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# 贵州省遵义地区经皮冠状动脉治疗术后患者 CYP2C19 基因多态性与氯吡格雷疗效的相关性研究

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**【摘要】** **目的** 探讨冠心病患者介入治疗后服用氯吡格雷的疗效与 CYP2C19 基因多态性的关系。**方法** 选取 2016 年 1 月至 2017 年 12 月于贵州航天医院诊断为急性冠脉综合征并接受经皮冠状动脉介入治疗(PCI)的患者 62 例,术前行 CYP2C19 基因型、二磷酸腺苷(ADP)诱导的血小板聚集率和心肌酶学等指标检测,术后 24 h 行心肌酶学指标复测,根据不同的代谢类型对患者进行分组,比较各组患者以上指标的差异。**结果** 各基因型所占比例:CYP2C19 \* 1/\* 1 为 37.10%, CYP2C19 \* 1/\* 2 为 35.48%, CYP2C19 \* 1/\* 3 为 11.29%, CYP2C19 \* 2/\* 2 为 12.90%, CYP2C19 \* 2/\* 3 为 3.23%, CYP2C19 \* 3/\* 3 为 0.00%; LDH、AST、CK、CK-MB 和  $\alpha$ -HBDH 在 PCI 术后均比术前明显升高( $t=0.019, 0.040, 0.044, 0.022, 0.014$ , 均  $P<0.05$ ),但快代谢型、中间代谢型和慢代谢型之间的 ADP 诱导血小板聚集率和心肌酶学等指标差异均无统计学意义(均  $P>0.05$ )。**结论** CYP2C19 在中国人群中的突变频率较大,该研究的样本量较少,无法得出氯吡格雷抵抗与基因型之间的具体关系,还需要增加样本量并综合多因素考虑。

**【关键词】** 经皮冠状动脉介入疗法; 基因型; 细胞色素 p450; 氯吡格雷

**基金项目:** 贵州省科技厅资助项目[(2017)1213, (2018)1183]

**Correlation of CYP2C19 polymorphism and clopidogrel efficacy after percutaneous coronary intervention in**

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**【Abstract】 Objective** To investigate the relationship between CYP2C19 gene polymorphisms and clopidogrel efficacy in coronary heart disease patients after percutaneous coronary intervention (PCI). **Methods** From January 2016 to December 2017, 62 patients with acute coronary syndromes and treated with PCI in Guizhou Aerospace Hospital were recruited, CYP2C19 genotype, ADP-induced platelet aggregation rate and myocardial enzymes and other indicators were detected before operation. The myocardial enzymes were measured 24 hours after PCI. According to different metabolic types, the patients were grouped, the above indicators were compared. **Results** The CYP2C19 \* 1/\* 1 was 37.10%, CYP2C19 \* 1/\* 2 was 35.48%, CYP2C19 \* 1/\* 3 was 11.29%, CYP2C19 \* 2/\* 2 was 12.90%, CYP2C19 \* 2/\* 3 was 3.23% and CYP2C19 \* 3/\* 3 was 0.00%. The LDH, AST, CK, CK-MB and  $\alpha$ -HBDH in the PCI patients after operation were significantly higher than those before operation( $t=0.019, 0.040, 0.044, 0.022, 0.014$ , all  $P<0.05$ ). But ADP induced platelet aggregation rate and myocardial enzymes and other

indicators among fast metabolism group, intermediate metabolic group and slow metabolic group had no statistically significant differences ( all  $P > 0.05$  ). **Conclusion** CYP2C19 mutation frequency in the Chinese population is relatively large, the sample size of this study is less, the relationship between clopidogrel resistance and the specific genotype can not be obtained, it need to increase the sample size and comprehensive multi - factor consideration.

**【Key words】** Percutaneous coronary intervention; Gentye; Cytochrome P-450; Clopidogrel

**Fund program:** Guizhou Science and Technology Department Funded Projects [ (2017)1213, (2018)1183 ]

# 华法林抗凝治疗强度对老年稳定型冠心病合并非瓣膜性心房颤动患者的疗效及预后的影响

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**【摘要】** **目的** 探讨华法林抗凝治疗强度对老年稳定型冠心病合并非瓣膜性心房颤动患者的疗效及预后的影响。**方法** 选取余姚市第二人民医院 2012 年 2 月至 2014 年 3 月收治的老年稳定型冠心病合并非瓣膜性心房颤动患者 96 例进行研究,采用随机数字表法将其分为研究组(低强度华法林抗凝治疗)和对照组(中强度华法林抗凝治疗),每组 48 例。治疗后平均随访 2 年,比较两组患者药物服用情况、主要终点、次要终点及安全性。**结果** 研究组国际标准化比值(INR)与华法林用量均低于对照组[(1.71 ± 0.38)比(2.37 ± 0.36)],(2.72 ± 0.28)mg/d 比(3.54 ± 0.34)mg/d],差异均有统计学意义( $t = 8.736, 12.898$ , 均  $P < 0.05$ ),其余药物服用情况组间比较差异均无统计学意义( $\chi^2 = 0.178, 0.066, 0.344, 0.071, 0.545, 0.042, 0.066$ , 均  $P > 0.05$ )。两组缺血性脑卒中及体循环栓塞发生率差异均无统计学意义( $\chi^2 = 0.000, 0.211, 0.211, 0.000, 0.000, 0.000, 0.000, 1.011, 0.000$ , 均  $P > 0.05$ )。两组全因死亡联合终点及非致命性心肌梗死发生率差异均无统计学意义( $\chi^2 = 1.011, 0.000, 0.000, 0.211, 0.000, 0.000, 0.000, 0.211$ , 均  $P > 0.05$ )。研究组轻度出血及总出血事件发生率低于对照组(2.08% 比 12.50%, 4.16% 比 18.75%),差异均有统计学意义( $\chi^2 = 3.852, 5.031$ , 均  $P < 0.05$ )。严重出血事件发生率组间差异无统计学意义(2.08% 比 6.25%,  $\chi^2 = 1.043, P > 0.05$ )。**结论** 低强度及中强度华法林抗凝治疗在老年稳定型冠心病合并非瓣膜性心房颤动患者中疗效相近,但低强度华法林抗凝治疗安全性更佳。

**【关键词】** 心房颤动; 冠心病; 华法林; 抗凝药

**基金项目:**浙江省卫生和计划生育委员会资助项目(2012RCA047)

**Effect of warfarin anticoagulation therapy on efficacy and prognosis in elderly patients with stable coronary heart disease and non valvular atrial fibrillation** Ye Danyang, Li Zhe.

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**【Abstract】 Objective** To investigate the influence of warfarin anticoagulation intensity on curative effect and prognosis in patients with non valvular atrial fibrillation in elderly patients with stable coronary heart disease. **Methods** From February 2012 to March 2014, 96 elderly patients with stable coronary heart disease and non valvular atrial fibrillation in the Second People's Hospital of Yuyao were randomly divided into study group (low intensity warfarin therapy) and control group (warfarin therapy) according to the digital table, with 48 cases in each group. The patients were followed up for average 2 years after treatment, the condition of taking drugs, major secondary end point, end point and safety were compared between the two groups. **Results** The INR and warfarin dosage of the study group were lower than those of the control group [(1.71 ± 0.38) vs. (2.37 ± 0.36)], (2.72 ± 0.28) mg/d vs. (3.54 ± 0.34) mg/d], the differences were statistically significant ( $t = 8.736, 12.898$ , all  $P < 0.05$ ), there were no statistically significant differences in other drugs use between the two groups ( $\chi^2 = 0.178, 0.066, 0.344, 0.071, 0.545, 0.042, 0.066$ , all  $P > 0.05$ ). There were no statistically significant differences in ischemic stroke and body circulation embolism rate between the two groups ( $\chi^2 = 0.000, 0.211, 0.211, 0.000, 0.000, 0.000, 0.000, 1.011, 0.000$ , all  $P > 0.05$ ). There were no statistically significant differences in end point of all-cause death or nonfatal myocardial infarction

incidence between the two groups ( $\chi^2 = 1.011, 0.000, 0.000, 0.211, 0.000, 0.000, 0.000, 0.211$ , all  $P > 0.05$ ). The mild bleeding and total bleeding rate of the study group were lower than those of the control group (2.08% vs. 12.50%, 4.16% vs. 18.75%), the differences were statistically significant ( $\chi^2 = 3.852, 5.031$ , all  $P < 0.05$ ). There was no statistically significant difference in the rate of major bleeding events between the two groups (2.08% vs. 6.25%,  $\chi^2 = 1.043$ ,  $P > 0.05$ ). **Conclusion** The low intensity and moderate intensity warfarin anticoagulation therapy has similar efficacy for elderly patients with stable coronary heart disease and non valvular atrial fibrillation, but low intensity warfarin anticoagulation therapy is safer.

**【Key words】** Atrial fibrillation; Coronary heart disease; Warfarin; Anticoagulants

**Fund program:** Project Supported by Zhejiang Provincial Health Planning Commission (2012RCA047)

# 射血分数保留型与减低型心力衰竭患者的临床特点分析

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**【摘要】目的** 比较射血分数保留型与射血分数减低型心力衰竭(以下简称心衰)的临床特点。**方法** 回顾性分析 2015 年 9 月至 2017 年 11 月山西医科大学第二医院收治入院的心力衰竭患者 171 例的临床资料,按左心室射血分数(EF 值)分为射血分数保留型心衰组[HFPEF 组,EF  $\geq$  45%,84 例,年龄(64.8  $\pm$  2.2)岁,其中男性 33 例,女性 51 例]和射血分数减低型心衰组[HFREF 组,EF < 45%,87 例,年龄(74.6  $\pm$  1.5)岁,其中男性 61 例,女性 26 例],详细记录相关临床指标,包括一般资料、基础病因、生化指标、超声心动图结果、用药情况等,比较两组的临床资料。**结果** 171 例患者中冠心病患者 69 例,扩心病患者 44 例,高心病患者 21 例,肺心病患者 10 例,风心病患者 15 例,退行性瓣膜病患者 7 例,先天性心脏病 2 例,房颤所致心衰患者 2 例,病毒性心肌炎患者 1 例。HFPEF 组年龄[(74.6  $\pm$  1.5)岁比(64.8  $\pm$  2.2)岁,  $t = 3.598, P = 0.015$ ]、入院收缩压均高于 HFREF 组[(131.2  $\pm$  22.2)mmHg 比(124.1  $\pm$  24.9)mmHg,  $t = 2.058, P = 0.041$ ],且女性患者所占比例偏高(60.7% 比 29.9%,  $\chi^2 = 16.410, P = 0.000$ );与 HFREF 组相比,HFPEF 组体质量低[(62.7  $\pm$  13.4)kg 比(68.6  $\pm$  14.9)kg,  $t = -2.395, P = 0.018$ ]、合并高血压(54.8% 比 37.9%,  $\chi^2 = 4.871, P = 0.032$ )、房颤(47.6% 比 13.8%,  $\chi^2 = 23.107, P = 0.000$ )的比例大,合并肾功能不全比例小(36.7% 比 53.6%,  $\chi^2 = 4.670, P = 0.041$ );生化指标中,HFPEF 组较 HFREF 组 BNP 值[(874.2  $\pm$  912.3)pg/mL 比(1 835.2  $\pm$  1 490.4)pg/mL,  $t = -5.011, P = 0.000$ ]和血红蛋白值[(125.5  $\pm$  24.3)g/L 比(134.7  $\pm$  23.9)g/L,  $t = -2.460, P = 0.015$ ]低、红细胞沉降率快[(28.0  $\pm$  25.6)mm/h 比(16.9  $\pm$  14.9)mm/h,  $t = 2.486, P = 0.017$ ];HFPEF 组左心室较 HFREF 组小[(50.9  $\pm$  6.4)mm 比(67.3  $\pm$  8.5)mm,  $t = -11.303, P = 0.000$ ];HFPEF 组 RAS 阻断剂(52.4% 比 86.2%,  $\chi^2 = 23.107, P = 0.000$ )、螺内酯(72.6% 比 88.5%,  $\chi^2 = 6.926, P = 0.011$ )、 $\beta$ 受体阻滞剂(57.1% 比 75.9%,  $\chi^2 = 6.739, P = 0.015$ )、他汀类药物(38.1% 比 54%,  $\chi^2 = 4.362, P = 0.046$ )的使用率均不如 HFREF 组频繁,而钙通道阻滞剂(38.1% 比 13.8%,  $\chi^2 = 13.208, P = 0.000$ )和华法林(16.7% 比 5.7%,  $\chi^2 = 5.159, P = 0.129$ )的使用较多。**结论** 射血分数保留型心衰和射血分数减低型心衰存在诸多差异,不同类型的心衰需采取不同的诊治及预防方案。

**【关键词】** 心力衰竭; 射血分数保留型; 射血分数减低型; 临床特点

**基金项目:**山西省自然科学基金项目(2013011050-3);山西省卫生计生委科研课题(2015042);山西省重点研发计划(指南)项目(201603D321103)

**Clinical characteristics of patients with preserved ejection fraction and reduced heart failure** Li Jing, Zhou Rong, Li Yanhong, Duan Yunxia, He Jie.

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**【Abstract】Objective** To compare the clinical characteristics of heart failure patients with preserved ejection fraction (HFPEF) and reduced ejection fraction (HFREF). **Methods** A total of 171 patients with heart failure from September 2015 to November 2017 in the Second Hospital of Shanxi Medical University were retrospectively analyzed. According to left ventricular ejection fraction (EF), the patients were divided into two groups: HEPEF [EF  $\geq$  45%, 84 cases, mean age (64.8  $\pm$  2.2) years old, 33 males and 51 females] and HFREF (EF < 45%, 87 cases, mean age (74.6  $\pm$  1.5) years old, including 61 males and 26 females). The clinical data of the two groups including general information, underlying etiology, biochemical indicators, echocardiography results, medication in detail were recorded.

**Results** Among the 171 patients, there were 69 patients with coronary heart disease, 44 patients with dilated cardiomyopathy, 21 patients with hypertensive heart disease, 10 patients with pulmonary heart disease, 15 patients with rheumatic heart disease, 7 patients with degenerative valvular disease, 2 patients with congenital heart disease, 2 cases of heart failure caused by atrial fibrillation, 1 case of viral myocarditis. The patients in the HFPEF group were older [ (74.6 ± 1.5) years old vs. (64.8 ± 2.2) years old,  $t = 3.598, P = 0.015$  ], more women (60.7% vs. 29.9%,  $\chi^2 = 16.410, P = 0.000$  ), lower body weight [ (62.7 ± 13.4) kg vs. (68.6 ± 14.9) kg,  $t = -2.395, P = 0.018$  ], less likely to have renal insufficiency (36.7% vs. 53.6%,  $\chi^2 = 4.670, P = 0.041$  ), and more likely to have hypertension (54.8% vs. 37.9%,  $\chi^2 = 4.871, P = 0.032$  ) and atrial fibrillation (47.6% vs. 13.8%,  $\chi^2 = 23.107, P = 0.000$  ). The HFPEF group had higher admission systolic blood pressure than the HFREF group [ (131.2 ± 22.2) mmHg vs. (124.1 ± 24.9) mmHg,  $t = 2.058, P = 0.041$  ]. The BNP value [ (874.2 ± 912.3) pg/mL vs. (835.2 ± 1490.4) pg/mL,  $t = -5.011, P = 0.000$  ], hemoglobin value [ (125.5 ± 24.3) g/L vs. (134.7 ± 23.9) g/L,  $t = -2.460, P = 0.015$  ] in the HFPEF group were lower than those in the HFREF group. The ESR in the HFPEF group was faster than that in HFREF group [ (28.0 ± 25.6) mm/h vs. (16.9 ± 14.9) mm/h,  $t = 2.486, P = 0.017$  ]. The HFPEF group had smaller left ventricular size than the HFREF group [ (50.9 ± 6.4) mm vs. (67.3 ± 8.5) mm,  $t = -11.303, P = 0.000$  ]. RAS blockers (52.4% vs. 86.2%,  $\chi^2 = 23.107, P = 0.000$  ), spironolactone (72.6% vs. 88.5%,  $\chi^2 = 6.926, P = 0.011$  ),  $\beta$ -blockers (57.1% vs. 75.9%,  $\chi^2 = 6.739, P = 0.015$  ), statin (38.1% vs. 54%,  $\chi^2 = 4.362, P = 0.046$  ) were used more in the HFREF group, while calcium channel blockers (38.1% vs. 13.8%,  $\chi^2 = 13.208, P = 0.000$  ) and warfarin (16.7% vs. 5.7%,  $\chi^2 = 5.159, P = 0.129$  ) were used more in the HFPEF group. **Conclusion** Different clinical characteristics were found in patients with HFPEF and HFREF. Different types of heart failure need different treatment and prevention programs.

**【Key words】** Heart failure; HFPEF; HFREF; Clinical characteristics

**Fund program:** Shanxi Province Basic Research Project (2013011050-3); Shanxi Provincial Health and Family Planning Commission Research Topic (2015042); Shanxi Province Key Research and Development (Guideline) Projects (201603D321103)

# 动态心电图、心脏彩色多普勒超声 在阵发性心房颤动诊断中的价值

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**【摘要】 目的** 探讨动态心电图、心脏彩色多普勒超声在阵发性心房颤动诊断中的临床应用价值。**方法** 将浙江省荣军医院 2014 年 1 月至 2017 年 6 月收治的疑似阵发性心房颤动患者 130 例纳入研究,患者均进行常规心电图、动态心电图、心脏彩色多普勒超声检查,对其检查结果进行分析。以临床综合诊断结果为确诊参照,比较三种检查方法对阵发性心房颤动的诊断灵敏度、特异度、准确性,并比较三种检查结果与阵发性心房颤动临床综合诊断结果的一致性系数。**结果** 心脏彩色多普勒超声对阵发性心房颤动诊断的灵敏度、特异度、准确性分别为 94.23%、96.15%、94.61%,动态心电图分别为 97.12%、100.00%、97.69%,常规心电图分别为 83.65%、76.92%、82.31%,心脏彩色多普勒超声对阵发性心房颤动的诊断灵敏度、特异度、准确性均高于常规心电图( $\chi^2 = 5.915, 4.127, 9.646$ , 均  $P < 0.05$ ),动态心电图也均高于常规心电图( $\chi^2 = 10.843, 6.783, 17.094$ , 均  $P < 0.05$ ),心脏彩色多普勒超声与动态心电图差异均无统计学意义( $\chi^2 = 1.045, 1.020, 1.664$ , 均  $P > 0.05$ );心脏彩色多普勒超声、动态心电图诊断结果与临床综合诊断结果之间的一致性系数分别为 0.735、0.762,均高于常规心电图。**结论** 动态心电图、心脏彩色多普勒超声对阵发性心房颤动的诊断均具有较高的准确性,其诊断灵敏度高、特异度好,可作为阵发性心房颤动诊断的主要手段,可联合使用。

**【关键词】** 心房颤动; 心电图描记术,便携式; 超声心动描记术,多普勒,彩色; 诊断

**基金项目:**浙江省卫生科技计划项目(2014KYB269)

**Clinical value of dynamic electrocardiogram, heart color Doppler ultrasound in the diagnosis of paroxysmal atrial fibrillation** Zheng Xiaofang, Liu Jianfeng.

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**【Abstract】 Objective** To investigate the clinical value of dynamic electrocardiogram (ECG), heart color Doppler ultrasound in the diagnosis of the paroxysmal atrial fibrillation. **Methods** A total of 130 cases of suspected paroxysmal atrial fibrillation in Zhejiang Rongjun Hospital were included in the study. The patients received routine ECG, dynamic ECG, heart color Doppler ultrasound examination, the examination results were analyzed. The clinical comprehensive diagnosis was used as the diagnostic reference, the diagnostic sensitivity, specificity, accuracy of three methods in the diagnosis of paroxysmal atrial fibrillation were compared. And the consistency coefficient of three examination results and clinical diagnosis of paroxysmal atrial fibrillation was compared. **Results** The sensitivity, specificity and accuracy of the heart color Doppler ultrasound in diagnosis of paroxysmal atrial fibrillation were 94.23%, 96.15%, 94.61%, respectively, which of the dynamic ECG were 97.12%, 100.00%, 97.69%, respectively, which of the routine ECG were 83.65%, 76.92%, 82.31%, respectively. The diagnostic sensitivity, specificity and accuracy of the heart color Doppler ultrasound were higher than those of the routine ECG ( $\chi^2 = 5.915, 4.127, 9.646$ , all  $P < 0.05$ ). The diagnostic sensitivity, specificity and accuracy of the dynamic ECG were also higher than those of the routine ECG ( $\chi^2 = 10.843, 6.783, 17.094$ , all  $P < 0.05$ ), the differences of the heart color Doppler ultrasound and dynamic ECG were not statistically significant ( $\chi^2 = 1.045, 1.020, 1.664$ , all  $P > 0.05$ ). The consistency coefficient of the heart color Doppler ultrasound, dynamic ECG with the results of clinical diagnosis were 0.735, 0.762, respectively, which was higher than that of the routine ECG. **Conclusion** Dynamic ECG, heart color Doppler ultrasound in the diagnosis of paroxysmal atrial fibrillation has higher accuracy, sensitivity and specificity, which can be used as the main means of diagnosis of paroxysmal atrial fibrillation.

**【Key words】** Atrial fibrillation; Electrocardiography, ambulatory; Echocardiography, doppler, color; Diagnosis

**Fund program:** Zhejiang Provincial Health Science and Technology Project(2014KYB269)

# 心电图碎裂 QRS 波在急性心肌梗死诊断中的运用

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**【摘要】** 目的 探讨心电图碎裂 QRS 波在急性心肌梗死诊断中的运用价值。方法 选取建德市第一人民医院 2014 年 1 月至 2016 年 7 月收治的经冠状动脉造影确诊的急性心肌梗死患者 83 例为研究对象(观察组),其中 41 例 ST 段抬高型急性心肌梗死患者为观察 A 组,42 例非 ST 段抬高型急性心肌梗死患者为观察 B 组;同时选择同期健康体检的 80 例健康者为对照组,比较三组碎裂 QRS 波的变化情况,观察碎裂 QRS 波诊断急性心肌梗死的效能。**结果** 观察组碎裂 QRS 波发生率为 71.1%,明显高于对照组的 10.0%,差异有统计学意义( $\chi^2 = 12.541, P < 0.01$ );观察 A 组、B 组碎裂 QRS 波发生率分别为 73.2%、61.9%,均明显高于病理性 Q 波发生率的 22.0%、9.5%,差异均有统计学意义( $\chi^2 = 10.248, 10.037$ , 均  $P < 0.01$ );病理性 Q 波阴性预测值较高,但是碎裂 QRS 波诊断敏感性、特异性以及阳性预测值分别为 81.2%、85.7%、95.6%,均明显高于病理性 Q 波的 48.1%、66.0%、41.9%,差异均有统计学意义( $\chi^2 = 8.168, 7.429, 8.568$ , 均  $P < 0.01$ );碎裂 QRS 波在下壁心肌梗死检出率(22.9%)明显高于病理性 Q 波(8.4%),而病理性 Q 波前壁心肌梗死检出率较高,为 21.7%,差异有统计学意义( $\chi^2 = 7.069, 7.364, P < 0.01$ ),两者侧壁心肌梗死检出率差异无统计学意义( $\chi^2 = 0.418, P > 0.05$ )。**结论** 心电图碎裂 QRS 波在急性心肌梗死诊断中应用价值高,但是也不能忽视病理性 Q 波的作用,临床实践中可采用上述指标联合进行疾病诊断,有助于提升诊断准确性。

**【关键词】** 心电图描记术; 碎裂 QRS 波; 心肌梗死; 诊断

**基金项目:**浙江省医药卫生科技计划项目(2016KYB235)

**Application of ECG fragmentation QRS wave in the diagnosis of acute myocardial infarction** Xi Hongfeng.

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**【Abstract】 Objective** To investigate the clinical value of fragmentation of QRS wave in the diagnosis of acute myocardial infarction. **Methods** A total of 83 patients with acute myocardial infarction diagnosed by coronary angiography in the First People's Hospital of Jiande were selected in the research (observation group), including 41 patients with acute ST elevation myocardial infarction (observation group A), 42 patients with non-ST elevation acute myocardial infarction (observation group B). And 80 healthy subjects were selected as control group. The changes of fragmented QRS wave were compared among three groups, the efficacy of fragmented QRS wave in the diagnosis of acute myocardial infarction were observed. **Results** The incidence rate of fragmented QRS wave in the observation group was 71.1%, which was significantly higher than 10.0% in the control group, the difference was statistically significant ( $\chi^2 = 12.541, P < 0.01$ ). The incidence rates of fragmented QRS wave in the observation group A and group B were 73.2% and 61.9%, respectively, which were significantly higher than the incidence rates of pathological Q wave (22%, 9.5%), the differences were statistically significant ( $\chi^2 = 10.248, 10.037$ , all  $P < 0.01$ ). The negative prediction value of pathological Q wave was higher, but the diagnostic sensitivity, specificity and positive predictive value of fragmentation of QRS wave were 81.2%, 85.7%, 95.6%, respectively, which were significantly higher than those of pathological Q wave (48.1%, 66%, 41.9%), the differences were statistically significant ( $\chi^2 = 8.168, 7.429, 8.568$ , all  $P < 0.01$ ). The detection rate of fragmented QRS wave in inferior myocardial infarction (22.9%) was significantly higher than that of pathological Q wave (8.4%), and the detection rate of pathological Q wave in anterior myocardial infarction was higher (21.7%), the difference was statistically significant ( $\chi^2 = 7.069, 7.364$ , all  $P < 0.01$ ). The detection rate of side wall myocardial infarction between the two groups had no statistically significant difference ( $\chi^2 = 0.418, P > 0.05$ ). **Conclusion** The fragmentation of QRS wave in the diagnosis of acute myocardial infarction has high application value, but also can not ignore the pathological Q wave function, the index can be used to diagnose the disease combined with clinical practice, help to improve the accuracy of diagnosis.

**【Key words】** Electrocardiography; QRS wave; Myocardial infarction; Diagnosis

**Fund program:** Supported by the Medical and Health Science and Technology Program of Zhejiang Province (2016KYB235)

# 经皮冠状动脉介入治疗老年冠心病的临床疗效评价

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**【摘要】** **目的** 探讨经皮冠状动脉介入治疗老年冠心病患者的临床疗效,为临床提供依据。**方法** 选择长治医学院附属和济医院 2015 年 10 月至 2016 年 11 月收治的接受经皮冠状动脉介入治疗的老年冠心病患者 52 例(老年组)以及同期接受经皮冠状动脉介入治疗的青中年冠心病患者 52 例(青中年组)为观察对象,均采用经皮冠状动脉介入治疗,比较两组手术成功率、并发症发生率、不良心脏事件发生率、冠状病变部位数及支架植入数。**结果** 老年组手术成功率为 92.31%,青中年组为 94.23%,两组差异无统计学意义( $P > 0.05$ );老年组并发症发生率为 13.46%,青中年组为 9.62%,两组差异无统计学意义( $P > 0.05$ );老年组不良心脏事件发生率为 5.77%,青中年组为 3.85%,两组差异无统计学意义( $P > 0.05$ );老年组冠状病变部位数、支架植入数分别为(2.52 ± 0.72)处、(61.35 ± 2.11)个,青中年组分别为(2.36 ± 0.57)处、(60.24 ± 3.58)个,两组差异均无统计学意义(均  $P > 0.05$ )。**结论** 经皮冠状动脉介入治疗老年冠心病患者切实可行,具有较高的手术成功率,并发症及不良心脏事件均较少。

**【关键词】** 冠状动脉疾病; 血管成形术,气囊,冠状动脉; 老年人

## Evaluation of clinical efficacy of percutaneous coronary intervention in the treatment of elderly patients with coronary heart disease Liu Xiaojian.

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**【Abstract】** **Objective** To investigate the clinical curative effect of percutaneous coronary intervention in the treatment of elderly patients with coronary heart disease, thus to provide the basis for clinical treatment. **Methods** Fifty-two elderly patients with coronary heart disease who were treated by percutaneous coronary intervention in Heji Hospital Affiliated to Changzhi Medical College were selected as elderly group, and 52 young and middle-aged patients with coronary heart disease who were treated by percutaneous coronary intervention were selected as young and middle-aged group. The surgical success rate, incidence rate of complication, incidence rate of adverse cardiac events, coronary lesion number and stent implantation were compared between the two groups. **Results** The success rate of surgery in the elderly group was 92.31%, which in the young and middle-aged group was 94.23%, there was no statistically significant difference between the two groups ( $P > 0.05$ ). The incidence rate of complication in the elderly group was 13.46%, which in the young and middle-aged group was 9.62%, there was no statistically significant difference between the two groups ( $P > 0.05$ ). The incidence rate of cardiovascular events in the elderly group was 5.77%, which in the young and middle-aged group was 3.85%, there was no statistically significant difference between the two groups ( $P > 0.05$ ). The number of coronary lesions and stent implantation in the elderly group were (2.52 ± 0.72), (61.35 ± 2.11), respectively, those in the young and middle-aged group were (2.36 ± 0.57), (60.24 ± 3.58), respectively, the differences between the two groups were no statistically significant (all  $P > 0.05$ ). **Conclusion** Percutaneous coronary intervention in the treatment of elderly patients with coronary heart disease is feasible and has high success rate of surgery, the complications and adverse cardiac events are less.

**【Key words】** Coronary disease; Angioplasty, balloon, coronary; Aged

# 阿司匹林联合替格瑞洛治疗急性冠状动脉综合征非血运重建患者的近远期临床疗效

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**【摘要】 目的** 探讨阿司匹林联合替格瑞洛治疗急性冠状动脉综合征(ACS)非血运重建患者的近远期临床疗效,评估对心功能的改善作用。**方法** 选择杭州市大江东医院 2016 年 1 月至 2017 年 2 月收治的 ACS 非血运重建患者 114 例,采用随机数字表法分为对照组和研究组,每组 57 例,对照组患者给予阿司匹林和氯吡格雷等常规治疗,研究组患者应用阿司匹林联合替格瑞洛进行治疗。评估患者临床疗效,评估治疗前后急性冠状动脉综合征注册(Grace)评分,检测患者血清乳酸脱氢酶(LDH)及肌酸磷酸肌酶(CPK)的水平。随访 12 个月,观察主要和次要终点事件发生率及呼吸困难发生情况。**结果** 研究组总有效率为 87.72% (50/57),高于对照组的 71.93% (41/57),差异有统计学意义( $\chi^2 = 10.65, P < 0.05$ );研究组患者主要终点事件、次要终点事件发生率分别为 12.28% (7/57)、17.54% (10/57),低于对照组的 21.05% (12/57)、35.09% (20/57),差异均有统计学意义( $\chi^2 = 9.82, 10.13$ , 均  $P < 0.05$ );研究组患者呼吸困难发生率为 24.56% (14/157),高于对照组的 3.51% (2/57),差异有统计学意义( $\chi^2 = 10.96, P < 0.05$ );研究组治疗后 Grace 评分为 (80.23 ± 7.89)分,低于对照组的(85.58 ± 8.14)分,差异有统计学意义( $t = 9.38, P < 0.05$ )。研究组治疗后 LDH 和 CPK 分别为(217.06 ± 44.34)U/L 和(167.52 ± 37.41)U/L,低于对照组的(261.58 ± 43.10)U/L 和(225.48 ± 38.26)U/L,差异均有统计学意义( $t = 10.06, 10.29$ , 均  $P < 0.05$ )。**结论** 阿司匹林联合替格瑞洛治疗 ACS 非血运重建患者,可有效抑制血小板聚集,临床疗效显著,ACS 患者的主要和次要终点事件的发生率显著降低,预后较好,呼吸困难发生率增高,但不影响患者治疗。

**【关键词】** 急性冠状动脉综合征; 阿司匹林; 替格瑞洛

## The short-term and long-term clinical efficacy of aspirin combined with ticagrelor in the treatment of acute coronary syndrome patients with non-revascularization Chen Jinhuan.

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**【Abstract】 Objective** To explore the short-term and long-term clinical efficacy of aspirin combined with ticagrelor in the treatment of acute coronary syndrome (ACS) patients with non-revascularization, to assess the improvement of cardiac function. **Methods** A total of 114 ACS patients with non-revascularization in Dajiang Hospital of Hangzhou were selected. They were randomly divided into control group and study group by random number table method, with 57 patients in each group. The control group was given aspirin and clopidogrel conventional therapy. The study group was treated with aspirin and ticagrelor. The clinical efficacy was evaluated. The Grace scores of ACS before and after treatment were evaluated, and the serum levels of lactate dehydrogenase (LDH) and creatine phosphokinase (CPK) were measured. The patients were followed up for 12 months, the incidence of primary and secondary end points and the occurrence of dyspnea were observed. **Results** The total effective rate of the study group was 87.72% (50/57), which was higher than 71.93% (41/57) of the control group, the difference was statistically significant ( $\chi^2 = 10.65, P < 0.05$ ). The incidence rates of primary end point and secondary end point of the study group were 12.28% (7/57) and 17.54% (10/57), respectively, which were lower than 21.05% (12/57) and 35.09% (20/57) of the control group, the differences were statistically significant ( $\chi^2 = 9.82, 10.13$ , all  $P < 0.05$ ). The incidence rate of dyspnea of the study group was 24.56% (14/157), which was higher than 3.51% (2/57) of the control group, the difference was statistically significant ( $\chi^2 = 10.96, P < 0.05$ ). The Grace score of the study group was (80.23 ± 7.89) points, which was lower than (85.58 ± 8.14) points of the control group, the difference was statistically significant ( $t = 9.38, P < 0.05$ ). The levels of LDH and CPK of the study group were (217.06 ± 44.34)U/L

and  $(167.52 \pm 37.41)$  U/L, respectively, which were lower than  $(261.58 \pm 43.10)$  U/L and  $(225.48 \pm 38.26)$  U/L of the control group, the differences were statistically significant ( $t = 10.06, 10.29$ , all  $P < 0.05$ ). **Conclusion** Aspirin combined with ticagrelor for ACS patients with non-revascularization can effectively inhibit platelet aggregation, the clinical efficacy is significant, the incidence of primary and secondary end points of patients with ACS was significantly reduced, the prognosis is good. While dyspnea rate increased, but does not affect the treatment of patients.

**【Key words】** Acute coronary syndrome; Aspirin; Ticagrelor

# 米力农治疗高血压性心脏病 伴心力衰竭的效果观察

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**【摘要】 目的** 观察并分析米力农治疗高血压性心脏病伴心力衰竭的临床效果。**方法** 选取 2016 年 2 月至 2017 年 1 月慈溪市慈林医院收治的高血压性心脏病伴心力衰竭患者 80 例,采用随机数字表法分为观察组和对照组,每组 40 例,对照组采用常规治疗方式,即进行降压治疗和抗心力衰竭的相关治疗等等。观察组在对照组的基础上给予米力农注射液进行治疗,对比分析两组患者的临床效果。**结果** 两组患者在心功能指标和 BNP 及 6MWD 对比中,治疗后观察组数据优于对照组[观察组治疗后 HR( $59.31 \pm 2.03$ )次/min、LVEF( $55.98 \pm 5.31$ )%、LVEDd( $54.37 \pm 0.83$ )mm、SBP( $119.53 \pm 7.04$ )mmHg、DBP( $67.31 \pm 2.94$ )mmHg、BNP( $198.32 \pm 21.54$ )ng/L、6MWD( $332.61 \pm 52.70$ )m;对照组治疗后 HR( $67.63 \pm 2.95$ )次/min、LVEF( $40.51 \pm 4.96$ )%、LVEDd( $60.55 \pm 1.47$ )mm、SBP( $128.47 \pm 8.35$ )mmHg、DBP( $76.37 \pm 3.75$ )mmHg、BNP( $227.43 \pm 25.96$ )ng/L、6MWD( $254.78 \pm 26.16$ )m],两组差异均有统计学意义( $t = 14.694, 13.465, 23.153, 5.176, 12.025, 20.521, 8.366$ ,均  $P < 0.05$ );观察组不良发生率(7.5%)低于对照组(10.0%),但差异无统计学意义( $\chi^2 = 0.156, P < 0.05$ )。**结论** 米力农治疗高血压性心脏病效果颇佳,可明显的将血浆 B 型利钠肽浓度降低,同时也没有明显的不良反应发生。

**【关键词】** 高血压; 心脏病; 心力衰竭; 米力农

**Effect of Milrinone injection on hypertensive heart disease complicated with heart failure** Zheng Lihai, Hua Milan.

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**【Abstract】 Objective** To observe and analyze the clinical effect of Milrinone injection in the treatment of hypertensive heart disease complicated with heart failure. **Methods** From February 2016 to January 2017, 80 patients with hypertensive heart disease complicated with heart failure in Cilin Hospital were selected and randomly divided into observation group and control group according to the digital table, with 40 cases in each group. The control group was given conventional therapy, including antihypertensive therapy and the treatment of heart failure and so on. The observation group was treated with Milrinone injection on the basis of the control group. The clinical manifestations of the two groups were compared and analyzed. **Results** The cardiac function indicators, B - type natriuretic peptide (BNP) and 6MWD in the observation group were better than those in the control group after treatment [observation group: HR ( $59.31 \pm 2.03$ ) times/min, LVEF ( $55.98 \pm 5.31$ )%, LVEDd ( $54.37 \pm 0.83$ ) mm, SBP ( $119.53 \pm 7.04$ ) mmHg, DBP ( $67.31 \pm 2.94$ ) mmHg, BNP ( $198.32 \pm 21.54$ ) ng/L, 6MWD ( $332.61 \pm 52.70$ ) m; control group: HR ( $67.63 \pm 2.95$ ) min, LVEF ( $40.51 \pm 4.96$ )%, LVEDd ( $60.55 \pm 1.47$ ) mm, SBP ( $128.47 \pm 8.35$ ) mmHg, DBP ( $76.37 \pm 3.75$ ) mmHg, BNP ( $227.43 \pm 25.96$ ) ng/L, 6MWD ( $254.78 \pm 26.16$ ) m], the differences were statistically significant ( $t = 14.6943, 13.4651, 23.1532, 5.1769, 12.0250, 20.5215, 8.3663$ , all  $P < 0.05$ ). The incidence rate of adverse reactions of the observation group (7.5%) was lower than that of the control group (10.0%), the difference was not statistically significant ( $\chi^2 = 0.156, P < 0.05$ ). **Conclusion** Milrinone injection in the treatment of hypertensive heart disease has good effect, can obviously decrease BNP concentration, increase the patients' life quality, and with no obvious adverse conditions.

**【Key words】** Hypertension; Heart disease; Heart failure; Milrinone injection

# 注射用重组人组织型纤溶酶原激酶衍生物治疗急性 ST 段抬高型心肌梗死 245 例临床观察

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**【摘要】 目的** 探讨重组人组织型纤溶酶原激酶衍生物(瑞通立, r-pA)治疗不同发病时间的急性 ST 段抬高型心肌梗死(STEMI)的临床疗效及安全性。**方法** 对临猗县人民医院 2011 年 7 月至 2015 年 12 月采用 r-pA 溶栓治疗且发病在 6 h 内的 STEMI 患者 245 例的临床资料进行回顾性分析,按发病时间分为两组,组 1 为发病  $\leq 3$  h,组 2 为发病时间 3 ~ 6 h,比较两组溶栓再通率、再通时间、出血发生率以及病死率。**结果** 组 1 溶栓再通率(94.63%)高于组 2(92.70%),但差异无统计学意义( $\chi^2 = 3.80, P > 0.01$ );组 1 溶栓再通时间( $30.80 \pm 10.2$ ) min,组 2 为( $48.38 \pm 19.2$ ) min,两组差异有统计学意义( $t = 1.97, P < 0.05$ );组 1 溶栓后出血率 10.07%,组 2 为 12.50%,两组差异无统计学意义( $P > 0.05$ );组 1 住院病死率 3.36%,组 2 为 3.12%,两组差异无统计学意义( $P > 0.05$ )。**结论** r-pA 用于发病 3 h 之内的 STEMI 患者溶栓再通时间短于发病 3 ~ 6 h 的 STEMI 患者,再通率有升高趋势,出血率、住院病死率无显著差异。

**【关键词】** 心肌梗死; 组织型纤溶酶原激活物; 血栓溶解疗法

**Retepase in treatment of acute ST elevation myocardial infarction: clinical study of 245 cases** Li Haixia.

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**【Abstract】 Objective** To investigate the clinical efficacy and safety of Reteplase in the treatment of acute ST segment elevation myocardial infarction (STEMI) with different onset time. **Methods** The clinical data of 245 patients with STEMI who received Reteplase thrombolytic therapy and the onset of the disease within 6h in the People's Hospital of Linyi County were retrospectively analyzed. According to the time of onset of the disease, the patients were divided into two groups. The onset of the disease in group 1 was less than 3h, that in group 2 was 3 - 6h. The recanalization rate, recanalization time, the incidence rate of bleeding and mortality were compared between the two groups. **Results** The recanalization rate of group 1 (94.63%) was higher than that of group 2(92.70%), but the difference was not statistically significant( $\chi^2 = 3.80, P < 0.01$ ). The recanalization time of group 1 was ( $30.80 \pm 10.2$ ) min, which of group 2 was ( $48.38 \pm 19.2$ ) min, the difference was statistically significant( $t = 1.97, P < 0.05$ ). The bleeding rate after thrombolysis of group 1 was 10.07%, which of group 2 was 12.50%, the difference was not statistically significant ( $P > 0.05$ ). The mortality of group 1 was 3.36%, which of group 2 was 3.12%, the difference was not statistically significant ( $P > 0.05$ ). **Conclusion** Reteplase for the STEMI patients with onset of the disease within 3h, the recanalization time is shorter than STEMI patients with onset of the disease 3 - 6h. The rate of recanalization is higher, and there is no significant difference in the rate of bleeding and in-hospital mortality.

**【Key words】** Myocardial infarction; Tissue plasminogen activator; Thrombolytic therapy

# 夏枯草汤联合苯磺酸氨氯地平治疗老年高血压的疗效及对患者血浆内皮素-1 的影响

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**【摘要】** **目的** 探讨中药夏枯草汤联合苯磺酸氨氯地平对老年高血压患者临床疗效及血浆内皮素-1 (ET-1) 的影响。**方法** 选择 2016 年 1 月至 2018 年 1 月温岭市中医院收治的老年高血压患者 76 例,根据治疗方法不同分为对照组 38 例和观察组 38 例。对照组采用钙离子拮抗剂苯磺酸氨氯地平片治疗,观察组采用中西医结合法(夏枯草汤联合苯磺酸氨氯地平片)治疗,两组均治疗 2 个月,评估治疗效果。以 24 h 平均舒张压(24 hDBP)、24 h 平均收缩压(24 hSBP)、白昼舒张压(dDBP)、白昼收缩压(dSBP)、夜间舒张压(nDBP)和夜间收缩压(nSBP)评价临床疗效;以治疗前、后 ET-1 水平评价对血管内皮功能的影响,比较两组临床疗效及对 ET-1 的影响。**结果** 观察组治疗后 24 hDBP(72.26 ± 4.62) mmHg、24 hSBP(133.26 ± 6.71) mmHg、dDBP(76.08 ± 5.26) mmHg、dSBP(136.51 ± 8.63) mmHg、nDBP(72.34 ± 3.96) mmHg 和 nSBP(133.64 ± 5.21) mmHg 水平,均低于对照组 24 hDBP(86.63 ± 5.18) mmHg、24 hSBP(143.29 ± 7.22) mmHg、dDBP(87.32 ± 5.73) mmHg、dSBP(153.67 ± 9.51) mmHg、nDBP(80.75 ± 4.27) mmHg 和 nSBP(148.27 ± 6.32) mmHg 水平( $t = 12.637, 11.268, 11.762, 12.406, 10.625, 11.738$ , 均  $P < 0.05$ );观察组治疗后血浆 ET-1 水平为(59.37 ± 7.82) μg/L,低于对照组的(67.58 ± 7.72) μg/L( $t = 10.653, P < 0.05$ )。**结论** 老年人高血压采用中药夏枯草汤联合苯磺酸氨氯地平治疗,能有效提升治疗效果,降低其血压水平,并能够改善血管内皮功能,值得推广应用。

**【关键词】** 高血压; 中草药; 夏枯草汤; 内皮抑素类; 老年人

## Effect of Selfheal soup combined benzene sulfonic acid amlodipine on elderly patients with hypertension and its effect on plasma endothelin-1 Zheng Haibo.

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**【Abstract】** **Objective** To study the clinical curative effect of Chinese traditional medicine *Prunella vulgaris* Decoction for elderly hypertensive patients, and its influence on endothelin-1 (ET-1). **Methods** From January 2016 to January 2018, 76 senile patients with hypertension in Wenling Hospital of Traditional Chinese Medicine were selected. According to different therapeutic methods, the patients were divided into two groups, with 38 cases in each group. The control group was given calcium antagonists benzene sulfonic acid amlodipine therapy, the observation group was given the combined therapy of Chinese and western medicine (*Prunella vulgaris* Decoction combined with benzene sulfonic acid amlodipine). All the patients were treated for 2 months, the therapeutic effect was evaluated. The 24-hour average diastolic blood pressure (24hDBP), 24-hour average systolic blood pressure (24hSBP), and diastolic pressure (dDBP), the day systolic blood pressure (dSBP), diastolic blood pressure at night (nDBP) and nocturnal systolic blood pressure (nSBP) were used to evaluate the clinical curative effect. Before and after treatment, the plasma ET-1 level was used to evaluate the influence on endothelial function. The clinical curative effect and its influence on ET-1 were compared between the two groups. **Results** After treatment, the 24hDBP, 24hSBP, dDBP, dSBP, nDBP and nSBP in the observation group were significantly lower than those in the control group [24hDBP (72.26 ± 4.62) mmHg vs. (86.63 ± 5.18) mmHg, 24hSBP (133.26 ± 6.71) mmHg vs. (143.29 ± 7.22) mmHg, dDBP (76.08 ± 5.26) mmHg vs. (87.32 ± 5.73) mmHg, dSBP (136.51 ± 8.63) mmHg vs. (153.67 ± 9.51) mmHg, nDBP (72.34 ± 3.96) mmHg vs. (80.75 ± 4.27) mmHg, nSBP (133.64 ± 5.21) mmHg vs. (148.27 ± 6.32) mmHg,  $t = 12.637, 11.268, 11.762, 12.406, 10.625, 11.738$ , all  $P < 0.05$ ]. The plasma ET-1 level of the observation group

was  $(59.37 \pm 7.82) \mu\text{g/L}$ , which was significantly lower than  $(67.58 \pm 7.72) \mu\text{g/L}$  of the control group ( $t = 10.653, P < 0.05$ ). **Conclusion** Prunella vulgaris Decoction in the treatment of elderly hypertensive patients can effectively improve therapeutic effect, lower the blood pressure levels, and can improve endothelial function, it is worthy of popularization and application.

**【Key words】** Hypertension; Drugs, Chinese herbal; Selfheal soup; Endostatins; Aged

# 舒血宁联合葛根素治疗不稳定型心绞痛的临床疗效评价

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**【摘要】** **目的** 评价舒血宁联合葛根素治疗冠心病不稳定型心绞痛患者的临床疗效。**方法** 选取 2014 年 1~6 月怀仁县人民医院收治的冠心病不稳定型心绞痛患者 200 例为研究对象,采用随机数字表法分为两组,每组 100 例,对照组患者给予舒血宁治疗,观察组患者给予舒血宁、葛根素联合治疗,治疗时间为 15 d,比较两组患者治疗总有效率、住院时间、心绞痛发作次数、治疗费用、不良反应发生率。**结果** 治疗后,观察组治愈 90 例、有效 5 例、无效 5 例,治疗总有效率为 95.00%,与对照组比较差异有统计学意义( $\chi^2 = 8.302, P < 0.05$ ),观察组住院时间( $10.15 \pm 1.20$ )d、心绞痛发作次数( $1.10 \pm 0.23$ )次、治疗费用( $3\ 458.15 \pm 210.27$ )元优于对照组( $t = 15.044, 12.262, 29.177$ , 均  $P < 0.05$ )。观察组中,发热 1 例、呕吐 1 例,不良反应发生率为 2.00%,与对照组比较差异有统计学意义( $\chi^2 = 6.663, P < 0.05$ )。**结论** 舒血宁、葛根素联合治疗冠心病不稳定型心绞痛效果显著,能改善各项指标、不良反应低,值得推广和应用。

**【关键词】** 冠心病; 不稳定型心绞痛; 舒血宁; 葛根素; 临床疗效

## Evaluation of clinical efficacy of Shuxuening injection combined with puerarin in the treatment of coronary heart disease with unstable angina pectoris Lin Senyan, Chen Haisheng.

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**【Abstract】** **Objective** To evaluate the clinical efficacy of Shuxuening injection combined with puerarin in the treatment of coronary heart disease patients with unstable angina pectoris. **Methods** From January 2014 to June 2014, 200 patients with coronary heart disease in the People's Hospital of Huai ren County were selected in the research. The patients were randomly divided into two groups according to the digital table, with 100 cases in each group. The control group was given Shuxuening injection, the observation group received Shuxuening injection combined with puerarin treatment. The treatment time was 15d. The total effective rate, hospitalization time, frequency of angina pectoris, cost of treatment, the incidence of adverse reactions were compared between the two groups. **Results** After treatment, in the observation group, 90 cases were cured, 5 cases were effective, 5 cases were invalid, the total effective rate was 95%, there was statistically significant difference compared with that in the control group ( $\chi^2 = 8.302, P < 0.05$ ). The hospitalization time, times of angina pectoris, cost of treatment in the observation group were ( $10.15 \pm 1.20$ ) d, ( $1.10 \pm 0.23$ ), ( $3\ 458.15 \pm 210.27$ ) CNY, respectively, which were better than those in the control group ( $t = 15.044, 12.262, 29.177$ , all  $P < 0.05$ ). In the observation group, 1 case of fever, 1 case of vomiting, the incidence rate of adverse reaction was 2%, there was statistically significant difference compared with that in the control group ( $\chi^2 = 6.663, P < 0.05$ ). **Conclusion** Shuxuening combined with puerarin in the treatment of coronary heart disease patients with unstable angina pectoris has significant effect, can improve the indicators, reduce adverse reactions, it is worthy of promotion and application.

**【Key words】** Coronary heart disease; Unstable angina pectoris; Shuxuening; Ge Gensu; Clinical efficacy

# 吲达帕胺联合氨氯地平治疗高血压合并冠心病的疗效观察

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**【摘要】 目的** 探讨吲达帕胺联合氨氯地平用于高血压合并冠心病的临床治疗效果。**方法** 选取 2015 年 1 月至 2017 年 1 月在岱山县第一人民医院进行治疗的高血压合并冠心病患者 62 例为研究对象,将其按照随机数字表法分成观察组 31 例(吲达帕胺联合氨氯地平治疗)和对照组 31 例(硝苯地平控释片治疗),对比两组的临床治疗效果。**结果** 经过治疗后,观察组的治疗有效率为 93.55%,不良反应发生率为 9.68%;对照组的治療有效率为 83.87%,不良反应发生率为 25.81%,两组在治疗效果、总胆固醇、心绞痛发生次数、甘油三酯、收缩压、舒张压方面相比差异均有统计学意义( $\chi^2 = 8.226, t = 6.223, 5.124, 7.112, 5.012, 5.348$ , 均  $P < 0.05$ )。**结论** 采用氨氯地平联合吲达帕胺治疗高血压合并冠心病,可更好地降低血压,辅助降低总胆固醇和甘油三酯水平,能减少心绞痛发作次数,不增加药物不良反应,具有一定的临床推广意义。

**【关键词】** 高血压; 冠状动脉疾病; 吲达帕胺; 氨氯地平

**Curative effect of indapamide combined with amlodipine in the treatment of hypertension complicated with coronary heart disease** Shen Fenfen, Zhong Haijiang.

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**【Abstract】 Objective** To explore the clinical effect of indapamide combined with amlodipine in the treatment of hypertension complicated with coronary heart disease (CHD). **Methods** From January 2015 to January 2017, 62 hypertension patients complicated with CHD in the First People's Hospital of Daishan County were selected in the research. The patients were randomly divided into two groups according to the digital table, with 31 cases in each group. The observation group received indapamide combined with amlodipine therapy, and the control group received nifedipine controlled release tablets. The curative effect was compared between the two groups. **Results** After treatment, the treatment effective rate of the observation group was 93.55%, the incidence rate of adverse reactions of the observation group was 9.68%, which of the control group were 83.87%, 25.81%, respectively. The differences were significant in therapeutic effect, total cholesterol, angina frequency, triglycerides, systolic pressure, diastolic blood pressure between the two groups ( $\chi^2 = 8.226, t = 6.223, 5.124, 7.112, 5.012, 5.348$ , all  $P < 0.05$ ). **Conclusion** Amlodipine in combination with indapamide in the treatment of hypertension complicated with CHD can reduce blood pressure, better auxiliary lower total cholesterol and triglyceride levels, avoid attack frequency of angina pectoris, and with no increase in adverse drug reactions, it has a certain clinical significance.

**【Key words】** High artery pressure; Coronary heart disease; Indapamide; Amlodipine

# 中西医结合治疗慢性阻塞性肺疾病伴呼吸肌疲劳的疗效及对血清白细胞介素 6、白细胞介素 8 的影响

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**【摘要】** 目的 探讨中西医结合治疗慢性阻塞性肺疾病(COPD)伴呼吸肌疲劳的临床疗效及其对血清白细胞介素 6(IL-6)、白细胞介素 8(IL-8)的影响。**方法** 选取柯桥区中医医院 2016 年 3 月至 2017 年 1 月收治的 COPD 伴呼吸肌疲劳患者 92 例,采用随机数字表法分为观察组( $n=46$ )和对照组( $n=46$ ),对照组采用西医常规治疗,观察组在对照组的基础上加用六君子汤治疗。观察两组治疗前后动脉血 pH 值、二氧化碳分压( $\text{PaCO}_2$ )、血氧分压( $\text{PaO}_2$ )等血气指标的变化以及血清 IL-6、IL-8 水平变化,比较两组临床疗效。**结果** 治疗前,两组动脉血 pH、 $\text{PaCO}_2$ 、 $\text{PaO}_2$  差异均无统计学意义( $t=0.274, 0.108, 0.233$ , 均  $P>0.05$ );治疗后,观察组动脉血  $\text{PaCO}_2$  为( $37.18 \pm 3.06$ )mmHg,明显低于对照组的( $40.23 \pm 2.97$ )mmHg( $t=7.004, P<0.05$ ),观察组  $\text{PaO}_2$  为( $84.48 \pm 3.25$ )mmHg,明显高于对照组的( $76.92 \pm 2.71$ )mmHg( $t=7.896, P<0.05$ ),两组动脉血 pH 差异无统计学意义( $t=0.671, P>0.05$ )。治疗前,两组血清 IL-6、IL-8 水平差异均无统计学意义( $t=0.506, 0.412$ , 均  $P>0.05$ );治疗后,观察组血清 IL-6、IL-8 水平分别为( $14.27 \pm 1.05$ )pg/mL、( $41.26 \pm 3.97$ )pg/mL,均明显低于对照组的( $18.38 \pm 1.76$ )pg/mL、( $60.54 \pm 4.31$ )pg/mL( $t=6.358, 7.138$ , 均  $P<0.05$ )。观察组总有效率为 97.8%,明显高于对照组的 73.9%( $\chi^2=8.617, P<0.05$ )。**结论** 采用中西医结合治疗 COPD 伴呼吸肌疲劳效果显著,可以有效缓解呼吸肌疲劳,改善患者血气指标,降低血清 IL-6、IL-8 水平,值得应用。

**【关键词】** 肺疾病,慢性阻塞性; 呼吸肌; 六君子汤; 白细胞介素 6; 白细胞介素 8

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## Therapeutic effect of combination of traditional Chinese medicine and western medicine on chronic obstructive pulmonary disease complicated with respiratory muscle fatigue and its effects on serum IL-6 and IL-8

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**【Abstract】 Objective** To investigate the clinical effect of integrated traditional Chinese and western medicine in the treatment of chronic obstructive pulmonary disease (COPD) complicated with respiratory muscle fatigue, and to analyze its effects on serum levels of interleukin-6 (IL-6) and interleukin-8 (IL-8). **Methods** A total of 92 COPD patients complicated with respiratory muscle fatigue in the Traditional Chinese Medicine Hospital of Keqiao District were selected and randomly divided into observation group and control group according to the digital table, with 46 cases in each group. The control group received routine treatment, the observation group was given Liujunzi Decoction on the basis of the control group. The arterial blood pH values, blood carbon dioxide partial pressure ( $\text{PaCO}_2$ ), partial pressure of oxygen ( $\text{PaO}_2$ ) and the changes of serum IL-6 and IL-8 levels were compared between the two groups. **Results** Before treatment, the arterial blood pH,  $\text{PaCO}_2$ ,  $\text{PaO}_2$  between the two groups had no statistically significant differences ( $t=0.274, 0.108, 0.233$ , all  $P>0.05$ ). After treatment, the arterial blood  $\text{PaCO}_2$  of the observation group [ $(37.18 \pm 3.06)$  mmHg] was significantly lower than that of the control group [ $(40.23 \pm 2.97)$  mmHg] ( $t=7.004, P<0.05$ ). The  $\text{PaO}_2$  of the observation group [ $(84.48 \pm 3.25)$  mmHg] was significantly higher than that of the control group [ $(76.92 \pm 2.71)$  mmHg] ( $t=7.896, P<0.05$ ). There was no statistically significant difference between the two groups in arterial blood pH ( $t=0.671, P>0.05$ ). Before treatment, the serum IL-6, IL-8 levels between the two groups

had no statistically significant differences ( $t=0.506, 0.412$ , all  $P>0.05$ ). After treatment, the levels of serum IL-6, IL-8 in the observation group were  $(14.27 \pm 1.05)$  pg/mL,  $(41.26 \pm 3.97)$  pg/mL, respectively, which were significantly lower than those in the control group [ $(18.38 \pm 1.76)$  pg/mL,  $(60.54 \pm 4.31)$  pg/mL] ( $t=6.358, 7.138$ , all  $P<0.05$ ). The total effective rate of the observation group was 97.8%, which was higher than 73.9% of the control group ( $\chi^2=8.617, P<0.05$ ). **Conclusion** The combination of traditional Chinese medicine and western medicine in the treatment of COPD complicated with respiratory muscle fatigue has significant effect, it can effectively alleviate respiratory muscle fatigue, improve blood gas index, reduce serum IL-6 and IL-8 levels, it is worthy of application.

**【Key words】** Pulmonary disease, chronic obstructive; Respiratory muscles; Six gentlemen decoction; Interleukin-6; Interleukin-8

# 无创机械通气治疗阻塞性睡眠呼吸暂停低通气综合征的疗效及对患者血清炎症因子的影响

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**【摘要】** **目的** 探讨无创通气治疗阻塞性睡眠呼吸暂停低通气综合征(OSAHS)的疗效以及对患者血清C反应蛋白(CRP)、内皮素-1(ET-1)及肿瘤坏死因子- $\alpha$ (TNF- $\alpha$ )的影响。**方法** 选择2016年2月至2017年8月晋中市第一人民医院医院收治的86例中、重度OSAHS患者,根据治疗方法的不同分为观察组和对照组各43例。观察组采用无创通气治疗,对照组采用内科保守治疗。比较两组治疗前后PSG指标及炎症因子的差异,分析呼吸暂停低通气指数(AHI)、氧减指数(ODI)、最低血氧饱和度(LSpO<sub>2</sub>)、平均血氧饱和度(MSpO<sub>2</sub>)与CRP、ET-1、TNF- $\alpha$ 的相关性。**结果** 治疗后,两组AHI、ODI指数显著下降,LSpO<sub>2</sub>、MSpO<sub>2</sub>显著升高,且观察组AHI[(13.7±8.6)次/h比(43.1±13.6)次/h]、ODI[(15.4±12.9)次/h比(42.5±12.6)次/h]、LSpO<sub>2</sub>[(79.6±16.8)%比(62.3±19.27)%]、MSpO<sub>2</sub>[(92.2±25.6)%比(80.3±30.4)%]改善程度优于对照组,差异均有统计学意义( $t=5.291, 4.258, 3.998, 4.651$ ,均 $P<0.05$ )。观察组治疗后CRP、ET-1、TNF- $\alpha$ 均明显降低,对照组治疗前后上述指标改善差异无统计学意义;观察组治疗后CRP[(3.7±0.7)mg/L比(6.1±1.8)mg/L]、ET-1[(32.3±11.9)ng/L比(46.5±16.6)ng/L]、TNF- $\alpha$ [(19.1±3.2)ng/L比(31.3±9.2)ng/L]水平明显低于对照组,差异均有统计学意义( $t=8.255, 6.594, 5.227$ ,均 $P<0.05$ )。经Pearson相关分析,AHI、ODI均与CRP、ET-1、TNF- $\alpha$ 呈正相关( $r=0.33, 0.56, 0.44, 0.26, 0.55, 0.63$ ),LSpO<sub>2</sub>、MSpO<sub>2</sub>则均与CRP、ET-1、TNF- $\alpha$ 呈负相关( $r=-0.36, -0.44, -0.54, -0.28, -0.36, -0.59$ )。其中,ODI与TNF- $\alpha$ 正相关系数最大,为0.63。MSpO<sub>2</sub>与TNF- $\alpha$ 负相关系数最大,为-0.59。**结论** 无创通气治疗OSAHS的疗效好,能够明显降低体内炎症因子水平。

**【关键词】** 睡眠呼吸暂停,阻塞性; 无创性通气; C反应蛋白质; 内皮素-1; 肿瘤坏死因子 $\alpha$

## Effect of noninvasive mechanical ventilation in the treatment of obstructive sleep apnea hypopnea syndrome and its effect on serum inflammatory factors Li Jing, Wu Ruifang.

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**【Abstract】 Objective** To investigate the effect of non-invasive ventilator in the treatment of obstructive sleep apnea hypopnea syndrome (OSAHS) and the effect on C-reactive protein (CRP), endothelin-1 (ET-1) and tumor necrosis factor- $\alpha$  (TNF- $\alpha$ ). **Methods** From February 2016 to August 2017, 86 patients with moderate and severe OSAHS in the First People's Hospital of Jinzhong were divided into the observation group and the control group according to the different treatment methods, with 43 cases in each group. The observation group was treated with noninvasive ventilator, and the control group was treated with conservative treatment. The differences of PSG and inflammatory factors were compared between the two groups before and after treatment, and the correlation between AHI, ODI, LSpO<sub>2</sub>, MSpO<sub>2</sub> and CRP, ET-1, and TNF- $\alpha$  was analyzed. **Results** After treatment, AHI, ODI, MSpO<sub>2</sub> of the two groups were decreased significantly, LSpO<sub>2</sub> increased significantly, and the AHI [(13.7±8.6)times/h vs. (43.1±13.6)times/h], ODI [(15.4±12.9)times/h vs. (42.5±12.6)times/h], LSpO<sub>2</sub> [(79.6±16.8)% vs. (62.3±19.27)%], MSpO<sub>2</sub> [(92.2±25.6)% vs. (80.3±30.4)%] in the observation group were better than those in the control group, the differences were statistically significant ( $t=5.291, 4.258, 3.998, 4.651$ , all  $P<0.05$ ). After treatment, the levels of CRP, ET-1, TNF- $\alpha$  in the observation group were decreased significantly, which in the control group had no statistically significant differences compared with those before treatment. After treatment, the CRP [(3.7±0.7)mg/L vs. (6.1±1.8)mg/L], ET-1 [(32.3±11.9)ng/L vs. (46.5±16.6)ng/L],

TNF- $\alpha$  [(19.1  $\pm$  3.2) ng/L vs. (31.3  $\pm$  9.2) ng/L] in the observation group were significantly lower than those in the control group, the difference were statistically significant ( $t = 8.255, 6.594, 5.227$ , all  $P < 0.05$ ). After Pearson correlation analysis, AHI and ODI were positively correlated with CRP, ET-1 and TNF- $\alpha$  ( $r = 0.33, 0.56, 0.44, 0.26, 0.55, 0.63$ ), while LSpO<sub>2</sub> and MSpO<sub>2</sub> were negatively correlated with CRP, ET-1, TNF- $\alpha$  ( $r = -0.36, -0.44, -0.54, -0.28, -0.36, -0.59$ ). Among them, the positive correlation coefficient of ODI and TNF- $\alpha$  was the largest (0.63). The negative correlation coefficient of MSpO<sub>2</sub> and TNF- $\alpha$  was the largest (-0.59). **Conclusion** Non-invasive ventilator in the treatment of OSAHS is effective and can obviously reduce the level of inflammatory factors in the body.

**【Key words】** Sleep apnea, obstructive; Noninvasive ventilator; C-reactive protein; Endothelin-1; Tumor necrosis factor-alpha

# 原发性附睾平滑肌肉瘤五例临床分析

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**【摘要】 目的** 探讨原发性附睾平滑肌肉瘤的诊断、治疗及预后。**方法** 回顾性分析 5 例原发性附睾平滑肌肉瘤患者的临床资料, 结合文献复习, 讨论其诊断、治疗及预后。**结果** 5 例患者均行手术治疗, 术后病理检查提示附睾平滑肌肉瘤; 术后随访 3 ~ 32 个月, 2 例分别于术后 14 个月和 25 个月死于全身多脏器转移; 1 例术后 18 个月死于心肌梗死, 1 例失访, 1 例存活。**结论** 原发性附睾平滑肌肉瘤确诊主要依靠术后病理检查。确诊后应尽早行患侧睾丸高位切除术, 放化疗目前尚无明确方案, 并且效果尚需进一步评估。附睾肉瘤恶性程度较高, 预后较差。

**【关键词】** 附睾平滑肌肉瘤; 诊断; 治疗; 预后

**Analysis of clinicopathological features of the primary epididymis leiomyosarcoma** Lin Yuxia, He Li.

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**【Abstract】 Objective** To study the diagnosis, treatment and prognostic features of primary epididymis leiomyosarcoma. **Methods** The clinical data of five cases of leiomyosarcoma of the epididymis in Ji'nan Central Hospital Affiliated to Shandong University were retrospectively reviewed and reviewed literatures to study the diagnosis, treatment and prognostic features. **Results** Five cases were underwent operation. Pathological examination confirmed the diagnosis of epididymis leiomyosarcoma. The patients were followed up for 3 - 32 months, 2 patients died due to multiple organs metastasis at 14 months and 25 months after operation. One patient died for acute myocardial infarction at 18 months after operation, 1 case was lost to follow up, 1 case was survival up to today. **Conclusion** Pathological examination is helpful in diagnosis. The radical inguinal orchiectomy with high ligation of the spermatic cord should be performed early. Primary epididymis leiomyosarcoma has highly aggressive course and prognosis is poor.

**【Key words】** Epididymis leiomyosarcoma; Diagnosis methods; Treatment; Prognosis

# 胺碘酮治疗快速性心律失常 66 例的临床观察

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**【摘要】** **目的** 观察胺碘酮治疗快速性心律失常的临床效果。**方法** 选取桐乡市第一人民医院 2016 年 5 月至 2017 年 5 月收治的快速性心律失常患者 66 例作为研究对象, 所有患者均接受胺碘酮治疗。观察患者治疗前后的血压、心率及心电图变化, 观察其临床疗效与不良反应。**结果** 66 例患者经胺碘酮治疗后, 治疗总有效率 81.82% (54/66), 无效率 18.18% (12/66)。与治疗前患者的收缩压 ( $140.47 \pm 11.02$ ) mmHg、舒张压 ( $86.53 \pm 10.42$ ) mmHg 和心率 ( $148.01 \pm 28.11$ ) 次/min 比较, 治疗后患者的收缩压 ( $95.81 \pm 12.08$ ) mmHg、舒张压 ( $69.66 \pm 8.78$ ) mmHg 和心率 ( $87.39 \pm 16.22$ ) 次/min 均明显降低 ( $t = 22.19, 10.06, 15.18$ , 均  $P < 0.01$ ); 与治疗前患者的心电图结果 P-R 间期 ( $138.61 \pm 12.87$ ) ms 与 QT 间期 ( $36.44 \pm 8.57$  ms) 相比, 治疗后 P-R 间期 ( $154.92 \pm 17.31$ ) ms, 与 QT 间期 ( $41.33 \pm 9.18$ ) ms 显著延长 ( $t = 6.14, 3.16$ , 均  $P < 0.01$ )。5 例患者出现不良发应, 不良反应发生率 7.58%。**结论** 应用胺碘酮治疗快速性心律失常疗效显著, 起效快, 安全性高, 值得临床推广应用。

**【关键词】** 心律失常, 窦性; 胺碘酮

**Clinical observation of amiodarone in the treatment of 66 patients with tachyarrhythmia** Cao Dongmin, Shen Jianjie.

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**【Abstract】** **Objective** To observe the clinical effect of amiodarone in the treatment of tachyarrhythmia.

**Methods** From May 2016 to May 2017, 66 patients with tachyarrhythmia in the First People's Hospital of Tongxiang were enrolled in the research. All patients were treated with amiodarone. The changes of blood pressure, heart rate and electrocardiogram were observed before and after treatment, and the clinical curative effect and adverse reaction were compared. **Results** The total effective rate was 81.82% (54/66), and the ineffective rate was 18.18% (12/66). After treatment, the systolic blood pressure, diastolic blood pressure and heart rate were ( $95.81 \pm 12.08$ ) mmHg, ( $69.66 \pm 8.78$ ) mmHg and ( $87.39 \pm 16.22$ ) beats/min, respectively, which were significantly lower than those before treatment [ $(140.47 \pm 11.02)$  mmHg, ( $86.53 \pm 10.42$ ) mmHg, ( $148.01 \pm 28.11$ ) beats/min] ( $t = 22.19, 10.06, 15.18$ , all  $P < 0.01$ ). After treatment, the PR interval and QT interval [ $(154.92 \pm 17.31)$  ms, ( $41.33 \pm 9.18$ ) ms] were significantly prolonged compared with those before treatment [ $(138.61 \pm 12.87)$  ms, ( $36.44 \pm 8.57$ ) ms] ( $t = 6.14, 3.16$ , all  $P < 0.01$ ). Adverse reactions occurred in 5 patients, and the incidence rate of adverse reactions was 7.58%. **Conclusion** The clinical efficacy of amiodarone in the treatment of patients with tachyarrhythmia is notable with rapid onset and high safety, and it is worthy of clinical application.

**【Key words】** Arrhythmia, agents; Amiodarone

# 产后出血 72 例危险因素分析

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**【摘要】** 目的 探讨产后出血的危险因素。方法 选择 2015 年 1 月至 2017 年 1 月吕梁市荣军医院后发生产后出血的产妇 72 例为研究对象,患者采用 logistic 回归分析法对产妇在产后出血的危险因素进行筛查,并针对不同危险因素提出相应的预防办法,以此来降低产后出血的发生率。**结果** 年龄[ $\geq 33$  岁产后出血的患者比例为 15.63% (5/32)],分娩方式[剖宫产产后出血的患者比例为 28.57% (4/14)],孕周[孕周 < 41 周产后出血的患者比例为 7.41% (4/54)],前置胎盘[产后出血患者比例为 23.08% (6/26)],产道损伤[产后出血患者比例为 14.29% (5/35)],宫缩乏力[产后出血患者比例为 37.93% (22/58)],凝血功能障碍[产后出血患者比例为 8.33% (2/24)]以及胎盘黏连[产后出血患者比例为 23.08% (3/13)]均会影响患者产后出血,通过对单一危险因素进行统计学分析发现,差异均有统计学意义( $\chi^2 = 15.125, 22.034, 6.825, 10.254, 7.114, 25.147, 26.301, 8.226$ , 均  $P < 0.05$ )。通过对单因素进行分析并进行多因素非条件 logistic 回归分析,建立危险因素模型中发现剖宫产,宫缩乏力、胎盘黏连符合分析结果( $\beta = 2.868, 1.484, 1.173$ ;  $S.E.(\beta) = 0.088, 0.086, 0.175$ ; 95%  $CI = 3.499 \sim 22.734, 2.889 \sim 6.834, 1.368 \sim 3.894$ ),但不同因素之间差异均有统计学意义( $OR = 16.746, 4.012, 2.379$ , 均  $P < 0.05$ )。**结论** 年龄、分娩方式、孕周、前置胎盘、产道损伤、宫缩乏力、凝血功能障碍及胎盘黏连均会影响患者产后出血,在孕妇分娩过程中,应该对可能发生的各种因素进行积极有效的预防,做好相关工作的准备和应对措施,在患者产后还应加大护理力度,防止产后出血的现象发生。

**【关键词】** 产后出血; 危险因素; 前置胎盘; 宫缩乏力

**Analysis of risk factors of 72 cases with postpartum hemorrhage** Zhang Jianzhuang, Xue Xiaoping.

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**【Abstract】 Objective** To explore the risk factors of postpartum hemorrhage. **Methods** From January 2015 to January 2017, 72 cases with postpartum hemorrhage in Rongjun Hospital of Lyuliang were selected in the present study. Logistic regression analysis was used to screen the risk factors of postpartum hemorrhage, and put forward corresponding preventive measures according to different risk factors, in order to reduce the incidence of postpartum hemorrhage. **Results** Age [the incidence rate of postpartum hemorrhage in patients more than 33 years old was 15.63% (5/32)], childbirth way [the incidence rate of postpartum hemorrhage in cesarean section patients was 28.57% (4/14)], gestational age [the incidence rate of postpartum hemorrhage in patients with gestational age < 41 weeks was 7.41% (4/54)], placenta previa [the incidence rate of postpartum hemorrhage was 23.08% (6/26)], the birth canal injury [the incidence rate of postpartum hemorrhage was 14.29% (5/35)], uterine inertia [the incidence rate of postpartum hemorrhage was 37.93% (22/58)], blood coagulation dysfunction [the incidence rate of postpartum hemorrhage was 8.33% (2/24)] and placenta conglutination [the incidence rate of postpartum hemorrhage was 23.08% (3/13)] had influence on postpartum hemorrhage, through the study of the statistical analysis of a single risk factor, found that the differences were statistically significant ( $\chi^2 = 15.125, 22.034, 15.125, 22.034, 7.114, 25.147, 26.301, 8.226$ , all  $P < 0.05$ ). Through the analysis of single factor and multiple factors unconditioned logistic regression analysis, established risk factor model and found that cesarean section, uterine inertia, placenta conglutination conformed to the analysis results ( $\beta = 2.868, 1.484, 1.173$ ,  $E.(\beta) = 0.088, 0.086, 0.175$ ,  $S.95\% CI = 3.499 - 22.734, 2.889 - 6.834, 1.368 - 3.894$ ), but statistically significant differences were observed among different factors ( $OR = 16.746, 4.0123, 2.379$ , all  $P < 0.05$ ). **Conclusion** Age, childbirth way, gestational age, placenta previa, birth canal injury, uterine inertia, blood coagulation dysfunction and placenta adhesion all can affect postpartum hemorrhage, in the process of childbirth pregnant women, should have the possibility of various factors are positive and effective prevention, ready to related work and measures, in patients with postpartum should also increase the intensity of nursing, preventing postpartum hemorrhage occurs.

**【Key words】** Postpartum hemorrhage; Placenta previa; Uterine inertia

# 鼠神经生长因子治疗外伤性面神经损伤的临床效果观察

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**【摘要】** **目的** 观察鼠神经生长因子在外伤性面神经损伤患者中的临床治疗效果。**方法** 选取三门县人民医院 2015 年 4 月至 2017 年 10 月收治的 60 例外伤性面神经损伤患者作为研究对象,利用完全随机分配法分为观察组和对照组,各 30 例。所有患者均给予地塞米松、七叶皂苷钠及尼莫地平治疗,在此基础上,对照组给予甲钴胺治疗,观察组给予鼠神经生长因子治疗。评定两组患者治疗前后面神经功能变化,比较其临床疗效。**结果** 治疗后,观察组的面神经功能分级(Ⅰ级 18 例,Ⅱ级 8 例,Ⅲ级 2 例,Ⅳ级 0 例,Ⅴ级 1 例,Ⅵ级 1 例)明显优于对照组(Ⅰ级 6 例,Ⅱ级 4 例,Ⅲ级 5 例,Ⅳ级 8 例,Ⅴ级 4 例,Ⅵ级 3 例),差异有统计学意义( $\chi^2 = 12.87, P < 0.01$ )。观察组的总有效率 93.33%,明显高于对照组的 70.00%,差异有统计学意义( $\chi^2 = 7.81, P < 0.05$ )。**结论** 鼠神经生长因子治疗外伤性面神经损伤患者具有重要的临床价值,有助于缓解临床症状,改善面神经功能,提高临床治愈率,值得临床应用。

**【关键词】** 面神经损伤; 鼠神经生长因子

**Clinical effect of mouse nerve growth factor in the treatment of traumatic facial nerve injury** Wang Duanbu, Gao Xiongwei, Li Yafeng, Ye Xiaoting.

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**【Abstract】** **Objective** To study the clinical effect of mouse nerve growth factor in the treatment of patients with traumatic facial nerve injury. **Methods** From April 2015 to October 2017, 60 patients with traumatic facial nerve injury in the People's Hospital of Sanmen County were selected and divided into observation group and control group by completely random assignment method, with 30 cases in each group. All patients were given dexamethasone, sodium aescinate and nimodipine treatment, on this basis, the control group was given mecobalamin treatment, the observation group was given mouse nerve growth factor treatment. The changes of facial nerve function before treatment were assessed, and the clinical efficacy was compared between the two groups. **Results** After treatment, the facial nerve function grade in the observation group (Ⅰ 18 cases, Ⅱ 8 cases, Ⅲ 2 cases, Ⅳ 0 case, Ⅴ 1 case, Ⅵ 1 case) was significantly better than those in the control group (Ⅰ 6 cases, Ⅱ 4 cases, Ⅲ 5 cases, Ⅳ 8 cases, Ⅴ 4 cases, Ⅵ 3 cases), the difference was statistically significant ( $\chi^2 = 12.87, P < 0.01$ ). The total effective rate of the observation group was 93.33%, which was significantly higher than 70.00% of the control group, the difference was statistically significant ( $\chi^2 = 7.81, P < 0.05$ ). **Conclusion** Mouse nerve growth factor in the treatment of patients with traumatic facial nerve injury has important clinical value, it is helpful to alleviate the clinical symptoms, improve facial nerve function and clinical cure rate, it is worthy of clinical application.

**【Key words】** Facial nerve injury; Mouse nerve growth factor

# 罗哌卡因腰硬联合麻醉用于无痛分娩的效果及对母婴的影响

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**【摘要】** **目的** 探讨罗哌卡因腰硬联合麻醉在无痛分娩中的效果及对母婴的影响。**方法** 选择 2016 年 3 月至 2017 年 5 月在太原市第八人民医院接受无痛分娩的产妇 64 例为观察组,应用罗哌卡因实施腰硬联合麻醉,另选择同期自然分娩的产妇 42 例为对照组,比较两组分娩疼痛程度、妊娠结局及不良反应。**结果** 观察组正常分娩率、缩宫素使用率分别为 50.00%、7.81%,均优于对照组(均  $P < 0.05$ );观察组新生儿出生 1 min、5 min Apgar 评分分别为(8.92 ± 1.20)分、(9.43 ± 0.56)分,均高于对照组( $t = 5.362, 4.036$ , 均  $P < 0.05$ );观察组 54.69% 产妇产后泌乳量充足,与对照组差异无统计学意义;分娩后,观察组 NO 水平高于对照组[(94.2 ± 9.6) μmol/L 比 (82.6 ± 5.6) μmol/L],皮质醇水平低于对照组[(726.3 ± 68.1) ng/mL 比 (892.7 ± 136.4) ng/mL],差异均有统计学意义(均  $P < 0.05$ )。**结论** 罗哌卡因腰硬联合麻醉是无痛分娩的理想方式,镇痛效果好,能够提高自然分娩率,对母婴影响小。

**【关键词】** 罗哌卡因; 麻醉; 自然分娩

**Effect of ropivacaine on painless delivery and its effect on mother and infant** Zhang Gong.

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**【Abstract】** **Objective** To investigate the effect of ropivacaine on painless delivery and its effect on mother and infant. **Methods** From March 2016 to May 2017, 64 cases of maternal painless labor demand in the Eighth People's Hospital of Taiyuan were chosen as the observation group, 42 cases of natural childbirth pregnant women in the Eighth People's Hospital of Taiyuan were selected as control group. The degree of labor pain, pregnancy outcome and the effect on mother and infant were compared. **Results** The excellent rate of normal delivery, oxytocin usage rate in the observation group were 50%, 7.81%, respectively, which were better than those in the control group (all  $P < 0.05$ ). The Apgar scores of newborns at 1 min 5 min after birth in the observation group were (8.92 ± 1.20) points, (9.43 ± 0.56) points, respectively, which were higher than those in the control group ( $t = 5.362, 4.036$ , all  $P < 0.05$ ). The postpartum lactation of the observation group was 54.69%, and had no statistically significant difference compared with the control group. After delivery, the level of NO in the observation group was higher than that in the control group [(94.2 ± 9.6) μmol/L vs. (82.6 ± 5.6) μmol/L], and the cortisol level was lower than that in the control group [(726.3 ± 68.1) ng/mL vs. (892.7 ± 136.4) ng/mL], the differences were statistically significant (all  $P < 0.05$ ). **Conclusion** Ropivacaine combined with spinal and epidural anesthesia is an ideal way for painless delivery, with good analgesic effect, which can improve the natural delivery rate and has little effect on mother and child.

**【Key words】** Ropivacaine; Anesthesia; Natural childbirth

# 血浆脑钠肽前体检测及左心室重量指数用于老年人左室射血分数正常心力衰竭的诊断价值分析

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**【摘要】** **目的** 探讨血浆脑钠肽前体 (NT-proBNP) 检测及左心室重量指数用于老年人左室射血分数正常心力衰竭的诊断价值。**方法** 选取鄞州人民医院心血管内科 2014 年 8 月至 2017 年 8 月收治的心功能不全患者 82 例,按照超声心动图中左心室射血分数 (LVEF) 的结果分为左室射血分数正常心力衰竭 (HFNEF) 组 (41 例) 和左室射血分数减低心力衰竭 (HFREF) 组 (41 例),另外选取同期心功能正常的患者 40 例为对照组;比较三组患者超声心动图的相关指标;比较三组患者的血浆 NT-proBNP 水平;绘制血浆 NT-proBNP 诊断 HFNEF 的 ROC 曲线,计算其诊断 HFNEF 的灵敏度和特异度;绘制左心室重量指数 (LVMI) 诊断 HFNEF 的 ROC 曲线,计算其诊断 HFNEF 的灵敏度和特异度;以血浆 NT-proBNP 水平做为反映左心室充盈压的间接指标,比较 HFNEF 组患者 LVMI 与血浆 NT-proBNP 的相关性。**结果** 对照组的 LVMI 明显小于心力衰竭患者 (HFNEF 组及 HFREF 组) [(86.95 ± 8.72) g/m<sup>2</sup> 比 (130.53 ± 15.18) g/m<sup>2</sup>,  $t = 20.078$ ,  $P = 0.000$ ],但 HFNEF 组与 HFREF 组的 LVMI 相比,差异无统计学意义 ( $P > 0.05$ );对照组 NT-proBNP 最低, HFNEF 组次之, HFREF 组最高,三组间差异有统计学意义 [(72.56 ± 7.81) ng/mL 比 (182.55 ± 18.45) ng/mL 比 (653.58 ± 55.95) ng/mL,  $F = 8.254$ ,  $P = 0.000$ ];以血浆 NT-proBNP 131 pg/mL 为临界值,诊断 HFNEF 的灵敏度为 0.94,特异度为 0.83,阳性预测值为 0.95,阴性预测值为 0.21;以 LVMI > 125 g/m<sup>2</sup> 为标准,诊断 HFNEF 的灵敏度为 0.62,特异度为 0.99;HFNEF 组患者中,血浆 NT-proBNP 水平与 LVMI 的相关性为  $r = 0.513$  ( $P < 0.01$ )。**结论** 老年 HFNEF 患者血浆 NT-proBNP 水平和 LVMI 都有明显升高,对于诊断 HFNEF 都具有一定意义;单独运用这 NT-proBNP 或 LVMI 进行诊断,存在一定的缺陷;如果能够联合应用,可能会取长补短,提高诊断的正确率。

**【关键词】** 心力衰竭; 钠尿肽; 左心室重量指数; 左心室射血分数

**Clinical value of plasma NT – proBNP and left ventricular mass index in the diagnosis of elderly patients with normal left ventricular ejection fraction** Zhou Lijun, Fang Yu, Cao Yong.

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**【Abstract】 Objective** To investigate the clinical value of plasma NT – proBNP and left ventricular mass index in the diagnosis of heart failure (HF) with normal left ventricular ejection fraction (LVEF) in elderly patients.

**Methods** From August 2014 to August 2017, 82 patients with congestive heart failure in the People's Hospital of Yinzhou were enrolled. According to the results of LVEF in echocardiography, the patients were divided into HFNEF group (41 cases) and HFREF group (41 cases), another 40 patients with normal heart function were selected as the control group. The relative indicators of echocardiography were compared among the three groups. The plasma NT – proBNP levels were compared among the three groups. The ROC curve of plasma NT – proBNP was used to diagnose HFNEF, and the sensitivity and specificity of HFNEF were calculated. The ROC curve of left ventricular mass index (LVMI) was drawn and its sensitivity and specificity were calculated. The plasma NT – proBNP level was used as an indirect indicator of left ventricular filling pressure, the correlation of LVMI and plasma NT – proBNP in the HFNEF group was compared. **Results** The LVMI in the control group was significantly lower than that in the HF group [(86.95 ± 8.72) g/m<sup>2</sup> vs. (130.53 ± 15.18) g/m<sup>2</sup>,  $t = 20.078$ ,  $P = 0.000$ ], but there was no statistically significant difference between the HFNEF group and HFREF group ( $P > 0.05$ ). The NT – proBNP was the lowest in the control group, followed by the HFNEF group and HFREF group, the difference was statistically significant among

the three groups  $[(72.56 \pm 7.81) \text{ ng/mL vs. } (182.55 \pm 18.45) \text{ ng/mL vs. } (653.58 \pm 55.95) \text{ ng/mL}, F = 8.254, P = 0.000]$ . The sensitivity, specificity, positive predictive value and negative predictive value of HFNEF were 0.94, 0.83, 0.95 and 0.21, respectively, when NT-proBNP 131pg/mL was used as the cut-off value. The sensitivity and specificity of HFNEF were 0.62 and 0.99, respectively, when LVMI  $> 125 \text{ g/m}^2$  was used as the standard. The correlation between plasma NT-proBNP and LVMI in the HFNEF group was  $r = 0.513 (P < 0.01)$ . **Conclusion** Plasma NT-proBNP and LVMI in elderly patients with HFNEF are significantly higher than those in elderly patients with HFNEF, which may be useful for the diagnosis of HFNEF, independent use of NT-proBNP or LVMI for diagnosis, there may be some defects; if applied together, may improve the accuracy of diagnosis.

**【Key words】** Heart failure; Natriuretic peptides; Left ventricular mass index; Left ventricular ejection fraction

# 子宫颈管长度对前置胎盘孕妇母婴结局的影响和阴道超声测量子宫颈管长度对紧急提早剖宫产的预测价值

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**【摘要】** **目的** 分析子宫颈管长度对前置胎盘孕妇母婴结局的影响和阴道超声测量子宫颈管长度对紧急提早剖宫产的预测价值。**方法** 将 2014 年 1 月至 2017 年 12 月长治潞安集团总医院分娩的胎盘前置孕妇 63 例作为研究对象,于妊娠晚期采用阴道超声对孕妇子宫颈管长度进行测量。根据产妇分娩时子宫颈管长度的不同,分为对照组(子宫颈管长度  $>25$  mm)39 例和研究组(子宫颈管长度  $\leq 25$  mm)24 例。比较两组患者母婴结局,且通过绘制受试者工作特征曲线以评估子宫颈管长度对胎盘前置孕妇妊娠 36 周前行紧急提早剖宫产的诊断效能,对曲线下面积和最佳诊断阈值进行计算,并计算敏感度和特异度。**结果** 研究组分娩孕周较对照组明显缩短( $t=5.95, P<0.01$ )。研究组早产、产前出血、孕 36 周前行紧急提早剖宫产的发生率较对照组均显著升高( $\chi^2=10.320, 10.370, 22.970$ , 均  $P<0.05$ )。两组输血发生率、新生儿性别的比较差异均无统计学意义( $\chi^2=0.001, 0.010$ , 均  $P>0.05$ );研究组新生儿出生体质量和 5 min Apgar 评分较对照组均显著降低( $t=5.48, 4.65$ , 均  $P<0.05$ ),新生儿窒息发生率较对照组显著升高( $\chi^2=5.190, P<0.05$ )。子宫颈管长度对预测前置胎盘孕妇妊娠 36 周前行紧急提早剖宫产的 ROC 曲线下面积为 0.87,灵敏度为 84.62%,特异度为 78.38%,最佳诊断阈值为 26.5 mm。**结论** 子宫颈管长度较短的孕妇出现早产、产前出血、新生儿窒息等不良结局的发生率较高,而采用阴道超声对胎盘前置孕妇子宫颈管长度进行测量,可作为预测孕妇行紧急提早剖宫产的重要评估方式,有助于加强临床干预和管理,预防出现围产期严重并发症。

**【关键词】** 宫颈长度测量; 前置胎盘; 超声检查; 阴道; 剖宫产术; 孕妇; 婴儿, 新生; 妊娠结局

## The effect of cervical canal length on maternal and neonatal outcomes in placenta previa and the predictive value of transvaginal ultrasound measurement of cervical canal length for emergency early cesarean section

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**【Abstract】** **Objective** To analyze the effect of cervical canal length on maternal and neonatal outcomes in placenta previa and the predictive value of transvaginal ultrasound measurement of cervical canal length for emergency early cesarean section. **Methods** From January 2014 to December 2017, 63 pregnant women with placenta previa in the General Hospital of Changzhi Lu'an Group were selected in this study. The length of the cervical tube was measured by vaginal ultrasound in the late pregnancy. According to the length of cervical canal during delivery, 63 cases were divided into control group (cervical canal length  $>25$ cm, 39 cases) and study group (cervical canal length  $\leq 25$ cm, 24 cases). The maternal and infant outcomes of the two groups were compared, and the diagnostic efficacy of the cervical canal length to the early cesarean section of the placenta preg before 36 weeks of pregnancy was assessed by drawing the receiver operating characteristic curve to evaluate the area and the best diagnostic threshold under the curve, and calculated the sensitivity and specificity. **Results** The gestational weeks of delivery in the study group was significantly shorter than that in the control group ( $t=5.95, P<0.01$ ). The incidence rate of premature delivery, prepartum hemorrhage and premature cesarean section before 36 weeks of pregnancy in the study group were significantly higher than those in the control group ( $\chi^2=10.32, 10.37, 22.97$ , all  $P<0.05$ ). There were no statistically significant differences in the rate of blood transfusion and the gender of the newborns between the two groups ( $\chi^2=0.001,$

0.010, all  $P > 0.05$ ). The birth weight and the 5 min Apgar score in the study group were significantly lower than those in the control group ( $t = 5.48, 4.65$ , all  $P < 0.05$ ). The incidence rate of neonatal asphyxia in the study group was significantly higher than that in the control group ( $\chi^2 = 5.19, P < 0.05$ ). The area of the cervical canal length was 0.87, with the sensitivity of 84.62%, the specificity was 78.38%, and the best diagnostic threshold was 26.5 mm for the pregnant women who was predicted the placenta previa before 36 weeks of pregnancy. **Conclusion** The incidence rates of adverse outcomes, such as premature birth, prenatal bleeding and neonatal asphyxia, are higher in pregnant women with shorter cervical tube length. The measurement of cervical canal length by vaginal ultrasound for pregnant women with placenta previa can be used as an important evaluation method to predict the early cesarean section of pregnant women, and help to strengthen the clinical intervention, take management to prevent serious perinatal complications.

**【Key words】** Cervical length measurement; Placenta previa; Ultrasonography; Vagina; Cesarean section; Pregnant women; Infant, newborn; Pregnancy outcome

# 30 min 动作观察训练联合康复治疗对早期脑卒中偏瘫患者抑郁量表和视觉模拟评分的影响

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**【摘要】** **目的** 探讨 30 min 动作观察训练联合康复治疗对早期脑卒中偏瘫患者贝克抑郁量表(BDI)、休息状态视觉模拟评分(R-VAS)及被动运动视觉模拟评分(P-VAS 评分)的影响。**方法** 将 2016 年 6 月至 2017 年 12 月泰山医学院附属医院收治的早期脑卒中偏瘫患者 86 例作为研究对象,按照随机数字表法将患者分为对照组和联合组,每组 43 例。对照组给予常规康复治疗,联合组在对照组治疗基础上联合 30 min 动作观察训练。比较两组患者治疗前、治疗后 1 个月 BDI、R-VAS 及 P-VAS 评分的差异。**结果** 联合组治疗后 P-VAS[(5.14 ± 1.47)分]、R-VAS[(8.14 ± 1.53)分]评分较治疗前均显著降低( $t = 11.42, 10.31$ , 均  $P < 0.01$ ),且联合组评分较对照组显著降低( $t = 9.27, 8.94$ , 均  $P < 0.01$ );而对照组治疗前后 P-VAS、R-VAS 评分的差异均无统计学意义( $t = 0.78, 1.69$ , 均  $P > 0.05$ )。联合组与对照组患者治疗后 BDI 量表评分较治疗前均显著降低( $t = 6.43, 2.29$ , 均  $P < 0.05$ ),且联合组评分较对照组显著降低( $t = 4.44, P < 0.05$ )。**结论** 30 min 动作观察训练联合康复治疗可有效缓解早期脑卒中偏瘫患者的疼痛等不适感,有助于加快上肢运动功能的恢复,因此具有良好的临床应用价值。

**【关键词】** 卒中; 偏瘫; 训练; 康复; 抑郁; 疼痛; 运动疗法; 生活质量

## Effect of 30 min action observation training combined with rehabilitation therapy on R - VAS, P - VAS and BDI scores in early stroke patients with hemiplegia Liu Chunlei, Liu Xia, Li Feng.

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**【Abstract】** **Objective** To analyze the effect of 30 min action observation training combined with rehabilitation therapy on resting state visual analogue score (R - VAS), passive movement state visual analogue score (P - VAS) and Beck depression index(BDI) scores in early stroke patients with hemiplegia. **Methods** From June 2016 to December 2017, 86 patients with early stroke and hemiplegia treated in the Affiliated Hospital of Tai'an Medical College were selected in the research. According to the random number table method, the patients were randomly divided into control group and combined group, with 43 cases in each group. The control group was given routine rehabilitation treatment, and the combined group was given 30 min action observation training on the basis of the control group. The differences of BDI, R - VAS and P - VAS were compared between the two groups before and after 1 month of treatment. **Results** The scores of P - VAS[(5.14 ± 1.47)points] and R - VAS[(8.14 ± 1.53)points] in the combined group were significantly lower than before treatment( $t = 11.42, 10.31$ , all  $P < 0.01$ ), and the scores of the combined group were significantly lower than those of the control group ( $t = 9.27, 8.94$ , all  $P < 0.01$ ). The P - VAS and R - VAS scores in the control group after treatment showed no statistically significant differences compared with those before treatment( $t = 0.78, 1.69$ , all  $P > 0.05$ ). After treatment, the BDI scale scores of the combined group and control group were significantly lower than those before treatment( $t = 6.43, 2.29$ , all  $P < 0.05$ ), and the score of the combined group was significantly lower than that of the control group( $t = 4.44, P < 0.05$ ). **Conclusion** The 30 min exercise observation and training combined with rehabilitation therapy can effectively relieve the pain and other discomfort of early stroke patients with hemiplegia, and can accelerate the recovery of upper limb movement function, so it has good clinical value.

**【Key words】** Stroke; Hemiplegia; Training; Rehabilitation; Depression; Pain; Exercise therapy; Quality of life

# 放置 T 管引流与否对腹腔镜胆总管切开取石患者手术效果的影响比较

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**【摘要】 目的** 比较放置 T 管引流与否对腹腔镜胆总管切开取石患者手术效果的影响。**方法** 将 2014 年 1 月至 2017 年 12 月侯马市人民医院收治的胆总管结石患者 76 例为研究对象, 均行腹腔镜胆总管切开取石术。按照随机数字表法将患者分为观察组(未放置 T 管引流)和对照组(放置 T 管引流), 每组 38 例。比较两组患者手术时间、术后住院时间、肛门排气时间、住院费用、胆漏发生情况及患者术后满意度。**结果** 两组手术时间差异无统计学意义( $t=0.39, P>0.05$ ); 观察组术后住院天数、住院费用及肛门排气时间较对照组明显减少( $t=12.54, 5.05, 11.32$ , 均  $P<0.01$ )。观察组术后胆漏发生率为 2.63%, 较对照组的 28.95% 明显降低( $\chi^2=8.02, P=0.01$ )。观察组术后满意度为 97.37%, 较对照组的 63.16% 显著升高( $\chi^2=11.96, P<0.01$ )。**结论** 未放置 T 管引流在腹腔镜胆总管切开取石术后可明显减少患者术后住院时间, 减轻患者住院费用, 并且能够明显降低术后胆漏发生率, 亦能够提高患者满意度, 因此具有良好的安全性和可行性, 值得临床应用和推广。

**【关键词】** 胆总管结石; 引流术; 腹腔镜检查; 病人满意度; 手术后并发症; 住院时间; 费用, 医疗; 疗效比较研究

## Comparison of the influence of putting T tube drainage or not on surgery effect of laparoscopic choledocholithotomy Ma Liang.

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**【Abstract】 Objective** To compare the influence of putting T tube drainage or not on surgery effect of laparoscopic choledocholithotomy. **Methods** From January 2014 to December 2017, 76 patients with laparoscopic choledocholithiasis in the People's Hospital of Houma were selected in the research. All patients underwent laparoscopic choledocholithotomy. According to the random number table method, the patients were randomly divided into observation group (without T tube drainage) and control group (with T tube drainage), with 38 cases in each group. The operation time, postoperative hospital stay, anal exhaust time, hospitalization expenses, bile leakage and postoperative satisfaction between the two groups were compared. **Results** There was no statistically significant difference in the operation time between the two groups ( $t=0.39, P>0.05$ ). The hospitalization days, hospitalization expense and anus exhaust time in the observation group were significantly lower than those in the control group ( $t=12.54, 5.05, 11.32$ , all  $P<0.01$ ). The incidence rate of bile leakage of the observation group was 2.63%, which was significantly lower than 28.95% of the control group ( $\chi^2=8.02, P=0.01$ ). The postoperative satisfaction of the observation group was 97.37%, which was significantly higher than 63.16% of the control group ( $\chi^2=11.96, P<0.01$ ). **Conclusion** The non-T tube drainage in laparoscopic choledochotomy can reduce the hospitalization time, hospitalization cost, incidence rate of postoperative bile leakage and improve the patients' satisfaction. Therefore, it has good safety and feasibility, which is worthy of clinical application and promotion.

**【Key words】** Choledocholithiasis; Drainage; Laparoscopy; Patient satisfaction; Postoperative complications; Length of stay; Fees, medical; Comparative effectiveness research

# 新生儿与孕母麻疹抗体水平的关系及新生儿抗体随时间变化的规律分析

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**【摘要】** **目的** 分析新生儿与孕母麻疹抗体水平的相关性及新生儿抗体随时间变化的规律。**方法** 采集青岛市第八人民医院 2016 年 3 月至 2017 年 9 月 127 例孕母产前静脉血及其新生儿脐带血,并随访采血新生儿 3 个月龄 79 例、6 个月龄 72 例、9 个月龄 57 例的静脉血,通过酶联免疫吸附法检测入选对象麻疹 IgG 抗体的水平。**结果** 孕母麻疹抗体几何平均浓度为  $(639.56 \pm 3.15)$  mIU/mL,较新生儿血抗体浓度的  $(1102.46 \pm 2.86)$  mIU/mL 显著降低 ( $P < 0.05$ )。3、6、9 个月龄新生儿麻疹抗体几何平均浓度分别为  $(159.95 \pm 3.25)$  mIU/mL、 $(126.35 \pm 4.06)$  mIU/mL、 $(113.04 \pm 4.32)$  mIU/mL,较新生儿出生时的水平显著降低 ( $P < 0.05$ )。随着月龄的增加,新生儿抗体阳性率与保护率明显降低 ( $P < 0.05$ )。采用趋势性  $\chi^2$  检验结果发现,随着母亲麻疹抗体水平的提高,新生儿麻疹抗体水平亦随之升高 ( $\chi^2 = 9.46, P < 0.05$ )。经 Pearson 相关性分析结果发现,孕母血抗体对数水平与新生儿脐带血 ( $r = 0.78$ )、3 个月龄 ( $r = 0.54$ )、6 个月龄 ( $r = 0.47$ )、9 个月龄 ( $r = 0.53$ ) 血抗体对数水平密切相关 (均  $P < 0.05$ )。经单因素分析结果发现,新生儿麻疹抗体几何平均浓度与新生儿性别、分娩方式、胎龄、出生体质量、孕母年龄均存在显著相关性 (均  $P < 0.01$ )。**结论** 随着时间的增加,新生儿麻疹抗体逐渐衰减,并且其抗体水平与孕母抗体水平密切相关。故此,目前应积极实施针对育龄妇女的麻疹疫苗接种,采取改善孕母抗体浓度的方法以增加新生儿麻疹抗体浓度,达到预防或减少小月龄婴儿发生麻疹的目的。

**【关键词】** 麻疹; 抗体; 新生儿; 母亲

## The correlation between newborns and pregnant women measles antibody level and the regularity of the change of newborns antibody with time Zhu Sijun.

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**【Abstract】** **Objective** To analyze the correlation between newborn and mother's measles antibody level and the regularity of the change of newborn antibody with time. **Methods** Prenatal venous blood and newborns' umbilical cord blood of 127 pregnant women in the Eighth People's Hospital of Qingdao were collected, and venous blood of 3-month-old in 79 cases, 6-month-old in 72 cases and 9-month-old in 57 cases of newborns were followed up. The level of measles IgG antibody was detected by enzyme-linked immunosorbent assay. **Results** The geometric mean concentration of the maternal measles antibody was  $(639.56 \pm 3.15)$  mIU/mL, which was significantly lower than that of the neonatal blood antibody concentration [ $(1102.46 \pm 2.86)$  mIU/mL] ( $P < 0.05$ ). The geometric means of neonatal measles antibody in 3, 6, 9 months old newborns were  $(159.95 \pm 3.25)$  mIU/mL,  $(126.35 \pm 4.06)$  mIU/mL,  $(113.04 \pm 4.32)$  mIU/mL respectively, which were significantly lower than those of the newborn at birth (all  $P < 0.05$ ). With the increase of the age, the positive rate and protection rate of the newborn all decreased significantly (all  $P < 0.05$ ). Using trend Chi square test, it was found that the level of measles antibody increased with the increase of measles antibody level ( $\chi^2 = 9.46, P < 0.05$ ). Pearson correlation analysis showed that the logarithmic level of maternal blood antibody was closely correlated with the umbilical cord blood ( $r = 0.78$ ), 3-month-old ( $r = 0.54$ ), 6-month-old ( $r = 0.47$ ), 9-month-old ( $r = 0.53$ ) blood antibody logarithm level (all  $P < 0.05$ ). Univariate analysis showed that the geometric mean of neonatal measles antibody was significantly correlated with neonatal sex, delivery mode, gestational age, birth weight and maternal age (all  $P < 0.01$ ). **Conclusion** With the increase of time, the measles antibody gradually attenuates, and the level of antibody is closely correlated with the level of maternal antibody. Therefore, we should actively implement measles vaccination for women of childbearing age, and adopt a way to improve maternal antibody concentration to increase the concentration of neonatal measles antibody, so as to prevent or reduce measles in infants.

**【Key words】** Measles; Antibodies; Newborns; Mothers

## 补充维生素 D 和钙对中年女性糖耐量减低合并骨量减少患者糖代谢和骨代谢标志物的影响

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**【摘要】** **目的** 探讨补充维生素 D 和钙对中年女性糖耐量减低(IGT)合并骨量减少患者糖代谢和骨代谢标志物的影响。**方法** 选择 2015 年 1 月至 2015 年 6 月在解放军第三〇九医院体检发现的 IGT 合并骨量减少的中年女性患者 60 例,给予碳酸钙 D3(朗迪)2 片/d,治疗随访 12 个月。治疗前后均进行口服葡萄糖耐量试验(OGTT)及胰岛素释放试验,测定体质量指数(BMI)、血脂四项[总胆固醇(TC)、低密度脂蛋白胆固醇(LDL-C)、高密度脂蛋白胆固醇(HDL-C)、甘油三酯(TG)]、空腹和餐后 2 h 血糖(FPG、2 h PG)、空腹和餐后 2 h 胰岛素(FINS、2 h INS)、糖化血红蛋白(HbA1c)、25-羟基维生素 D[25(OH)D]、血钙(Ca)和骨代谢标志[总骨 I 型前胶原 N 端肽(TPINP)、骨钙素(BGP)、I 型胶原羧基末端肽( $\beta$ -CTX)]及骨密度(BMD),计算稳态模型胰岛素抵抗指数(HOMA-IR)及稳态模型胰岛  $\beta$  细胞功能指数(HOMA- $\beta$ )。治疗前后比较采用 *t* 检验,采用 Pearson 相关分析两因素之间的关系。**结果** (1)与治疗前相比,治疗后 BMI、TC、LDL-C、HDL-C、TG 变化差异均无统计学意义(均  $P > 0.05$ );治疗后 FPG[(5.0 ± 1.0) mmol/L 比(5.8 ± 0.9) mmol/L]、2 h PG[(8.0 ± 1.6) mmol/L 比(9.1 ± 1.5) mmol/L]、FINS[(11.1 ± 4.7) mU/L 比(14.1 ± 5.6) mU/L]、2 h INS[(44.2 ± 3.8) mU/L 比(55.1 ± 7.9) mU/L]、HbA1c[(5.6 ± 0.5)% 比(6.3 ± 0.6)%]、HOMA-IR[(2.21 ± 1.12) 比(3.81 ± 0.82)]水平均降低,差异均有统计学意义(均  $P < 0.05$ );治疗后 HOMA- $\beta$ [(52.17 ± 2.89) 比(41.53 ± 2.21)]升高,差异有统计学意义( $P < 0.05$ )。(2)治疗前 IGT 合并骨量减少患者维生素 D 缺乏[25(OH)D < 20  $\mu$ g/L]达 88.3%(54/60);与治疗前相比,治疗后 BMD、Ca、25(OH)D[(35.2 ± 7.8)  $\mu$ g/L 比(14.8 ± 3.7)  $\mu$ g/L]、TPINP[(51.24 ± 7.12) ng/mL 比(38.73 ± 5.10) ng/mL]、BGP[(28.21 ± 6.24) ng/mL 比(14.92 ± 4.72) ng/mL]水平升高,差异均有统计学意义(均  $P < 0.05$ );治疗后  $\beta$ -CTX[(251.43 ± 13.79) pg/mL 比(387.79 ± 15.77) pg/mL]水平降低,差异有统计学意义( $P < 0.05$ )。(3)Pearson 相关分析结果显示,25(OH)D 水平与 HOMA- $\beta$ 、BMD、Ca、TPINP、BGP 呈正相关( $r = 0.298, 0.352, 0.421, 0.435, 0.465$ , 均  $P < 0.05$ ),而与 FPG、2 h PG、HbA1c、FINS、2 h INS、HOMA-IR、 $\beta$ -CTX 呈负相关( $r = -0.254, -0.358, -0.287, -0.356, -0.279, -0.458, -0.421$ , 均  $P < 0.05$ )。**结论** 补充维生素 D 和钙对中年女性糖耐量减低合并骨量减少患者糖代谢和骨代谢有改善作用。

**【关键词】** 维生素 D; 钙; 葡糖耐量试验; 葡萄糖代谢障碍; 骨疾病,代谢性

**Effect of vitamin D and calcium supplementation on the markers of glucose metabolism and bone metabolism in middle-aged women patients with impaired glucose tolerance and osteopenia** Yu Yang, Wang Lu, Yang Lijun, Hao Chunyan, Gao Lijie, Ma Limin.

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## 小剂量米非司酮联合桂枝茯苓胶囊治疗 子宫内膜异位症的临床疗效及安全性

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**【摘要】** 目的 观察小剂量米非司酮联合桂枝茯苓胶囊治疗子宫内膜异位症的临床疗效及安全性。  
方法 将湖州市妇幼保健院 2015 年 1 月至 2016 年 1 月收治的符合入组标准的子宫内膜异位症患者 84 例, 按照随机数字表法分为研究组( $n=42$  例)和对照组( $n=42$  例), 对照组患者于月经来潮 5 d 后口服米非司酮治疗, 12.5 mg/次, 1 次/d, 研究组口服小剂量米非司酮, 10 mg/次, 1 次/d, 桂枝茯苓胶囊, 3 粒/次, 3 次/d, 连续治疗 12 周, 治疗前后观察患者症状、体征改善情况, 空腹抽血采用放射免疫法检测生殖激素指标[血清雌二醇( $E_2$ )、孕酮(P)、促卵泡素(FSH)、黄体生成素(LH)], 治疗 12 周进行临床疗效评估, 记录不良反应发生情况。  
结果 研究组和对照组治疗后症状体征积分分别为( $13.06 \pm 4.65$ )分和( $17.30 \pm 5.86$ )分, 均较治疗前明显下降( $t=3.987, 3.426$ , 均  $P < 0.05$ ), 研究组治疗后症状体征积分明显低于对照组( $t=3.475, P < 0.05$ ); 研究组和对照组治疗后  $E_2$ 、P 分别为( $113.3 \pm 10.6$ ) pmol/L 和( $125.8 \pm 13.2$ ) pmol/L、( $0.42 \pm 0.18$ ) pmol/L 和( $0.64 \pm 0.20$ ) pmol/L, 均较治疗前明显下降( $t=11.442, 7.263, 6.117, 3.475$ , 均  $P < 0.05$ ), 但研究组治疗后  $E_2$ 、P 明显低于对照组( $t=3.772, 6.117$ , 均  $P < 0.05$ ); 研究组的临床总有效率为 95.24%, 明显高于对照组的 80.95%, 差异有统计学意义( $\chi^2=8.007, P < 0.05$ ); 研究组和对照组痤疮、体质量增加和关节酸痛的发生率分别为 2.38% 和 16.67%、2.38% 和 19.05%、2.38% 和 19.05%, 差异均有统计学意义( $\chi^2=4.974, 6.098, 6.098$ , 均  $P < 0.05$ )。  
结论 小剂量米非司酮联合桂枝茯苓胶囊的疗效优于常规剂量米非司酮疗效, 能显著改善症状体征积分, 调节激素水平, 且能降低长期大量使用米非司酮所致的不良反应发生率。

**【关键词】** 子宫内膜异位症; 米非司酮; 桂枝茯苓胶囊; 体征和症状; 雌二醇; 孕酮; 尿促卵泡素; 黄体激素类

**Clinical efficacy and safety of low dose mifepristone and Guizhi Fuling Capsule in the treatment of endometriosis** Li Shuikun, Zhang Qinfen.

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## 癌症患者电子健康素养现状及影响因素研究

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**【摘要】** 目的 调查癌症患者电子健康素养现状及探索其影响因素。方法 采用便利抽样方法抽取 2017 年 7~10 月宁海县中医医院各科室符合纳入、排除标准的癌症患者,使用一般情况调查表和电子健康素养量表进行问卷调查。结果 癌症患者电子健康素养总分为  $(23.24 \pm 3.92)$  分,81.9% 的患者得分高于 20 分,总体得分状况中等偏高;多重线性回归分析发现年龄  $(\beta = -0.453, 95\% CI = -3.759 \sim -1.785)$  和文化程度  $(\beta = 1.766, 95\% CI = 1.124 \sim 2.408)$  是影响癌症患者电子健康素养的因素(均  $P < 0.05$ )。结论 癌症患者电子健康素养虽处于中等偏上水平,然而患者对所获取健康信息评价及利用能力较差,医务人员对癌症患者的电子健康素养教育应针对个体特点,加强对高龄、低文化程度患者的健康指导,提高其电子健康素养,从而改善其健康状况。

**【关键词】** 肿瘤; 健康素养; 电子; 疾病影响状态调查; 年龄因素; 文化特征; 肿瘤分期

**Research on status and influencing factors of electronic health literacy in cancer patients** Zhang Lingling.

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## Gamma-3 钉和股骨近端抗旋髓内钉内固定术治疗 股骨粗隆间骨折的临床疗效研究

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**【摘要】** **目的** 探讨 Gamma-3 钉和股骨近端抗旋髓内钉(PFNA)内固定术治疗股骨粗隆间骨折的临床疗效。**方法** 选取杭州市富阳中医骨伤医院 2014 年 3 月至 2016 年 7 月收治股骨粗隆间骨折患者 120 例为研究对象,采用随机抽签法分为 A 组(60 例)和 B 组(60 例),分别采用 Gamma-3 钉和 PFNA 内固定术治疗,比较两组患者手术相关临床指标、髋关节功能优良率、人工全髋关节疗效(Harris)评分及术后并发症发生率。**结果** A 组手术用时、手术出血量、切口长度、手术辐射次数及骨折愈合用时分别为(78.95 ± 15.13) min、(181.56 ± 53.62) mL、(6.97 ± 1.35) cm、(10.82 ± 2.53) 次、(11.89 ± 1.84) 周;B 组手术用时、手术出血量、切口长度、手术辐射次数及骨折愈合时间分别为(63.07 ± 10.57) min、(124.90 ± 37.43) mL、(7.10 ± 1.40) cm、(8.13 ± 1.91) 次、(12.16 ± 1.87) 周;B 组手术用时、手术出血量及手术辐射次数均显著优于 A 组( $t=3.16$ 、 $3.41$ 、 $2.97$ ,  $P=0.00$ 、 $0.00$ 、 $0.00$ );两组患者切口长度和骨折愈合用时差异均无统计学意义( $t=0.72$ 、 $0.81$ ,  $P=0.53$ 、 $0.47$ );两组髋关节功能优良率比较差异无统计学意义( $\chi^2=1.34$ ,  $P=0.48$ );两组 Harris 评分差异均无统计学意义( $t=0.82$ 、 $0.77$ 、 $0.86$ ,  $P=0.47$ 、 $0.50$ 、 $0.44$ );两组术后并发症发生率差异无统计学意义( $\chi^2=1.34$ ,  $P=0.48$ )。**结论** Gamma-3 钉和 PFNA 内固定术用于股骨粗隆间骨折患者治疗总体疗效和安全性接近,但 PFNA 内固定术有助于缩短手术用时,降低医源性创伤,并有助于减轻辐射损伤。

**【关键词】** 股骨骨折; 骨折固定术; 髋关节; 疗效比较研究

**Clinical comparison study of Gamma-3 nail and PFNA internal fixation in the treatment of intertrochanteric fractures** Zhou Junpeng, Lu Zhou, Mo Junjie.

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## 健康教育在输尿管镜下钬激光碎石术中的应用

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**【摘要】** **目的** 探讨健康教育在输尿管镜下钬激光碎石术的临床效果。**方法** 选取 2016 年 1 月至 2017 年 2 月庆元县人民医院收治的输尿管镜下实施钬激光碎石术患者 100 例,采用随机数字表法将患者分为观察组和对照组,每组 50 例,观察组患者采用连续规范化全程的健康教育,对照组采用口头健康教育,比较分析患者的临床效果。**结果** 观察组手术时间、住院时间 $[(41.4 \pm 25.6) \text{ min}, 2 \sim 15 \text{ d}]$ 明显优于对照组 $[(59.3 \pm 32) \text{ min}, 5 \sim 20 \text{ d}]$ ,差异有统计学意义( $t = 5.221, 5.014, P < 0.05$ ),但在结石排净率方面观察组(98.00%)和对照组(96.00%)差异无统计学意义( $\chi^2 = 1.225, P > 0.05$ ),所有患者均成功碎石,积极配合,无严重并发症发生。**结论** 应用输尿管镜钬激光碎石术治疗输尿管结石,激光安全有效,对患者带来的痛苦较小,而且具有无切口,恢复速度快的特点。

**【关键词】** 健康教育; 输尿管镜检查术; 碎石术; 临床效果

**Application of health education in holmium laser lithotripsy under ureteroscopy** Wu Limei, Ye Shaohui, Zhang Liyan.

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## 适用于野外训练的消毒棉球棒实训设计

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**【摘要】** 根据在各级军队医院就业的毕业生反馈的意见,在护理实训中增加了野战救护实训内容,并且把改进消毒液、消毒棉球棒存放使用方法作为引入野战救护实训的第一个内容。本次实训以小组为单位团队合作完成,培养了学生的创新意识,通过这次实训大家认识到发明创新不仅仅是理工科学生的事情,护理专业的学生也应该具有创新能力,同时培养了学生的动手、合作、沟通、交流、分析及解决问题等多种职业能力,增强了学生的综合职业能力,从而实现学生职业的可持续发展。

**【关键词】** 护理; 运动损伤; 户外医疗; 高职实训教学; 研究设计; 合作

**基金项目:**安徽省省级质量工程“生理学智慧课堂试点”项目(2017zhkt408)

**Innovative training Design of Disinfection Cotton Ball stick suitable for Outdoor exercise in Field training**

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**Fund program:** Anhui Provincial Quality Project "Physiology Wisdom Classroom Pilot" (2017zhkt408)

## 以家庭为中心优质护理模式在儿科病房中的应用

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**【摘要】** 目的 分析以家庭为中心的优质护理模式应用在儿科病房中的护理效果及应用价值。方法 回顾性选取 2015 年 10 月至 2017 年 10 月杭州市第一人民医院收治的儿科患者 170 例,根据护理方法不同分为对照组和观察组。对照组给予常规护理模式,观察组采取以家庭为中心的优质护理模式开展护理,对比两组护理效果。**结果** 观察组护理差错发生率为 1.18%,对照组护理差错发生率为 9.76%,组间差异有统计学意义( $P < 0.05$ )。观察组病房管理评分( $92.54 \pm 6.01$ )分,基础护理评分( $93.44 \pm 5.54$ )分,护理文书书写评分( $95.49 \pm 4.97$ )分,消毒隔离评分( $93.08 \pm 6.56$ )分;对照组病房管理评分( $82.35 \pm 2.13$ )分,基础护理评分( $80.66 \pm 2.46$ )分,护理文书书写评分( $83.19 \pm 2.55$ )分,消毒隔离评分( $81.49 \pm 2.36$ )分,组间对比差异有统计学意义( $P < 0.05$ )。观察组家庭生活评分( $20.35 \pm 2.82$ )分,同伴交往评分( $19.89 \pm 2.65$ )分,学校生活评分( $19.59 \pm 2.87$ )分,生活环境评分( $20.17 \pm 2.46$ )分,自我认识评分( $22.21 \pm 1.91$ )分,抑郁体验评分( $20.87 \pm 2.63$ )分,焦虑体验评分( $21.15 \pm 2.08$ )分,躯体情感评分( $20.87 \pm 2.11$ )分;对照家庭生活评分( $14.67 \pm 1.03$ )分,同伴交往评分( $13.78 \pm 1.13$ )分,学校生活评分( $13.52 \pm 1.37$ )分,生活环境评分( $14.05 \pm 1.53$ )分,自我认识评分( $14.56 \pm 1.16$ )分,抑郁体验评分( $13.85 \pm 1.42$ )分,焦虑体验评分( $14.19 \pm 1.33$ )分,躯体情感评分( $14.08 \pm 1.18$ )分,组间对比差异有统计学意义( $P < 0.05$ )。**结论** 采用以家庭为中心的优质护理模式应用在儿科病房中可以降低护理差错发生率,提升儿科病房护理质量,改善患儿生活质量,值得在临床推广应用。

**【关键词】** 家庭为中心; 优质护理; 儿科病房

**基金项目:**浙江省杭州市卫生科技计划(2014A05)

**Application of family centered high quality care nursing in the pediatric ward** Zhao Wadi, He Hongfen.

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**Fund program:** Hangzhou Health Science and Technology Plan of 2014(2014A05)

# 快速康复外科技术在肺癌围术期护理中的应用效果及对患者生存质量的影响

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**【摘要】目的** 探究分析快速康复外科技术在肺癌围术期护理中的应用效果及对患者生存质量的影响。**方法** 选择 2016 年 7 月至 2017 年 7 月于武警浙江总队嘉兴医院行胸腔镜下肺癌切除手术治疗的患者 300 例作为研究对象,根据随机数字表法分为观察组(150 例,采用快速康复外科理念管理)和对照组(150 例,采用传统护理管理)。比较两组术后的胸管保留时间、肛门排气时间、住院天数、住院费用,两组术后 7 d 的免疫球蛋白 A(IgA)、免疫球蛋白 G(IgG)、免疫球蛋白 M(IgM)浓度及  $CD_4^+$ 、 $CD_8^+$ , 干预前后的白细胞介素-6(IL-6)、肿瘤坏死因子(TNF- $\alpha$ )浓度变化情况、并发症发生情况(包括切口感染、胸腔积液、肺部感染、肺不张、心律失常、支气管胸膜瘘)、干预前后生活质量评分。**结果** 观察组的胸管保留时间( $4.9 \pm 1.1$ )d、肛门排气时间( $1.1 \pm 0.4$ )d、住院天数( $12.4 \pm 4.3$ )d,均明显短于对照组的胸管保留时间( $8.2 \pm 1.6$ )d、肛门排气时间( $1.9 \pm 0.7$ )d、住院天数( $16.5 \pm 4.7$ )d( $t = 20.816, 12.153, 7.883$ , 均  $P < 0.05$ );观察组住院费用( $15.35 \pm 2.25$ )千元,低于对照组的( $19.42 \pm 3.16$ )千元( $t = 12.850, P < 0.05$ );术后 7 d 观察组的 IgA( $2.06 \pm 0.31$ )g/L、IgG( $12.53 \pm 1.25$ )g/L、IgM( $1.28 \pm 0.14$ )g/L 及  $CD_4^+$ ( $48.41 \pm 4.89$ )%、IL-6( $150.85 \pm 13.12$ ) $\mu$ g/L、TNF- $\alpha$ ( $1.81 \pm 0.39$ )ng/L,均明显高于对照组的 IgA( $1.81 \pm 0.27$ )g/L、IgG( $10.89 \pm 1.16$ )g/L、IgM( $1.17 \pm 0.17$ )g/L 及  $CD_4^+$ ( $35.67 \pm 4.54$ )%、IL-6( $172.67 \pm 12.56$ ) $\mu$ g/L、TNF- $\alpha$ ( $2.08 \pm 0.38$ )ng/L( $t = 7.448, 11.778, 6.117, 23.384, 14.714, 6.073$ , 均  $P < 0.05$ );观察组  $CD_8^+$ ( $25.74 \pm 4.22$ )%, 低于对照组的( $37.43 \pm 4.18$ )%( $t = 24.104, P < 0.05$ );观察组并发症总发生率 4.67%, 明显小于对照组的 13.33% ( $\chi^2 = 6.878, P < 0.05$ );观察组的生理质量得分( $70.12 \pm 4.12$ )分、心理质量得分( $71.09 \pm 4.04$ )分、角色质量得分( $70.39 \pm 3.93$ )分、社会质量得分( $69.93 \pm 4.16$ )分,均较对照组的生理质量得分( $62.45 \pm 4.16$ )分、心理质量得分( $62.72 \pm 4.08$ )分、角色质量得分( $65.63 \pm 4.21$ )分、社会质量得分( $62.29 \pm 4.05$ )分更高( $t = 16.044, 17.854, 10.123, 16.117$ , 均  $P < 0.05$ )。**结论** 快速康复外科理念有助于胸腔镜肺癌手术围术期患者康复,疗效显著,减少并发症,有助于改善患者生活质量,值得进行临床推广。

**【关键词】** 快速康复外科; 肺癌; 生活质量

**Effect of rapid rehabilitation surgery on perioperative care of lung cancer and its impact on quality of life**

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## 综合护理干预对轻中度阿尔茨海默症患者日常生活能力及精神状况的影响分析

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**【摘要】** **目的** 探讨综合护理干预对轻中度阿尔茨海默症(Alzheimer's disease, AD)患者日常生活能力及精神状况的影响。**方法** 选取 2017 年 1~12 月绍兴市第七人民医院精神科收治的轻中度阿尔茨海默症患者 62 例作为研究对象,所有入选患者均给予综合护理干预。分别于综合护理干预前和干预后 6 个月评估日常生活能力量表(Activity of Daily Living Scale, ADL)和简易精神状态量表(Mini-Mental State Examination, MMSE)。比较 62 例患者综合护理干预前和干预后 6 个月 ADL 评分与 MMSE 评分的变化。**结果** 综合干预 6 个月后,62 例患者的 ADL 评分较干预前明显下降( $36.85 \pm 4.28$ )分比( $30.48 \pm 4.05$ )分,差异有统计学意义( $t=8.512, P=0.000$ );MMSE 评分较干预前明显升高( $14.25 \pm 1.63$ )分比( $18.77 \pm 1.92$ )分,差异有统计学意义( $t=14.131, P=0.000$ )。**结论** 对于轻中度 AD 患者,可以通过综合护理干预改善日常生活能力和精神状况,值得临床借鉴。

**【关键词】** 综合护理干预; 阿尔茨海默症; 日常生活能力; 精神状况

**Effect of comprehensive nursing intervention on activity of daily living and mental status in patients with mild to moderate Alzheimer's disease** Hu Meijin, Lu Qiuping, Wang Yibing.

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## 他汀类药物联合氯吡格雷对动脉粥样硬化斑块影响的研究进展

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**【摘要】** 他汀类药物与抗血小板药物是治疗脑血管疾病的两大基石, 两种药物在降脂、稳定斑块、降低血小板反应性、抑制炎症中起着至关重要的作用。他汀类药物通过多种作用途径可有效延缓动脉粥样硬化进程, 缩小斑块体积, 减少心脑血管疾病发生率。氯吡格雷目前主要用于抗血小板聚集, 有部分研究指出氯吡格雷也参与抗动脉粥样硬化过程, 但目前机制未明。在他汀类药物与氯吡格雷联用时, 氯吡格雷抗动脉粥样硬化作用往往被忽略, 该研究就他汀联合氯吡格雷对动脉粥样硬化斑块的疗效研究进展进行综述。

**【关键词】** 动脉粥样硬化; 他汀类药物; 氯吡格雷; 脑血管疾病; 斑块

**Research progress of combined statins and clopidogrel on atherosclerotic plaques** Li Xiaoying, Zhou Borong, Luo Jianhua, Gao Wanli.

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**【Abstract】** Statins and antiplatelet drugs are the two cornerstones for the treatment of cerebrovascular diseases. This two drugs play a vital role in reducing platelet reactivity and inhibiting inflammation. Statins can effectively delay the progression of atherosclerosis, reduce plaque volume and reduce the incidence of cerebrovascular diseases through multiple pathways. Clopidogrel is currently used primarily for anti-platelet aggregation. Some studies indicate that clopidogrel is also involved in the process of atherosclerosis, but the mechanism is not clear. The anti-atherosclerosis effect of clopidogrel is often neglected, when statins are combined with clopidogrel. This article reviews the progress in the treatment of atherosclerotic plaque by statin combined with clopidogrel.

**【Key words】** Atherosclerosis; Statins; Clopidogrel; Cerebrovascular disease; Plaques

## 健康教育材料评估工具的研究进展

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**【摘要】** 随着“以患者为中心”的医学模式转变,健康教育已成为开展整体护理的重要组成部分之一。作为健康教育的实施媒介,健康教育材料是开展健康教育的前提。健康教育材料的质量对于提高护理质量具有积极意义。本文通过对国内、外关于健康教育材料评估工具的研究进展进行综述,总结了目前国外常用的健康教育材料评估工具;探究了国内目前研究存在的问题。此外,本文通过对国外常用评估工具的不同特点开展讨论,发现了可适用于我国的健康教育材料评估工具,为今后国内的相关研究指导了方向。

**【关键词】** 健康教育; 护理; 研究

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**Research Progress on Patient Education Materials Assessment Tool** Chen Yiwen, Yang Wenyu.

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**【Abstract】** With the transformation of the "patient-centered" medical model, patient education has become an important part of the holistic nursing care. As an implementation medium of patient education, patient education materials are the premise for the development of patient education. The quality of patient education materials plays a positive role in improving the quality of care. This article summarizes the domestic and international research progress of patient education materials assessment tools; it also summarizes the currently used international patient education materials assessment tool; it explores the existing problems in the domestic research. In addition, this article discusses the different characteristics of commonly used international assessment tools, and identifies an applicable patient education materials assessment tool that can be introduced into China so as to guide the domestic research direction in the future.

**【Key words】** Health education; Nursing care; Research

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