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甲磺酸伊马替尼用于慢性粒细胞白血病 临床治疗的效果分析

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【摘要】 目的 研究并探讨甲磺酸伊马替尼用于慢性粒细胞白血病临床治疗中的效果。**方法** 选择 2013 年 1 月至 2017 年 1 月嘉兴市第二医院血液科收治的慢性粒细胞白血病患者 60 例纳入研究,采取计算机随机数字表法将 60 例患者分为对照组、观察组各 30 例。对照组、观察组分别实施常规化疗、常规化疗 + 甲磺酸伊马替尼口服。治疗 6 个月后,比较两组临床疗效、不良反应发生率、免疫功能指标、生存质量评分。**结果** 观察组客观缓解率为 76.67% (23/30),对照组为 50.00% (15/30),观察组高于对照组 ($\chi^2 = 4.593, P < 0.05$);观察组不良反应发生率为 13.33% (4/30),明显低于对照组的 36.67% (11/30) ($\chi^2 = 4.356, P < 0.05$);治疗前,两组各项免疫功能指标差异均无统计学意义 ($t = 0.168, 0.287, 0.156$, 均 $P > 0.05$),治疗后,观察组各项免疫功能指标均高于对照组 ($t = 4.482, 3.731, 3.361$, 均 $P < 0.05$);治疗后,观察组各项生存质量评分均高于对照组 ($t = 8.898, 5.945, 9.309, 5.679$, 均 $P < 0.05$)。**结论** 在慢性粒细胞白血病患者中采用甲磺酸伊马替尼治疗,可有效提高患者的近期疗效和化疗安全性,还可有效减轻化疗对患者免疫功能的影响,改善其生存质量。

【关键词】 白血病,髓样,慢性; 伊马替尼; 免疫; 生活质量

基金项目:浙江省药学会医院药学专项科研资助项目(2014ZY30)

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Clinical analysis of imatinib mesylate in the treatment of chronic myeloid leukemia

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【Abstract】 Objective To study and explore the clinical effect of imatinib mesylate in the treatment of chronic myeloid leukemia. **Methods** From January 2013 to January 2017, 60 patients with chronic myeloid leukemia in the Second Hospital of Jiaxing were included in the study. The patients were randomly divided into control group and observation group, with 30 cases in each group. The control group was given routine chemotherapy, the observation group was given routine chemotherapy combined with imatinib mesylate orally. After 6 months of treatment, the clinical curative effect, the incidence of adverse reactions, immune function, quality of life score of the two groups were compared. **Results** The response rate of the observation group was 76.67% (23/30), which was higher than 50.00% (15/30) of the control group ($\chi^2 = 4.593, P < 0.05$). The incidence rate of adverse reactions in the observation group was 13.33% (4/30), which was significantly lower than 36.67% (11/30) in the control group ($\chi^2 = 4.356, P < 0.05$). Before treatment, the immune function indicators between the two groups had no statistically significant differences ($t = 0.168, 0.287, 0.156$, all $P > 0.05$). After treatment, the indicators of immune function in the observation group were higher than those in the control group ($t = 4.482, 3.731, 3.361$, all $P < 0.05$). After treatment, the quality of life scores in the observation group were higher than those in the control group ($t = 8.898, 5.945, 9.309, 5.679$, all $P < 0.05$). **Conclusion** Imatinib mesylate in the treatment of patients with chronic myelogenous leukemia can effectively improve the efficacy and safety of chemotherapy, reduce the effect of chemotherapy on the immune function of patients, improve their quality of life.

【Key words】 Leukemia, myelogenous, chronic; Imatinib; Immune; Quality of life

Fund program: Special Research Project of Pharmacy of Zhejiang Pharmaceutical Association Hospital (2014ZY30)

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三氧化二砷维持治疗对急性早幼粒细胞白血病 远期复发率的影响

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【摘要】 目的 探讨三氧化二砷维持治疗对急性早幼粒细胞白血病 (APL) 患者远期复发率的影响。**方法** 选取湖州市第一人民医院 2011 年 12 月至 2013 年 12 月收治的 APL 患者 60 例,根据随机数字表法将患者分为两组,各 30 例。所有患者接受相同的诱导治疗及巩固治疗。维持治疗期间给予对照组全反式维甲酸,观察组患者则使用三氧化二砷,维持治疗持续进行 2 个周期后,检测并比较两组患者血清相关水平变化情况 & 治疗期间不良反应发生情况;治疗后持续随访 3 年,记录并比较两组患者各年的复发率 & 生存率。**结果** 维持治疗 1 个周期、2 个周期,两组患者的总胆固醇、甘油三酯水平均较治疗前升高 (均 $P < 0.05$),但观察组各血脂水平均低于对照组,差异均有统计学意义 ($t = 2.044, 2.175$, 均 $P < 0.05$)。观察组治疗期间维甲酸综合征、颅内压升高及其他不良反应发生率均低于对照组,差异均有统计学意义 (6.67% 比 26.67%、6.67% 比 30.00%、6.67% 比 26.67%, $\chi^2 = 0.043, 0.023, 0.043$, 均 $P < 0.05$)。治疗后 2、3 年,观察组生存率高于对照组,差异均有统计学意义 (90.00% 比 66.67%、83.33% 比 60.00%, $\chi^2 = 4.812, 4.812$, 均 $P < 0.05$); 治疗后 3 年,观察组复发率低于对照组,差异有统计学意义 (10.00% 比 33.33%, $\chi^2 = 4.812, P < 0.05$)。**结论** 急性早幼粒细胞白血病患者维持治疗阶段使用三氧化二砷对患者血脂代谢无明显影响,在一定程度上可减少患者不良反应发生,降低其复发率,提高其生存率。

【关键词】 白血病,早幼粒细胞,急性; 三氧化二砷; 阿糖胞苷; 柔红霉素; 复发; 无病生存; 出血; 药物毒性

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Effect of arsenic trioxide maintenance therapy on long-term recurrence rate in patients with acute promyelocytic leukemia

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【Abstract】 Objective To explore the effect of arsenic trioxide maintenance therapy on the long-term recurrence rate in patients with acute promyelocytic leukemia (APL). **Methods** From December 2011 to December 2013, 60 patients with APL in the First People's Hospital of Huzhou were selected and divided into control group and observation group according to random number table, with 30 cases in each group. All patients received the same induction therapy and consolidation therapy. During the maintenance treatment period, all-trans retinoic acid (ATRA) was given to the control group, and arsenic trioxide was used in the observation group. The serum levels and incidence of adverse reactions in the two groups were detected and compared after two cycles of the maintenance therapy. Three years of follow-up was conducted after treatment to record and compare the recurrence rate and survival rate in the two groups. **Results** The levels of TC and TG after 1 and 2 cycles of treatment were higher than those before treatment in both two groups (all $P < 0.05$), but the levels of lipid indicators in the observation group were lower than those in the control group, and the differences were statistically significant ($t = 2.044, 2.175$, all $P < 0.05$). The incidence rates of retinoic acid syndrome, elevated intracranial pressure and other adverse reactions in the observation group during the treatment were lower than those in the control group (6.67% vs. 26.67%, 6.67% vs. 30.00%, 6.67% vs. 26.67%), and the differences were statistically significant ($\chi^2 = 0.043, 0.023, 0.043$, all $P < 0.05$). The survival rates after 2 and 3 years of treatment in the observation group were higher than those in the control group (90.00% vs. 66.67%, 83.33% vs. 60.00%), and the differences were statistically significant ($\chi^2 = 4.812, 4.812$, all $P < 0.05$). The recurrence rate after 3 years of treatment in the observation group was lower than

that in the control group (10.00% vs. 33.33%), and the difference was statistically significant ($\chi^2 = 4.812, P < 0.05$). **Conclusion** For patients with APL, the application of arsenic trioxide in the maintenance therapy can produce no significant effect on their lipid metabolism, and at a certain extent, can help reduce the incidence of adverse reactions and recurrence rate, and improve the survival rate.

【Key words】 Leukemia, promyelocytic, acute; Arsenic trioxide; Cytarabine; Daunorubicin; Recurrence; Disease-free survival; Hemorrhage; Drug toxicity

Fund program: Science and Technology Planning Project of Huzhou City, Zhejiang Province (2017GYB04)

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血栓弹力图对临床输血的指导价值分析

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【摘要】 **目的** 探讨血栓弹力图对临床输血的指导价值。**方法** 抽选山西省人民医院 2016 年 3 月至 2018 年 2 月收治的术中需要输注血液制品的患者 98 例,采用随机数字表法分为观察组和对照组各 49 例。观察组采用血栓弹力图指标指导输血,对照组采用常规凝血指标指导输血。比较两组患者血液制品用量及术中、术后临床结局,并分析血栓弹力图相关参数(R、MA、Angle)与传统凝血指标的相关性。**结果** 观察组术中出血量为(955.3 ± 211.3)mL,明显少于对照组的(1 145.8 ± 201.2)mL,差异有统计学意义($t=4.570, P<0.05$)。观察组使用悬浮红细胞(4.25 ± 1.07)U、血红蛋白(Hb)(2.32 ± 1.08)g、血小板(PLT)(2.14 ± 0.58)U、新鲜冰冻血浆(217.5 ± 21.3)mL,使用量均明显少于对照组,差异均有统计学意义($t=9.074, 7.017, 10.238, 51.761$, 均 $P<0.05$)。活化部分凝血活酶时间(APTT)、凝血酶原时间(PT)与 R 均为正相关($r=0.46, 0.35$, 均 $P<0.05$);纤维蛋白原(FIB)与 MA 为正相关($r=0.37, P<0.05$);PLT 与 Angle 角、MA 均为正相关($r=0.51, 0.71$, 均 $P<0.05$)。**结论** 与常规凝血指标相比,通过血栓弹力图对需手术输血患者合理使用血液制品具有指导价值,可以降低输血量,值得在临床推广。

【关键词】 输血; 血栓弹力描记术; 红细胞; 血小板; 血红蛋白类; 凝血酶原时间

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Clinical value of thrombus elasto graph in guiding clinical transfusion

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【Abstract】 Objective To explore the guiding value of thrombus elasto graph in clinical blood transfusion.

Methods From March 2016 to February 2018, 98 patients who were given blood products in the People's Hospital of Shanxi Province were selected. The patients were divided into the observation group and the control group by the random stratification method, with 49 cases in each group. The observation group used thrombus elastograph to guide blood transfusion, while the control group used conventional coagulation indicators to guide blood transfusion. The amount of blood products and the clinical outcome of the two groups were compared, and the correlation between the parameters related to the thrombus map (R, MA, Angle) and the traditional blood coagulation index were analyzed.

Results The blood loss during operation in the observation group was (955.3 ± 211.3) mL, which was significantly less than (1 145.8 ± 201.2) mL in the control group, and the difference was statistically significant ($t=4.570, P<0.05$). The use of suspended red cells, Hb, PLT and fresh frozen plasma in the observation group were (4.25 ± 1.07) U, (2.32 ± 1.08) g, (2.14 ± 0.58) U, (217.5 ± 21.3) mL, respectively, which were significantly less than those in the control group ($t=9.074, 7.017, 10.238, 51.761$, all $P<0.05$). APTT and PT were positively correlated with R ($r=0.46, 0.35$, all $P<0.05$). FIB was positively correlated with MA ($r=0.37, P<0.05$). PLT was positively correlated with Angle angle and MA ($r=0.51, 0.71$, all $P<0.05$). **Conclusion** Compared with the conventional coagulation index, the thrombus map is of guiding value for the rational use of blood products for the patients who need the blood transfusion. It can help to reduce the amount of blood transfusion, and it is worth to be popularized in clinical practice.

【Key words】 Blood transfusion; Thrombuselastograph; Erythrocytes; Blood platelets; Hemoglobins; Prothrombin time

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外周静脉置入中心静脉导管术后上肢深静脉血栓形成的相关因素分析

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【摘要】 目的 探讨引起经外周静脉置入中心静脉导管(Peripherally inserted central catheter, PICC)相关性上肢深静脉血栓形成的相关危险因素。方法 选取 2014 年 1 月至 2018 年 2 月解放军第一一七医院肿瘤内科接受 PICC 置管的住院患者 300 例作为研究对象, 最终确认置管后发生上肢深静脉血栓者 30 例(血栓组), 其余 270 例则未发现上肢深静脉血栓(非血栓组)。收集患者的一般资料(性别、年龄、体质指数)、置管技术指标(穿刺次数、置管时长、导管尖端位置)、置留血管指标(置管侧肢体、置管静脉、置管静脉内径)、既往史(高血压病史、糖尿病病史、肿瘤病史、肿瘤化疗史、吸烟史、血栓史、PICC 或 CVP 置管史)和实验室检查指标(血小板计数、血浆 D-二聚体、血浆纤维蛋白原、凝血酶原时间), 以单因素分析找出血栓组和非血栓组差异具有统计学意义的变量, 再将这些变量代入 logistic 回归分析, 找出导致 PICC 置管后上肢深静脉血栓形成的危险因素。结果 单因素分析显示, 血栓组与非血栓组具有差异性的变量有导管尖端位置、置管静脉内径、肿瘤病史、肿瘤化疗史和血浆 D-二聚体($\chi^2 = 4.556, 10.973, 11.940, 5.357, 11.623, P = 0.033, 0.001, 0.001, 0.021, 0.001$); 多因素 logistic 回归分析得出, PICC 置管术后上肢深静脉血栓形成的危险因素为导管尖端置于上腔静脉上 2/3 处、置管静脉内径 < 4 mm、既往有肿瘤病史和肿瘤化疗史($P = 0.014, 0.023, 0.017, 0.028$)。结论 PICC 置管术后上肢深静脉血栓形成的危险因素为导管尖端置于上腔静脉上 2/3 处、置管静脉内径 < 4 mm、既往有肿瘤病史和肿瘤化疗史。

【关键词】 导管插入术, 中心静脉; 导管插入术, 外周; 腔静脉, 上; 血栓形成; 危险因素

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Analysis of related factors of deep venous thrombosis in upper extremity after PICC catheterization

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【Abstract】 Objective To investigate the related risk factors of upper extremity deep venous thrombosis associated with peripherally inserted central catheter (PICC). **Methods** From January 2014 to February 2018, 300 patients with PICC in the No. 117 Hospital of the Chinese People's Liberation Army were selected in the study, of whom 30 patients developed deep venous thrombosis (thrombosis group), the other 270 patients had no deep venous thrombosis (non-thrombotic group). General data of the patients (gender, age, body mass index), catheter technical parameters (number of punctures, length of catheter, position of catheter tip), retention vessel index (inner side of catheter, indwelling vein, internal diameter of catheter), past history (history of hypertension, history of diabetes, history of oncology, history of cancer chemotherapy, history of smoking, history of blood clots, history of PICC, or CVP insertion), and laboratory tests (platelet count, plasma D-dimer, plasma fibrin original, prothrombin time) were collected. Univariate analysis was used to find out the differences between the thrombosis group and the non-thrombosis group. Logistic regression analysis was used to identify the risk factors for deep vein thrombosis of the upper extremities after PICC catheterization. **Results** Univariate analysis showed that variables that differed between the thrombus group and the non-thrombosis group included catheter tip location, diameter of the cannulated vein, history of cancer, history of chemotherapy, plasma D-dimer ($\chi^2 = 4.556, 10.973, 11.940, 5.357, 11.623, P = 0.033, 0.001, 0.001, 0.021, 0.001$). Multivariate Logistic regression analysis showed that the risk factors of upper extremity deep venous thrombosis after PICC catheterization were catheter tip placement on the upper vena cava 2/3, catheter vein diameter < 4 mm, tumor history and chemotherapy history ($P = 0.014, 0.023, 0.017, 0.028$). **Conclusion** The risk factors of upper extremity deep venous thrombosis after PICC catheterization are catheter tip placed on the upper

2/3 of the superior vena cava, diameter of the catheter vein < 4 mm, tumor history and chemotherapy history.

【Key words】 Catheterization, central venous; Catheterization, peripheral; Vena cava, superior; Thrombosis; Risk factors

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诱导治疗结束时外周血绝对淋巴细胞计数对成年人急性淋巴细胞白血病生存的影响

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【摘要】 **目的** 研究诱导治疗结束时外周血绝对淋巴细胞计数(ALC)对成年人急性淋巴细胞白血病(ALL)患者生存的影响。**方法** 回顾分析山西医科大学第二医院 2011 年 1 月 1 日至 2017 年 12 月 31 日就诊的成年人 ALL 病例,分析诱导治疗结束时 ALC(ALC-28)及其与治疗第 1、8 天 ALC(ALC-1、ALC-8)的比值(ALC-28/ALC-1、ALC-28/ALC-8)对成年人 ALL 生存的影响。**结果** ALC-28 以 675 个/ μ L 分成低 ALC-28 和高 ALC-28 两组,两组中位无复发生存(RFS)时间(8 个月比 12 个月)、中位总生存(OS)时间(16 个月比 23 个月)差异均有统计学意义($P=0.001,0.010$)。ALC-28/ALC-1 以 43% 分组,低比值组 RFS、OS 时间均短于高比值组,差异均有统计学意义(均 $P<0.05$)。ALC-28/ALC-8 以 86% 分组比较,高 ALC-28/ALC-8 组有更长的 RFS、OS 时间(均 $P<0.05$)。多因素分析中,低 ALC-28 是 RFS 独立危险因素;低 ALC-28、低 ALC-28/ALC-1 是 OS 的独立危险因素。**结论** 治疗结束时 ALC 及其比值对成年人 ALL 的生存有影响,数值越高代表着更长的生存时间。

【关键词】 白血病,淋巴样; 成年人; 淋巴细胞计数; 生存时间

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Impact of peripheral blood absolute lymphocyte count at the end of induction on survival in adult patients with acute lymphoblastic leukemia

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【Abstract】 **Objective** To study the impact of peripheral blood absolute lymphocyte count (ALC) on survival in adult patients with acute lymphoblastic leukemia (ALL) at the end of induction chemotherapy. **Methods** 122 adult patients with ALL from January 2011 to December 2017 in the Second Hospital of Shanxi Medical University were retrospectively analyzed. The impact of ALC at the end of induction and ALC ratios for relapse-free(RFS) and overall survival(OS) of adult ALL were analyzed. **Results** The study cohort was divided into the two groups according ALC-28 values ($<675\text{cells}/\mu\text{L}$ and $\geq 675\text{cells}/\mu\text{L}$). The median RFS (8 months vs 12 months, $P=0.001$), median OS (16 months vs 23 months, $P=0.010$) between the two groups had statistically significant differences. ALC-28/ALC-1 was bordered by 43%. The RFS and OS in the low ratio group were significantly shorter than those in the high ratio group ($P<0.05$). ALC-28/ALC-8 was compared with 86% cut-off. Longer RFS and OS in the higher ALC-28/ALC-8 group (all $P<0.05$). Low ALC-28 was independent risk factor for RFS. Low ALC-28, and low ALC-28/ALC-1 were independent risk factors of OS. **Conclusion** ALC at the end of induction and ALC ratios are associated with RFS and OS of adult ALL. Higher the value, the longer the survival time.

【Key words】 Leukemia, lymphoid; Adult; Lymphocyte count; Survival

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以颅内占位为首发表现的慢性髓系白血病 诊治及文献复习

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【摘要】 目的 探讨以颅内占位为首发表现的慢性髓系白血病(CML)的临床特点及转归。**方法** 对以颅内占位为首发表现的 1 例 49 岁女性 CML 患者的临床资料结合文献进行分析。**结果** 该患者主要临床表现为头痛伴视物模糊, 头颅 CT 提示左侧额叶占位性病变, 血常规提示白细胞计数(WBC) $360.09 \times 10^9/L$, 骨髓涂片示粒系占 87.0%, 原始粒细胞占 13.5%, 诊断为 CML 加速期。予以伊马替尼治疗后, 本身疾病得到控制, 颅内占位消失, 长期无病生存。**结论** 针对不同患者, 选择的酪氨酸激酶抑制剂(TKIs)也应个体化, 针对存在颅内占位的 CML, 首选 TKIs 为达沙替尼, 但该病例提示伊马替尼亦有临床疗效, 可能与颅内的肿瘤细胞释放入外周或伊马替尼也可少量透过血脑屏障相关。在 CML 的治疗中, 应根据患者的病情选择合适的 TKIs。

【关键词】 白血病, 髓样, 加速期; 脑疾病; 病例报告

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Diagnosis and treatment of chronic myeloid leukemia with the initial symptoms of intracranial space – occupying lesion

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【Abstract】 Objective To investigate the clinical characteristics and prognosis of chronic myeloid leukemia (CML) with the initial symptoms of intracranial space – occupying lesion. **Methods** The clinical features of a 49 years old CML female patient with the initial symptoms of intracranial occupying lesions in the Affiliated Hospital of Southwest Medical University were analyzed. And the literatures were reviewed and summarized. **Results** The main clinical manifestations of the patient were headache and blurred vision. Cranial CT showed space occupying lesions in the left frontal lobe. The white blood cell counts(WBC) was $360.09 \times 10^9/L$. Bone marrow smear showed 87.0% of granulocyte and 13.5% of primitive granulocytes, and the patient was diagnosed as CML (accelerated phase). The patient was treated with imatinib 600mg qd, and the disease was controlled. Her intracranial mass was disappeared, and achieved long – term disease – free survival. Imatinib on CML intracranial lesions also had certain curative effect.

Conclusion Tyrosine kinase inhibitors (TKIs) should also be individualized for different patients. Dasatinib is the first choice for CML with intracranial occupying lesions. However, this case suggests that imatinib also has clinical efficacy. It may be related to the release of intracranial tumor cells into the peripheral blood or imatinib, and also a small amount of penetration through the blood – brain barrier. In the treatment of CML, appropriate TKIs should be chosen according to the patients' condition.

【Key words】 Leukemia, myeloid, accelerated phase; Brain diseases; Case reports

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康复新液联合莫匹罗星软膏治疗腹膜透析隧道口肉芽组织增生的疗效观察

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【摘要】 目的 观察康复新液联合莫匹罗星软膏治疗腹膜透析患者隧道口肉芽组织增生的疗效。**方法** 以 2012 年 1 月至 2017 年 12 月在广州市花都区人民医院进行腹透治疗并发隧道口肉芽组织增生患者 35 例为研究对象,采用随机数字表法分为对照组(20 例)和治疗组(15 例)。对照组采用常规处理;治疗组采用康复新液浸湿的无菌敷料覆盖隧道口。记录治疗前后隧道口肉芽组织转归及并发症发生情况,并进行对比分析。**结果** 对照组痊愈时间为(8.58 ± 1.36) d,治疗组痊愈时间为(3.43 ± 0.85) d,两组差异有统计学意义($t = 3.57, P < 0.05$);对照组有 3 例并发隧道口渗血,治疗组无并发症。**结论** 康复新液联合莫匹罗星软膏治疗腹膜透析患者隧道口肉芽组织增生疗程短,不良反应少,值得临床推广应用。

【关键词】 腹膜透析; 肉芽组织; 康复新液; 莫匹罗星软膏

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Effect of Kangfuxin liquid combined with mupirocin on exit - site granulation tissue hyperplasia in peritoneal dialysis patients

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【Abstract】 Objective To observe the effect of Kangfuxin liquid combined with mupirocin on exit - site granulation tissue hyperplasia in peritoneal dialysis patients. **Methods** From January 2012 to December 2017, 35 peritoneal dialysis patients with exit - site granulation tissue hyperplasia in the People's Hospital of Huadu District were selected and randomly assigned into treatment group (15 cases) and control group (20 cases). The control group was given conventional treatment, the treatment group received a sterile dressing moistened with Kangfuxin liquid. Before and after treatment, the exit - site granulation tissue outcome and the incidence of complications were recorded and compared. **Results** The recovery time of the control group was (8.58 ± 1.36) d, which was longer than (3.43 ± 0.85) d of the treatment group ($t = 3.57, P < 0.05$). Exit - site exudation was found in 3 patients of the control group. No complications were observed in the treatment group. **Conclusion** Kangfuxin liquid combined with mupirocin can shorten the recovery time of exit - site granulation tissue hyperplasia in peritoneal dialysis patients, and reduce the side effect, which is worthy of clinical application.

【Key words】 Peritoneal dialysis; Granulation tissue; Kangfu Xin Ye; Mupirocin

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八珍汤合化积丸联合肝动脉化疗栓塞术 治疗原发性肝癌的临床效果观察

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【摘要】目的 观察八珍汤合化积丸联合肝动脉化疗栓塞术治疗原发性肝癌的临床效果。**方法** 选取 2016 年 12 月至 2017 年 10 月海阳市人民医院收治的原发性肝癌患者 76 例,根据临床治疗方式的不同,将患者分为两组,各 38 例。对照组患者接受肝动脉化疗栓塞术治疗,观察组患者接受八珍汤合化积丸联合肝动脉化疗栓塞术治疗。观察两组临床效果。**结果** 观察组患者的病灶总缓解率为 63.16% (24/38),明显高于对照组的 23.68% (9/38) ($\chi^2 = 12.050, P < 0.05$);观察组患者的卡氏(KPS)评分提高率为 47.37% (18/38)、KPS 评分稳定率为 36.84% (14/38),高于对照组的提高率[26.32% (10/38)]和稳定率[31.58% (12/38)] ($\chi^2 = 6.397, P < 0.05$);观察组患者不良反应发生率为 21.05%,对照组患者不良反应发生率为 44.74%,两组差异有统计学意义($\chi^2 = 4.828, P < 0.05$)。**结论** 原发性肝癌患者接受八珍汤合化积丸联合肝动脉化疗栓塞术治疗,能够有效缓解患者的病情,提高患者的生存质量,且安全性较高。

【关键词】 肝肿瘤; 化学栓塞,治疗性; 生活质量; 临床效果; 八珍汤; 化积丸; 综合疗法; 对比研究

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Clinical observation of Bazhen decoction Huaji pill combined with chemoembolization in the treatment of primary liver cancer

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【Abstract】Objective To observe the clinical effect of Bazhen decoction Huaji pill combined with transcatheter arterial chemoembolization (TACE) in the treatment of primary liver cancer. **Methods** From December 2016 to October 2017, 76 patients with primary liver cancer admitted to the People's Hospital of Haiyang were selected. According to the different clinical treatment methods, the patients were divided into two groups, with 38 cases in each group. The control group received hepatic arterial chemoembolization, and the observation group received Bazhen decoction Huaji pill combined with TACE. **Results** The total remission rate of the patients in the observation group was 63.16% (24/38), which was significantly higher than 23.68% (9/38) in the control group ($\chi^2 = 12.050, P < 0.05$). The improvement rate and stability rate of KPS score in the observation group were 47.37% (18/38), 36.84% (14/38), respectively, which were higher than those in the control group [26.32% (10/38), 31.58% (12/38)], $\chi^2 = 6.397, P < 0.05$. The incidence rate of adverse reactions in the observation group was 21.05%, which was lower than 44.74% in the control group, the difference was significant ($\chi^2 = 4.828, P < 0.05$). **Conclusion** Bazhen decoction Huaji pill combined with TACE in the treatment of patients with primary liver cancer can effectively alleviate the patients' condition, improve the quality of life of patients, and has high safety. It is worthy of popularization and application.

【Key words】 Liver neoplasms; Chemoembolization, therapeutic; Quality of life; Clinical effect; Bazhen Tanghe; Huaji pill; Combined modality therapy; Contrastive study

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肾穿刺活检 136 例临床病理分析

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【摘要】 目的 探讨肾脏疾病行肾穿刺活检的临床病理特征,为肾穿刺活检在肾脏疾病诊疗中的应用提供借鉴和帮助。**方法** 选取舟山医院 2015 年 1 月至 2017 年 6 月收治的肾脏疾病患者 136 例为观察对象,患者均接受肾穿刺活检,对肾穿刺活检标本进行组织化学、免疫组化染色,并在光镜下观察其病理改变情况,结合患者的临床资料,总结肾穿刺活检患者的临床特点及病理特点。**结果** 病理类型分布方面,原发性肾小球肾炎占比最高(79.41%),继发性肾小球肾炎次之(15.44%),其余为肾小管和间质性肾病(5.15%);原发性肾小球肾炎中,膜性肾病(28.68%)、IgA 肾病(27.94%)占比较高,而在继发性肾小球肾炎中,糖尿病肾病(5.88%)占比最高。性别方面,男性患者所占比例(59.56%)高于女性患者的 40.44% ($\chi^2 = 9.941, P < 0.05$),原发性肾小球肾炎中的男性患者(62.04%)多于女性患者(37.96%) ($\chi^2 = 12.519, P < 0.05$)。肾穿刺活检患者的年龄集中于 41~50 岁、>50~60 岁、>60~70 岁这三个年龄段,以中老年人群为主。**结论** 行肾穿刺活检的肾脏疾病以原发性肾小球肾炎为主,发病人群主要为中老年男性人群,不同肾脏疾病的性别分布有所不同,临床上诊断肾脏疾病时需结合肾穿刺活检和患者具体情况进行综合诊断。

【关键词】 肾疾病; 活组织检查,针吸; 病理学,临床

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Clinicopathologic analysis of 136 cases of renal biopsy

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【Abstract】 Objective To investigate the clinical and pathological characteristics of kidney disease by renal biopsy, thus to provide reference and help for the application of renal biopsy in the diagnosis and treatment of kidney diseases. **Methods** From January 2015 to June 2017, 136 cases with kidney disease in Zhoushan Hospital were selected in the research. All patients received renal biopsy, histochemical staining of renal biopsy samples, immunohistochemical staining, and observed under light microscope, and the pathological changes of the situation, combined with clinical data, the clinical and pathological characteristics of renal biopsy patients were summarized. **Results** The distribution of pathological type of primary glomerulonephritis, the highest proportion (79.41%), secondary glomerulonephritis (15.44%), followed by the rest of the renal tubular and interstitial nephropathy (5.15%). Of the primary glomerulonephritis, membranous nephropathy (28.68%), IgA nephropathy (27.94%) accounted for a relatively high proportion. However, in secondary glomerulonephritis, diabetic nephropathy (5.88%) was the highest proportion. Of gender, the proportion of the male patients (59.56%) was higher than that of the female patients (40.44%, $\chi^2 = 9.941, P < 0.05$), primary glomerulonephritis in the male patients (62.04%) was higher than that in the female patients (37.96%) ($\chi^2 = 12.519, P < 0.05$). The age of renal biopsy was focused on the age of 41-50 years, >50-60 years, >60-70 years old, which was mainly the elderly population. **Conclusion** Renal biopsy of kidney disease is mainly primary glomerulonephritis, the incidence of people mainly in the elderly male population. Comprehensive diagnosis is needed for different kidney diseases with renal biopsy and the specific circumstances.

【Key words】 Kidney disease; Biopsy, needle; Pathology, clinical

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小切口白内障手术劈核与不劈核治疗白内障的疗效比较

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【摘要】 目的 比较小切口白内障手术劈核与不劈核两种术式治疗白内障的疗效。**方法** 选取 2014 年 3 月至 2015 年 9 月在仙桃市第一人民医院治疗的白内障患者 125 例(146 眼)按照随机抽签法分为两组。观察组 60 例(75 眼)行劈核的小切口白内障手术;对照组 65 例(71 眼)行不劈核的小切口白内障手术。比较观察两组术后的视力、角膜散光、手术时间及并发症等。**结果** 术后 1 周两组视力差异有统计学意义($Z = -2.078, P < 0.05$),术后 1 个月、3 个月两组视力差异均无统计学意义($Z = -0.960, -0.743$, 均 $P > 0.05$)。术后 1 周、1 个月观察组和对照组角膜散光差异均有统计学意义[(1.33 ± 0.45)D 比(1.52 ± 0.49)D, (1.03 ± 0.42)D 比(1.18 ± 0.44)D, $t = 2.442, 2.108$, 均 $P < 0.05$], 术后 3 个月时两组角膜散光差异无统计学意义($t = 0.432, P > 0.05$)。观察组与对照组手术时间差异无统计学意义[(11.28 ± 2.32)min 比(11.87 ± 2.52)min, $t = 1.473, P > 0.05$]。两组各发生后囊破裂 1 例,但均未发生晶状体核脱入玻璃体腔、脉络膜下爆发性出血或角膜内皮失代偿等严重并发症。**结论** 采用劈核的小切口白内障手术对比不劈核的小切口白内障手术具有术后早期视力恢复快和角膜散光小等优点。因此,劈核的小切口白内障手术值得临床推广与应用。

【关键词】 白内障摘除术; 视力,眼睛; 散光; 外科手术,微创性; 疗效比较研究

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Comparison of the effect of small incision cataract surgery whether combined with nucleus chopping or not in the treatment of cataract

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【Abstract】 Objective To compare efficacy of small incision cataract surgery whether combined with nucleus chopping or not in the treatment of cataract. **Methods** From March 2014 to September 2015, 125 cases of age-related cataract (146 eyes) in the the First People's Hospital of Xiantao were divided into 60 cases (75 eyes) of observation group and 65 cases (71 eyes) of control group by method of random sampling. The observation group accepted small incision cataract surgery combined with chopping nucleus. The control group only underwent small incision cataract surgery. The postoperative visual acuity, corneal astigmatism and operation time, and complications and so on in the two groups were compared. **Results** There was statistically significant difference in postoperative visual acuity after 1 week between the two groups ($Z = -2.078, P < 0.05$), but there was no statistically significant difference in postoperative visual acuity after 1 month or 3 months between the two groups ($Z = -0.960, -0.743$, all $P > 0.05$). The postoperative corneal astigmatism after 1 week or 1 month between the observation group and the control group had statistically significant differences [(1.33 ± 0.45)D vs. (1.52 ± 0.49)D, (1.03 ± 0.42)D vs. (1.18 ± 0.44)D, $t = 2.442, 2.108$, all $P < 0.05$], but there was no statistically significant difference in postoperative corneal astigmatism after 3 months between the two groups ($t = 0.432, P > 0.05$). There was no statistically significant difference in the operation time between the observation group and the control group [(11.28 ± 2.32)min vs. (11.87 ± 2.52)min, $t = 1.473, P > 0.05$]. One case of posterior capsular rupture occurred in the two groups, respectively. But serious complications such as lens nucleus escaped into vitreous cavity, explosive haemorrhage from the choroid or corneal endothelial decompensated had not been found. **Conclusion** The small incision cataract surgery combined with nucleus chopping has advantages in acquiring fast visual rehabilitation acuity in the early stage after

operation, lower corneal astigmatism compared to that without nucleus chopping. Therefore, the small incision cataract surgery combined with nucleus chopping is worthy of clinical popularization and application.

【Key words】 Cataract extraction; Vision, ocular; Astigmatism; Surgical procedures, minimally invasive; Comparative effectiveness research

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综合康复锻炼对乳腺癌术后患者上肢功能康复和生活质量的影响

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【摘要】 目的 探讨综合康复锻炼对乳腺癌患者术后上肢功能康复和生活质量的影响。**方法** 选择杭州市红十字会医院(浙江省中西医结合医院)2014年1月至2017年12月收治的乳腺癌手术患者68例作为研究对象,按照随机数字表法将其分为观察组(34例)和对照组(34例)。所有患者进行常规康复训练,观察组在此基础上进行背阔肌增强锻炼和简化24式太极拳锻炼的综合康复锻炼。对两组患者上肢功能康复情况和生活质量进行比较分析。**结果** 观察组术后2个月后伸角度、旋内角度和内收肌力分别为 $(39.43 \pm 5.82)^\circ$ 、 $(150.7 \pm 10.34)^\circ$ 、 $(145.24 \pm 10.35)N$,对照组术后2个月后伸角度、旋内角度和内收肌力分别为 $(33.71 \pm 5.28)^\circ$ 、 $(134.10 \pm 11.81)^\circ$ 、 $(119.57 \pm 9.46)N$,与出院前比较均显著提高($t = 12.041, 3.883, 11.807, 4.906, 21.904, 11.617$, 均 $P < 0.05$),且观察组均明显高于对照组($t = 4.244, 6.166, 10.674$, 均 $P < 0.05$);观察组术后2个月患者疼痛、ADL和ROM评分分别为 (13.27 ± 4.51) 分、 (16.48 ± 4.22) 分、 (31.46 ± 5.64) 分,对照组术后2个月患者疼痛、ADL和ROM评分分别为 (10.73 ± 4.15) 分、 (12.05 ± 4.13) 分、 (26.57 ± 5.16) 分,与出院前比较均显著的提高($t = 5.238, 2.503, 10.953, 5.531, 12.872, 9.160$, 均 $P < 0.05$),且观察组均明显高于对照组($t = 2.417, 4.375, 3.730$, 均 $P < 0.05$);观察组术后2个月患者WHOQOL-BREF评分分别为 (17.24 ± 2.81) 分、 (16.74 ± 3.18) 分、 (17.45 ± 2.56) 分、 (33.48 ± 5.15) 分、 (3.97 ± 1.05) 分、 (3.87 ± 1.18) 分,对照组术后2个月患者WHOQOL-BREF评分分别为 (14.21 ± 3.08) 分、 (13.81 ± 3.28) 分、 (13.45 ± 2.83) 分、 (28.81 ± 4.82) 分、 (3.26 ± 1.16) 分、 (3.18 ± 1.28) 分,与出院前比较均显著的提高($t = 9.669, 4.965, 8.327, 4.857, 10.522, 4.198, 11.487, 7.132, 5.572, 2.688, 5.178, 2.727$, 均 $P < 0.05$),且观察组均明显高于对照组($t = 4.238, 3.740, 6.112, 4.638, 2.646, 2.311$, 均 $P < 0.05$)。**结论** 乳腺癌患者术后进行积极的综合康复锻炼有助于上肢功能的恢复和患者生活质量的提高。

【关键词】 乳腺肿瘤; 上肢; 功能; 锻炼; 生活质量

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Effect of comprehensive rehabilitation exercise after breast cancer surgery on functional rehabilitation of upper limb and quality of life

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【Abstract】 Objective To investigate the effect of comprehensive rehabilitation exercise on the rehabilitation of upper limb function and quality of life in patients with breast cancer. **Methods** From January 2014 to December 2017, 68 cases received breast cancer surgery in Hangzhou Red Cross Hospital were chosen in the research. The patients were randomly divided into observation group (34 cases) and control group (34 cases). All the patients were given routine rehabilitation training, and the observation group was given latissimus dorsi muscle strengthening exercise and simplified 24 Style Taijiquan exercise. The upper limb function rehabilitation and quality of life of the two groups were compared and analyzed. **Results** At 2 months after operation, the angle of extension, the angle of internal rotation and the adduction strength in the observation group were $(39.43 \pm 5.82)^\circ$, $(150.7 \pm 10.34)^\circ$ and $(145.24 \pm 10.35)N$, respectively, which in the control group were $(33.71 \pm 5.28)^\circ$, $(134.10 \pm 39.43)^\circ$ and $(119.57 \pm 9.46)N$, respectively, which were significantly improved compared with those before discharge ($t = 12.041, 3.883, 11.807, 4.906, 21.904, 11.617$, all $P < 0.05$), which in the observation group were significantly higher than those in the control group ($t = 4.244, 6.166, 10.674$, all $P < 0.05$). The pain, ADL and ROM scores in the observation group at 2 months after operation were (13.27 ± 4.51) points, (16.48 ± 4.22) points and (31.46 ± 5.64) points,

respectively, which in the control group were (10.73 ± 4.15) points, (12.05 ± 4.13) points and (26.57 ± 5.16) points, respectively, which were significantly higher than before discharge ($t = 5.238, 2.503, 10.953, 5.531, 12.872, 9.160$, all $P < 0.05$), which in the observation group were significantly higher than those in the control group ($t = 2.417, 4.375, 3.730$, all $P < 0.05$). The WHOQOL – BREF scores in the observation group at 2 months after operation were (17.24 ± 2.81) points, (16.74 ± 3.18) points, (17.45 ± 2.56) points, (33.48 ± 5.15) points, (3.97 ± 1.05) points and (3.87 ± 1.18) points, respectively, which in the control group were (14.21 ± 3.08) points, (13.81 ± 3.28) points, (13.45 ± 2.83) points, (28.81 ± 4.82) points, (3.26 ± 1.16) points, (3.18 ± 1.28) points, respectively, compared with those before discharge, the differences were statistically significant ($t = 9.669, 4.965, 8.327, 4.857, 10.522, 4.198, 11.487, 7.132, 5.572, 2.688, 5.178, 2.727$, all $P < 0.05$), which in the observation group were significantly higher than those in the control group ($t = 4.238, 3.740, 6.112, 4.638, 2.646, 2.311$, all $P < 0.05$). **Conclusion** A positive comprehensive rehabilitation exercise for the patients with breast cancer is helpful to the recovery of the function of the upper limb and the improvement of the quality of life of the patients.

【Key words】 Breast neoplasms; Upper limb; Function; Exercise; Quality of life

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重度子痫前期患者甲状腺激素水平与尿蛋白定量的关系研究

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【摘要】 目的 研究重度子痫前期患者甲状腺激素水平与 24 h 尿蛋白定量的关系。**方法** 选取青岛市第三人民医院和青岛市中心医院 2015 年 8 月至 2017 年 10 月收治的重度子痫前期患者 180 例, 采用化学发光微粒免疫法测定促甲状腺激素 (TSH) 水平, 按其检测结果分为两组: 甲状腺正常组 (110 例, TSH 为 0.3 ~ 3.3 mU/L) 和甲状腺功能减退组 (70 例, TSH > 3.3 mU/L)。另选取同期于该院体检的 240 例健康孕妇为对照组, 对比三组的 TSH、游离三碘甲腺原氨酸 (FT₃)、游离甲状腺素 (FT₄) 水平和 24 h 尿蛋白定量, 分析重度子痫前期患者甲状腺激素水平与 24 h 尿蛋白定量的关系, 比较其甲状腺自身抗体结果。**结果** 甲状腺正常组 FT₄、FT₃ 的含量分别为 (11.92 ± 2.54) pmol/L、(5.22 ± 1.25) pmol/L, 甲状腺功能减退组 FT₄、FT₃ 的含量分别为 (9.02 ± 1.09) pmol/L、(3.92 ± 1.57) pmol/L, 均低于对照组 ($t = 6.657, 16.758, 13.221, 18.245$, 均 $P < 0.05$), 且甲状腺功能减退组低于甲状腺正常组 ($t = 9.031, 6.149$, 均 $P < 0.05$)。甲状腺正常组 TSH 和 24 h 尿蛋白的含量为 (2.56 ± 0.86) mU/L、(66.51 ± 18.52) mg, 甲状腺功能减退组 TSH 和 24 h 尿蛋白的含量为 (5.87 ± 3.02) mU/L、(79.14 ± 12.58) mg, 均高于对照组 ($t = 2.330, 7.197, 16.417, 13.335$, 均 $P < 0.05$), 且甲状腺功能减退组高于甲状腺正常组 ($t = 10.883, 5.014$, 均 $P < 0.05$)。重度子痫前期患者的血清 TSH 与 24 h 尿蛋白定量呈正相关 ($r = 0.254, P = 0.001$), FT₄ 与 24 h 尿蛋白定量呈负相关 ($r = -0.182, P = 0.025$), 而重度子痫前期患者的血清 FT₃ 与 24 h 尿蛋白定量无相关性 ($r = -0.080, P = 0.330$)。甲状腺功能减退组患者 TPOAb 阳性率、TGA 阳性率分别为 12.86%、18.57%, 与甲状腺正常组的 10.91%、14.55% 比较差异无统计学意义 ($\chi^2 = 0.158, 0.513, P = 0.691, 0.474$)。**结论** 重度子痫前期患者甲状腺激素水平与 24 h 尿蛋白定量存在相关性, 通过检测其甲状腺激素水平, 对于临床上治疗重度子痫前期患者具有较好的指导意义。

【关键词】 先兆子痫; 白蛋白尿; 促甲状腺激素; 游离三碘甲腺原氨酸; 游离甲状腺素; 甲状腺抗体

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Relationship between thyroid hormone level and urine protein quantitation in patients with severe preeclampsia

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【Abstract】 Objective To study the relationship between thyroid hormone level and 24h urine protein quantitation in patients with severe preeclampsia. **Methods** From August 2015 to October 2017, 180 patients with severe preeclampsia who were treated in the Third People's Hospital of Qingdao were selected. The level of thyroid-stimulating hormone (TSH) was detected by chemiluminescence particles immune method. According to the test results, the patients were divided into normal group ($n = 110$, TSH = 0.3 - 3.3 mU/L) and hypothyroidism group ($n = 70$, TSH > 3.3 mU/L). Another 240 healthy pregnant women who admitted in the Third People's Hospital of Qingdao during the same period were selected as control group. The TSH, free triiodothyronine (FT₃), free thyroxine (FT₄) levels and 24h urine protein quantitation were compared among the three groups. The correlation between the level of thyroid hormone and 24h urine protein quantitation, the results of thyroid autoantibody in patients with severe preeclampsia were analyzed. **Results** The FT₄, FT₃ levels in the normal group were (11.92 ± 2.54) pmol/L, (5.22 ± 1.25) pmol/L, respectively, which in the hypothyroidism group were (9.02 ± 1.09) pmol/L, (3.92 ± 1.57) pmol/L, respectively, which were all lower than those in the control group ($t = 6.657, 16.758, 13.221, 18.245$, all $P < 0.05$), which in the

hypothyroidism group were lower than those in the normal group ($t = 9.031, 6.149$, all $P < 0.05$). The TSH, 24h urine protein quantitation levels in the normal group were (2.56 ± 0.86) mU/L, (66.51 ± 18.52) mg, respectively, which in the hypothyroidism group were (5.87 ± 3.02) mU/L, (79.14 ± 12.58) mg, respectively, which were all higher than those in the control group ($t = 2.330, 7.197, 16.417, 13.335$, all $P < 0.05$), which in the hypothyroidism group were higher than those in the normal group ($t = 10.883, 5.014$, all $P < 0.05$). There was positive correlation between serum TSH and 24h urine protein quantitation in patients with severe preeclampsia ($r = 0.254, P = 0.001$). There was negative correlation between FT₄ and 24h urine protein quantitation ($r = -0.182, P = 0.025$). There was no correlation between serum FT₃ and 24h urine protein quantitation ($r = -0.080, P = 0.330$). The positive rates of TPO Ab, TG Ab were 12.86%, 18.57% in hypothyroidism group, there were no statistically significant differences compared with 10.91%, 14.55% in the normal group ($\chi^2 = 0.158, 0.513; P = 0.691, 0.474$). **Conclusion** There is correlation between thyroid hormone levels and 24h urine protein quantitation in patients with severe preeclampsia. It has great significance for clinical treatment of severe preeclampsia by detecting the level of thyroid hormone.

【Key words】 Pre-eclampsia; Albuminuria; Thyroid stimulating hormone; Free triiodothyronine; Free thyroxine 4; Thyroid antibody

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超声弹性成像技术对桥本甲状腺炎合并良、恶性结节的鉴别诊断价值

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【摘要】 目的 探讨超声弹性成像技术在桥本甲状腺炎合并良恶性结节鉴别诊断中的价值。**方法** 选择 2013 年 1 月至 2015 年 12 月江山市中医院收治的桥本甲状腺炎合并恶性结节 21 例(25 个结节)和良性结节 52 例(76 个结节)为研究对象。所有结节均进行彩色多普勒超声检查和超声弹性成像检查。**结果** 恶性组患者结节中边界清楚、形态规则、非低回声、无钙化或粗钙化、阻力指数(RI)值 < 0.70、血流信号 0 ~ I 级所占比例(32.0%、24.0%、12.0%、40.0%、32.0%、24.0%)均低于良性组(80.3%、51.3%、47.4%、97.4%、60.5%、51.3%) ($\chi^2 = 20.245, 5.682, 9.928, 44.228, 6.153, 5.682, P = 0.000, 0.017, 0.002, 0.000, 0.013, 0.017$)。二维彩色多普勒超声诊断桥本甲状腺炎合并良恶性结节的敏感性为 68.0%, 特异性为 75%, 诊断准确性为 73.2%。以超声弹性图分级 \geq III 级为恶性结节预测指标, 超声弹性成像诊断桥本甲状腺炎合并良恶性结节的敏感性为 88.0%, 特异性为 69.7%, 诊断准确性为 74.3%。以超声弹性成像应变率比值 = 5.13 为截断点, 超声弹性成像应变率比值诊断桥本甲状腺炎合并良恶性结节的敏感性为 76.0%, 特异性为 92.1%, 诊断准确性为 88.1%。**结论** 超声弹性图分级和超声弹性成像应变率在桥本甲状腺炎合并良恶性结节的鉴别诊断中具有一定价值。

【关键词】 桥本病; 甲状腺肿瘤; 超声检查; 敏感性与特异性

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Differential diagnosis value of ultrasound elastography in Hashimoto's thyroiditis with benign and malignant nodules

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【Abstract】 Objective To investigate the differential diagnosis value of ultrasound elastography in Hashimoto's thyroiditis with benign and malignant nodules. **Methods** From January 2013 to December 2015, 21 patients (25 nodules) with Hashimoto's thyroiditis and malignant nodules and 52 patients (76 nodules) with benign nodules in Jiangshan Hospital of Traditional Chinese Medicine were studied. All nodules were detected by color Doppler ultrasound and ultrasound elastography. **Results** The proportion of boundaries clear, morphological rules, non-low-echo, no calcification or coarse calcifications, RI value < 0.70, blood flow grade 0 - I in patients with malignant nodules (32.0%, 24.0%, 12.0%, 40.0%, 32.0%, 24.0%) were lower than those of the benign group (80.3%, 51.3%, 47.4%, 97.4%, 60.5%, 51.3%) ($\chi^2 = 20.245, 5.682, 9.928, 44.228, 6.153, 5.682, P = 0.000, 0.017, 0.002, 0.000, 0.013, 0.017$). The sensitivity, specificity and diagnostic accuracy of two-dimensional color Doppler ultrasound in diagnosing Hashimoto's thyroiditis with malignant and benign nodules were 68.0%, 75.0% and 73.2%, respectively. The ultrasound elastography \geq III grade level was as the predictor of malignant nodules, the sensitivity, specificity and diagnostic accuracy of ultrasound elastography in diagnosing Hashimoto's thyroiditis with benign and malignant nodules were 88.0%, 69.7% and 74.3%, respectively. The ultrasound elastography strain rate ratio = 5.13 was the cut-off point, the ultrasound elastography strain rate ratio in diagnosing Hashimoto's thyroiditis with benign and malignant nodules, the sensitivity was 76.0%, the specificity was 92.1%, the diagnostic accuracy was 88.1%. **Conclusion** Ultrasound elastography grading and ultrasound elastography strain rate have certain value in the differential diagnosis of Hashimoto's thyroiditis with malignant and benign nodule.

【Key words】 Hashimoto disease; Thyroid neoplasms; Thyroid nodule; Ultrasonography; Sensitivity and Specificity

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超声引导下腹横肌平面阻滞对妇科腹腔镜手术麻醉效果及术后早期镇痛的影响

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【摘要】 **目的** 观察超声引导下腹横肌平面(TAP)阻滞对妇科腹腔镜手术麻醉效果及术后镇痛的影响。**方法** 选择2015年1月至2017年7月在上海市嘉定区南翔医院择期全身麻醉下行妇科腹腔镜手术患者60例,年龄46~68岁,美国麻醉医师协会(ASA)分级I~II级。采用随机数字表法,将其分为两组($n=30$):对照组(A组)和超声引导下腹横肌平面阻滞组(B组)。B组于麻醉诱导前30 min在超声引导下双侧腹横肌平面阻滞。两组于手术结束前10 min连接经静脉病人自控镇痛(PCIA)泵,持续镇痛48 h,维持视觉模拟(VAS)评分 <4 分,当VAS评分 ≥ 4 分时,静脉注射舒芬太尼 $5\ \mu\text{g}$ 。记录两组术中麻醉药用量,苏醒及拔管时间,记录术后24 h内舒芬太尼单位时间用量、镇痛补救情况和不良反应发生情况。**结果** 与A组比较,B组术中丙泊酚用量[(210 ± 32) mg 比(324 ± 45) mg]、舒芬太尼用量[(31 ± 3.6) μg 比(42 ± 3.8) μg]、术后24 h内舒芬太尼单位时间用量[(3.2 ± 0.5) μg 比(5.4 ± 0.7) μg]明显减少($P < 0.001$);苏醒时间[(12 ± 3) min 比(20 ± 5) min]及拔管时间[(15 ± 4) min 比(25 ± 7) min]明显提前($P < 0.001$)。术后24 h内镇痛补救率(13%比40%) and 恶心(10%比33%)、呕吐(0%比10%)发生率降低($P < 0.05$)。**结论** 超声引导下腹横肌平面阻滞,可明显减少妇科腹腔镜下全子宫切除手术患者术中麻醉药用量,改善术后早期镇痛效果。

【关键词】 麻醉和镇痛; 腹肌; 神经肌肉阻滞; 腹腔镜检查; 妇科手术

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Effects of ultrasound – guided transverses abdominis plane block on anesthesia and early postoperative patient – controlled analgesia in patients undergoing gynecological laparoscopic surgery

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【Abstract】 Objective To investigate the efficacy of ultrasound – guided transverses abdominis plane block (TAP) on anesthesia and postoperative analgesia in patients undergoing gynecological laparoscopic surgery. **Methods** From January 2015 to July 2017, 60 patients aged 46 – 68 years, of American Society of Anesthesiologists (ASA) physical status I – II, scheduled for elective gynecological laparoscopic surgery in Nanxiang Hospital of Jiading District of Shanghai were randomly divided into control group(A group) and ultrasound – guided TAP group(B group), with 30 cases in each group, In B group, ultrasound – guided TAP was performed 30 min before induction of anesthesia. The patients in both two groups received patient – controlled intravenous analgesia (PCIA) for 48 h started from 10 min before the end of surgery. The VAS score ≥ 4 points, sufentanil $5\ \mu\text{g}$ was injected intravenously. The consumption of anesthesia drugs during operation, time of consciousness and extubation, the consumption of sufentanil per hour in 24h after operation, requirement for rescue medication, and the adverse reactions within 24h after surgery were also recorded. **Results** Compared with those in A group, the consumption of propofol [(210 ± 32) mg vs. (324 ± 45) mg], sufentanil [(31 ± 3.6) μg vs. (42 ± 3.8) μg] in operation and consumption of sufentanil per hour in 24h after operation [(3.2 ± 0.5) μg vs. (5.4 ± 0.7) μg] in B group were significantly lower ($P < 0.001$). The time of consciousness [(12 ± 3) min vs. (20 ± 5) min] and extubation [(15 ± 4) min vs. (25 ± 7) min] were significantly reduced in B group ($P < 0.001$). The requirement for rescue medication (13% vs. 40%) and the incidence rate of nausea (10% vs. 33%) and vomiting (0% vs. 10%) within 24h after surgery were significantly decreased in B group compared with

those in A group ($P < 0.05$). **Conclusion** Ultrasound – guided TAP performed in patients undergoing gynecological laparoscopic surgery can reduce the consumption of anesthesia drugs in operation and optimize postoperative analgesia.

【Key words】 Anesthesia and analgesia; Abdominal muscles; Neuromuscular; Laparoscopy; Gynecologic surgery

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动态增强技术联合磁共振弥散加权成像技术 诊断乳腺良恶性病变的临床价值

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【摘要】 目的 探讨动态增强(DCE-MRI)技术联合磁共振弥散加权成像(MR-DWI)技术诊断乳腺良恶性病变的临床效果。**方法** 以2017年1月至2018年1月浙江大学舟山医院收治的乳腺发生病变患者100例为研究对象,对患者实施MR-DWI和DCE-MRI检查并与病理验证结果进行比较分析。**结果** 良性乳腺病灶的表观扩散系数(ADC)值为 $(1.65 \pm 0.24) \times 10^{-3} \text{ mm}^2/\text{s}$;恶性乳腺病灶的ADC值为 $(1.17 \pm 0.17) \times 10^{-3} \text{ mm}^2/\text{s}$,良恶性病灶患者ADC值相比差异有统计学意义($t = 5.021, P < 0.05$)。88例良性病灶患者I型、II型、III型曲线病例数分别为62例(70.45%)、18例(20.45%)和8例(9.09%)。20例恶性病灶患者I型、II型、III型曲线病例数分别为3例(15.00%)、5例(25.00%)和12例(60.00%)。对动态增强I型和III型曲线在乳腺良恶性病灶相比,差异有统计学意义($\chi^2 = 8.254, P < 0.05$),两者联合诊断的曲线下面积与单纯使用ADC和DEC-MRI相比,差异有统计学意义($\chi^2 = 6.032, P < 0.05$),ADC与DEC-MRI诊断的曲线下面积相比差异无统计学意义($\chi^2 = 5.221, P > 0.05$)。**结论** 综合运用DWI与DCE-MRI这两种方式之后,能够为乳腺恶性肿瘤的诊断奠定坚实的数据基础,并且有效强化诊断的敏感性与特异性,进而使得临床干预与临床治疗的进行更加容易。

【关键词】 磁共振成像,弥散; 图像增强; 乳腺肿瘤; 诊断,鉴别

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Clinical value of dynamic enhancement combined with diffusion - weighted MRI in the diagnosis of benign and malignant breast lesions

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【Abstract】 Objective To explore the clinical effect of dynamic enhancement combined with diffusion - weighted magnetic resonance imaging(MRI) in the diagnosis of benign and malignant breast lesions. **Methods** From January 2017 to January 2018, 100 patients with breast lesions in Zhoushan Hospital were selected in the study. The patients received MR - DWI and DCE - MRI inspection, and the results were compared with the pathological verification results. **Results** The ADC value of benign breast lesions was $(1.65 \pm 0.24) \times 10^{-3} \text{ mm}^2/\text{s}$. The ADC value of malignant breast lesions was $(1.17 \pm 0.17) \times 10^{-3} \text{ mm}^2/\text{s}$, and there was statistically significant difference in ADC value between patients with benign and malignant breast lesions ($t = 5.021, P < 0.05$). The number of type I, type II and type III curve cases of 88 patients with benign lesions was 62 cases (70.45%), 18 cases (20.45%) and 8 cases (9.09%), respectively. The number of patients with type I, type II and type III curve of malignant lesion was 3 cases (15.00%), 5 cases (25.00%) and 12 cases (60.00%), respectively. For dynamic enhancement type I and type III curve in breast benign and malignant lesions, the difference was statistically significant ($\chi^2 = 8.254, P < 0.05$). The area under the curve of the joint diagnosis compared with the simple use of ADC and DEC - MRI, the difference was statistically significant ($\chi^2 = 6.032, P < 0.05$). The ADC compared with DEC - the area under the curve of MRI in the diagnosis had no obvious difference ($\chi^2 = 5.221, P > 5.221$). **Conclusion** The integrated use of DWI and DCE - MRI can lay the solid data for the diagnosis of breast malignant tumor, and effectively strengthen the diagnostic sensitivity and specificity, and make clinical intervention and clinical treatment easily.

【Key words】 Diffusion magnetic resonance imaging; Image enhancement; Breast neoplasms; Diagnosis; differential

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采用血液净化技术治疗重症毒蕈中毒 23 例临床分析

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【摘要】 目的 观察采用血液净化技术治疗重症毒蕈中毒的疗效及经验。**方法** 收集 23 例重症毒蕈中毒患者,在一般疗法(洗胃、催吐、口服活性炭、导泻、阿托品、肾上腺皮质激素、对症及支持治疗等)基础上,给予血液净化疗法:血液灌流,每次 2 h,隔天 1 次;血液透析,与血液灌流串联应用;床旁血液滤过,治疗时间(8~10)h/次。**结果** 23 例患者中合并肝损伤 22 例(95.7%)、肾损伤 7 例(30.4%)、中枢神经系统损伤 3 例(13.0%)、其它 4 例(17.4%)。血液灌流串联血液透析治疗 22 例,(3.6±0.4)次/例;床旁血液滤过 19 例,(2.9±0.5)次/例。转归:好转 21 例,死亡 2 例。**结论** 毒蕈中毒者应该尽早行血液净化治疗,血液净化技术是治疗重症毒蕈中毒的有效方法。

【关键词】 血液透析滤过; 真菌; 中毒; 多器官功能衰竭

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Clinical analysis of blood purification technology in the treatment of 23 cases with severe toadstool poisoning

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【Abstract】 Objective To observe the curative effect and experience of blood purification technology in the treatment of severe mushroom poisoning. **Methods** A total of 23 patients with severe mushroom poisoning in the Central Hospital of Pulandian District of Dalian were collected. On the basis of general therapy (emetic, gastric lavage, oral activated charcoal, catharsis, atropine, adrenal cortical hormone, symptomatic and supportive treatment), the patients were given blood purification therapy; hemoperfusion, 2 hours each time, 1 time every two days; application in series with hemodialysis, hemoperfusion; bedside hemofiltration was performed (8-10)h/ time. **Results** Of the 23 patients, 22 cases had liver injury (95.7%), 7 cases had renal injury (30.4%), 3 cases had central nervous system damage (13%), and 4 cases had other 17.4%. Hemoperfusion was performed in 22 patients, with an average of (3.6±0.4) times per day, and 19 patients with bedside hemofiltration, with an average of (2.9±0.5) times per patient. Outcome; 21 cases were improved, 2 cases died. **Conclusion** Blood purification treatment should be done as early as possible for mushroom poisoning patients, and it is an effective method for the treatment of severe mushroom poisoning.

【Key words】 Hemofiltration; Mycotoxicosis; Poisoning; Multiple organ failure

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1.5T 动态增强核磁共振诊断鉴别前列腺癌价值研究

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【摘要】 目的 分析 1.5T 动态增强核磁共振(MRI)在前列腺癌诊断鉴别中的临床应用价值。方法 选取浙江衢化医院 2017 年 1 月至 2017 年 12 月收治的前列腺疾病患者 298 例作为研究对象,所有对象进行 MRI 检查[包括 T2 加权成像(T2WI)、扩散加权成像(DWI)、动态增强(DCE)],观察所有对象的检查结果,并以病理活检作为确诊金标准,对出现前列腺癌的可能性做出评价。结果 在该次研究中所选择的 298 例前列腺疾病患者中共有前列腺癌 136 例,其中外周前列腺癌 84 例,T2WI、DWI、DCE 检出率均为 100.00%,中央腺体前列腺癌 52 例,T2WI、DWI、DCE 检出率分别为 100.00%、98.08%、98.08%;298 例前列腺疾病患者中共有前列腺炎 162 例,其中外周前列腺炎 64 例,T2WI、DWI、DCE 检出率分别为 98.44%、100.00%、96.88%,中央腺体前列腺炎 98 例,T2WI、DWI、DCE 检出率分别为 97.96%、100.00%、98.98%。结论 1.5T 动态增强 MRI 能够准确的检出前列腺疾病,尤其是前列腺癌。

【关键词】 前列腺肿瘤; 磁共振成像; 诊断; 病理学,临床; 癌组织检查,针吸

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Clinical value of 1.5T dynamic enhanced MRI in the differential diagnosis of prostate cancer

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【Abstract】 Objective To analyze the clinical value of 1.5T dynamic enhanced MRI in the differential diagnosis of prostate cancer. **Methods** A total of 298 patients with prostate disease admitted to Zhejiang Quhua Hospital from January 2017 to December 2017 were enrolled. All subjects underwent MRI (including T2WI, DWI, DCE), and the results of all subjects were observed. The pathological biopsy was used as the gold standard for diagnosis. The possibility of prostate cancer was evaluated. **Results** Among the 298 patients with prostate disease, there were 136 cases of prostate cancer, including 84 cases of peripheral prostate cancer, the detection rates of T2WI, DWI and DCE were all 100.00%, 52 cases of central gland prostate cancer, the detection rates of T2WI, DWI and DCE were 100.00%, 98.08%, and 98.08%, respectively. Among 298 patients with prostate disease, there were 162 cases of pre-existing adenitis, including 64 cases of peripheral prostatitis. The detection rates of T2WI, DWI and DCE were 98.44%, 100.00%, 96.88%, respectively, 98 cases of central glandular gland inflammation, the detection rates of T2WI, DWI, DCE were 97.96%, 100.00%, 98.98%, respectively. **Conclusion** 1.5T dynamic enhanced MRI can correctly detect prostate diseases, especially prostate cancer.

【Key words】 Prostate neoplasms; Magnetic resonance imaging; Diagnosis; Pathology, clinical; Biopsy, needle

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真空辅助乳腺微创旋切系统在乳腺肿瘤诊治中的应用效果观察

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【摘要】 目的 观察在诊治乳腺肿瘤时使用安珂(ENCOR)真空辅助乳腺微创旋切系统的应用效果。**方法** 选取 2017 年 1-10 月在阳泉市阳煤集团总医院进行治疗的乳腺肿瘤患者 86 例,采用随机数字表法分为研究组和对照组,各 43 例,研究组使用安珂真空辅助乳腺微创旋切系统进行切除治疗,对照组使用传统的乳腺肿瘤切除术进行切除治疗。观察比较两组手术情况、术后并发症发生率以及术后复发情况。**结果** 研究组术中出血量、手术时间、瘢痕长度及术后恢复时间分别为(5.1±1.2)mL、(15.9±3.5)min、(0.3±0.1)cm、(2.7±0.4)d,对照组分别为(12.7±2.3)mL、(26.8±4.6)min、(3.2±1.1)cm、(5.1±0.8)d,两组差异均有统计学意义($t=15.579, 14.297, 14.108, 13.597$, 均 $P < 0.05$);研究组术后并发症发生率为 11.63%,对照组术后并发症发生率为 30.23%,两组差异有统计学意义($\chi^2=5.187$, 均 $P < 0.05$);在术后 12 个月的随访中,研究组出现肿瘤残余患者 2 例(4.65%),出现复发患者 1 例(2.33%);对照组出现肿瘤残余患者 3 例(6.98%),出现复发患者 2 例(4.65%),两组差异无统计学意义($\chi^2=1.013, P > 0.05$)。**结论** 采用真空辅助微创旋切系统治疗乳腺微小肿瘤具有创伤小、痛苦轻、恢复快等优点,临床应用安全有效。

【关键词】 外科手术;微创性;乳腺肿瘤;诊断;治疗;疗效比较研究

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Application of ENCOR vacuum – assisted breast minimally invasive revolving system in the diagnosis and treatment of breast tumors

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【Abstract】 Objective To study the application effect of ENCOR vacuum – assisted breast minimally invasive polypectomy system in the diagnosis and treatment of breast tumors. **Methods** Totally 86 breast cancer patients treated in the General Hospital of Yangmei Group from January 2017 to October 2017 were randomly divided into study group and control group, with 43 cases in each group. The study group was treated with ENCOR vacuum – assisted minimally invasive rotational atherectomy system, while the control group was treated by traditional breast excision. The operative conditions, postoperative complications and postoperative recurrence were observed and compared between the two groups. **Results** The intraoperative bleeding volume, operation time, scar length and postoperative recovery time in the study group were (5.1±1.2)mL, (15.9±3.5)min, (0.3±0.1)cm, (2.7±0.4)d, respectively, which in the control group were (12.7±2.3)mL, (26.8±4.6)min, (3.2±1.1)cm and (5.1±0.8)d, respectively, the differences between the two groups were statistically significant ($t=15.579, 14.297, 14.108, 13.597$, all $P < 0.05$). The total incidence rate of postoperative complications in the study group was 11.63%, which was significantly lower than 30.23% in the control group ($\chi^2=5.187, P < 0.05$). During the follow – up of 12 months, in the study group, 2 patients (4.65%) had residual tumor, 1 patient (2.33%) developed recurrence; in the control group, 3 patients (6.98%) had residual tumor, 2 patients (4.65%) developed recurrence. There was no statistically significant difference between the two groups ($\chi^2=1.013, P > 0.05$). **Conclusion** ENCOR vacuum – assisted breast minimally invasive revolving system in the treatment of breast tiny tumors has advantages of less trauma and pain, rapid recovery, etc, it is safe and effective.

【Key words】 Surgical procedures, minimally invasive; Breast neoplasms; Diagnosis; Treatment; Comparative effectiveness research

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不同材料修复牙楔状缺损对其边缘密合度的影响比较

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【摘要】 目的 比较不同材料修复牙楔状缺损对其边缘密合度的影响。**方法** 选择 2016 年 1-7 月宁波市海曙区口腔医院收治的楔状缺损患者 80 例 172 颗牙,采用随机数字表法分为三组进行修复治疗,A 组用富士玻璃离子充填,26 例患者 55 颗牙;B 组用卡瑞斯玛光固化复合树脂充填,23 例患者 59 颗牙;C 组用松风加强型流动聚合体 F03 充填,31 例患者 58 颗牙。对三组不同材料充填后的牙齿的边缘密合度进行测量。**结果** 经秩和检验,三组充填体渗透程度差异有统计学意义($H = 7.036, P = 0.035$);A 组渗漏平均长度(1.10 ± 0.05)mm,B 组渗漏平均长度(0.96 ± 0.05)mm,C 组渗漏平均长度(0.78 ± 0.06)mm,C 组渗漏深度较 A 组、B 组短,差异有统计学意义($F = 22.371, P = 0.005$)。**结论** 松风加强型流动聚合体 F03 与牙体组织边缘密合度优于富士玻璃离子与卡瑞斯玛光固化复合树脂,在治疗楔状缺损上更有优势。

【关键词】 牙修复体修补; 富士玻璃离子; 卡瑞斯玛光固化复合树脂; 松风加强型流动聚合体 F03; 边缘密合度

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Effects of marginal adaptation with different materials on restoring dental wedge-shaped defects

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【Abstract】 Objective To evaluate the effects of marginal adaptation with different materials on restoring dental wedge-shaped defects. **Methods** From January 2016 to July 2016, 80 patients with 172 wedge-shaped defect teeth in Stomatological Hospital of Haishu District were chosen and randomly divided into three groups according to random number table method, 26 patients with 55 defect teeth were treated with Fuji glass ionomer (group A), 23 patients with 59 defect teeth were treated with Carey charismatic light-cured composite resin (group B), and the other 31 patients with 58 defect teeth were treated with beautiful flow plus reinforced polymer F03 (group C). Marginal adaptation of three groups of different materials of the teeth were measured. **Results** The micro-leakage depth among the three groups had statistically significant difference ($H = 7.036, P = 0.035$). The micro-leakage depth of group A, B and C were (1.10 ± 0.05) mm, (0.96 ± 0.05) mm, (0.78 ± 0.06) mm, respectively. There was statistically significant difference among the three groups ($F = 22.371, P = 0.005$). **Conclusion** The marginal adaptation of beautiful flow plus reinforced polymer F03 is superior to Fuji II glass-ionome and Charisma composite resin, and has benefits for treatment of wedge-shaped defects.

【Key words】 Dental prosthesis repair; Fuji glass ionomer; Carey charismatic light-cured composite resin; Beautiful flow plus reinforced polymer; Marginal adaptation

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不同方案治疗急性间质性肾炎的临床效果比较

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【摘要】目的 比较不同治疗方案治疗急性间质性肾炎的临床效果。**方法** 选取 2016 年 2 月至 2017 年 4 月苏州大学附属常熟医院收治的急性间质性肾炎患者 153 例为研究对象,采用随机数字表法分为 A、B、C 三组,每组 51 例。给予 A 组患者常规血液透和营养支持,给予 B 组常规血液透析、营养支持与泼尼松免疫透析综合治疗,给予 C 组常规血液透析、营养支持与环孢菌素免疫透析综合治疗。对比三组患者治疗总有效率、不良反应发生率与各项生化指标水平。**结果** B 组和 C 组患者治疗总有效率和各项生化指标参数均明显优于 A 组 [血尿氮素: A 组 (10.43 ± 4.28) mmol/L, B 组 (6.04 ± 1.64) mmol/L, C 组 (6.17 ± 1.75) mmol/L; 血肌酐: A 组 (143.15 ± 40.35) mg/24 h, B 组 (91.22 ± 34.21) mg/24 h, C 组 (92.04 ± 36.83) mg/24 h; 尿 β_2 微球蛋白水平: A 组 (0.37 ± 0.13) mg/L, B 组 (0.21 ± 0.23) mg/L, C 组 (0.25 ± 0.07) mg/L; 24 小时尿蛋白定量: A 组 (1.23 ± 0.53) g/24 h, B 组 (0.34 ± 0.26) g/24 h, C 组 (0.38 ± 0.06) g/24 h] ($t = 1.26, 4.83, 0.97, 4.17, 2.36, 2.87, 3.12, 4.55$, 均 $P < 0.05$), 且 B、C 两组对比差异无统计学意义 ($P > 0.05$); 三组不良反应发生率差异无统计学意义 ($P > 0.05$)。**结论** 应用免疫抑制剂辅助治疗急性间质性肾炎可有效提高其临床疗效,且用药安全性较高,值得临床推广。

【关键词】 肾炎, 间质性; 免疫抑制剂; 泼尼松; 环孢菌素; 疗效比较研究

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Comparison of effects of different regimens in the treatment of acute interstitial nephritis

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胃黏膜多部位联合取样在幽门螺杆菌培养与根除中的应用价值

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【摘要】 **目的** 明确胃黏膜多部位联合取样在幽门螺杆菌的培养鉴定以及根据药物敏感试验结果指导幽门螺杆菌根除中的应用价值。**方法** 选取 2016 年 1 月至 2017 年 1 月在平阳县人民医院消化内科就诊的患者 225 例为研究对象,所有患者均进行¹³C 尿素呼气试验,随后行胃镜检查并分别在胃窦小弯、胃体进行胃黏膜取样,按常规方法培养鉴定幽门螺杆菌,并对分离菌株进行琼脂稀释法药物敏感试验。将幽门螺杆菌培养阳性的患者 199 例采用随机数字表法分为两组,药敏试验组(99 例)根据药敏试验选择两种敏感的抗生素,对照组(100 例)的抗生素种类固定选择阿莫西林+克林霉素,完成疗程后复查幽门螺杆菌的根除情况。**结果** 共有 225 例患者纳入最终研究,88.44%(199 例)患者幽门螺杆菌培养阳性,其中 85.33%的患者¹³C 尿素呼气试验阳性。73.87%(147 例)患者两个部位的幽门螺杆菌培养均阳性,26.13%(52 例)患者两个部位培养结果不一致。随访结果显示药敏试验组具有更高的幽门螺杆菌根除率(88.89%比 68.00%, $\chi^2 = 11.612, P = 0.0007$)。**结论** 胃窦小弯、胃体胃黏膜联合取样可提高幽门螺杆菌的培养阳性率,根据药敏结果选择抗菌药可提高幽门螺杆菌根除效果。

【关键词】 螺杆菌,幽门; 活组织检查; 微生物敏感性试验; 抗菌药; 治疗结果

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Clinical value of combined sampling at multiple sites of gastric mucosa for *Helicobacter pylori* culture and eradication

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姜黄素对心肌缺血再灌注损伤大鼠糖代谢的影响

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【摘要】 目的 探讨姜黄素对缺血再灌注损伤大鼠糖代谢关键酶的作用。方法 采用健康雄性 Wister 大鼠建立 Langendorff 离体心脏灌注模型,对照组($n=8$)持续灌注 90 min;缺血再灌注组($n=8$)全心缺血 30 min,再灌注 60 min;姜黄素预处理组($n=8$)加入姜黄素后,全心缺血 30 min,再灌注 60 min。再灌注结束时,应用紫外分光光度法测定缺血再灌注后心肌乳酸脱氢酶(LDH),糖代谢相关酶—6-磷酸果糖激酶-1(PFK)、丙酮酸激酶(PK)、己糖激酶(HK)的活性。结果 与缺血再灌注组相比,姜黄素预处理组 LDH 释放显著减少[(113 ± 11)U/g 比(93 ± 8)U/g],差异有统计学意义($t=3.27, P<0.05$);与缺血再灌注组相比,姜黄素预处理组心肌 PK 活性显著下降[(5.821 ± 0.841)U/mg 比(4.948 ± 0.663)U/mg],差异有统计学意义($t=4.11, P<0.05$);与缺血再灌注组相比,姜黄素预处理组心肌 PFK 活性显著下降[(0.496 ± 0.071)U/mg 比(0.411 ± 0.049)U/mg],差异有统计学意义($t=6.42, P<0.05$);与缺血再灌注组相比,姜黄素预处理组心肌 HK 活性显著下降[(0.415 ± 0.074)U/mg 比(0.387 ± 0.075)U/mg],差异有统计学意义($t=2.14, P<0.05$)。结论 姜黄素预处理能够相对降低糖代谢中关键酶的活性,减少缺血再灌注损伤对能量的需求及乳酸脱氢酶的释放,对缺血再灌注损伤心肌起保护作用。

【关键词】 姜黄素; 再灌注损伤; 磷酸果糖激酶-1; 丙酮酸激酶; 己糖激酶

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Effect of curcumin on glucose metabolism in myocardial ischemia reperfusion injury rats

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乳腺外科整复术在乳腺癌保乳手术中的临床应用

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【摘要】 目的 分析乳腺外科整复术在乳腺癌保乳手术中的临床应用价值。方法 选取余姚市第二人民医院于 2015 年 10 月至 2017 年 10 月期间收治的乳腺癌患者 70 例,采用随机数字表法将 70 例乳腺癌患者分为观察组和对照组,每组 35 例,对照组采取乳腺保乳手术的常规治疗方法,观察组在此基础上加用乳腺外科整复术,对比两组患者的临床应用价值。结果 观察组 1 年生存率(97.14%)、3 年生存率(97.14%)与对照组 1 年生存率(94.28%)、3 年生存率(91.42%)相对比,差异无统计学意义($P > 0.05$);观察组的满意度(94.28%)显著高于对照组(71.42%)($\chi^2 = 6.436, P = 0.011$);观察组的不良反应产生(8.57%)率显著低于对照组(28.57%)($\chi^2 = 4.928, P = 0.026$)。结论 结合乳腺癌患者的病情和需求,采用乳腺外科修复术应用于乳腺癌保乳手术中,效果显著,值得推广使用。

【关键词】 乳腺肿瘤; 修复外科手术; 保乳手术; 病人满意度; 疗效比较研究

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Clinical application of breast surgery in breast – conserving surgery

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抗菌治疗前后慢性牙周炎合并 2 型糖尿病患者糖化血红蛋白水平变化与牙周临床指标的相关性分析

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【摘要】 目的 分析牙周炎合并 2 型糖尿病患者抗菌治疗前后糖化血红蛋白(HbA1c)水平与牙周临床指标的相关性。方法 选取 2014 年 5 月至 2015 年 5 月杭州市大江东医院 96 例牙周炎合并 2 型糖尿病患者,分别于抗菌治疗前、后测定 HbA1c 水平,统计分析 HbA1c 水平与牙周临床指标牙周探诊深度(PD)、牙龈指数(GI)、菌斑指数(PLI)、探诊出血指数(BOP)及牙周附着丧失(AL)的相关性。结果 治疗后 HbA1c(6.12 ± 1.38)%和 FPG(6.05 ± 0.82)mmol/L,明显低于治疗前的 HbA1c(9.37 ± 1.64)%和 FPG(7.22 ± 1.24)mmol/L,差异有统计学意义($t=5.36, 5.11$, 均 $P < 0.05$);治疗后 PD(3.84 ± 2.11)、BOP(15.85 ± 12.07)、PLI(1.06 ± 0.54)、AL(3.06 ± 1.67),均明显低于治疗前的 PD(6.07 ± 2.04)、BOP(43.17 ± 16.22)、PLI(2.13 ± 0.87)、AL(6.41 ± 1.83),差异均有统计学意义($t=4.97, 8.01, 6.57, 7.34$, 均 $P < 0.05$);治疗前后 HbA1c 水平变化幅度与 PD、BOP、PLI、AL 均呈正相关(均 $P < 0.05$);多元回归分析中,控制其他影响因素后,HbA1c 水平与 BOP、PLI、AL 依然呈正相关($F=11.387, P < 0.05$)。结论 牙周炎合并 2 型糖尿病患者抗菌治疗前、后 HbA1c 水平变化幅度与 BOP、PLI、AL 始终呈正相关,HbA1c 水平检测可作为评估糖尿病患者牙周破坏与治疗效果的重要指标。

【关键词】 牙周炎; 糖尿病,2 型; 糖化血红蛋白; 血糖; 牙龈

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Correlation between HbA1c levels change and periodontal clinical parameters in patients with chronic periodontitis and type 2 diabetes mellitus

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痔瘕宁栓治疗混合痔术后并发症的临床研究

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【摘要】 目的 观察自制中成药痔瘕宁栓治疗混合痔术后并发症的临床效果。方法 选取徐州医科大学附属医院和衡水市第四人民医院肛肠科手术患者 60 例,按入院顺序随机分为治疗组和对照组各 30 例。治疗组采用自制痔瘕宁栓治疗,对照组采用肛泰栓治疗。观察术后疼痛积分、肛缘水肿、便血等,以肛泰栓作为对照。结果 两组总疗效分别为 100.0% 和 90.0%,差异有统计学意义($\chi^2 = 7.925, P = 0.019$)。痔瘕宁栓治疗组患者术后的疼痛积分、肛缘水肿、尿储留、肛门坠胀积分、便血积分和创面愈合时间明显低于对照组,差异均有统计学意义(均 $P < 0.05$)。结论 痔瘕宁栓可以减少混合痔术后疼痛、便血等并发症的发生,对未引起肛肠科医师足够重视的患者自觉感受如肛门坠胀也有很好的治疗作用,大大的减轻了患者的痛苦,宜于临床推广应用。

【关键词】 痔; 外科手术; 手术后并发症; 医学,中国传统

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Clinical study of Zhilouning suppository in the treatment of postoperative complications of mixed hemorrhoid

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规范化生活管理对妊娠期糖尿病孕产妇血糖水平及妊娠结局的影响分析

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【摘要】 目的 探讨规范化生活管理对妊娠期糖尿病孕产妇血糖水平及妊娠结局的影响。**方法** 选择 2014 年 6 月至 2017 年 6 月海宁市人民医院产前检查及分娩的妊娠期糖尿病孕产妇 451 例作为研究对象,根据随机数字表法分为观察组(225 例,采用规范化生活管理)和对照组(226 例,采用常规管理)。比较两组干预前后的空腹血糖、餐后 2 h 血糖水平、围生期并发症发生情况(包括产后出血、胎膜早破、剖宫产、羊水过多、妊娠高血压)及妊娠结局(包括畸形儿、新生儿窒息、巨大儿、高胆红素血症、胎儿窘迫)。**结果** 干预后,观察组血糖控制情况较对照组好,差异均有统计学意义($t = 3.824, 17.301, 6.532, 6.119$, 均 $P < 0.05$);观察组并发症发生率(12.89%)明显低于对照组的 23.01% ($\chi^2 = 7.837, P < 0.05$);观察组新生儿并发症(4.44%)明显低于对照组的 11.06% ($\chi^2 = 6.898, P < 0.05$)。**结论** 对妊娠期糖尿病孕产妇进行规范化生活管理,有助于控制血糖,减少妊娠并发症,改善妊娠结局,值得临床推广。

【关键词】 糖尿病,妊娠; 规范; 血糖; 妊娠结局

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Effect of standardized life management on blood glucose level and pregnancy outcomes in gestational diabetic patients

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基于 CT 的 3D 骨盆骨折模型对患者近远期疗效的影响

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【摘要】 目的 分析基于 CT 的 3D 骨盆骨折模型对患者近远期疗效的影响。方法 选取桐乡市第一人民医院 2015 年 4 月至 2017 年 4 月经 Tile 分型 C 型骨盆骨折患者 94 例作为研究对象,按照随机数字表法将患者分为观察组和对照组各 47 例,两组患者均采用钢板重建以及拉力螺钉行内固定治疗。其中,对照组采用传统 CT 片指导手术治疗,观察组采用 3D 骨盆骨折模型指导手术治疗。比较两组患者术中出血量、手术时间、输血量情况,通过 Matta 标准评估复位质量。术后 12 个月复查 X-ray 观察两组患者的骨折愈合情况,并采用 Majeed 骨盆骨折评分系统评估骨盆功能,比较两组患者并发症的发生情况。**结果** 观察组术中出血量、手术时间、输血量均显著低于对照组($t=9.34, 5.78, 9.20$, 均 $P<0.01$);观察组的 Matta 标准骨折复位满意度为 95.74%,显著高于对照组的 74.47% ($\chi^2=4.46, P<0.05$);观察组术后 12 个月的 Majeed 骨盆骨折评分优良率为 93.62%,显著高于对照组的 82.98% ($\chi^2=3.46, P<0.05$);两组患者的并发症发生率差异无统计学意义 ($P>0.05$)。**结论** 基于 CT 的 3D 骨盆骨折模型指导钢板重建及拉力螺钉行内固定治疗有利于减少术中出血量、手术时间、输血量,改善 Matta 标准骨折复位满意度,降低远期并发症的发生率,提高远期疗效。

【关键词】 骨折; 骨盆; 成像,三维; 骨折固定术; 手术后并发症; 疗效比较研究

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Effect of 3D pelvis fracture model based on CT on the short and long term efficacy in patients with pelvis fracture

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脊柱严重侧弯畸形患者的胃镜检查一例

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One case of severe scoliosis was reported in the gastroscopy

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患者男性,59岁,藏族,农民。主诉:间断性腹痛、反酸5年,加重伴腹胀气喘1周。现病史:患者于5年前开始出现间断性上腹部疼痛伴反酸等消化道症状,由于患者为先天性脊柱胸廓畸形,未能行内镜检查而对症治疗,1周前(2018年3月15日)开始上述症状加重伴气喘、咳嗽咳痰等呼吸道症状而收住院。既往病史有先天性脊柱与胸廓畸形、肺结核、气管炎、肺气肿等病史。查体:神志清楚,精神可,营养状况差,胸廓畸形,脊柱高度侧弯畸形,双肺呼吸音粗,心率68次/min、律齐,各瓣膜区未闻及杂音,腹部平软、剑突下

压痛阳性,Murphy's征(-)肝区叩击痛阴性,双下肢轻度浮肿。影像检查结果:(1)胸片示:胸廓畸形、脊柱高度右侧弯,慢性支气管炎,右下肺感染,心界增大。(2)心电图:窦性心律,偶发房早,顺中向转位,QT-QTC延长。(3)心脏超声:全心增大,室壁变薄,肺动脉高压,肺动脉瓣、二尖瓣、三尖瓣反流。内镜检查结果:(1)食管腔走形扭转、上段脊柱弯曲处食管腔狭窄,中下段食管腔明显扩张。(2)贲门口松弛扩张。(3)慢性萎缩性胃炎伴糜烂。(4)胃腔扩张。

健康教育对哮喘患儿糖皮质激素雾化吸入治疗的依从性及临床效果观察

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【摘要】 目的 探讨健康教育对哮喘患儿糖皮质激素雾化吸入治疗的依从性以及临床效果。方法 选择 2016 年 1 月至 2017 年 5 月枣庄市立医院行糖皮质激素雾化吸入治疗的哮喘患儿 122 例, 采用随机数字表法分为两组各 61 例。对照组行常规护理干预, 观察组在对照组基础上加强健康教育干预。观察两组干预后 3 个月的治疗依从性、哮喘控制水平及治疗前后肺功能指标变化情况。结果 干预后观察组总依从率、哮喘控制率分别 91.80%、95.08%, 高于对照组的 77.05%、59.02%, 差异均有统计学意义 ($\chi^2 = 5.050, 22.435$, 均 $P < 0.05$)。干预前两组儿童哮喘控制测试 (C-ACT) 评分、依从性评分比较差异均无统计学意义 (均 $P > 0.05$); 干预后观察组 C-ACT 评分、依从性评分为 (25.68 ± 4.95) 分、 (7.96 ± 1.58) 分, 高于对照组 (20.37 ± 3.64) 分、 (5.02 ± 1.03) 分, 差异均有统计学意义 ($t = 6.750, 12.175$, 均 $P < 0.05$)。治疗前两组肺功能比较差异无统计学意义 ($P > 0.05$); 治疗后观察组各个指标 [用力肺活量 (FVC)、第 1 秒用力呼气量 (FEV₁)、最大呼气流量 (PEF)、用力呼出 25% 肺活量时呼气流量 (FEF_{25%})、用力呼出 50% 肺活量时呼气流量 (FEF_{50%})、用力呼出 75% 肺活量时呼气流量 (FEF_{75%})] 均显著优于对照组 (均 $P < 0.05$)。结论 哮喘患儿采取健康教育可显著提升糖皮质激素吸入治疗的依从性和哮喘控制水平, 改善患儿肺功能。

【关键词】 哮喘; 支气管; 健康教育; 糖皮质激素类; 雾化器和汽化器; 药物医疗依从性; 儿童

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Observation of health education on the compliance and clinical effect of glucocorticoid inhalation in children with asthma

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心理干预对乳腺癌患者术后情绪控制与生存质量的影响

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【摘要】 目的 分析心理干预应用在乳腺癌手术患者中对情绪和生存质量影响。方法 回顾性分析 2015 年 6 月至 2017 年 6 月舟山医院收治的乳腺癌手术患者 140 例,根据护理方法不同分为对照组和观察组,每组 70 例。对照组患者采用常规护理,观察组在对照组治疗基础上联合心理干预,分析两组患者护理情况。**结果** 观察组干预后社会行为问题评分(2.02 ± 0.33)分,个人情绪问题评分(5.06 ± 0.52)分,习惯问题评分(1.02 ± 0.17)分,学习工作问题评分(0.82 ± 0.11)分,上述得分低于对照组,差异均有统计学意义($t = 3.287$ 、 4.103 、 4.872 、 4.541 ,均 $P < 0.05$)。观察组服务态度评分(18.06 ± 1.86)分,沟通技巧评分(17.88 ± 2.31)分,病房环境评分(18.44 ± 1.66)分,服务水平评分(17.94 ± 1.88)分,护士仪表评分(18.94 ± 1.01)分,上述评分高于对照组,差异均有统计学意义($t = 5.873$ 、 6.192 、 6.028 、 5.196 、 6.011 ,均 $P < 0.05$)。观察组躯体功能评分(78.06 ± 4.85)分,心理功能评分(87.49 ± 4.88)分,社会功能评分(82.47 ± 5.79)分,物质功能评分(79.68 ± 5.83)分,生活质量总分(75.94 ± 5.88)分,上述评分均高于对照组,差异均有统计学意义($t = 9.127$ 、 11.032 、 14.289 、 13.014 、 11.987 ,均 $P < 0.05$)。**结论** 心理干预应用在乳腺癌手术患者中可以减轻负性情绪,提升患者生活质量,值得在临床推广应用。

【关键词】 心理疗法; 乳腺肿瘤; 情绪; 生活质量

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Effect of psychological intervention on the postoperative emotional control and quality of life of breast cancer patients

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多元化护理培训对肿瘤科护士综合护理能力的影响

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【摘要】 目的 分析多元化护理培训对肿瘤科护士综合护理能力的影响。方法 选取肿瘤科护士36名为研究对象,分析为期1年多元化护理培训前后对其综合护理能力的影响。结果 肿瘤科护士经护理培训后临床护理能力评分中的临床处理与评估(87.46±4.43)分、健康宣教(87.46±4.43)分、病症预判能力(87.46±4.43)分、操作技能(87.46±4.43)分、基础护理知识(87.46±4.43)分、护理操作(87.46±4.43)分,均高于培训前的(73.76±3.25)分、(75.72±2.11)分、(71.48±3.12)分、(76.34±1.37)分、(79.48±2.79)分、(75.42±3.51)分,差异均有统计学意义($t=36.602, 44.966, 38.891, 28.008, 52.552, 33.747$, 均 $P<0.05$);培训后应急处理时间[处置时间(4.51±1.01)min、停留时间(25.08±2.76)min]均短于培训前的(8.73±1.47)min、(41.59±5.13)min,患者治疗成功率为84.14%,高于培训前的64.57%($t=14.081, 17.005, \chi^2=16.878$, 均 $P<0.05$);培训前后,肿瘤患者及医生对护士培训前后沟通交流、团队合作、查房、操作熟练、化疗防护与给药、病情处理能力方面的满意度差异均有统计学意义($\chi^2=8.70, 5.005, 4.000, 5.316, 4.118, 5.185, 4.834, 6.869$, 均 $P<0.05$)。结论 多元化护理培训可有效提高肿瘤科护士综合护理能力,缩短应急处理时间,提高治疗成功率及满意度。

【关键词】 教育,专业,再培训; 护士; 肿瘤科,医院; 临床工作能力; 病人满意度

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Effect of diversified nursing training on comprehensive nursing ability of nurses

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优质护理对血液透析患者的生活质量、知识掌握及并发症的影响

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【摘要】 目的 探讨优质护理对血液透析动静脉内瘘患者的疗效、知识掌握及并发症的影响。**方法** 选取浙江省台州医院 2015 年 1 月至 2017 年 12 月住院部收治的行血液透析动静脉内瘘患者 100 例,采用随机数字表分为两组,每组各 50 例。对照组予常规护理;观察组予常规护理及优质护理。观察两组患者疗效,知识掌握情况及并发症。**结果** 观察组内瘘成熟 42 例及 1 年内畅通 36 例、2 年内畅通 31 例,均显著优于对照组的 34 例、32 例、25 例($\chi^2 = 3.16, 3.47, 3.51$, 均 $P < 0.05$);观察组干预后生活质量评分总体健康状况(85.93 ± 7.24)分,显著优于对照组的(71.64 ± 5.63)分,其他评分也优于对照组,两组差异有统计学意义($t = 5.27, 6.81, 7.39, 5.34, 6.27, 7.21, 6.45$, 均 $P < 0.05$);观察组知识掌握率各方面均显著优于对照组($\chi^2 = 4.25, 4.61, 4.18, 3.72, 3.86, 3.87, 3.58, 3.76, 3.65, 3.59, 3.56, 3.27, 3.62, 3.29, 3.71$, 均 $P < 0.05$);观察组内瘘血流量不足 1 例,渗血 3 例,血肿 2 例,动脉瘤 3 例,血栓 1 例,内瘘狭窄 2 例,显著少于对照组血流量不足 4 例,渗血 8 例,血肿 6 例,动脉瘤 5 例,血栓 4 例,内瘘狭窄 6 例($\chi^2 = 3.27, 4.15, 3.36, 3.14, 4.21, 4.06$, 均 $P < 0.05$)。**结论** 优质护理应用于血液透析动静脉内瘘患者可获得较好的临床保护效果,提高知识掌握率,减少和预防并发症,延长内瘘寿命有积极意义。

【关键词】 护理; 血液透析滤过; 动静脉瘘; 生活质量; 病人满意度

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Effect of quality nursing on quality of life, knowledge mastery and complications in hemodialysis patients

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心理护理在慢性盆腔炎中的应用价值

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【摘要】 目的 探讨心理护理对慢性盆腔炎中的应用以及对患者焦虑自评量表(SAS)、抑郁自评量表(SDS)评分的影响。**方法** 回顾大同市第一人民医院 2015 年 1 月至 2016 年 6 月诊治的 134 例慢性盆腔炎患者资料,根据不同护理方法分为观察组和对照组。所有患者治疗方式为中药灌肠联合微波,对照组给予常规护理,观察组给予心理护理。比较两组患者 SAS 以及 SDS、治疗有效率、患者满意率。**结果** 护理前两组 SAS 评分、SDS 评分差异无统计学意义($P > 0.05$);护理后观察组 SAS 评分为(29.55 ± 1.24)分、SDS 评分为(29.23 ± 2.06)分,明显低于对照组的(37.38 ± 2.91)分、(39.83 ± 2.58)分($t = 20.262, 26.280, P < 0.05$);观察组总有效率为 94.03%、患者满意率 94.02%、71.65%,对照组分别为 71.63%、64.17% ($\chi^2 = 17.617, \chi^2 = 29.944, P < 0.05$)。**结论** 对慢性盆腔炎患者给予心理护理可以有效降低患者 SAS、SDS 评分,提高治疗有效率和患者满意率,值得临床推广应用。

【关键词】 心理疗法; 护理; 盆腔炎,慢性; 焦虑; 抑郁; 病人满意度

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Application value of psychological nursing in the treatment of chronic pelvic inflammatory disease

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集体娱乐康复训练对老年脑卒中卧床患者负性情绪及睡眠质量的影响

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【摘要】 目的 探讨集体娱乐康复训练对老年脑卒中卧床者负性情绪及睡眠质量的影响。方法 选择 2016 年 11 月至 2017 年 8 月新泰市第二人民医院收治的脑卒中后卧床患者 96 例,按照随机数字表法分为两组各 48 例,观察组实施集体娱乐康复训练,对照组以医师为主导,护理上完全遵医嘱进行工作,比较两组干预后心理负面情绪状况及睡眠质量变化情况。结果 护理干预后,两组焦虑与抑郁评分分别为(15.0 ± 0.5)分和(14.1 ± 1.3)分,均显著优于干预前的(32.0 ± 1.6)分和(26.5 ± 1.3)分,有可比性($t = 64.140, 42.657$, 均 $P < 0.05$),且护理干预后,观察组焦虑与抑郁评分均优于干预后对照组的(21.2 ± 1.0)分和(21.8 ± 1.0)分($t = 35.072, 29.692$, 均 $P < 0.05$),观察组匹兹堡睡眠质量为(12.0 ± 0.9)分,显著优于对照组的(25.6 ± 1.6)分($t = 46.855, P < 0.05$)。结论 集体娱乐康复训练对于长期卧床的老年脑卒中患者,能有效的减少其负面心理情绪,改善睡眠质量,值得临床推广。

【关键词】 卒中; 娱乐; 康复; 老年人; 情绪; 睡眠

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Effect of collective recreational rehabilitation training on negative emotions and sleep quality of elderly stroke patients

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原发性免疫性血小板减少症治疗进展

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【摘要】 原发性免疫性血小板减少症是一种获得性免疫介导的以血小板减少、伴或不伴皮肤黏膜瘀紫、鼻衄、内脏出血等为特征的自身免疫性疾病。近年来,原发性免疫性血小板减少症的治疗进展迅速,尤其是血小板受体激动剂艾曲波帕的出现。本文就原发性免疫性血小板减少症的治疗研究进展作一综述。

【关键词】 血小板减少症; 血小板生成素; 间质干细胞移植; 脾切除术; 糖皮质激素类; 丙种球蛋白类

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Treatment research progress of primary immune thrombocytopenia

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【Abstract】 Primary immune thrombocytopenia is an autoimmune disease characterized by reduced platelets, accompanied by or without skin mucous bruises, epistaxis, internal bleeding, etc. Recent years, the treatment of primary immune thrombocytopenia developed very quickly, including the appearance of platelet receptor agonist - Eltrombopag. Here, we reviewed the treatment and research development of primary immune thrombocytopenia.

【Key words】 Thrombocytopenia; Thrombopoietin; Mesenchymal stem cell transplantation; Splenectomy; Glucocorticoids; Gamma-globulins

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