轻微,停药后自行缓解或消失。6 个月后,观察组复发 2.56% (1/39),对照组为 15.38% (6/39),观察组复发率低于对照组($\chi^2 = 3.92, P = 0.04$)。**结论** 采用抗生素序贯转换治疗方法即先静脉滴注抗生素,后转为口服联合用药,近期及远期临床疗效佳,且安全可靠,未增加患者经济负担,值得临床推广使用。

【关键词】 盆腔炎性疾病; 抗感染药; 白细胞介素类

Effect of different antibiotic therapy in the treatment of patients with chronic pelvic inflammation disease and the influence on inflammatory factors Tong Meihong, Zhang Tao.

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【Abstract】 Objective To compare the effects of different antibiotic regimens on clinical efficacy and inflammatory factors in patients with chronic pelvic inflammatory disease. **Methods** 78 patients with chronic pelvic inflammatory disease were enrolled. They were randomly divided into observation group (antibiotic sequential method) and control group (sequential transformation of antibiotics) by computer generation test case random number method, 39 cases in each group. After treatment for 10 days, the clinical efficacy was observed, the serum IL-1 and IL-2 levels before and after treatment were compared. The economic costs, adverse events during the course of treatment were compared between the two groups, and 6 months after treatment, the recurrence was followed up in the two groups. **Results** After 10 days of treatment, the total effective rate was 94.59% in the observation group and 86.49% in the control group. The total remission rate in the observation group was higher than that in the control group ($\chi^2 = 5.41, P = 0.002$). Before treatment, the levels of IL-1 and IL-2 of the observation group were (413.47 ± 38.59) μg/L, (489.43 ± 44.58) ng/L, respectively, which of the control group were (419.47 ± 40.46) μg/L, (490.47 ± 47.40) ng/L, respectively, and the differences were not statistically significant between the two groups ($t = 0.65, 0.10, P = 0.52, 0.92$). After treatment, the IL-1 level of the observation group [(288.53 ± 32.48) μg/L] was

lower than before treatment ($t = 15.07, P = 0.00$), and IL - 2 level [$(288.53 \pm 32.48) \text{ ng/L}$] was higher than before treatment ($t = 14.65, P = 0.00$). After treatment, the IL - 1 level of the control group [$(358.41 \pm 43.47) \mu\text{g/L}$] was lower than before treatment ($t = 15.07, P = 0.00$), and IL - 2 level [$(550.46 \pm 32.90) \text{ ng/L}$] was higher than before treatment ($t = 14.65, P = 0.00$). The improvement of IL - 1 and IL - 2 levels in the observation group were better than those in the control group ($t = 7.83, 9.66, \text{ all } P = 0.00$). The cost of drug and drug expense of the observation group were $(115.47 \pm 3.48) \text{ RMB}$ and $(27.45 \pm 2.01) \text{ RMB}$, respectively, which of the control group were $(120.45 \pm 3.39) \text{ RMB}$, $(27.45 \pm 2.01) \text{ RMB}$, respectively, the differences between the two groups were not statistically significant ($t = 2.44, 0.00, P = 0.17, 1.00$). There were 2 cases with gastrointestinal discomfort in the observation group and 1 case in the control group, the difference between the two groups was not statistically significant ($\chi^2 = 0.35, P = 0.56$). The adverse reactions of two groups were relatively minor, self - mitigation or disappeared after withdrawal the drug. After treatment for 6 months, the recurrence rate was 2.56% (1/39) in the observation group and 15.38% (6/39) in the control group. The recurrence rate of the observation group was lower than that of the control group ($\chi^2 = 3.92, P = 0.04$). **Conclusion** The antibiotic sequential conversion therapy is the first intravenous antibiotics, and then oral combination, the recent and long - term clinical efficacy is good, and it is safe and reliable, without increasing the economic burden of patients, and is worthy of clinical use.

【Key words】 Pelvic inflammatory disease; Anti-infective agents; Interleukins

化异汤治疗复发子宫内膜异位症的疗效观察

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【摘要】 目的 观察化异汤治疗复发子宫内膜异位症的临床疗效及其对 Th1/Th2 平衡的影响。方法 选择术后复发的子宫内膜异位症患者 92 例为研究对象, 采用随机数字表法分为观察组 46 例、对照组 46 例。对照组口服米非司酮, 每次 12.5 mg, 1 次/d, 连续治疗 3 个月。观察组服用中药化异汤, 连续治疗 3 个月。观察两组治疗前后血清糖类抗原 125(CA125)、干扰素 γ (IFN- γ)、白细胞介素 4(IL-4) 的变化, 比较两组临床疗效。**结果** 对照组有效率为 78.3%, 观察组有效率为 91.3%, 观察组有效率明显高于对照组($\chi^2 = 5.160, P < 0.05$)。对照组治疗前、后血清 CA125 分别为(103.62 \pm 27.45) IU/mL、(55.21 \pm 19.23) IU/mL, 观察组治疗前、后血清 CA125 分别为(106.85 \pm 22.74) IU/mL、(31.47 \pm 12.94) IU/mL, 两组治疗后血清 CA125 均明显降低($t = 10.963, 14.206$, 均 $P < 0.01$), 观察组治疗后血清 CA125 低于对照组($t = 5.038, P < 0.05$)。对照组治疗前 IL-4、IFN- γ 、IL-4/IFN- γ 分别为(22.61 \pm 6.72) ng/L、(51.77 \pm 8.09) ng/L、(0.41 \pm 0.11), 治疗后分别为(15.16 \pm 5.04) ng/L、(60.39 \pm 9.14) ng/L、(0.22 \pm 0.07); 观察组治疗前 IL-4、IFN- γ 、IL-4/IFN- γ 分别为(23.01 \pm 6.71) ng/L、(51.16 \pm 7.63) ng/L、(0.42 \pm 0.15), 治疗后分别为(9.03 \pm 3.37) ng/L、(69.91 \pm 8.24) ng/L、(0.12 \pm 0.05)。两组治疗后血清 IL-4 均明显降低($t = 6.0143, 8.770$, 均 $P < 0.01$), 观察组治疗后 IL-4 降低更明显($t = 3.448, P < 0.05$); 两组治疗后血清 IFN- γ 均明显升高($t = 2.014, 2.998$, 均 $P < 0.05$), 观察组治疗后 IFN- γ 升高更明显($t = 2.106, P < 0.05$); 两组治疗后血清 IL-4/IFN- γ 均明显降低($t = 5.182, 9.062$, 均 $P < 0.01$), 观察组治疗后 IL-4/IFN- γ 降低更明显($t = 5.824, P < 0.05$)。**结论** 化异汤可以明显提高子宫内膜异位症复发患者的疗效, 并且可以改善 Th1/Th2 失衡。

【关键词】 子宫内膜异位症; 复发; 中草药; 化异汤

Clinical effect of Huayi decoction in the treatment of recurrent endometriosis Zong Xiuhong, Gong Cuilan.

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【Abstract】 Objective To study the effect of Huayi decoction in the treatment of recurrent endometriosis, and its influence on Th1/Th2 balance. **Methods** 92 patients with recurrent endometriosis were selected as the research subjects. According to the digital table method, the patients were randomly divided into the observation group and the control group, 46 cases in each group. The control group was given mifepristone, every time 12.5mg, 1 time/day, continuously treated for 3 months. The observation group was treated with Huayi decoction for 3 months. The serum carbohydrate antigen 125(CA125), interferon gamma (IFN- γ), interleukin 4 (IL-4) were measured before and after treatment. **Results** After treatment, the effective rate of the control group was 78.3%, which was significantly lower than 91.3% of the observation group ($\chi^2 = 5.16, P < 0.05$). Before and after treatment, the serum CA125 levels of the control group were (103.62 \pm 27.45) IU/mL, (55.21 \pm 19.23) IU/mL, respectively. Before and after treatment, the serum CA125 levels of the observation group were (106.85 \pm 22.74) IU/mL, (31.47 \pm 12.94) IU/mL, respectively. After treatment, the serum CA125 levels were significantly lower in the two groups ($t = 10.963, 14.206$, all $P < 0.01$), and the serum CA125 level in the observation group was significantly lower than that in the control group ($t = 5.038, P < 0.05$). The IL-4, IFN- γ , IL-4/IFN- γ of the control group before treatment were (22.61 \pm 6.72) pg/mL, (51.77 \pm 8.09) pg/mL and (0.41 \pm 0.11), respectively, which after treatment were (15.16 \pm 5.04) pg/mL, (60.39 \pm 9.14) pg/mL and (0.22 \pm 0.07), respectively. The IL-4, IFN- γ , IL-4/IFN- γ of the observation group before treatment were (23.01 \pm 6.71) pg/mL, (51.16 \pm 7.63) pg/mL and (0.42 \pm 0.15), respectively, which after treatment were (9.03 \pm 3.37) pg/mL, (69.91 \pm 8.24) pg/mL and (0.12 \pm 0.05), respectively. After treatment, the serum IL-4 levels of the two groups were significantly lower ($t = 6.0143, 8.770$, all

$P < 0.01$), and the decrease of IL-4 level of the observation group was more significant ($t = 3.448, P < 0.05$). After treatment, the serum IFN- γ levels were significantly higher in the two groups ($t = 2.014, 2.998$, all $P < 0.05$), and the increase of IFN- γ level of the observation group was more significant ($t = 2.106, P < 0.05$). After treatment, the serum IL-4/IFN- γ of the two groups were significantly lower ($t = 5.182, 9.062$, all $P < 0.01$), and the IL-4/IFN- γ decreased more significantly in the observation group ($t = 5.824, P < 0.05$). **Conclusion** Huayi decoction can significantly improve the postoperative curative effect and improve the imbalance of Th1/Th2.

【Key words】 Endometriosis; Recurrence; Drugs, chinese herbal; Huayi Tan

氧气驱动雾化吸入在支气管哮喘急性发作救治中的效果分析

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【摘要】 目的 观察氧气驱动雾化吸入在支气管哮喘急性发作救治中的临床效果。**方法** 选取 96 例支气管哮喘急性发作患者作为研究对象,采用随机数字表法分为观察组和对照组,各 48 例。两组患者均采用沙丁胺醇和布地奈德雾化吸入治疗,其中对照组患者采用超声雾化吸入法,观察组患者采用氧气驱动雾化吸入法。观察两组治疗前后的血氧饱和度(SpO_2)、最大呼气峰流速(PEF)、第 1 秒用力呼气容量(FEV_1)和呼吸指数(RI),比较主要临床症状消失时间,分析其临床效果。**结果** 治疗后,观察组的总有效率 91.67%,对照组的总有效率为 72.92%,组间差异有统计学意义($\chi^2 = 7.19, P < 0.05$)。与对照组相比,观察组的发热、咳嗽、气喘、哮鸣音、肺部啰音及气短等主要临床症状消失时间均明显缩短[观察组:(3.05 ± 1.23)d、(4.43 ± 1.16)d、(3.12 ± 1.11)d、(4.26 ± 1.37)d、(4.98 ± 1.75)d、(3.51 ± 1.37)d,对照组:(4.14 ± 1.03)d、(7.75 ± 1.98)d、(5.75 ± 1.86)d、(6.53 ± 1.46)d、(8.42 ± 1.55)d、(6.53 ± 1.46)d],差异均有统计学意义($t = 4.71$ 、 10.02 、 8.41 、 7.86 、 10.20 、 10.45 ,均 $P < 0.01$)。治疗后,两组 SpO_2 、PEF、 FEV_1 均明显升高[观察组:(98.70 ± 1.44)%、(126.33 ± 9.87)mL/min、(2.06 ± 0.52)L;对照组:(83.15 ± 1.39)%、(108.32 ± 7.26)mL/min、(1.42 ± 0.38)L],而 RI 显著下降(观察组: 0.17 ± 0.08 ,对照组: 0.27 ± 0.06),两组差异均有统计学意义($t_{\text{观}} = 36.18$ 、 16.77 、 12.04 、 10.69 , $t_{\text{对}} = 11.03$ 、 8.15 、 5.34 、 2.69 ,均 $P < 0.01$),且观察组的 SpO_2 、PEF、 FEV_1 及 RI 改善程度明显优于对照组($t = 53.83$ 、 10.18 、 6.88 、 6.74 ,均 $P < 0.01$)。**结论** 在救治支气管哮喘急性发作中,采用氧气驱动雾化吸入治疗临床疗效显著,可有效地缓解患者发热、咳嗽等主要的临床症状,改善肺通气功能,值得临床进一步推广应用。

【关键词】 投药,吸入; 哮喘

Analysis of the effect of oxygen driven aerosol inhalation in the treatment of acute exacerbation of bronchial asthma Shen Jianjie, Cao Dongmin.

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【Abstract】 Objective To analyze the effect of oxygen driven aerosol inhalation in the treatment of acute exacerbation of bronchial asthma. **Methods** 96 patients with acute exacerbation of bronchial asthma were selected as the subjects. They were divided into observation group and control group by the random number table, 48 cases in each group. All patients were treated with salbutamol and budesonide inhalation therapy, the control group was treated with ultrasonic atomization inhalation, the observation group was treated with oxygen driven aerosol inhalation. The changes of blood oxygen saturation(SpO_2), maximum expiratory peak flow(PEF), forced expiratory volume in the first second(FEV_1) and respiratory index(RI) were observed before and after treatment in the two groups. The time of disappearance of major clinical symptoms was compared, and the clinical treatment effect was analyzed. **Results** After treatment, the total effective rate of the observation group was 91.67%, which of the control group was 72.92%, the difference between the two groups was statistically significant($\chi^2 = 7.19, P < 0.05$). Compared with the control group, the fever, cough, asthma, wheezing, shortness of breath, pulmonary rales and main clinical symptoms disappear time of the observation group were significantly shortened [observation group: (3.05 ± 1.23)d, (4.43 ± 1.16)d, (3.12 ± 1.11)d, (4.26 ± 1.37)d, (4.98 ± 1.75)d, (3.51 ± 1.37)d; control group: (4.14 ± 1.03)d, (7.75 ± 1.98)d, (5.75 ± 1.86)d, (6.53 ± 1.46)d, (8.42 ± 1.55)d, (6.53 ± 1.46)d, $t = 4.71, 10.02, 8.41, 7.86, 10.20, 10.45$, all $P < 0.01$]. After treatment, the SpO_2 , PEF and FEV_1 of the two groups were significantly increased [observation group: (98.70 ± 1.44)%, (126.33 ± 9.87)mL/min, (2.06 ± 0.52)L; control group: (83.15 ± 1.39)%, (108.32 ± 7.26)mL/min, (1.42 ± 0.38)L], while RI decreased significantly [observation group: (0.17 ± 0.08)],

control group: (0.27 ± 0.06) , the differences were significant ($t_o = 36.18, 16.77, 12.04, 10.69, t_c = 11.03, 8.15, 5.34, 2.69$, all $P < 0.01$), and the improvement of SpO_2 , PEF, FEV_1 and RI of the observation group were significantly better than those of the control group ($t = 53.83, 10.18, 6.88, 6.74$, all $P < 0.01$). **Conclusion** In the treatment of acute exacerbation of bronchial asthma, the clinical efficacy of oxygen driven aerosol inhalation is significant. The way can better alleviate patients' major clinical symptoms, such as fever, cough, improve lung ventilation function, and is worthy of further clinical application.

【Key words】 Administration, inhalation; Asthma

不同剂量盐酸戊乙奎醚防治全身麻醉苏醒期导尿管不适的效果比较

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【摘要】 目的 比较不同剂量的盐酸戊乙奎醚术前给药防治全麻苏醒期导尿管不适的效果。**方法** 择期全身麻醉下手术的成年患者 160 例,采用随机数字表法分为四组,术前 30 min 静注盐酸戊乙奎醚 0.005 mg/kg(A 组)、0.010 mg/kg(B 组)、0.015 mg/kg(C 组)和 0.9% 氯化钠注射液(D 组)。四组均在全麻诱导后留置 12F 双腔气囊乳胶导尿管并在气囊内注入 0.9 氯化钠注射液 8 mL,术后在麻醉恢复室对苏醒期导尿管不适程度按照轻、中、重度进行评估。**结果** B 组和 C 组术后中度及重度导尿管不适发生率(B 组 20.0% 和 5.0%;C 组 12.8% 和 2.5%)明显低于 A 组和 D 组(A 组 38.5% 和 12.8%;D 组 46.0% 和 15.4%) ($\chi^2 = 7.834, 6.764, 8.163, 14.172, 8.362, 6.943, 15.413, 17.512$, 均 $P < 0.05$),B 组和 C 组以及 A 组和 D 组之间差异无统计学意义。**结论** 术前应用盐酸戊乙奎醚 0.010 mg/kg 和 0.015 mg/kg 均可有效地防治全麻苏醒期导尿管不适的发生,老年人以 0.010 mg/kg 为宜。

【关键词】 麻醉前用药; 盐酸戊乙奎醚; 导尿管不适

Preventive and therapeutic effects of different doses of penethylidine hydrochloride on the catheter – related bladder discomfort during general anesthesia recovery period Shi Tianwu, He Wensheng, Sun Yunyun, Li Xia, Hu Yuan, Jiang Wei.

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【Abstract】 Objective To investigate the preventive and therapeutic effects of different doses of penethylidine hydrochloride preoperative medication on the catheter – related bladder discomfort during general anesthesia recovery period. **Methods** 160 adult patients who underwent general anesthesia for elective surgery were randomly divided into four groups. 40 patients in each group received intravenous injection 30min before surgery with penethylidine hydrochloride 0.005mg/kg (group A), 0.010mg/kg (group B), 0.015mg/kg (group C), or normal saline (group D). All patients were catheterized with a 12 Fr Foley's catheter and the balloon was inflated with 8mL normal saline after anesthesia induction. The bladder discomfort was assessed during recovery in the post – anesthesia care unit. The severity of bladder discomfort was graded as mild, moderate and severe. **Results** The incidence of moderate and severe bladder discomfort in group B and group C (group B: 20.0%, 5.0%; group C: 12.8%, 2.5%) were significant lower compared with group A and group D (group A: 38.5%, 12.8%; group D: 46.0% 15.4%) ($\chi^2 = 7.834, 6.764, 8.163, 14.172, 8.362, 6.943, 15.413, 17.512$, all $P < 0.05$). There was no significant difference between group B and group C, group A and group D. **Conclusion** Hydrochloride penethylidine preoperative administration with 0.010mg/kg or 0.015mg/kg can effectively control the incidence of catheter discomfort during general anesthesia recovery period and 0.010mg/kg is appropriate for the elderly.

【Key words】 Preanesthtic medication; Penethylidine hydrochloride; Catheter-related bladder discomfort

保妇康栓联合重组人干扰素 α -2b 治疗慢性宫颈炎伴人乳头瘤病毒感染的治疗及预后分析

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【摘要】 目的 分析保妇康栓联合重组人干扰素 α -2b 治疗慢性宫颈炎伴人乳头瘤病毒(HPV)感染的临床疗效,并观察预后,为其临床治疗提供参考。**方法** 选择 120 例慢性宫颈炎伴 HPV 感染患者,采用随机数字表法将所有患者分为观察组和对照组,两组均为 60 例。观察组患者给予保妇康栓联合重组人干扰素 α -2b 治疗,对照组患者给予重组人干扰素 α -2b 治疗。分别于治疗开始前、1 个疗程结束及治疗结束后 3 个月对患者进行评估,观察比较两组患者的治愈率、治疗总有效率、HPV 转阴率、治疗中不良反应的发生及复发率。**结果** 观察组 60 例患者中治愈 26 例,治愈率为 43.33%,对照组 60 例患者中治愈 15 例,治愈率为 25%,观察组治愈率高于对照组,差异有统计学意义($\chi^2 = 4.482, P < 0.05$);观察组 60 例患者中治疗有效 59 例,治疗的总有效率为 98.33%,对照组 60 例患者中治疗有效 48 例,治疗的总有效率为 80.00%,观察组总有效率高于对照组,差异有统计学意义($\chi^2 = 10.438, P < 0.05$);对照组患者的 HPV 转阴率为 38.33%,观察组为 56.67%,观察组明显高于对照组,差异有统计学意义($\chi^2 = 4.043, P < 0.05$);观察组患者出现不良反应者 7 例,发生率为 11.67%,对照组出现不良反应者 6 例,发生率为 10.00%,差异无统计学意义($\chi^2 = 0.086, P > 0.05$);3 个月后,观察组无复发,对照组复发 1 例,复发率为 1.67%,差异无统计学意义($\chi^2 = 1.008, P > 0.05$)。**结论** 保妇康栓联合重组人干扰素 α -2b 治愈慢性宫颈炎伴 HPV 感染有良好的疗效及预后效果,值得在临床上加以推广应用。

【关键词】 宫颈炎; 人乳头瘤病毒; 保妇康栓; 重组人干扰素 α -2b

Efficacy and prognosis of Baofukang suppository combined with recombinant human interferon α -2b in the treatment of chronic cervicitis with HPV infection Cai Jianfen, Wang Xianyu.

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【Abstract】 Objective To study the clinical efficacy of Baofukang suppository and recombinant human interferon α -2b in the treatment of HPV infection with chronic cervicitis, and to observe the prognosis, thus to provide reference for its clinical treatment. **Methods** 120 patients with chronic cervicitis with HPV infection were selected. All patients were divided into observation group and control group by random number table method, 60 cases in each group. The observation group was treated with Baofukang combined with recombinant human interferon α -2b, and the control group was treated with recombinant human interferon α -2b. The patients were evaluated before treatment, at the end of treatment and 3 months after treatment. The cure rate, total effective rate, recurrence rate, incidence rate of adverse reactions were observed and compared. **Results** In the observation group, 26 cases were cured, the cure rate was 43.33%. In the control group, 15 cases were cured, the cure rate was 25%. The cure rate of the observation group was higher than that of the control group, the difference was statistically significant ($\chi^2 = 4.482, P < 0.05$). The total effective rate of the observation group was 98.33%, which was higher than 80.00% of the control group, the difference was statistically significant ($\chi^2 = 10.438, P < 0.05$). The negative rate of HPV in the control group was 38.33%, which was lower than 56.67% in the observation group, the difference was statistically significant ($\chi^2 =$

4.043, $P < 0.05$). The incidence rate of adverse reactions in the observation group was 11.67%, which in the control group was 10.00%, the difference was not statistically significant ($\chi^2 = 0.086, P > 0.05$). After treatment for 3 months, the recurrence rate was 0.00% in the observation group and 1.67% in the control group, the difference was not statistically significant ($\chi^2 = 1.008, P > 0.05$). **Conclusion** The combination of Baofukang suppository and recombinant human interferon $\alpha-2b$ showed good curative effect and prognosis in the treatment of chronic cervicitis with HPV infection, and it is worthy to be popularized in clinical practice.

【Key words】 Uterine cervicitis; Human papillomavirus; Baofukang suppository; Recombinant human interferon $\alpha-2b$

体质量管理对肥胖型糖尿病肾病患者血清低氧诱导因子-1 α 、肿瘤坏死因子- α 的影响

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【摘要】 **目的** 探讨体质量管理对肥胖型糖尿病肾病患者血清低氧诱导因子-1 α (HIF-1 α)、肿瘤坏死因子- α (TNF- α) 的影响。**方法** 选取肥胖型糖尿病肾病患者 180 例,根据体质量管理分为体质量指数(BMI)上升组(BMI 较基础值增加 $\geq 3\%$)51 例、BMI 稳定组(BMI 较基础值变化 $< 3\%$)64 例、BMI 下降组(BMI 较基础值减少 3%)65 例。采用双抗体夹心酶联免疫法测定血清 HIF-1 α 、TNF- α 含量。**结果** 与 BMI 下降组比较, BMI 上升组和 BMI 稳定组空腹血糖、糖化血红蛋白、餐后 2 h 血糖升高(BMI 上升组 $t = 10.816, 17.839, 12.912$, BMI 稳定组 $t = 6.950, 9.878, 8.301$, 均 $P < 0.05$); 与 BMI 稳定组比较, BMI 上升组空腹血糖、糖化血红蛋白、餐后 2 h 血糖升高($t = 5.298, 8.475, 5.874$, 均 $P < 0.05$); 与 BMI 下降组比较, BMI 上升组和 BMI 稳定组血肌酐和尿素氮升高(BMI 上升组: $t = 13.477, 27.254$, BMI 稳定组: $t = 13.820, 11.073$, 均 $P < 0.05$); 与 BMI 稳定组比较, BMI 上升组血肌酐和尿素氮升高($t = 6.502, 14.154$, 均 $P < 0.05$); 与 BMI 下降组比较, BMI 上升组和 BMI 稳定组 HIF-1 α 和 TNF- α 升高(BMI 上升组 $t = 30.050, 22.963$, BMI 稳定组 $t = 16.261, 16.476$, 均 $P < 0.05$); 与 BMI 稳定组比较, BMI 上升组 HIF-1 α 和 TNF- α 升高($t = 17.951, 9.601$, 均 $P < 0.05$)。**结论** BMI 上升糖尿病肾病患者血清 HIF-1 α 和 TNF- α 含量明显增加,通过体质量管理,体质量稳定和体质量下降患者血清 HIF-1 α 和 TNF- α 含量明显降低。

【关键词】 体质量管理;肥胖; 糖尿病肾病; 低氧诱导因子-1 α ; 肿瘤坏死因子- α

Effects of weight management on serum HIF - 1 α and TNF - α in patients with obese type 2 diabetic nephropathy Tang Zhiyue.

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【Abstract】 Objective To investigate the effect of weight management on serum HIF - 1 α and tumor necrosis factor α (TNF - α) in patients with obese type 2 diabetic nephropathy. **Methods** 180 patients with obese diabetic nephropathy were selected. According to weight management, the patients were divided into BMI increased group (BMI compared with the basic value increased more than or equal to 3%) with 51 cases, BMI stable group (BMI compared with the basic value changes of $< 3\%$) with 64 cases, BMI decreased group (compared with baseline values BMI reduction of 3%) with 65 cases. The serum contents of HIF - 1 α and TNF - α were measured by double antibody sandwich enzyme - linked immunosorbent assay. **Results** Compared with BMI decreased group, the fasting blood glucose, glycosylated hemoglobin, postprandial 2h blood glucose in the BMI increased group and BMI stable group were increased (BMI increased group: $t = 10.816, 17.839, 12.912$, BMI stable group: $t = 6.950, 9.878, 8.301$, all $P < 0.05$). Compared with the BMI stable group, the fasting blood glucose, glycosylated hemoglobin, postprandial 2h blood glucose in the BMI increased group were increased ($t = 5.298, 8.475, 5.874$, all $P < 0.05$). Compared with BMI decreased group, the serum creatinine and blood urea nitrogen in BMI increased group and BMI stable group were increased (BMI increased group: $t = 13.477, 27.254$, BMI stable group: $t = 13.820, 11.073$, all $P < 0.05$). Compared with the BMI stable group, the serum creatinine and blood urea nitrogen in the BMI increased group were increased ($t = 6.502, 14.154$, all $P < 0.05$). Compared with BMI decreased group, the HIF - 1 α and TNF - α levels of the BMI increased group and BMI stable group were elevated (BMI increased group: $t = 30.050, 22.963$, BMI stable group: $t = 16.261, 16.476$, all $P < 0.05$). Compared with the BMI stable group, the HIF - 1 α and TNF - α levels of BMI ascending group were increased ($t = 17.951, 9.601$, all $P < 0.05$). **Conclusion** The serum levels of HIF - 1 α and TNF - α in type 2 diabetic nephropathy patients with increased BMI are significantly increased, and the serum levels of HIF - 1 α and TNF - α are decreased significantly by weight management.

【Key words】 Weight management; Obesity; Diabetic nephropathies; Hypoxia inducible factor-1 α ; Tumor necrosis factor- α

清热消痰养阴方联合糖皮质激素治疗儿童难治性肺炎支原体肺炎的疗效研究

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【摘要】 **目的** 探讨清热消痰养阴方联合糖皮质激素治疗儿童难治性肺炎支原体肺炎的疗效。**方法** 选取难治性支原体肺炎患儿 134 例作为研究对象,采用随机数字表法将所有患儿分为对照组和观察组,每组 67 例。对照组采用氢化可的松治疗,观察组采用清热消痰养阴方联合糖皮质激素治疗。干预 1 周后,比较两组干预前临床资料及干预后临床症状、体征改善情况和总体治疗效果。**结果** 两组患儿退热时间的差异无统计学意义,观察组咳嗽缓解时间(3.61 ± 1.13)d、肺部啰音吸收时间(6.52 ± 1.90)d、胸腔积液消失时间(7.02 ± 2.10)d,均显著短于对照组的咳嗽缓解时间(4.89 ± 2.18)d($t = 2.920, P = 0.021$)、肺部啰音吸收时间(8.24 ± 2.75)d($t = 3.108, P = 0.000$)、胸腔积液消失时间(9.26 ± 2.38)d($t = 5.027, P = 0.000$);两组患儿白细胞总数、C-反应蛋白、红细胞沉降率差异均无统计学意义,观察组淋巴细胞百分比(55.25 ± 4.91)%,显著高于对照组的(50.16 ± 4.83)%($t = 2.597, P = 0.037$);观察组痊愈率(97.01%)显著高于对照组(83.58%)($t = 6.849, P = 0.009$)。**结论** 清热消痰养阴方联合糖皮质激素不仅可以有效地改善患儿的临床症状,提升患儿的淋巴细胞比例,还可以提高总体疗效,值得临床推广。

【关键词】 清热消痰养阴方; 糖皮质激素类; 肺炎,支原体

Effect of heat phlegm and nourishing Yin combined with glucocorticoids in the treatment of refractory Mycoplasma pneumoniae pneumonia in children Zhang Baozhen, Wang Lihe.

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【Abstract】 **Objective** To evaluate the clinical efficacy of phlegm and nourishing Yin combined with glucocorticoids in the treatment of refractory Mycoplasma pneumoniae pneumonia in children. **Methods** 134 children with Mycoplasma pneumoniae pneumonia were divided into control group and observation group according to the random number, 67 cases in each group. The control group were given hydrocortisone, and the observation group received phlegm and nourishing Yin combined with glucocorticoid. After intervention, the clinical data and the improvement of the clinical symptoms of the two groups were compared. **Results** There was no statistically significant difference in antipyretic time between the two groups ($P > 0.05$). The time of cough relief, the absorption time of lung rales, the disappearance time of pleural effusion of the observation group were (3.61 ± 1.13)d, (6.52 ± 1.90)d and (7.02 ± 2.10)d, respectively, which were significantly shorter than those of the control group [(4.89 ± 2.18) d, $t = 2.920, P = 0.021$; (8.24 ± 2.75)d, $t = 3.108, P = 0.000$; (9.26 ± 2.38)d, $t = 5.027, P = 0.000$]. There were no statistically significant differences in the total white blood cell count, C-reactive protein and erythrocyte sedimentation rate between the two groups (all $P > 0.05$). The percentage of lymphocytes in the observation group [$(55.25 \pm 4.91)\%$] was significantly higher than that in the control group [$(50.16 \pm 4.83)\%$, $t = 2.597, P = 0.037$]. The effective treatment rate in the observation group was 97.01%, which was significantly higher than 83.58% in the control group ($\chi^2 6.849, P = 0.009$). **Conclusion** Heat phlegm and nourishing Yin combined with glucocorticoid can not only effectively improve the patients' clinical symptoms, improve the proportion of lymphocyte, but also can improve the overall efficacy of children, it is worthy of clinical promotion.

【Key words】 Heat phlegm and nourishing yin; Glucocorticoids; Pneumonia, mycoplasma

阿替卡因肾上腺素注射液与利多卡因注射液用于智齿拔除术中的麻醉效果比较

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【摘要】 **目的** 比较阿替卡因肾上腺素注射液与利多卡因注射液在智齿拔除术中麻醉效果。**方法** 选择 220 例智齿患者作为本次研究的对象,采用随机数字表法分为研究组 110 例(智齿共 132 颗,上颌智齿 47 颗,下颌智齿 85 颗)和对照组 110 例(智齿共 129 颗,上颌智齿 51 颗,下颌智齿 78 颗),研究组患者选取阿替卡因肾上腺素注射液麻醉,对照组患者选择盐酸利多卡因注射液麻醉。观察比较两组患者上、下颌智齿麻醉效果、VAS 评分及不良反应发生情况。**结果** 研究组上颌智齿麻醉总有效率(100.00%)明显高于对照组(90.20%),差异有统计学意义($\chi^2 = 6.358, P < 0.05$)。研究组下颌智齿麻醉总有效率(100.00%)明显高于对照组(92.31%),差异有统计学意义($\chi^2 = 6.788, P < 0.05$)。研究组上颌智齿麻醉注射时 VAS 评分(2.57 ± 0.65)分,显著低于对照组的(2.87 ± 0.63)分,差异有统计学意义($t = 2.319, P < 0.05$)。对照组出现 1 例血管所致的局部血肿,研究组患者未出现并发症。**结论** 智齿拔除时,采用阿替卡因肾上腺素注射液麻醉效果显著好于利多卡因注射液的麻醉效果,并未出现并发症,值得临床推广使用。

【关键词】 拔牙; 麻醉; 阿替卡因肾上腺素注射液; 盐酸利多卡因注射液

Comparison of the anesthetic effects of articaine adrenaline injection and lidocaine injection in wisdom tooth extraction Hu Guanqing, Zhou Yanli, Hu Jianli.

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【Abstract】 Objective To compare the anesthetic effect of articaine adrenaline injection and lidocaine injection in wisdom tooth extraction. **Methods** 220 patients with wisdom teeth were selected as the research subjects. According to the random table method, the patients were randomly divided into research group 110 cases (a total of wisdom teeth 132, maxillary wisdom teeth 47, mandibular wisdom tooth 85) and the control group 110 cases (a total of wisdom teeth 129, maxillary wisdom teeth 51, mandibular wisdom tooth 78). The research group received articaine adrenaline injection, the control group received lidocaine hydrochloride injection. The effects of anesthesia, VAS score and adverse reactions in the two groups were observed. **Results** The total effective rate of maxillary wisdom tooth anesthesia in the research group (100.00%) was significantly higher than that in the control group (90.20%), and the difference between the two groups was statistically significant ($\chi^2 = 6.358, P < 0.05$). The total effective rate of mandibular wisdom tooth anesthesia in the research group (100.00%) was significantly higher than that in the control group (92.31%), and the difference between the two groups was statistically significant ($\chi^2 = 6.788, P < 0.05$). The VAS score of maxillary wisdom tooth anesthesia in the research group [2.57 ± 0.65] points was significantly lower than that in the control group [2.87 ± 0.63] points, and the difference between the two groups was statistically significant ($t = 2.319, P < 0.05$). In the control group, there was 1 case of hematoma caused by blood vessels, and no complications occurred in the research group. **Conclusion** The anesthetic effects of articaine adrenaline injection in wisdom tooth extraction is better than lidocaine hydrochloride injection, without any complications, it is worthy of clinical promotion.

【Key words】 Teeth extraction; Anesthesia; Articaine adrenaline injection; Lidocaine hydrochloride injection

全胸腔镜肺叶切除术治疗老年人非小细胞肺癌的疗效观察

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【摘要】 目的 探讨全胸腔镜肺叶切除术治疗老年人非小细胞肺癌的临床疗效。**方法** 选取 120 例老年非小细胞肺癌患者为研究对象, 采用随机数字表法分为研究组 60 例和对照组 60 例, 对照组采用传统开胸肺叶切除术治疗, 研究组采用全胸腔镜肺叶切除术治疗, 比较两组手术相关指标、术后疼痛情况、心肺功能、术后并发症及临床疗效。**结果** 研究组术中出血量少于对照组[(138.44 ± 41.53) mL 比(327.83 ± 54.61) mL]、术后引流量少于对照组[(1 290.28 ± 129.37) mL 比(1 643.19 ± 231.27) mL]、手术时间短于对照组[(145.72 ± 19.65) min 比(243.26 ± 50.38) min]、住院时间短于对照组[(7.43 ± 1.59) d 比(10.35 ± 2.34) d], 差异均有统计学意义($t = 21.383, 10.316, 13.972, 7.995$, 均 $P < 0.05$)。研究组术后 1 d[(7.57 ± 1.63) 分比(8.76 ± 2.06) 分]、3 d[(5.46 ± 0.82) 分比(6.68 ± 1.53) 分]、7 d[(2.51 ± 0.41) 分比(4.94 ± 1.37) 分]疼痛较对照组轻, 差异均有统计学意义($t = 3.509, 5.444, 13.162$, 均 $P < 0.05$)。两组治疗前心肺功能差异均无统计学意义($t = 0.207, 0.287, 1.112, 0.137$, 均 $P > 0.05$); 治疗后研究组心率(HR)[(83.27 ± 12.85) 次/min 比(95.38 ± 15.6) 次/min]、一氧化碳弥散量(DLCO)[(67.49 ± 6.84)% 比(71.43 ± 5.91)%]较对照组低, 第 1 秒呼气容积(FEV₁)[(1.67 ± 0.25) L 比(1.42 ± 0.10) L]、最大通气量(MVV)[(74.34 ± 0.56)% 比(63.25 ± 0.51)%]较对照组高, 差异均有统计学意义($t = 4.636, 3.376, 7.192, 113.413$, 均 $P < 0.05$)。研究组术后并发症发生率较对照组低(1.67% 比 11.67%) ($\chi^2 = 4.821, P < 0.05$)。两组中位无瘤生存期(19.24 个月比 19.49 个月)差异无统计学意义($u = 0.571, P > 0.05$)。两组无瘤生存率差异无统计学意义($P > 0.05$)。**结论** 全胸腔镜肺叶切除术对老年非小细胞肺癌患者心肺功能影响较小, 创伤较轻, 近期疗效优于传统开胸肺叶切除术, 但远期疗效相似。

【关键词】 癌, 非小细胞肺; 肺叶切除术; 胸腔镜检查

Effect of thoracoscopic lobectomy in the treatment of elderly patients with non small cell lung cancer

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【Abstract】 Objective To investigate the clinical effect of thoracoscopic lobectomy in the treatment of elderly patients with non-small cell lung cancer. **Methods** 120 elderly patients with non-small cell lung cancer were selected as study objects, and they were randomly divided into study group (60 cases) and control group (60 cases) according to the digital table. The control group was treated with traditional thoracic lobectomy. The study group was treated with thoracoscopic lobectomy. The surgical related indicators, postoperative pain, cardiopulmonary function, postoperative complications and clinical efficacy were compared between the two groups. **Results** The blood loss of the study group was (138.44 ± 41.53) mL, which was less than (327.83 ± 54.61) mL of the control group, and the postoperative drainage was (1 290.28 ± 129.37) mL in the study group, which was less than (1 643.19 ± 231.27) mL in the control group. The operation time and hospitalization time of the study group were (145.72 ± 19.65) min, (7.43 ± 1.59) d, respectively, which were shorter than (243.26 ± 50.38) min, (10.35 ± 2.34) d of the control group ($t = 21.383, 10.316, 13.972, 7.995$, all $P < 0.05$). 1, 3, 7 days after surgery, the VAS scores of the study group were significantly lower than those of the control group [(7.57 ± 1.63) vs. (8.76 ± 2.06), (5.46 ± 0.82) vs. (6.68 ± 1.53), (2.51 ± 0.41) vs. (4.94 ± 1.37), $t = 3.509, 5.444, 13.162$, all $P < 0.05$]. There was no statistically signif-

icant difference in cardiopulmonary function between the two groups before treatment ($t = 0.207, 0.287, 1.112, 0.137$, all $P > 0.05$). After treatment, the heart rate (HR) and the carbon monoxide diffusion (DLCO) of the study group were significantly lower than those of the control group [(83.27 ± 12.85) times/min vs. (95.38 ± 15.6) times/min, $(67.49 \pm 6.84)\%$ vs. $(71.43 \pm 5.91)\%$], the FEV₁ and mean ventilation volume (MVV) of the study group were significantly higher than those of the control group [(1.67 ± 0.25) L vs. (1.42 ± 0.10) L, $(74.34 \pm 0.56)\%$ vs. $(63.25 \pm 0.51)\%$], and the differences were statistically significant ($t = 4.636, 3.376, 7.192, 113.413$, all $P < 0.05$). The incidence rate of postoperative complications in the study group was lower than that in the control group (1.67% vs. 11.67% , $\chi^2 = 4.821, P < 0.05$). There was no statistically significant difference between the two groups in median survival time (19.24 months vs. 19.49 months, $u = 0.571, P > 0.05$). There was no statistically significant difference in the disease free survival rate between the two groups ($P > 0.05$). **Conclusion** Thoracoscopic lobectomy has less effect on cardiopulmonary function in elderly patients with non-small cell lung cancer. The short-term curative effect is better than traditional thoracic lobectomy, but the long-term curative effect is similar.

[Key words] Carcinoma, non-small-cell lung; Lobectomy; Thoracoscopy

尼可地尔与曲美他嗪对经皮冠状动脉介入术后患者血管内皮功能及炎症因子的影响

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【摘要】 **目的** 比较尼可地尔与曲美他嗪对冠心病患者经皮冠状动脉介入(PCI)术后血管内皮功能及炎症因子的影响。**方法** 160 例行择期 PCI 治疗的冠心病患者,采用随机数字表法将其分为四组,每组 40 例。尼可地尔组于 PCI 术前 72 h 开始口服尼可地尔片 5 mg/次,3 次/d;曲美他嗪组于术前 72 h 开始口服盐酸曲美他嗪片 20 mg 次,3 次/d;联合用药组于术前 72 h 开始口服上述同等剂量的尼可地尔和曲美他嗪;对照组不给予尼可地尔或曲美他嗪治疗。观察各组 PCI 术前、术后 6 h、术后 12 h、术后 24 h 肌酸激酶同工酶(CK-MB)和肌钙蛋白(cTnI)的动态变化,并比较各组 PCI 术前、术后 6 h、术后 24 h 内皮素(ET-1)、一氧化氮(NO)、超敏 C 反应蛋白(hs-CRP)、肿瘤坏死因子 α (TNF- α)及白介素 6(IL-6)的差异。**结果** 对照组术后 CK-MB、cTnI 较术前明显升高($t = 2.500, 3.663, 4.168, 5.783, 4.912$, 均 $P < 0.05$),其余三组术后未见明显变化($P > 0.05$)。尼可地尔组、曲美他嗪组、联合用药组术后 cTnI 均明显低于对照组($F = 11.960, 15.643, 16.078$, 均 $P < 0.05$),但三组间差异无统计学意义($P > 0.05$)。四组患者术后 ET-1、hs-CRP、TNF- α 、IL-6 均较术前明显升高(对照组: $t = 6.897, 5.293, 15.934, 16.759, 8.516, 9.209, 6.809, 6.757$, 均 $P < 0.05$;尼可地尔组: $t = 2.254, 8.903, 11.280, 5.961, 5.992, 4.235, 4.738$, 均 $P < 0.05$;曲美他嗪组: $t = 3.425, 10.513, 11.582, 4.117, 5.696, 4.130, 3.868$, 均 $P < 0.05$;联合用药组: $t = 3.180, 9.204, 10.107, 4.839, 6.214, 5.151, 5.883$, 均 $P < 0.05$),NO 较术前明显降低(对照组: $t = 5.707, 5.066$, 均 $P < 0.05$;尼可地尔组: $t = 2.701, 2.393$, 均 $P < 0.05$;曲美他嗪组: $t = 3.662, 3.163$, 均 $P < 0.05$;联合用药组: $t = 2.632, 2.427$, 均 $P < 0.05$),尼可地尔组、曲美他嗪组、联合用药组术后 ET-1、hs-CRP、TNF- α 、IL-6 均明显低于对照组($F = 9.709, 7.794, 43.772, 47.321, 15.252, 10.565, 5.632, 4.372$, 均 $P < 0.05$),NO 明显高于对照组($F = 14.138, 8.374$, 均 $P < 0.05$);尼可地尔组术后 NO 高于曲美他嗪组($t = 2.249, 2.305$, 均 $P < 0.05$),其余指标三组间差异无统计学意义($P > 0.05$)。析因分析显示,尼可地尔与曲美他嗪在改善 ET-1、NO、hs-CRP、TNF- α 、IL-6 等方面无交互作用($P > 0.05$)。**结论** 尼可地尔与曲美他嗪均有助于减轻 PCI 相关心肌损伤,改善 PCI 术后内皮功能,抑制炎症因子释放,但两者无协同作用;尼可地尔在改善血管内皮功能方面可能更有效。

【关键词】 血管成形术,经腔,经皮冠状动脉; 内皮功能; 细胞因子类; 尼可地尔; 曲美他嗪

Effects of nicorandil or trimetazidine on endothelial function and inflammatory factors in patients with coronary heart disease after PCI Liang Shanwu, Yang Yongchao.

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【Abstract】 **Objective** To compare the effects of nicorandil and trimetazidine on endothelial function and inflammatory cytokines in patients with coronary heart disease after percutaneous coronary intervention(PCI), and to analyze the synergistic effect. **Methods** 160 patients with coronary heart disease underwent elective PCI were enrolled and randomly divided into four groups, 40 cases in each group. The nicorandil group was given nicorandil tablets 5mg once time, 3 times a day at 72h before PCI. The trimetazidine group was given trimetazidine tablets 20mg once time, 3 times a day. The combined group was given the same dose of nicorandil and trimetazidine. The control group was not given nicorandil or trimetazidine. The changes of CK - MB, cTnI, ET - 1, NO, hs - CRP, TNF - α and IL - 6 were observed and compared before and after PCI. **Results** The CK - MB and cTnI in the control group were significantly increased after PCI ($t = 2.500, 3.663$, all $P < 0.05$; $t = 4.168, 5.783, 4.912$, all $P < 0.05$), but there

were no statistically significant differences in the other three groups (all $P > 0.05$). The level of cTnI in the control group was higher than that in the other three groups after PCI ($F = 11.960, 15.643, 16.078$, all $P < 0.05$). After PCI, the levels of ET-1, hs-CRP, TNF- α and IL-6 in the four groups were all significantly increased (control group: $t = 6.897, 5.293$, all $P < 0.05$; $t = 15.934, 16.759$, all $P < 0.05$; $t = 8.516, 9.209$, all $P < 0.05$; $t = 6.809, 6.757$, all $P < 0.05$; nicorandil group: $t = 2.254, P < 0.05$; $t = 8.903, 11.280$, all $P < 0.05$; $t = 5.961, 5.992$, all $P < 0.05$; $t = 4.235, 4.738$, all $P < 0.05$; trimetazidine group: $t = 3.425, P < 0.05$; $t = 10.513, 11.582$, all $P < 0.05$; $t = 4.117, 5.696$, all $P < 0.05$; $t = 4.130, 3.868$, all $P < 0.05$; combination group: $t = 3.180, P < 0.05$; $t = 9.204, 10.107$, all $P < 0.05$; $t = 4.839, 6.214$, all $P < 0.05$; $t = 5.151, 5.883$, all $P < 0.05$), and NO level was significantly decreased (control group: $t = 5.707, 5.066$, all $P < 0.05$; nicorandil group: $t = 2.701, 2.393$, all $P < 0.05$; trimetazidine group: $t = 3.662, 3.163$, all $P < 0.05$; combination group: $t = 2.632, 2.427$, all $P < 0.05$). The levels of ET-1, hs-CRP, TNF- α and IL-6 in the control group were significantly higher than those in the other three groups after PCI ($F = 9.709, 7.794, P < 0.05$; $F = 43.772, 47.321, P < 0.05$; $F = 15.252, 10.565, P < 0.05$; $F = 5.632, 4.372, P < 0.05$), and NO level in the control group was lower than that in the other three groups ($F = 14.138, 8.374$, all $P < 0.05$). The level of NO in the nicorandil group was higher than that in the trimetazidine group ($t = 2.249, 2.305$, all $P < 0.05$). There was no synergistic effect between nicorandil and trimetazidine in improving ET-1, NO, hs-CRP, TNF- α or IL-6 ($P > 0.05$). **Conclusion** Both nicorandil and trimetazidine may help to relieve PCI-related myocardial injury, improve endothelial function, inhibit inflammatory factors after PCI, but there is no synergistic effect. Nicorandil may be more effective in improving endothelial function.

【Key words】 Angioplasty, transluminal, percutaneous coronary; Endothelial function; Cytokines; Nicorandil; Trimetazidine

吞咽训练及冰刺激联合肌电生物反馈治疗在脑卒中吞咽呛咳患者中的应用效果

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【摘要】 目的 探讨吞咽训练及冰刺激联合肌电生物反馈治疗在脑卒中吞咽呛咳患者中的应用效果。**方法** 选取 79 例脑卒中吞咽呛咳患者, 采用随机数字表法分组, 对照组 39 例给予常规吞咽训练干预, 观察组 40 例于吞咽训练基础上实施冰刺激 + 肌电生物反馈治疗, 观察比较两组临床干预效果及干预前后吞咽功能 (VFSS) 评分, 并统计两组并发症发生情况。**结果** 观察组干预总有效率为 90.00% (36/40), 高于对照组的 71.79% (28/39), 差异有统计学意义 ($\chi^2 = 4.255, P = 0.039$); 干预 8 周后观察组 VFSS 评分高于对照组, 差异有统计学意义 ($t = 12.173, P = 0.000$); 观察组并发症发生率为 7.50% (3/40), 低于对照组的 25.64% (10/39), 差异有统计学意义 ($\chi^2 = 4.727, P = 0.030$)。**结论** 吞咽训练及冰刺激联合肌电生物反馈治疗可改善脑卒中吞咽呛咳患者吞咽功能, 效果显著, 安全性高。

【关键词】 卒中; 吞咽障碍; 冰刺激; 肌电生物反馈

Application effect of swallowing training and ice stimulation combined with electromyography biofeedback therapy in stroke patients with swallowing and coughing Qin Yanxia, Liu Zaigao, Meng Qingtian, Zhou Ya, Cheng Pan.

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【Abstract】 Objective To investigate the application effect of swallowing training and ice stimulation combined with electromyography biofeedback therapy in stroke patients with swallowing and coughing. **Methods** Seventy - nine stroke swallowing and coughing patients treated were collected and were randomly divided into two groups (39 cases in control group, 40 cases in observation group) according to the digital table. The control group was treated with normal swallowing training, while the observation group was treated with ice stimulation combined with electromyography biofeedback therapy. The clinical intervention effect and the VFSS results before and after the intervention were observed and compared. The complications of the two groups were statistically analyzed. **Results** The total effective rate of the observation group [90.00% (36/40)] was higher than that of the control group [71.79% (28/39), $\chi^2 = 4.255, P = 0.039$]. After eight - week intervention, the VFSS score of the observation group was higher than that of the control group ($t = 12.173, P = 0.000$); and the incidence rate of complications of the observation group [7.50% (3/40)] was lower than that of the control group [25.64% (10/39), $\chi^2 = 4.727, P = 0.030$]. **Conclusion** Swallowing training and ice stimulation combined with electromyography biofeedback therapy can significantly improve the swallowing function of stroke patients with swallowing and coughing, and it is safe.

【Key words】 Stroke; Deglutition disorders; Ice stimulation; Electromyography biofeedback

阿米替林联合多潘立酮治疗功能性消化不良的临床疗效分析

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【摘要】 目的 观察阿米替林联合多潘立酮治疗功能性消化不良(FD)的临床疗效。方法 选取 156 例 FD 患者为研究对象,采用完全随机分配法分为观察组和对照组,各 78 例。对照组给予多潘立酮治疗,观察组给予阿米替林联合多潘立酮进行治疗。观察两组治疗前后临床症状积分变化与不良反应发生情况,比较其临床疗效。结果 治疗后,观察组总有效率为 93.59%,明显高于对照组的 76.92%,组间差异有统计学意义($\chi^2 = 10.59, P < 0.01$)。两组早饱、餐后腹胀、恶心呕吐、上腹胀痛、嗝气等临床症状积分均明显减少($t_{\text{观}} = 16.21, 14.69, 13.84, 15.17, 42.64, t_{\text{对}} = 17.54, 8.88, 16.43, 10.98, 15.06$, 均 $P < 0.01$),且观察组临床症状改善程度更为显著($t = 9.89, 9.79, 8.47, 9.99, 18.52$, 均 $P < 0.01$)。观察组不良反应发生率 16.67%,对照组不良反应发生率 23.08%,差异无统计学意义($\chi^2 = 1.09, P > 0.05$),且治疗结束后均自行消失。结论 与单独使用多潘立酮相比,阿米替林联合多潘立酮治疗 FD 患者疗效显著,安全性好,有利于改善其临床症状,提高有效率。

【关键词】 消化不良; 阿米替林; 多潘立酮

Clinical efficacy of amitriptyline combined with domperidone in the treatment of functional dyspepsia

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【Abstract】 Objective To observe and analyze the clinical efficacy of amitriptyline combined with domperidone in the treatment of functional dyspepsia (FD). **Methods** 156 patients with FD were selected as the study subjects, and they were randomly divided into the observation group and the control group, 78 cases in each group. The patients in the control group were treated with domperidone, and the patients in the observation group were given amitriptyline combined with domperidone. The changes of clinical symptoms scores and the occurrence of adverse reactions were observed before and after treatment in both two groups, and the clinical curative effect was compared. **Results** After treatment, the total effective rate of the observation group was 93.59%, which was significantly higher than 76.92% of the control group, and there was significant difference between the two groups ($\chi^2 = 10.59, P < 0.01$). The early satiety, postprandial bloating, nausea and vomiting, epigastric distending pain, belching and other clinical symptoms scores in two groups were significantly reduced ($t_{\text{observation group}} = 21.95, 33.78, 42.12, 37.58, 42.64, t_{\text{control group}} = 17.54, 8.88, 16.43, 10.98, 15.06$, all $P < 0.01$), and the clinical symptoms of the observation group improved more significantly ($t = 9.89, 9.79, 8.47, 9.99, 18.52$, all $P < 0.01$). The incidence rate of adverse reactions in the observation group was 16.67%, which in the control group was 23.08%, the difference between the two groups was not statistically significant ($\chi^2 = 1.09, P > 0.05$). After the treatment, the adverse reactions disappeared spontaneously. **Conclusion** Compared with the use of domperidone alone, the clinical efficacy of amitriptyline combined with domperidone in the treatment of FD patients is significant with good safety, and is conducive to improve the clinical symptoms of patients, increase the efficacy and worthy of clinical application.

【Key words】 Dyspepsia; Amitriptyline; Domperidone

丙戊酸钠分别与齐拉西酮和奥氮平联用治疗 I 型双相情感障碍临床对比研究

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【摘要】 目的 探讨丙戊酸钠分别与齐拉西酮和奥氮平联用治疗 I 型双相情感障碍临床疗效差异。**方法** 选取 I 型双相情感障碍患者共 100 例,采用随机数字表法分为 A 组(50 例)和 B 组(50 例),在丙戊酸钠基础上分别联合奥氮平和齐拉西酮辅助治疗;比较两组近期疗效,治疗前后贝克躁狂量表(BRMS)评分、数字符号评分、连线测验 A/B(TMT)评分、威斯康星片分类测验(WCST)评分及汉诺塔认知功能评分(TOH)。**结果** A 组和 B 组临床治疗总有效率分别为 88.00% 和 92.00%,两组差异无统计学意义($\chi^2 = 8.14, P > 0.05$);两组治疗后 BRMS 评分均显著低于治疗前($t = 3.74, 4.06, 均 P < 0.05$);两组治疗后 BRMS 评分组间差异无统计学意义($t = 0.89, P > 0.05$);B 组治疗后数字符号评分、WCST 评分及 TOH 认知功能评分均显著高于 A 组、治疗前($t = 3.17, 4.03, 3.96, 3.54, 2.86, 3.81, 4.66, 4.29, 3.81, 3.43, 均 P < 0.05$);B 组治疗后 TMT A/B 评分均显著低于 A 组、治疗前($t = 3.82, 4.82, 4.55, 4.09, 3.83, 均 P < 0.05$)。**结论** 丙戊酸钠分别与齐拉西酮和奥氮平联用治疗 I 型双相情感障碍在缓解躁狂症状方面效果接近,但丙戊酸钠联合齐拉西酮方案更有助于促进认知功能损伤恢复,改善远期预后。

【关键词】 双相情感障碍; 丙戊酸钠; 齐拉西酮; 奥氮平

Clinical comparative study of sodium valproate separately combined with ziprasidone and olanzapine in the treatment of bipolar disorder type I Le Jun'er, Wang Jianlin, Zhang Mintao.

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【Abstract】 Objective To compare the clinical effects of sodium valproate separately combined with ziprasidone and olanzapine in the treatment of bipolar disorder type I. **Methods** 100 patients with bipolar disorder type I were chosen. According to the digital table, the patients were randomly divided into two groups, including A group (50 children) with olanzapine and B group (50 children) with ziprasidone on the basis of sodium valproate. The clinical effects, the BRMS score, digit symbol scores, TMT A/B scores, WCST score and TOH cognitive function scores before and after treatment of the two groups were compared. **Results** The total effective rates of A group and B group were 88.00%, 92.00%, respectively. There was no statistically significant difference in clinical effects between the two groups ($\chi^2 = 8.14, P < 0.05$). The BRMS scores of both two groups after treatment were significantly lower than before treatment ($t = 3.74, 4.06, all P < 0.05$). There was no statistically significant difference in BRMS score after treatment between the two groups ($t = 0.89, P > 0.05$). The digit symbol scores, WCST score and TOH cognitive function scores of B group after treatment were significantly higher than those of A group and before treatment ($t = 3.17, 4.03, 3.96, 3.54, 2.86, 3.81, 4.66, 4.29, 3.81, 3.43, all P < 0.05$). The TMT A/B scores of B group after treatment were significantly lower than those of A group and before treatment ($t = 3.82, 4.82, 4.55, 4.09, 3.83, all P < 0.05$). **Conclusion** Sodium valproate separately combined with ziprasidone and olanzapine in the treatment of bipolar disorder type I possess the same clinical effects in manic symptoms relief, and sodium valproate combined with ziprasidone can effectively promote the recovery process of cognitive function damage and improve the clinical prognosis for long-term.

【Key words】 Bipolar disorder; Sodium valproate; Ziprasidone; Olanzapine

采用自体骨髓间充质干细胞修复股骨头坏死(I、II 期)的临床研究

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【摘要】 **目的** 研究采用自体骨髓间充质干细胞修复股骨头缺血性坏死改善和治疗效果。**方法** 运用自体骨髓间充质干细胞治疗 56 例髋成人股骨头缺血性坏死患者。采取患者髂后上棘骨髓液 200 mL,分离自体骨髓间充质干细胞并制成悬液 20~30 mL,在数字减影技术(DSA)透视下超选择注入股骨头滋养供血动脉内,行自体骨髓间充质干细胞移植。移植术后 DSA 观察新血管形成,影像学方法观察股骨头形态学变化。**结果** 6 个月后随访发现接受自体骨髓间充质干细胞移植治疗的 56 例患者,髋关节疼痛缓解的 52 例(86.6%),髋关节功能改善的 50 例(82.3%),行走距离延长者 51 例(85.7%);DSA 检查显示供血动脉较移植之前明显增多、增粗、血流速度增快。12~24 个月后股骨头区域的骨质明显获得改善(100.0%)。**结论** 骨髓间充质干细胞移植方法简便,安全有效,能够有效的治疗 I 期和 II 期的股骨头缺血性坏死。

【关键词】 间质干细胞移植; 股骨头坏死

Clinical study of autologous bone marrow mesenchymal stem cells in repairing osteonecrosis (stage I and II)

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【Abstract】 **Objective** To study the effect of autologous bone marrow mesenchymal stem cells in the treatment of osteonecrosis. **Methods** 56 cases of osteonecrosis of femoral head(ONFH) were treated with autologous bone marrow mesenchymal stem cells. DSA observed neovascularization after transplantation, morphological changes of femoral head were observed by imaging method. **Results** Of the 30 patients who underwent autologous bone marrow stem cell transplantation, 86.6% had resuscitation of hip pain, 23.3% had improved hip function, and 85.7% had walking distance. Examination showed that the arterial artery was significantly increased before transplantation, thickening, faster blood flow. The femoral head area of the bone was significantly improved (100.0%) after 12-24 months. **Conclusion** The method of transplantation of bone marrow mesenchymal stem cells is simple, safe and effective. It is effective for stage I and II of the avascular necrosis of the femoral head.

【Key words】 Marrow mesenchymal stem cells transplantation; Femur head necrosis

西洛他唑联合阿司匹林和氯吡格雷用于老年脑血管病变患者经皮冠状动脉介入治疗术后的抗血栓作用分析

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【摘要】 目的 分析西洛他唑联合阿司匹林和氯吡格雷用于老年脑血管病变患者经皮冠状动脉介入治疗(PCI)术后的抗血栓作用。方法 选择行经皮冠状动脉介入治疗(PCI)术的老年脑血管病变患者 100 例,采用随机数字表法将患者分为对照组和观察组各 50 例。两组患者均给予控制血压、血脂、血糖及改善循环等常规治疗。对照组采用阿司匹林联合氯吡格雷治疗;观察组在对照组基础上,增服西洛他唑。服药前、服药 1 周、4 周、8 周后,应用 PL-11 型全自动血小板分析仪检测患者血小板的聚集程度。随访 2 个月,比较患者血小板聚集程度、血小板的体积、治疗的有效率及不良反应发生情况。**结果** 治疗前,两组血小板聚集率差异无统计学意义($t_0 = 2.782, P > 0.05$)。治疗后两组血小板聚集率明显减少,但观察组用药 1 周($51.87 \pm 9.65\%$)、用药 4 周($40.85 \pm 10.24\%$)、用药 8 周($38.52 \pm 9.64\%$),明显低于对照组用药 1 周($69.25 \pm 8.41\%$)、用药 4 周($62.43 \pm 9.22\%$)、用药 8 周($58.46 \pm 10.18\%$)的血小板聚集率,差异均有统计意义($t_1 = 5.693, t_4 = 4.846, t_8 = 6.719$, 均 $P < 0.05$)。治疗前,两组血小板平均体积差异无统计学意义($t_0 = 2.146, P > 0.05$);治疗后,两组血小板体积明显降低($t_1 = 1.656, t_4 = 1.438, t_8 = 2.189, P < 0.05$);观察组与对照组差异无统计学意义($t_1 = 3.716, t_4 = 1.271, t_8 = 2.523, P > 0.05$)。观察组有效率 94.00% (47/50) 明显高于对照组 82.00% (41/50), 差异有统计学意义($\chi^2 = 4.683, P < 0.05$)。观察组和对照组药物不良反应发生率分别为 10.00% (5/50) 和 8.00% (4/50), 差异无统计学意义($\chi^2 = 1.947, P = 0.136$)。**结论** 西洛他唑联合阿司匹林和氯吡格雷用于老年脑血管病变患者 PCI 术后可明显减少血小板的聚集率,提高临床疗效。

【关键词】 脑血管障碍; 血管成形术; 阿司匹林; 氯吡格雷; 抗血栓作用; 西洛他唑

Antithrombotic effects of cilostazol combined with clopidogrel and aspirin in senile patients with cerebrovascular disease after PCI surgery Xu Danyan, Xu Lingcheng, Jin Yangjun, He Juping.

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【Abstract】 Objective To analyze the antithrombotic effects of cilostazol combined with aspirin and clopidogrel in elderly patients with cerebrovascular disease after PCI. **Methods** 100 elderly patients with cerebrovascular diseases who treated with coronary artery interventional therapy (PCI) were randomly divided into the control group and the observation group according to the digital table, 50 cases in each group. The two groups were given control of blood pressure, blood lipids, blood sugar, improve circulation and other conventional treatment. The control group was treated with aspirin combined with clopidogrel, the observation group was treated with cilostazol based on the treatment of control group. Before and after treatment for 1, 4 and 8 weeks, the platelet aggregation degree was detected by PL-11 automatic platelet analyzer. During 2 months of follow-up, the degree of platelet aggregation, the volume of platelets, the efficacy of treatment and the incidence of adverse reactions were compared. **Results** The platelet aggregation rate between the two groups had no statistically significant difference before treatment ($t_0 = 2.782, P > 0.05$). After treatment, the platelet aggregation rate of the two groups decreased significantly, but after treatment for 1, 4 and 8 weeks, the platelet aggregation rates of the observation group were significantly lower than those of the control group

[(51.87 ± 9.65)%, (40.85 ± 10.24)%, (38.52 ± 9.64)% ; (69.25 ± 8.41)%, (62.43 ± 9.22)%, (58.46 ± 10.18)%], the differences were statistically significant ($t_1 = 5.693, t_4 = 4.846, t_8 = 6.719$, all $P < 0.05$). Before treatment, the mean platelet volume between the two groups had statistically significant difference ($t_0 = 2.146, P > 0.05$). After treatment, the platelet volume of the two groups decreased significantly ($t_1 = 1.656, t_4 = 1.438, t_8 = 2.189$, all $P < 0.05$). There were no statistically significant differences between the observation group and the control group ($t_1 = 3.716, t_4 = 1.271, t_8 = 2.523$, all $P > 0.05$). The effective rate of the observation group was 94.00% (47/50), which was significantly higher than that of the control group [82.00% (41/50)], the difference was statistically significant ($\chi^2 = 4.683, P < 0.05$). The incidence rates of adverse reactions in the observation group and the control group were 10.00% (5/50) and 8.00% (4/50), respectively, there was no statistically significant difference between the two groups ($\chi^2 = 1.947, P = 0.136$). **Conclusion** Cilostazol combined with clopidogrel and aspirin in the treatment of elderly patients with cerebrovascular disease after PCI can significantly reduce platelet aggregation rate, improve clinical curative effect, and has certain clinical value.

【Key words】 Cerebrovascular disorders; Angioplasty; Aspirin; Clopidogrel; Antithrombotic effect; Cilostazol

江苏省常熟市第一人民医院 2015-2016 年儿科门诊处方超说明书用药情况分析

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【摘要】 **目的** 回顾性分析常熟市第一人民医院(以下简称该院)2015-2016 年儿科门诊超说明书用药情况,为促进儿科规范用药提供参考。**方法** 分层随机抽取该院 2015 年 9 月至 2016 年 8 月的门诊患儿处方,根据最新版药品说明书,判定其超说明书用药类型并进行分析。**结果** 共抽取 2 400 张儿科门诊处方,超说明书用药发生率按处方计 39.96%;超说明书用药类型中主要是未提及儿童用药信息(57.13%)和超给药频次(22.69%);超说明书用药年龄段主要以学龄前(44.39%)、幼儿期(38.89%)为主;超说明书用药种类主要是抗微生物药(43.55%)、呼吸系统药物(20.60%)和中成药(11.75%)。**结论** 该院儿科门诊超说明书用药情况较为普遍,需要进一步规范儿科用药,保障儿童用药安全。

【关键词】 超说明书用药; 儿科; 门诊; 用药安全

Investigation and analysis of 2 400 prescriptions for off-label drug use in outpatient department of pediatrics

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个性化健康教育在骨折诊疗中的应用

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【摘要】 目的 探讨个性化健康教育在骨折诊疗中的应用效果。**方法** 选择 80 例患者作为研究对象,按照入院顺序,单号作对照组($n=40$),双号作为观察组($n=40$),对照组患者给予常规健康教育,观察组在此基础上给予个性化健康教育。**结果** 观察组患者骨折知识(90.00%)、遵医行为(95.00%)、饮食与生活(97.50%)、康复训练(95.00%)等知识知晓率高于对照组(75.00%、77.50%、75.00%、80.00%)($\chi^2=7.792、12.911、21.343、10.285$,均 $P<0.05$);观察组患者护理满意率为 95.00%,明显高于对照组的 70.00%($\chi^2=21.645$, $P<0.05$);观察组患者治疗后 1 周[(56.23±12.01)分]、3 个月[(78.54±15.63)分]、6 个月[(92.83±16.73)分],生活质量评分高于对照组[(42.38±8.32)分]、[(54.80±11.01)分]、[(75.28±11.41)分]($t=2.083、2.015、2.149$,均 $P<0.05$)。**结论** 针对骨折患者,采用个性化健康教育,有利于提高患者健康知识知晓率,改善生活质量,提高护理满意率,可在临床积极推广和应用。

【关键词】 骨折; 个性化; 健康教育

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护理干预对急性缺血性脑卒中阿替普酶溶栓治疗预后的影响

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【摘要】 目的 探讨护理干预对急性缺血性脑卒中阿替普酶溶栓治疗预后的影响。**方法** 将 83 例急性缺血性脑卒中阿替普酶溶栓患者采用随机数字表法分为对照组和观察组。对照组 39 例,予常规的内科护理;观察组 44 例,予在常规内科护理的基础上再进行现代康复医学手段,如言语及肢体功能训练、运动疗法、作业疗法等护理干预,治疗 8 周。分别用美国国立卫生院神经功能缺损评分(NIHSS)评分指数、巴塞尔指数(Barthel)指数评价日常生活及活动能力、健康状况调查问卷 SF-36 评分对患者生存质量等评价手段分别对患者入院前、入院治疗后 2 周、4 周、6 周及 8 周后患者的结果进行评价。**结果** 与治疗前比较,两组 NIHSS 评分指数显著下降($t = 3.236, 3.752, 4.333, 6.400$, 均 $P < 0.01$), Barthel 指数显著提高($t = 4.220, 6.037, 4.751, 7.636, 10.615$, 均 $P < 0.01$), SF-36 患者生存质量评价显著提高($t = 3.188, 4.118, 6.033, 2.876, 6.230, 8.760, 11.292$, 均 $P < 0.01$);与对照组比较,治疗 8 周后 NIHSS 评分指数显著下降($t = 3.284, P < 0.01$), Barthel 指数显著提高($t = 5.604, 4.122$, 均 $P < 0.01$), SF-36 患者生存质量评价显著提高($t = 4.551, 4.617$, 均 $P < 0.01$), 总有效率较高(95.45% 比 58.97%, $Z = -5.211, P < 0.01$)。**结论** 护理干预可以对急性缺血性脑卒中阿替普酶溶栓治疗预后产生影响,且疗效显著。

【关键词】 卒中; 脑缺血; 阿替普酶; 血栓溶解疗法; 护理

Influence of nursing intervention on prognosis of acute ischemic stroke patients with thrombolytic therapy

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护理干预在支气管哮喘诊治中的效果观察 及对患者肺功能的影响

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【摘要】 **目的** 探讨护理干预在支气管哮喘患者中的护理效果及对肺功能的影响。**方法** 选择 100 例支气管哮喘患者作为研究对象,采用随机数字表法分为对照组 50 例:常规普通护理;观察组 50 例:在常规护理基础上实施护理干预。系统观察指标:两组患者护理效果(包括者健康知识掌握情况、护理依从性、住院时间);两组患者肺功能比较。**结果** 观察组健康知识掌握情况 92%,显著高于对照组的 70% ($\chi^2 = 17.52, P < 0.05$),观察组护理依从性 90%,显著高于对照组的 62% ($\chi^2 = 16.81, P < 0.05$);对照组住院时间 (19.84 ± 3.76)d,显著长于观察组的 (11.73 ± 2.57)d ($t = 16.74, P < 0.05$);两组患者肺功能各指标在护理前差异均无统计学意义 ($t = 0.98, 1.05, 0.78$, 均 $P > 0.05$),护理后观察组患者肺功能各指标较对照组改善更显著 ($t = 5.62, 8.45, 12.81$, 均 $P < 0.05$)。**结论** 对支气管哮喘患者进行护理干预能有效改善患者的健康知识掌握情况,提高治疗依从性,缩短住院时间,改善患者肺功能,值得在临床应用。

【关键词】 护理干预; 哮喘; 肺功能

Effect of nursing intervention in the diagnosis and treatment of bronchial asthma and its influence on pulmonary function He Xiaofang.

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血液透析与高钾血症

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【摘要】 高钾血症是慢性肾脏病(CKD)患者最常见的并发症,血液透析(HD)患者更为常见。HD 患者的高血钾主要与 K^+ 摄入过量、 K^+ 清除不足和 K^+ 由细胞内向细胞外转移有关。临床上,多数患者没有明显症状,少数患者可出现心脏和神经肌肉症状。为预防高钾血症,应严格控制每天钾摄入,对高钾血症的患者,应给予充分透析以及药物治疗。

【关键词】 血液透析滤过; 高钾血症

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【Abstract】 Hyperkalemia is the most common complication of patients with chronic kidney disease (CKD), which is more common in hemodialysis (HD) patients. The reason of hyperkalemia in HD patients are related to excessive intake of K^+ , insufficient clearance of K^+ and K^+ transferring from intracellular to extracellular. Clinically, most of the patients don't have any obvious symptoms, a few of patients appear heart and neuromuscular symptoms. To prevent hyperkalemia, the patients should control the daily potassium intake strictly, and take adequate dialysis and drug therapy.

【Key words】 Hemodiafiltration; Hyperkalemia

幽门螺杆菌与肾脏疾病

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【摘要】 幽门螺杆菌(*Helicobacter pylori*, Hp)是最常见的消化道感染病菌,自 19 世纪 80 年代发现以后,其在多种胃肠道及胃肠外疾病中的重要作用得到证实。Hp 可以通过多种机制参与疾病的发展过程,其中引起局部和全身炎症反应和免疫损害尤为重要。Hp 可以定植于胃黏膜,导致胃内及血清中多种炎性介质水平增高,而肾脏疾病的发生如肾小球肾炎、肾功能衰竭、糖尿病肾病等经证实也与炎症反应有关, Hp 可能通过增加炎症反应,影响体液免疫或细胞免疫参与多种肾脏疾病的病理过程。该研究对 Hp 与肾脏疾病的研究进展进行综述。

【关键词】 螺杆菌,幽门; 肾小球肾炎; 糖尿病肾病

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【Abstract】 *Helicobacter pylori* (HP) is the most common infectious pathogen of the digestive tract, since being identified in 1880s, its critical roles in many gastrointestinal and extra - gastrointestinal diseases have been confirmed. HP is involved in disease processes by different mechanisms, one of which significantly important is the local or systemic inflammatory response and immune damage. HP could colonize in the gastric mucosa, resulting in the elevation of many inflammatory mediators in stomach and serum. Many kidney diseases, like glomerulonephritis, renal failure and diabetic nephropathy have been confirmed to be related to inflammatory responses, and HP could participate in different kinds of kidney diseases by enhancing inflammatory responses to influence humoral or cellular immune response. This manuscript reviewed the research progress on the relationship between Hp and renal disease.

【Key words】 *Helicobacter pylori*; Glomerulonephritis; Diabetic nephropathy