

中国基层医药[®]

CHINESE JOURNAL OF PRIMARY MEDICINE AND PHARMACY

半月刊 1994年7月创刊 第26卷 第3期 2019年2月1日出版

主管
国家卫生健康委员会

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出版
《中华医学杂志》社有限责任公司
100710,北京市东四西大街42号
电话(传真):(010)85158180
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电话:(010)64842472

广告发布登记号
淮广登字[2017]01号

印刷
安徽鑫凯盛印刷有限公司

发行
范围:公开
国内:中国邮政集团公司北京报刊发行局
国外:中国国际图书贸易集团有限公司
(北京399信箱,100044)
代号 SM4777

订购
全国各地邮政局
邮发代号 82-948

邮购
中国基层医药杂志社
232001,中国安徽淮南市洞山中路16号
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定价
每期 15.00元,全年 360.00元

中国标准连续出版物号
ISSN 1008-6706
CN 34-1190/R

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目次

儿科疾病

新型围术期功能锻炼联合康复指导在小儿发育性髋关节脱位治疗中的应用	257
李华 胡晓云 李连永	
右美托咪定术前滴鼻在小儿麻醉中的应用效果评价	261
李解 胡晓娟 王梓仲 唐杰 许柳 王飞	
雾化吸入联合孟鲁斯特治疗小儿感染后咳嗽应用价值评价	264
李德军	
腹腔镜下肝门暴露技术在小儿Ⅲ型胆道闭锁治疗中的应用研究	268
李炳 陈为兵 夏顺林 张丰年 王寿青 刘孟旭 杜永春 胡晓婷 顾春辉 王挺 王晓敏 陈震 李龙	
3.0T核磁共振敏感加权成像在新生儿缺氧缺血性脑病诊断中的价值分析	272
于扬 司振妍 吕聪聪	
频繁发作性儿童良性发作性眩晕临床分析	276
蔡成福 上官翰京 刘存山	
陕西省神木市2016年秋冬季节儿童血清25羟维生素D水平分析	279
刘娟 刘永林	
孟鲁司特联合布地奈德治疗小儿咳嗽变异性哮喘疗效观察	282
杨永朝	
小儿豉翘清热颗粒治疗急性上呼吸道感染的临床疗效观察	286
李晨虹	
换血治疗对新生儿胆红素脑病患儿并发症及预后的影响	290
朱士红 李慧	
C-反应蛋白联合凝血功能检测对于新生儿晚发型败血症诊断价值探讨	294
蓝海鹰 谭晓霞 李军胜 王琳丽	
布地奈德联合硫酸特布他林雾化吸入对支气管哮喘患儿血清趋化素样因子-1、环氧化酶2水平变化的影响	298
王香英 许如菊	

腹痛伴或不伴肠系膜淋巴结肿大患儿肠道血流动力学变化	303
孙跃女	
布洛芬预防早产儿颅内出血的临床效果及对氨基末端脑钠肽前体、血浆内皮素水平影响	307
金海华 卢洪萍	
左乙拉西坦治疗儿童及青少年癫痫临床分析	310
吴名展 陈伊洁 郭晓成 何素丽 马兰香	
早产儿并发症的流行病学分析	315
刘喜娟 陆丽骏 邱红 吴乃胜	
蒙脱石散联合消旋卡多曲对轮状病毒肠炎患儿血清白细胞介素 2、6、10 及高敏 C 反应蛋白水平变化的影响	319
虞追波 吕笑俏 柳攀	

论 著

丁溴东莨菪碱联合坦索罗辛辅助体外冲击波碎石治疗泌尿系结石的疗效及 对血清炎性因子的影响	324
陈跃军	
肾动脉不同阻断方式对后腹腔镜下保留肾单位手术的临床疗效分析	328
尚鹏飞	
超声引导下经皮扩张气管切开术在危重症患者治疗中的应用价值	332
包利峰 邱俊芬 吴德君 陈毓	
抗缪勒管激素评估系统性红斑狼疮患者卵巢储备功能的效果评价	337
张华 王丽 刘利鹏 王凌	
早期治疗妊娠合并亚临床甲状腺功能减退症对妊娠结局的影响	341
陈文婷	
枸地氯雷他定片与氯雷他定分散片治疗过敏性鼻炎的疗效比较	345
徐雪芬 王海哨 胡定国	

研究与实践

甲状腺微小乳头状癌患病风险预测指标研究	349
段滨红 杜馥曼 王丹 刘余 卞丙凤	
血氨和血清白细胞介素水平与肝硬化致肝性脑病相关性分析	352
许小丽 许小琴	
多肝段联合切除 + 术中胆道镜取石术治疗复杂肝内胆管结石的效果探究	355
戴启强 杜学峰	
宫颈癌、宫颈癌前病变与生殖道感染的相关性及危险因素分析	358
林顺彝 周惠洁 许子花	

健康教育

健康宣教路径模式用于经外周静脉穿刺中心静脉置管 治疗老年人重度慢性阻塞性肺疾病的效果观察	361
严琳琳	

护理学

循证护理用于阑尾炎穿孔感染患者术后护理的效果分析	364
黄新波	
优质护理对重症监护病房患者非计划性拔管的影响	367
吴依玲	
舒适护理用于股骨颈骨折患者的效果分析	370
王秀平	
快速康复外科护理对胃肠外科患者术后胃肠功能恢复及并发症发生率的影响	373
陈毅芳	
心理护理联合无保护会阴助产对初产妇妊娠结局和新生儿窒息评分的影响	377
林丽萍	

综 述

儿童过敏性紫癜的治疗进展	381
吴雨寒 高慧	

《中国基层医药》杂志可直接用的缩略语	对英文目次二
本期广告目次	306
《中国基层医药》杂志 2019 年度重点报道计划	351
《中国基层医药》杂志 2018 年相关指标一览表	380

本刊稿约见本卷第 1 期后插 1

执行编委 胡世莲 郑笑林 英文审校 黄河胜 责任编辑 黄力毅 责任排版 蒋传坤

新型围术期功能锻炼联合康复指导在小儿发育性髋关节脱位治疗中的应用

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【摘要】 目的 探究分析新型围术期功能锻炼联合康复指导在小儿发育性髋关节脱位治疗中的临床应用。**方法** 选取 2015 年 12 月至 2017 年 12 月中国医科大学附属盛京医院收治的行手术治疗的 40 例小儿发育性髋关节作为临床研究对象, 采用随机数字表法将其分为对照组和观察组两组, 各 20 例, 对照组给予常规围手术期康复指导, 观察组给予新型围术期功能锻炼联合康复指导, 比较两组患儿行不同干预前后肢体功能及心理状态变化情况。**结果** 两组干预后与干预前相比 FMA 及 Barthel 评分均升高, 观察组与对照组相比上述评分改善更加显著, 差异均有统计学意义(均 $P < 0.05$)。行不同干预后, 观察组患儿焦虑自评量表(SAS)、抑郁自评量表(SDS)、汉密尔顿抑郁量表(HAMD)等负性情绪评分均明显低于同期对照组(均 $P < 0.05$), 差异有显著统计学意义。**结论** 新型围术期功能锻炼联合康复指导能有效改善小儿发育性髋关节脱位的肢体功能, 同时改善患儿的心理状态, 对于提高稳定的近远期疗效具有积极意义。

【关键词】 围术期; 功能锻炼; 康复指导; 髋关节脱位; 儿童; 发育性; 心理状态

基金项目:国家自然科学基金(30600654)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.001

Application of new perioperative functional exercise combined with rehabilitation guidance in the treatment of developmental hip dislocation in children

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【Abstract】 Objective To explore and analyze the clinical application of perioperative functional exercise combined with rehabilitation guidance in the treatment of pediatric developmental hip dislocation. **Methods** From December 2015 to December 2017, 40 children with developmental dislocation of the hip treated in Shengjing Hospital Affiliated to China Medical University were selected in the research. The patients were randomly divided into control group and observation group, with 20 cases in each group. The control group was given conventional perioperative rehabilitation guidance, the observation group was given new perioperative functional exercise combined with rehabilitation guidance. The limb function and mental status changes before and after the intervention were compared between the two groups. **Results** After intervention, the scores of FMA and Barthel were all increased in the two groups compared with those before intervention, and the improvements of the observation group were more significant than those of the control group (all $P < 0.05$). After intervention, the self-rating anxiety scale (SAS), self-rating depression scale (SDS), Hamilton depression scale (HAMD) and other negative emotions scores in the observation group were significantly lower than those in the control group (all $P < 0.05$). **Conclusion** New perioperative functional exercise combined with rehabilitation guidance can effectively improve the limb function of children with developmental dislocation of the hip joint, at the same time improve the patients' mental state, and has positive significance to enhance the curative effect.

【Key words】 Perioperative period; Functional exercise; Rehabilitation guidance; Pediatric developmental dislocation of the hip

Fund program: National Natural Science Foundation of China (30600654)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.001

右美托咪定术前滴鼻在小儿麻醉中的应用效果评价

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【摘要】 **目的** 观察右美托咪定术前滴鼻在小儿麻醉中的临床效果。**方法** 选取四川省人民医院温江分院 2014 年 4 月至 2017 年 4 月行包皮环切术患儿 40 例为研究对象,ASA I 级,年龄范围 2~10 岁,采用随机数字表法分为两组,术前 30 min 分别经鼻腔予右美托咪定 1 $\mu\text{g}/\text{kg}$ (实验组)和等容量 0.9% 氯化钠注射液 (对照组)。记录给药前(T0)、滴鼻后 5 min(T1)、滴鼻后 10 min(T2)、滴鼻后 20 min(T3)、滴鼻后 30 min(T4) 患儿心率、血氧饱和度、血压,给药 30 min 后评估患儿镇静评分,观察并记录术后清醒时的躁动评分。**结果** 重复测量方差分析结果显示:组间因素中,SBP($F=14.54, P<0.05$)和 DBP($F=22.69, P<0.05$)差异有统计学意义;组内因素中 SBP($F=13.77, P<0.05$)、DBP($F=10.48, P<0.05$)和 HR($F=5.13, P<0.05$)存在交互作用,差异有统计学意义。与对照组相比,实验组各时间点心率、血压均低于对照组($P<0.05$),镇静评分优于对照组($t=-9.131, P<0.05$),术后躁动评分低于对照组($t=3.387, P<0.05$)。**结论** 右美托咪定术前滴鼻能提供满意的镇静效果,不影响患儿的生命体征,并且显著降低全麻术后躁动的发生。

【关键词】 右美托咪定; 滴鼻; 小儿麻醉; 术前; 包皮环切术

基金项目:四川省成都市卫计委科研项目(150043/2015100)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.002

Application effect of preoperative intranasal dexmedetomidine in pediatric anesthesia

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【Abstract】 **Objective** To observe the clinical effects of preoperative intranasal dexmedetomidine in pediatric anesthesia. **Methods** From April 2014 to April 2017, 40 pediatric patients who accepted elective circumcision, ASA I, aged 2 to 10 years in Wenjiang Branch of Sichan Provincial People's Hospital were divided into two groups, with 20 cases in each group. The test group received intranasal dexmedetomidine 1 $\mu\text{g}/\text{kg}$, and the control group received intranasal equal volume of saline 30 min before surgery. HR, SpO₂, BP were monitored and recorded before intranasal (T0), 5min after intranasal (T1), 10min after intranasal (T2), 20min after intranasal (T3), 30min after intranasal (T4). The sedation score was assessed after 30 min of administration. The restless score was observed after waking. **Results** ANOVA analysis showed that there were significant differences in SBP($F=14.54, P<0.05$) and DBP($F=22.69, P<0.05$) between the two groups, and the SBP($F=13.77, P<0.05$), DBP($F=10.48, P<0.05$), HR($F=5.13, P<0.05$) had interaction effects. Compared with those of the control group, the heart rate and the diastolic pressure of the test group were decreased at T2~T4(all $P<0.05$). The sedation score of the test group was superior than that of the control group($t=-9.131, P<0.05$), and the postoperative agitation score was lower than that of the control group($t=3.387, P<0.05$). **Conclusion** Intranasal dexmedetomidine can provide satisfactory sedative effects without affecting the vital signs of children and significantly reducing the postoperative agitation.

【Key words】 Dexmedetomidine; Intranasal; Pediatric anesthesia; Preoperative; Circumcision

Fund program: Scientific Research Project of Health and Family Planning Commission of Chengdu City, Sichuan Province(150043/2015100)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.002

雾化吸入联合孟鲁斯特治疗小儿感染后咳嗽应用价值评价

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【摘要】 目的 探讨小儿感染后咳嗽采取雾化吸入联合孟鲁司特治疗的临床价值。方法 以台州市肿瘤医院 2015 年 9 月至 2017 年 8 月收治的感染后咳嗽患儿 300 例为研究对象,采用随机数字表法均分为两组。对照组予以孟鲁司特治疗,观察组在此基础上,联合雾化吸入治疗。观察两组临床效果、症状好转时间、不良事件发生情况及家长满意度。**结果** 观察组总有效率为 97.33%,相比如对照组(86.67%)更高($P < 0.05$);观察组咳嗽及咳痰好转时间均优于对照组,分别为(3.02 ± 0.45)d、(2.11 ± 0.71)d($P < 0.05$);观察组不良事件发生率(3.33%),较对照组指标更低($P < 0.05$);观察组家长总满意率为 96.00%,显然高于对照组($P < 0.05$)。**结论** 小儿感染后咳嗽采取雾化吸入与孟鲁司特联合治疗,效果确切,可有效控制病情,缓解咳嗽等症状,且安全性较高,不良反应风险低。

【关键词】 小儿感染后咳嗽; 孟鲁司特; 异丙托溴铵; 布地奈德; 雾化吸入; 不良反应; 满意度

基金项目:浙江省药学会医院药学专项科研资助项目(2014ZY13)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.003

Application value of atomization inhalation combined with montelukast in the treatment of cough after infantile infection

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【Abstract】 Objective To investigate the clinical value of atomization inhalation combined with montelukast in the treatment of infantile cough after infection. **Methods** From September 2015 to August 2017, 300 children with post-infection cough in Taizhou Tumor Hospital were randomly divided into two groups, with 150 cases in each group. The control group was treated with montelukast, and the observation group was given atomization inhalation combined with montelukast. The clinical effect, symptom improvement time, adverse events and parents' satisfaction were observed. **Results** The total effective rate of the observation group was 97.33%, which was higher than 86.67% in the control group($P < 0.05$). The improvement time of cough and expectoration of the observation group [(3.02 ± 0.45)d, (2.11 ± 0.71)d] was better than those of the control group (all $P < 0.05$). The incidence rate of adverse events in the observation group (3.33%) was lower than that in the control group ($P < 0.05$). The total satisfactory rate of parents in the observation group was 96.00%, which was obviously higher than that in the control group ($P < 0.05$). **Conclusion** The effect of atomization inhalation combined with montelukast on children's cough after infection is good, it can effectively control the condition and relieve the symptoms such as cough, and the safety is higher. The risk of adverse reactions is low.

【Key words】 Cough after infantile infection; Montelukast; Isopropyl joe ju ammonium; Budesonide; Atomization inhalation; Side effects; Satisfaction degree

Fund program: Special Research Project of Zhejiang Pharmaceutical Society Hospital Pharmacy(2014ZY13)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.003

腹腔镜下肝门暴露技术在小儿Ⅲ型胆道闭锁治疗中的应用研究

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【摘要】目的 探讨肝门暴露技术在腹腔镜下手术治疗小儿Ⅲ型胆道闭锁中的应用价值。**方法** 选择淮安市妇女儿童医院 2013 年 6 月至 2017 年 10 月收治的Ⅲ型胆道闭锁患儿 30 例为研究对象,患儿均行腹腔镜下肝门肠吻合手术。充分应用肝门暴露技术,悬吊肝圆韧带、胆囊残端组织及胆囊颈部,充分游离肝门纤维块,游离门静脉左右分支及肝左右动脉,用两根弹性牵拉带环绕门静脉左右支及肝左右动脉,牵拉弹性牵拉带暴露肝门,切除肝门纤维块,完成肝门肠吻合手术。其中 20 例肝脏增大明显,行腹腔镜下肝方叶部分切除术。**结果** 该组 30 例患儿中,28 例在腹腔镜下顺利完成肝门肠吻合手术,2 例中转右上腹小切口手术。无手术死亡病例。腹腔镜手术时间 210~280 min。术中出血量少,无术中输血者,无手术相关的特殊并发症。1 例术后 1 周死于肺炎、呼吸衰竭,2 例失去随访。25 例获得 3~51 个月(平均 22.4 个月)随访,3 例分别于术后 10、16、35 个月死于肝功能衰竭。19 例黄疸完全清除。3 例术后黄疸指数明显下降。**结论** 腹腔镜下充分应用肝门暴露技术,可助顺利完成肝门肠吻合术,降低腹腔镜手术中转率,提高手术效果。

【关键词】 腹腔镜检查; 胆道闭锁; 吻合术,外科; 儿童; 肝门

基金项目:江苏省妇幼健康科研项目(F201713);江苏省淮安市科技计划项目(HAS201615)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.004

Application of laparoscopic hepatic portal exposure in children with type III biliary atresia

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【Abstract】 Objective To explore the clinical value of portal exposure in laparoscopic treatment of children with type III biliary atresia (BA). **Methods** From June 2013 to October 2017, 30 infants with type III BA who treated with laparoscopic portoenterostomy in Huai'an Women and Children's Hospital were selected. A percutaneous suture was used to snare the round ligament and retract the liver, other percutaneous stay sutures were then introduced and fundus and neck of gallbladder were sutured to elevate the liver to expose the portal hepatis. The fibro cord and hepatic vessels were mobilized, and then two rubber bands were put around the left and right portal veins and hepatic arteries. The portal hepatis was exposed by laterally stretching the two elastic rubber bands. The fibro cord was removed and then laparoscopic portoenterostomy was accomplished. In 20 cases, the liver was enlarged, part of hepatic lobus quadratus was removed laparoscopically for exposure of the portal hepatis. **Results** There were 30 cases in this group, 2 cases were converted to open surgery by a micro transverse incision. There was no surgical death. Time of laparoscopic procedure varied from 210 to 280 min. All cases survived the surgery without any intraoperative complications. Blood loss during operation was minimal, without necessity for blood transfusion. One case died of respiratory failure one week after surgery. Two cases were lost follow-up. Twenty-five cases were followed up for 3~51 months (mean 22.4 months). Three cases died because of repeated cholangitis and liver failure at 10, 16, 35 months postoperatively. Nineteen patients' total bilirubin had dropped to normal, three others' bilirubin levels dropped significantly after surgery. **Conclusion** The technique of laparoscopic hepatic porta exposure can help to complete hepatic portoenterostomy successfully, reduce the conversion rate of laparoscopic surgery, and improve the surgical effect.

【Key words】 Laparoscopy; Biliary atresia; Anastomosis, surgical; Child; Porta

Fund program: Maternal and Child Health Scientific Research Project of Jiangsu Province (F201713); Science and Technology Planning Project of Huai'an City, Jiangsu Province (HAS201615)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.004

3.0T 核磁共振磁敏感加权成像在新生儿缺氧缺血性脑病诊断中的价值分析

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【摘要】 目的 探究 3.0T 核磁共振磁敏感加权成像诊断新生儿缺氧缺血性脑病的效果,为临床提供指导。**方法** 以 2015 年 12 月 10 日至 2017 年 12 月 10 日丽水市人民医院诊治的新生儿缺氧缺血性脑病患者 100 例(观察组)及同期该院接受健康检查的健康新生儿 100 例(对照组)为研究对象,对所有研究对象实施 3.0T 核磁共振磁敏感加权成像检查,研究 3.0T 核磁共振磁敏感加权成像的诊断价值。**结果** 观察组新生儿 ADC 值 $[(0.001\ 13 \pm 0.000\ 01)\text{mm}^2/\text{s}]$ 相比对照组 $[(0.001\ 98 \pm 0.000\ 02)\text{mm}^2/\text{s}]$ 明显更低, $P < 0.05$;轻度组新生儿 ADC 值 $[(0.001\ 21 \pm 0.000\ 01)\text{mm}^2/\text{s}]$ 相比中度组 $[(0.001\ 12 \pm 0.000\ 02)\text{mm}^2/\text{s}]$ 、重度组 $[(0.001\ 02 \pm 0.000\ 03)\text{mm}^2/\text{s}]$ 明显更高($P < 0.05$);ADC 值的表达水平与新生儿缺氧缺血性脑病呈正相关,即 ADC 值越低,新生儿缺氧缺血性脑病越严重,观察组新生儿分数各向异性值、相对各向异性值相比对照组均明显更高(均 $P < 0.05$)。**结论** 对新生儿缺氧缺血性脑病患者实施 3.0T 核磁共振磁敏感加权成像诊断切实可行,有助于临床医师分析患儿病情,对开展治疗工作具有较积极的意义。

【关键词】 3.0T 核磁共振; 磁敏感加权成像; 缺氧缺血性脑病; 新生儿; 诊断

基金项目:浙江省丽水市科技计划项目(2014ZC001)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.005

Clinical value of 3.0T magnetic resonance magnetic sensitive weighted imaging in the diagnosis of neonatal hypoxic ischemic encephalopathy

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【Abstract】 Objective To explore the clinical value of 3.0T nuclear magnetic resonance susceptibility weighted imaging in diagnosis of neonatal hypoxic ischemic encephalopathy, thus to provide guidance for the clinical.

Methods From December 10, 2015 to December 10, 2017, 100 cases of neonatal hypoxic ischemic encephalopathy (observation group) and 100 cases of normal newborns in Lishui People's Hospital during the same period accepted health examination (control group) were selected in the research. All the cases received 3.0T magnetic resonance susceptibility weighted imaging, the diagnostic value of 3.0T MR susceptibility weighted imaging was observed.

Results The ADC value of the observation group $[(0.001\ 13 \pm 0.000\ 01)\text{mm}^2/\text{s}]$ was significantly lower than that in the control group $[(0.001\ 98 \pm 0.000\ 02)\text{mm}^2/\text{s}]$ ($P < 0.05$). The neonatal ADC value of the mild group $[(0.001\ 21 \pm 0.000\ 01)\text{mm}^2/\text{s}]$ was significantly higher than that in the moderate group $[(0.001\ 12 \pm 0.000\ 02)\text{mm}^2/\text{s}]$ and the severe group $[(0.001\ 02 \pm 0.000\ 03)\text{mm}^2/\text{s}]$ ($P < 0.05$). ADC value was positively correlated with neonatal hypoxic ischemic encephalopathy, namely, the lower the ADC value, the more serious the neonatal hypoxic ischemic encephalopathy. The fractional anisotropy value and relative anisotropy value of newborn babies in the observation group were significantly higher than those in the control group (all $P < 0.05$). **Conclusion** For neonatal hypoxic ischemic encephalopathy patients, 3.0T nuclear magnetic resonance susceptibility weighted imaging in the diagnosis is feasible, it can help the clinician to analyze the disease, and has positive significance to carry out the treatment.

【Key words】 3.0T MRI; Magnetic sensitive weighted imaging; Hypoxic ischemic encephalopathy; Newborn; Diagnosis

Fund program: Lishui City Science and Technology Project(2014ZC001)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.005

频繁发作性儿童良性发作性眩晕临床分析

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【摘要】 **目的** 探讨频繁发作性儿童良性发作性眩晕的临床特点,进一步提高诊治水平。**方法** 回顾性分析厦门大学附属第一医院耳鼻咽喉头颈外科频繁发作性儿童良性发作性眩晕 25 例的临床资料,所有病例均采用偏头痛治疗方案。**结果** 阿斯匹林联合普奈洛尔治疗效果最佳,起效快,治疗周期短,副作用最小。**结论** 阿斯匹林及普奈洛尔是治疗偏头痛常用药物,能有效治疗频繁发作性儿童良性发作性眩晕,且经济实用,利于基层推广。同时也证实儿童良性发作性眩晕与偏头痛的同源性。

【关键词】 儿童良性发作性眩晕; 偏头痛; 阿斯匹林; 普奈洛尔; 疗效

DOI:10.3760/cma.j.issn.1008-6706.2019.03.006

Clinical analysis of benign paroxysmal vertigo of childhood with frequent episodes

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【Abstract】 **Objective** To discuss the clinical characteristics of benign paroxysmal vertigo of childhood (BPVC) with frequent episodes, in order to further improve the level of diagnosis and treatment. **Methods** The clinical data of 25 cases with frequent episodes of BPVC were analyzed retrospectively. All cases were treated with regimen for migraine. **Results** Aspirin combined with propranolol had the best effect, quick effect, short period of treatment and minimal side effect. **Conclusion** Aspirin and propranolol are commonly used drugs in the treatment of migraine, which can effectively treat frequent episodes of BPVC, and is economical and practical, and it is conducive to promotion at the grass-roots level. It also confirms the homology of children with benign paroxysmal vertigo and migraine.

【Key words】 Benign paroxysmal vertigo of childhood; Migraine; Aspirin; Propranolol; Treatment effect

DOI:10.3760/cma.j.issn.1008-6706.2019.03.006

陕西省神木市 2016 年秋冬季节儿童血清 25 羟维生素 D 水平分析

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【摘要】 目的 了解陕西省神木市秋冬季节儿童血清 25 羟维生素 D 水平,为该地区佝偻病防治提供理论依据。**方法** 选取 2016 年 6-12 月神木市 2016 年秋冬季节儿童保健门诊体检儿童共 277 例。取清晨空腹血,采用酶联免疫法检测其血清 25 羟维生素 D 水平。**结果** 277 例中男性 181 例,女性 96 例;婴儿 163 例(58.8%),幼儿 75 例(27.1%),学龄前 24 例(8.7%)及学龄 15 例(5.4%),男 181 例,女 96 例。血清 25 羟维生素 D 的中位数(四分位数间距)为 33.21(14.93)nmol/L;其中重度维生素 D 缺乏 4.3%,中度维生素 D 缺乏 15.9%,轻度维生素 D 缺乏 57.0%,维生素 D 不足 7.9%,维生素 D 适宜 11.9%,维生素 D 过量 2.9%。不同年龄组 25 羟维生素 D 水平差异无统计学意义($H=10.133, P>0.05$),各年龄组 25 羟维生素 D 水平男女性别差异无统计学意义($Z=0.712, 1.094, 0.476, 0.000$,均 $P>0.05$)。秋季体检儿童的血清 25 羟维生素 D 水平高于冬季体检儿童(75.96% 比 90.75%, $\chi^2=11.27, P<0.05$)。**结论** 神木市儿童血清 25 羟维生素 D 缺乏或不足普遍存在,冬季明显增多;应该加强户外活动,及时补充维生素 D 预防佝偻病的发生。

【关键词】 佝偻病; 25-羟维生素 D2; 儿童; 秋冬季节

基金项目:陕西省神木市科技计划项目(【2016】16)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.007

Analysis of the levels of serum 25-hydroxy vitamin D in autumn and winter among children of Shenmu city, Shaanxi province

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【Abstract】 Objective To investigate the levels of serum 25-hydroxy vitamin D in autumn and winter among children of Shenmu city, Shaanxi province, and to provide theoretical basis for prevention and treatment of rickets in this area. **Methods** From June 2016 to December 2016, a total of 277 children in the children's health clinic were selected. The morning fasting blood was extracted and serum levels of 25-hydroxy vitamin D were measured by enzyme-linked immunosorbent assay (ELISA). **Results** Among the 277 cases, there were 181 males and 96 females, including 163 infants (58.8%), 75 toddlers (27.1%), 24 preschool children (8.7%) and 15 school-going children (5.4%). The median (interquartile range) of serum 25-hydroxyl vitamin D was 33.21 (14.93) nmol/L. Among all children, 4.3% had severe vitamin D deficiency, 15.9% had moderate deficiency, 57.0% had mild deficiency, 7.9% had insufficient vitamin D levels, 11.9% had suitable vitamin D levels, while 2.9% had excess of vitamin D. There was no statistically significant difference in the level of 25-hydroxyl vitamin D between different age groups ($H=10.133, P>0.05$), and different gender groups ($Z=0.712, 1.094, 0.476, 0.000$, all $P>0.05$). The levels of serum 25-hydroxyl vitamin D in serum extracted in autumn were higher than those extracted in winter (75.96% vs. 90.75%, $\chi^2=11.27, P<0.05$). **Conclusion** There is significant deficiency of serum 25-hydroxyl vitamin D in Shenmu children, which significantly increased in winter. The outdoor activities should be strengthened and the vitamin D should be timely supplemented to prevent the occurrence of rickets.

【Key words】 Rickets; 25-Hydroxyvitamin D 2; Child; Autumn and winter

Fund program: Science and Technology Planning Project of Shenmu City, Shaanxi Province (【2016】16)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.007

孟鲁司特联合布地奈德治疗小儿咳嗽变异性哮喘疗效观察

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【摘要】 目的 探究孟鲁司特联合布地奈德治疗小儿咳嗽变异性哮喘的疗效,为临床提供指导。**方法** 选择 2015 年 3 月至 2017 年 3 月阳谷县人民医院 90 例小儿咳嗽变异性哮喘患儿作为研究对象,采用随机数字表法将 90 例患儿分为观察组(45 例,应用孟鲁司特联合布地奈德治疗)、对照组(45 例,应用布地奈德联合硫酸沙丁胺醇治疗)。均随访 3 个月,研究对比观察组和对照组患儿的疗效、咳嗽缓解时间、咳嗽消失时间、不良反应发生率及复发率。**结果** 观察组患儿总有效率(95.56%)相比对照组(77.78%)明显更高($P < 0.05$);观察组患儿咳嗽缓解时间 $[(7.79 \pm 3.23) \text{d}]$ 、咳嗽消失时间 $[(10.78 \pm 2.36) \text{d}]$ 相比对照组 $[(9.16 \pm 2.23) \text{d}]$ 、 $[(12.24 \pm 2.78) \text{d}]$ 明显更短($P < 0.05$);观察组患儿不良反应发生率(2.22%)和对照组(6.67%)差异无统计学意义($P > 0.05$),但观察组患儿复发率(4.44%)相比对照组(17.78%)明显更低($P < 0.05$)。**结论** 孟鲁司特联合布地奈德治疗小儿咳嗽变异性哮喘切实可行,有助于减少复发。

【关键词】 孟鲁司特; 布地奈德; 小儿; 哮喘,变异性; 硫酸沙丁胺醇

基金项目:山东省医药科技发展计划项目(2016WSA16003)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.008

Clinical effect of montelukast combined with budesonide in the treatment of children with cough variant asthma

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【Abstract】 Objective To explore the curative effect of montelukast combined with budesonide in the treatment of cough variant asthma in children, to provide guidance for clinical practice. **Methods** From March 2015 to March 2017, 90 children with cough variant asthma in the People's Hospital of Yanggu County were randomly divided into observation group ($n = 45$) and control group ($n = 45$) according to the digital table. The observation group was given budesonide combined with montelukast, while the control group was given budesonide combined with salbutamol sulfate. All patients were followed up for 3 months. The curative effect, cough relief time, cough disappearance time, incidence rate of adverse reaction and recurrence rate were compared between the two groups. **Results** The total effective rate of the observation group (95.56%) was significantly higher than 77.78% of the control group ($P < 0.05$). The cough relief time $[(7.79 \pm 3.23) \text{d}]$ and the cough disappearance time $[(10.78 \pm 2.36) \text{d}]$ in the observation group were significantly shorter than those in the control group $[(9.16 \pm 2.23) \text{d}]$, $[(12.24 \pm 2.78) \text{d}]$ (all $P < 0.05$). The incidence rate of adverse reactions of the observation group was 2.22%, which of the control group was 6.67%, there was no statistically significant difference between the two groups ($P > 0.05$). The recurrence rate of the observation group (4.44%) was significantly lower than 17.78% of the control group ($P < 0.05$). **Conclusion** It is feasible to treat cough variant asthma in children with montelukast combined with budesonide, and it is helpful to reduce recurrence.

【Key words】 Montelukast; Budesonide; Children; Asthma, Variability; Salbutamol Sulfate

Fund program: Medical Science and Technology Development Planning Project of Shandong Province (2016WSA16003)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.008

小儿豉翘清热颗粒治疗急性上呼吸道感染的临床疗效观察

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【摘要】 目的 探讨小儿豉翘清热颗粒治疗急性上呼吸道感染的临床疗效及安全性。**方法** 选取台州市中西医结合医院自 2017 年 1-12 月收治的 116 例罹患上呼吸道感染的患儿,根据治疗方案不同均分为对照组和观察组,对照组给予利巴韦林颗粒、布洛芬混悬滴剂进行治疗,观察组在此基础上加用小兒豉翘清热颗粒,两组均连续治疗 5 d,考察并比较两组的临床疗效、临床症状改善情况、治愈时间、血清细胞因子水平及不良反应发生率等。**结果** 经治疗后,观察组痊愈率 96.6% 与对照组痊愈率 81.0% 比较,差异有统计学意义 ($P < 0.05$);观察组的退热时间、咳嗽消退时间、痊愈时间分别为 (1.4 ± 0.5) d、 (2.1 ± 0.4) d、 (4.5 ± 1.4) d、对照组分别为 (2.6 ± 0.9) d、 (3.4 ± 1.1) d、 (5.8 ± 1.9) d,两组比较,差异均有统计学意义 ($P < 0.05$),观察组咽部红肿消退时间为 (3.5 ± 1.1) d,对照组为 (3.8 ± 1.3) d,两组比较,差异无统计学意义 ($P > 0.05$);观察组血清细胞因子 IL-6、IL-10 和 TNF- α 水平分别为 (108.45 ± 25.61) $\mu\text{g/L}$ 、 (34.88 ± 9.07) $\mu\text{g/L}$ 、 (1.26 ± 0.86) mg/mL,对照组分别为 (129.27 ± 28.31) $\mu\text{g/L}$ 、 (43.27 ± 10.09) $\mu\text{g/L}$ 、 (2.11 ± 1.03) mg/mL,两组比较差异均有统计学意义 ($P < 0.05$);两组均未出现其它严重的不良反应。**结论** 小儿豉翘清热颗粒用于治疗急性上呼吸道感染,可显著改善临床症状,增强临床疗效,且安全性较好,有一定的临床借鉴价值。

【关键词】 上呼吸道感染; 小儿豉翘清热颗粒; 利巴韦林; 布洛芬; 不良反应

DOI:10.3760/cma.j.issn.1008-6706.2019.03.009

Clinical efficacy of Xiao'er Chiqiaoqingre granule in the treatment of acute upper respiratory tract infection

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【Abstract】 Objective To investigate the clinical efficacy and safety of Xiao'er Chiqiaoqingre granule in the treatment of acute upper respiratory tract infection. **Methods** From January 2017 to December 2017, a total of 116 children with upper respiratory tract infection in Taizhou Integrated Traditional Chinese and Western Medicine Hospital were selected and randomly divided into control group and observation group according to different treatment regimens, with 58 cases in each group. The control group was given ribavirin granules, ibuprofen suspension drops for treatment. The observation group was given Xiao'er Chiqiaoqingre granule on the basis of the control group. The two groups were treated for 5 days, then the clinical effect, the improvement of clinical symptoms, the time of cure, the level of serum cytokines and safety were compared between the two groups. **Results** After treatment, the cure rate of the observation group was 96.6%, which was significantly higher than 81.0% of the control group ($P < 0.05$). The antipyretic time, cough disappeared time, healing time in the observation group were (1.4 ± 0.5) d, (2.1 ± 0.4) d, (4.5 ± 1.4) d, respectively, which were significantly shorter than those in the control group [(2.6 ± 0.9) d, (3.4 ± 1.1) d, (5.8 ± 1.9) d] (all $P < 0.05$). The throat irritation subsided time of the observation group was (3.5 ± 1.1) d, which of the control group was (3.8 ± 1.3) d, the difference was not statistically significant ($P > 0.05$). The serum levels of IL-6, IL-10 and TNF- α in the observation group were (108.45 ± 25.61) $\mu\text{g/L}$, (34.88 ± 9.07) $\mu\text{g/L}$, (1.26 ± 0.86) mg/mL, respectively, which were significantly lower than those in the control group [(129.27 ± 28.31) $\mu\text{g/L}$, (43.27 ± 10.09) $\mu\text{g/L}$, (2.11 ± 1.03) mg/mL] (all $P < 0.05$). There were no other serious adverse reactions in the two groups. **Conclusion** Xiao'er Chiqiaoqingre granule in the treatment of acute upper respiratory tract infection can significantly improve clinical symptoms, improve clinical curative effect, and has good safety and certain clinical value.

【Key words】 Acute upper respiratory tract infection; Xiao'er chiqiaoqingre granule; Ribavirin; Ibuprofen; Adverse reactions

DOI:10.3760/cma.j.issn.1008-6706.2019.03.009

换血治疗对新生儿胆红素脑病患儿的并发症及预后的影响

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【摘要】 **目的** 研究换血治疗对新生儿胆红素脑病患儿的并发症及预后的影响。**方法** 选取肥城市人民医院 2013 年 6 月至 2016 年 6 月收治的胆红素脑病患儿的 76 例为观察对象,根据是否接受换血治疗分为研究组($n=41$)和对照组($n=35$),检测并比较两组总胆红素(TBIL)、间接胆红素(IBIL)、结合胆红素(DBIL)水平及血总胆红素与血浆白蛋白比值(B/A),记录两组并发症、预后情况。**结果** 研究组换血后 TBIL、IBIL、DBIL 及 B/A 比值分别为(209.49 ± 48.82) $\mu\text{mol/L}$ 、(201.81 ± 39.62) $\mu\text{mol/L}$ 、(21.92 ± 19.47) $\mu\text{mol/L}$ 及(5.15 ± 1.89),均明显低于换血前的(492.35 ± 42.41) $\mu\text{mol/L}$ 、(439.44 ± 52.56) $\mu\text{mol/L}$ 、(69.38 ± 21.56) $\mu\text{mol/L}$ 及(13.28 ± 0.40) ($t=28.007, 23.117, 10.461, 26.947$, 均 $P < 0.05$);研究组贫血、窦性心动过缓以及电解质紊乱发生率分别为 48.78%、48.78%、60.98%,明显高于对照组的 17.14%、14.29%、14.29% ($\chi^2=8.397, 10.178, 17.228$, 均 $P < 0.05$);研究组死亡、听力损害、脑损害发生率分别为 7.32%、70.73%、12.20%,对照组分别为 11.43%、71.43% 和 14.29%,两组差异均无统计学意义($\chi^2=0.382, 0.004, 0.072$, 均 $P > 0.05$)。**结论** 换血治疗新生儿胆红素脑病能显著降低胆红素水平和 B/A 比值,但会增加贫血、窦性心动过缓以及电解质紊乱的发生率,对预后无显著影响。

【关键词】 血液成分输血; 婴儿,新生; 核黄疸; 胆红素; 并发症; 预后

DOI:10.3760/cma.j.issn.1008-6706.2019.03.010

Effect of exchange transfusion therapy on complications and prognosis in newborns with bilirubin encephalopathy

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【Abstract】 **Objective** To study the influence of exchange transfusion therapy on the complications and prognosis in newborns with bilirubin encephalopathy. **Methods** From June 2013 to June 2016, 76 children with bilirubin encephalopathy in Feicheng People's Hospital were selected and divided into study group($n=41$) and control group($n=35$) according to whether or not accepted the exchange transfusion treatment. The levels of total bilirubin (TBIL), indirect bilirubin (IBIL), direct bilirubin (DBIL) and the ratio of total bilirubin to plasma albumin (B/A) were detected and compared between the two groups. The complications and prognosis of the two groups were recorded. **Results** After exchange transfusion, the TBIL, IBIL, DBIL and B/A values in the study group were (209.49 ± 48.82) $\mu\text{mol/L}$, (201.81 ± 39.62) $\mu\text{mol/L}$, (21.92 ± 19.47) $\mu\text{mol/L}$ and (5.15 ± 1.89), respectively, which were significantly lower than those before exchange transfusion [(492.35 ± 42.41) $\mu\text{mol/L}$, (439.44 ± 52.56) $\mu\text{mol/L}$, (69.38 ± 21.56) $\mu\text{mol/L}$ and (13.28 ± 0.40)] ($t=28.007, 23.117, 10.461, 26.947$, all $P < 0.05$). The incidence rates of anemia, sinus bradycardia and electrolyte disturbances in the study group were 48.78%, 48.78%, 60.98%, respectively, which were significantly higher than those in the control group (17.14%, 14.29%, 14.29%) ($\chi^2=8.397, 10.178, 17.228$, all $P < 0.05$). The incidence rates of death, hearing impairment and brain damage in the study group were 7.32%, 70.73% and 12.20%, respectively, which in the control group were 11.43%, 71.43% and 14.29%, respectively, there were no statistically significant differences between the two groups ($\chi^2=0.382, 0.004, 0.072$, all $P > 0.05$). **Conclusion** Exchange transfusion can significantly reduce the levels of bilirubin and B/A in the treatment of newborns with bilirubin encephalopathy, but it can increase the incidence rate of anemia, sinus bradycardia and electrolyte disturbances, which has no significant influence on the prognosis of patients.

【Key words】 Blood component transfusion; Infant, newborn; Kernicterus; Bilirubin; Complication; Prognosis

DOI:10.3760/cma.j.issn.1008-6706.2019.03.010

C-反应蛋白联合凝血功能检测对于新生儿晚发型败血症诊断价值探讨

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【摘要】 目的 探讨 C-反应蛋白(C-reactive protein, CRP)联合凝血酶原时间(Prothrombin time, PT)、活化部分凝血酶时间(Activated partial thromboplastin time, APTT)对于新生儿晚发型败血症的诊断价值。**方法** 收集 2013 年 1 月至 2018 年 1 月丽水市妇幼保健院新生儿科收治的 100 例败血症患儿作为研究对象,根据血培养的结果,将血培养阳性患儿归为败血症 A 组(53 例),血培养阴性患儿归为败血症 B 组(47 例),另选取同期出生的 50 例正常新生儿归入对照组。检测并比较 3 组受试对象 CRP、PT 和 APTT 值;绘制受试者工作曲线(receiver-operating characteristic curves, ROC),计算各检测指标 ROC 曲线下面积(area under ROC curve, AUC)以及灵敏度、特异度、阳性预测值和阴性预测值,用二项分类 Logistic 回归法建立新的变量 CPR + PT + APTT,继续绘制 ROC 曲线,计算新变量的 AUC、灵敏度、特异度、阳性预测值和阴性预测值。**结果** 对照组、败血症 A 组、败血症 B 组的 CPR、PT 和 APTT 实验室检测结果均依次升高($F = 10.616, 6.155, 5.243, P = 0.000, 0.000, 0.000$),差异具有统计学意义。4 项指标中, CPR + PT + APTT 的 AUC 最高(0.94),灵敏度最高(93.42%),特异度最高(91.66%),阳性预测值最高(92.60%),阴性预测值最大(78.55%)。**结论** 在血培养未能及时诊断新生儿晚发型败血症的情况下,联合检测 CPR + PT + APTT,可以为其早期诊断提供某些线索,值得临床关注。

【关键词】 败血症,晚发型; C-反应蛋白; 凝血酶原时间; 活化部分凝血酶时间; 新生儿; 灵敏度; 特异度; 阳性预测值; 阴性预测值

DOI:10.3760/cma.j.issn.1008-6706.2019.03.011

Clinical value of C-reactive protein combined with coagulation test in the diagnosis of neonatal late-onset sepsis

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【Abstract】 Objective To investigate the clinical value of C-reactive protein (CRP) combined with prothrombin time (PT) and partially activated thromboplastin time (APTT) in the diagnosis of neonatal late-onset sepsis. **Methods** From January 2013 to January 2018, 100 neonates with sepsis admitted to our department of neonatology in Lishui Maternal and Child Health - Care Center were collected. According to the results of blood culture, neonates with positive blood culture were classified as sepsis group A (53 cases), and neonates with negative blood culture were classified as sepsis group B (47 cases). Another 50 normal newborns born at the same period were included in the control group. The CRP, PT and APTT values of the three groups were detected and compared. The receiver-operating characteristic curves (ROC) were plotted to obtain the area under ROC curve (AUC) and the sensitivity, specificity, positive predictive value and negative predictive value. Another ROC curve was plotted to obtain the area under ROC curve (AUC) and the sensitivity, specificity, positive predictive value, and negative predictive value for a new variable, CPR + PT + APTT, which was established using a binomial logistic regression method. **Results** The results of CPR, PT and APTT in the control group, sepsis group A and sepsis group B all increased in turn ($F = 10.616, 6.155, 5.243, P = 0.000, 0.000, 0.000$). CPR + PT + APTT had the largest AUC (0.94), the highest sensitivity (93.42%), the highest specificity (91.66%), the highest positive predictive value (92.60%), and the highest negative predictive value (78.55%) in the four indicators. **Conclusion** When blood culture fails to diagnose late-onset neonatal sepsis, combined detection of CPR + PT + APTT can provide some clues for its early diagnosis, which is worthy of clinical attention.

【Key words】 Sepsis, late-onset; C-reactive protein; Prothrombin time; Activated partial thrombin time; Neonatal; Sensitivity; Specificity; Positive predictive value; Negative predictive value

DOI:10.3760/cma.j.issn.1008-6706.2019.03.011

布地奈德联合硫酸特布他林雾化吸入对支气管哮喘患儿血清趋化素样因子-1、环氧化酶 2 水平变化的影响

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【摘要】 目的 探讨布地奈德联合硫酸特布他林雾化吸入对支气管哮喘患儿血清环氧化酶 2 (COX-2) 及趋化素样因子-1 (CKLF-1) 水平变化的影响。**方法** 选取杭州市儿童医院 2016 年 4 月至 2017 年 8 月收治的支气管哮喘患儿 78 例,采用随机数字表法分为对照组 ($n = 39$) 与研究组 ($n = 39$)。对照组采取常规治疗,研究组于对照组基础上加用布地奈德 + 硫酸特布他林,均治疗 7 d。疗程结束后统计两组临床疗效、临床症状改善及住院用时、治疗前后血清 COX-2 及 CKLF-1 水平、不良反应发生率。**结果** 研究组总有效率 (94.87%) 高于对照组 (74.36%) ($\chi^2 = 6.303, P < 0.05$); 研究组胸闷、喘息及咳嗽改善用时、住院时间短于对照组 ($t_1 = 13.054, t_2 = 7.365, t_3 = 4.944, t_4 = 8.342, P < 0.05$); 治疗前两组血清 COX-2 及 CKLF-1 水平差异无统计学意义 ($P > 0.05$), 疗程结束后两组血清 COX-2 及 CKLF-1 水平较治疗前降低,且研究组低于对照组 ($t_1 = 4.934, t_2 = 4.660, P < 0.05$); 研究组不良反应发生率 (12.82%) 与对照组 (7.69%) 相比差异无统计学意义 ($\chi^2 = 0.139, P > 0.05$)。**结论** 联合采取布地奈德及硫酸特布他林雾化吸入治疗支气管哮喘患儿,可有效缓解其临床症状,并降低血清 COX-2 及 CKLF-1 水平,提高治疗效果,促使患儿及早康复出院,且不良反应发生率较低,具有安全性。

【关键词】 布地奈德; 硫酸特布他林; 哮喘; 趋化素样因子-1; 环氧化酶 2; 雾化吸入; 治疗效果
DOI:10.3760/cma.j.issn.1008-6706.2019.03.012

Effect of atomization inhalation of budesonide and terbutaline sulfate on serum levels of chemokine like factor -1 and cyclooxygenase 2 in children with bronchial asthma

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【Abstract】 Objective To investigate the effect of atomization inhalation of budesonide and terbutaline sulfate on serum levels of cyclooxygenase 2 (COX - 2) and chemokine like factor - 1 (CKLF - 1) in children with bronchial asthma. **Methods** A total of 78 children with bronchial asthma in Hangzhou Children's Hospital from April 2016 to August 2017 were selected and divided into the control group ($n = 39$) and the study group ($n = 39$). The control group was treated with routine treatment, and the study group was treated with budesonide and terbutaline sulfate on the basis of the control group. The treatment was continued for 7 d. After treatment, the clinical effects, clinical symptoms improvement, hospitalization time, the serum levels of COX - 2 and CKLF - 1 before and after treatment, and the incidence of adverse reaction of two groups were observed. **Results** The total effective rate of the study group (94.87%) was higher than that of the control group (74.36%) ($\chi^2 = 6.303, P < 0.05$). The improvement time of chest tightness, wheezing, cough and hospitalization time of the study group were shorter than those of the control group ($t_1 = 13.054, t_2 = 7.365, t_3 = 4.944, t_4 = 8.342, all P < 0.05$). After treatment, the levels of serum COX - 2 and CKLF - 1 in the two groups were lower than those before treatment, which of the study group were lower than those in the control group ($t_1 = 4.934, t_2 = 4.660, all P < 0.05$). There was statistically significant difference in the incidence rate of adverse reactions between the study group (12.82%) and the control group (7.69%) ($\chi^2 = 0.139, P > 0.05$). **Conclusion** Atomization inhalation of budesonide and terbutaline sulfate in the treatment of children with bronchial asthma can effectively alleviate the clinical symptoms, reduce serum levels of COX - 2 and CKLF - 1, improve therapeutic effect, promote children's recovery and shorten the hospitalization time. Besides, the incidence rate of adverse reactions is low, and it is safe.

【Key words】 Budesonide; Terbutaline sulfate; Asthma; Chemokine like factor-1; Cyclooxygenase 2; Atomization inhalation; Treatment effect

DOI:10.3760/cma.j.issn.1008-6706.2019.03.012

腹痛伴或不伴肠系膜淋巴结肿大患儿肠道血流动力学变化

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【摘要】 目的 分析腹痛伴或不伴肠系膜淋巴结肿大患儿肠道血流动力学变化。方法 选取运城市中心医院 2016 年 6 月至 2017 年 12 月收治的腹痛伴肠系膜淋巴结肿大患儿 48 例为研究组,腹痛不伴肠系膜淋巴结肿大患儿 49 例为对照组,并通过彩色多普勒超声检测对比两组患儿肠系膜上动脉(SMA)的舒张末期流速、收缩期峰值流速、阻力指数。**结果** 研究组患儿的 SMA 的舒张末期流速 $[(16.46 \pm 5.14) \text{ cm/s}]$ 、收缩期峰值流速 $[(94.89 \pm 20.15) \text{ cm/s}]$ 均显著低于对照组 $[(20.23 \pm 6.09) \text{ cm/s}]$ 、 $[(106.98 \pm 19.32) \text{ cm/s}]$ ($t = 3.28, 3.00$, 均 $P < 0.01$)。两组患儿的 SMA 阻力指数 $[(0.82 \pm 0.05)$ 比 $(0.81 \pm 0.04)]$ 差异无统计学意义 ($t = 1.08, P > 0.05$)。**结论** 腹痛伴肠系膜淋巴结肿大患儿的 SMA 的舒张末期流速、收缩期峰值流速均显著低于腹痛不伴肠系膜淋巴结肿大患儿,由此可见 SMA 的舒张末期流速、收缩期峰值流速可有效反应出患儿肠道血流动力学变化,为诊断小儿肠系膜淋巴结肿大提供可靠的依据。

【关键词】 肠系膜淋巴结肿大; 腹痛; 多普勒超声; 血流动力学; 肠系膜上动脉

DOI:10.3760/cma.j.issn.1008-6706.2019.03.013

Changes of intestinal hemodynamics in children with abdominal pain accompanied with or without mesenteric lymph node enlargement

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【Abstract】 Objective To analyze the changes of intestinal hemodynamics in children with abdominal pain accompanied with or without mesenteric lymph node enlargement. **Methods** From June 2016 to December 2017, in Yuncheng Central Hospital, 48 children with abdominal pain and mesenteric lymph node enlargement were randomly selected as the study group, and 49 children with abdominal pain and no mesenteric lymph node swelling were selected as the control group. The end diastolic flow rate, peak systolic flow velocity and resistance index of the SMA were compared by color Doppler ultrasound. **Results** The end diastolic velocity $[(16.46 \pm 5.14) \text{ cm/s}]$ and peak systolic velocity $[(94.89 \pm 20.15) \text{ cm/s}]$ of SMA in the study group were significantly lower than those in the control group $[(20.23 \pm 6.09) \text{ cm/s}, (106.98 \pm 19.32) \text{ cm/s}]$ ($t = 3.2, 3.00$, both $P < 0.01$). There was no statistically significant difference in the SMA resistance index between the two groups $[(0.82 \pm 0.05)$ vs. $(0.81 \pm 0.04)]$ ($t = 1.08, P > 0.05$). **Conclusion** The end diastolic flow rate and peak systolic flow velocity of SMA in children with abdominal pain and mesenteric lymphadenopathy are significantly lower than those with abdominal pain and no mesenteric lymph node enlargement. This shows that the end diastolic flow rate and peak systolic flow velocity of SMA can effectively reflect the changes in the intestinal flow mechanics of the children, which can be used to diagnose the mesenteric drenching in children. It provides a reliable basis for the enlargement of the knot.

【Key words】 Mesenteric lymph node enlargement; Abdominal pain; Doppler ultrasound; Hemodynamics; Superior mesenteric artery

DOI:10.3760/cma.j.issn.1008-6706.2019.03.013

布洛芬预防早产儿颅内出血的临床效果及对氨基末端脑钠肽前体、血浆内皮素水平影响

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【摘要】 目的 探讨应用布洛芬预防早产儿颅内出血的临床效果及对氨基末端脑钠肽前体(NT-proBNP)、血浆内皮素(ET-1)水平影响。**方法** 选取 2016 年 1 月至 2017 年 12 月浙江省台州医院经纳入及排除标准筛选后早产儿 112 例为研究对象。采用随机数字表法分为观察组和对照组,每组 56 例。对照组进行常规治疗,观察组在此基础上给予布洛芬进行预防治疗,比较两组患儿颅内出血发生率、临床指标及血清 NT-proBNP、ET-1 水平。**结果** 观察组患儿发生颅内出血 10 例(17.86%),对照组患儿发生颅内出血 17 例(30.36%),两组颅内出血发生率差异有统计学意义($\chi^2 = 12.472, P < 0.05$)。与对照组比较,观察组患儿血清 NT-proBNP、ET-1 水平明显下降,差异有统计学意义($P < 0.05$)。两组患儿肝功能、肾功能、凝血异常及少尿比较,差异无统计学意义($P > 0.05$)。两组患儿的需氧时间和恢复出生体质量时间,差异有统计学意义($P < 0.05$);两组患儿喂养不耐受及胃出血发生率差异无统计学意义($P > 0.05$)。**结论** 应用布洛芬混悬液能够有效预防早产儿颅内出血,且安全性较高,无明显毒副作用,值得临床使用。

【关键词】 早产儿; 颅内出血; 布洛芬; 氨基末端脑钠肽前体; 血浆内皮素

DOI:10.3760/cma.j.issn.1008-6706.2019.03.014

Clinical effect of ibuprofen on preventing intracranial hemorrhage in premature infants and its influence on NT - proBNP and ET - 1 level

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【Abstract】 Objective To investigate the clinical effect of ibuprofen on preventing intracranial hemorrhage in premature infants and its influence on the levels of NT - proBNP and ET - 1. **Methods** From January 2016 to December 2017, 112 premature infants in Taizhou Hospital were selected as study objects after screening by inclusion and exclusion criteria. The infants were randomly divided into observation group and control group according to the digital table, with 56 cases in each group. The control group was treated with routine therapy, and the observation group was given ibuprofen prophylaxis. The incidence of intracranial hemorrhage, clinical index and serum NT - proBNP, ET - 1 levels were compared between the two groups. **Results** There was significant difference in the incidence rate of intracranial hemorrhage between the observation group (17.86%) and the control group (30.36%) ($\chi^2 = 12.472, P < 0.05$). The serum levels of NT - proBNP and ET - 1 in the observation group were significantly lower than those in the control group (all $P < 0.05$). There were no statistically significant differences in liver function, renal function, coagulation abnormality and oliguria between the two groups (all $P > 0.05$). There were no statistically significant differences in feeding intolerance and gastric hemorrhage between the two groups (all $P > 0.05$). **Conclusion** The application of ibuprofen suspension can effectively prevent intracranial hemorrhage in premature infants, which is worthy of clinical use.

【Key words】 Premature; Intracranial hemorrhage; Ibuprofen; NT-proBNP; ET-1

DOI:10.3760/cma.j.issn.1008-6706.2019.03.014

左乙拉西坦治疗儿童及青少年癫痫临床分析

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【摘要】 目的 探讨以及比较左乙拉西坦片及丙戊酸钠缓释片对儿童及青少年癫痫患者的临床疗效。**方法** 选择 2017 年 4 月至 2018 年 4 月汕头潮南民生医院收治的儿童及青少年癫痫患者 80 例,按抽签分组方式分为两组,每组 40 例。观察组采用左乙拉西坦片治疗,对照组采用丙戊酸钠缓释片治疗。比较两组患者治疗前后脑电图改善情况、治疗总有效率与不良反应发生率。**结果** 观察组治疗 6 个月后脑电图改善率为 41.17%,而对照组为 45.71%,两组差异无统计学意义($\chi^2 = 0.508, P > 0.05$);观察组治疗 9 个月脑电图改善率为 70.58%,对照组为 74.28%,两组差异无统计学意义($\chi^2 = 0.225, P > 0.05$)。观察组治疗总有效率(92.50%)与对照组治疗总有效率(95.00%)相比,差异无统计学意义($\chi^2 = 0.354, P > 0.05$);观察组总不良反应发生率为 22.50%,明显低于对照组的 45.00%,差异有统计学意义($\chi^2 = 6.864, P < 0.05$)。**结论** 丙戊酸钠缓释片和左乙拉西坦片治疗儿童及青少年癫痫均具有较高的有效性和安全性,但左乙拉西坦不良反应更少,值得在临床单药治疗儿童及青少年癫痫方面进行推广。

【关键词】 癫痫; 脑电图描记术; 治疗结果; 药物不良反应报告系统; 丙戊酸钠; 左乙拉西坦; 儿童; 青少年

基金项目:广东省汕头市重点科技项目(汕府科【2017】119 号)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.015

Clinical analysis of levetiracetam in the treatment of children and adolescents with epilepsy

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【Abstract】 Objective To explore and compare the clinical efficacy of levetiracetam tablets and compound sodium valproate sustained release tablets in the treatment of children and adolescents with epilepsy. **Methods** From April 2017 to April 2018, 80 children and adolescents with epilepsy treated in Chaonan Minsheng Hospital of Shantou were selected as study objects, and they were randomly divided into two groups by drawing lots, with 40 cases in each group. The observation group was given levetiracetam tablets, and the control group was treated with valproate. The improvement of EEG after therapy, the total effective rate, and the incidence of adverse reactions were observed and evaluated. **Results** The EEG improvement rates after treatment for 6 months in the observation group and control group were 41.17%, 45.71%, respectively, the difference was not statistically significant ($\chi^2 = 0.508, P > 0.05$). The EEG improvement rates after treatment for 9 months in the observation group and control group were 70.58%, 74.28%, respectively, the difference was not statistically significant ($\chi^2 = 0.225, P > 0.05$). The total effective rate in the observation group was 92.50%, which was 95.00% in the control group, the difference was not statistically significant between the two groups ($\chi^2 = 0.354, P > 0.05$). However, the incidence rate of adverse reactions of the observation group (22.50%) was significantly lower than that of the control group (45.00%) ($\chi^2 = 6.864, P < 0.05$). **Conclusion** Both levetiracetam tablets and compound sodium valproate sustained release tablets have appreciable efficacy and safety in the treatment of epilepsy in children and adolescents, but levetiracetam therapy has less adverse reactions, which deserves further promotion in monotherapy of epilepsy in children and adolescents.

【Key words】 Epilepsy; Electroencephalography; Treatment outcome; Adverse drug reaction reporting systems; Sodium valproate; Levetiracetam; Child; Adolescent

Fund program: Key Technology Project of Shantou City, Guangdong Province (No. 119, Yanfu Branch【2017】)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.015

早产儿并发症的流行病学分析

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【摘要】 目的 研讨早产儿并发症的高危因素、转归状况等流行病学资料。方法 选取 2017 年 1 月至 2018 年 3 月间在宁波市妇女儿童医院进行生产且全部存活的早产儿 1 800 例为本次研究对象,通过对孕妇、早产儿情况以及早产儿并发症等情况进行调查分析,总结早产儿并发症的流行病学。结果 早产儿发生的概率为 9.09%;不同胎龄($\chi^2 = 2\ 481.34, P < 0.01$)和不同体质量($\chi^2 = 3\ 088.21, P < 0.01$)之间的对比结果中,差异有统计学意义($P < 0.05$);胎膜发生早破为主要导致早产儿出生的常见因素之一,其次胎儿窘迫也是较为常见的因素,所以在不同孕周中,数据差异无统计学意义($P > 0.05$);而其他因素导致的早产儿情况,其在不同孕周中对比,差异有统计学意义($P < 0.05$)。结论 对早产儿流行病学进行研究,能够促进围生期管理水平及质量的提升,进而针对性地强化围生期卫生宣传与保健手段,针对围生期的常见疾病进行有效的预防和治疗,切实强化高危妊娠重点管理及监护工作,重视产儿科之间协作关系的建立,主张宫内转运,使得孕妇能够在具备救治早产儿条件的医院生产,进而有效减小早产儿、低出生体质量儿的死亡率及患病率,能够降低智力残疾出现的概率,最终使得我国出生人口整体素质得到提升。

【关键词】 早产儿; 并发症; 流行病学; 围产医学; 胎膜早破; 智力残疾

DOI:10.3760/cma.j.issn.1008-6706.2019.03.016

Epidemiological analysis of complications in preterm infants

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【Abstract】 Objective To explore the epidemiological analysis of complications in premature infants.

Methods From January 2017 to March 2018, 1800 premature babies in Ningbo Women and Children Hospital were selected in the study. The clinical data of pregnant women, premature infants and premature complications, and so on were investigated, and summarized epidemiology of premature infant complications. **Results** The probability of premature birth was 9.09%. The differences between different gestational age ($\chi^2 = 2\ 481.34$) and different body weight ($\chi^2 = 3\ 088.21$) were statistically significant (all $P < 0.05$). Premature rupture of membranes occurred as the main one of the common factors lead to premature birth, the fetal distress was also more common factors, so in different gestational age, the difference was not statistically significant ($P > 0.05$). However, compared with other factors, the difference of premature infants at different gestational weeks was statistically significant ($P < 0.05$). **Conclusion** Epidemiological study of preterm infants, can promote their perinatal management level and quality, and then pointed to strengthen perinatal health education and health care, for the effective prevention and treatment of common diseases of perinatal, key management and monitoring work earnestly strengthen the high-risk pregnancy, attaches great importance to the establishment of collaborative relationship between made in pediatric claims intrauterine transshipment, making pregnant women can be produced in the hospital for treatment for premature babies, and reduce the mortality and morbidity rates of premature and low birth weight, can reduce the risk of intellectual disability, eventually making the birth population overall quality improved.

【Key words】 Premature babies; Complications; Epidemiology; Among medical; Premature rupture of membranes; Mental disabilities

DOI:10.3760/cma.j.issn.1008-6706.2019.03.016

蒙脱石散联合消旋卡多曲对轮状病毒肠炎 患儿血清白细胞介素 2、6、10 及高敏 C 反应蛋白水平变化的影响

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【摘要】 目的 探讨蒙脱石散联合消旋卡多曲对轮状病毒肠炎患儿血清白细胞介素 2(IL-2)、IL-6、IL-10 及高敏 C 反应蛋白(hs-CRP)水平变化的影响。**方法** 选取 2014 年 6 月至 2016 年 7 月浦江县人民医院 76 例轮状病毒肠炎患儿,采用随机数字表法分为对照组和研究组,每组 38 例。两组入院后均给予基础治疗,在此基础上对照组仅采用蒙脱石散,研究组采用蒙脱石散 + 消旋卡多曲,两组均持续治疗 3 d。疗程结束后统计对比两组临床疗效、临床症状(大便性状、大便次数、脱水、呕吐、发热)恢复时间、入院时及疗程结束后血清 IL-2、IL-6、IL-10、hs-CRP 水平变化情况及不良反应发生率。**结果** 研究组临床疗效(轻度便秘、皮疹、恶心)优于对照组[19 例(50.00%)比 11 例(28.95%),16 例(42.11%)比 15 例(39.47%),3 例(7.89%)比 12 例(31.58%)],差异有统计学意义($Z = 2.358, P < 0.05$);研究组大便性状[(45.58 ± 10.11)h]、大便次数[(44.96 ± 10.03)h]、脱水[(33.15 ± 10.27)h]、呕吐[(18.16 ± 6.46)h]、发热[(25.51 ± 10.32)h]改善时间均少于对照组,差异均有统计学意义($t = 9.618, 8.344, 8.557, 3.921, 9.487$, 均 $P < 0.05$);研究组治疗前血清 IL-2、IL-6、IL-10、hs-CRP 水平与对照组差异均无统计学意义(均 $P > 0.05$),治疗后研究组血清 IL-2、IL-10 水平较对照组高,血清 IL-6、hs-CRP 水平较对照组低,差异均有统计学意义($t = 5.545, 7.705, 7.090, 10.352$, 均 $P < 0.05$);研究组与对照组不良反应发生率比较差异无统计学意义(10.52% 比 13.15%, $\chi^2 = 0.000, P > 0.05$)。**结论** 蒙脱石散联合消旋卡多曲治疗轮状病毒肠炎可显著缓解患儿临床症状,改善血清炎症因子水平,缓解体内炎症反应,提高治疗效果,且安全性较高。

【关键词】 蒙脱石散; 消旋卡多曲; 轮状病毒肠炎; 高敏 C 反应蛋白; 白细胞介素; 安全性

DOI:10.3760/cma.j.issn.1008-6706.2019.03.017

Influence of montmorillonite powder combined with racecadotril granules on serum IL - 2, IL - 6, IL - 10 and hs - CRP levels in children with rotavirus enteritis

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【Abstract】 Objective To investigate the effect of montmorillonite powder combined with racecadotril granules on serum levels of interleukin - 2 (IL - 2), interleukin - 6 (IL - 6), interleukin - 10 (IL - 10) and high - sensitivity C - reactive protein (hs - CRP) in children with rotavirus enteritis. **Methods** From June 2014 to July 2016, 76 children with rotavirus enteritis in the People's Hospital of Pujiang County were selected and randomly divided into control group and study group according to the digital table, with 38 cases in each group. The two groups were given basic treatment after admission, on the basis, the control group was treated with montmorillonite powder, and the study group was treated with montmorillonite powder combined with racecadotril granules. The two groups were treated for 3 days. The clinical efficacy, clinical symptoms (stool, stool frequency, dehydration, vomiting, fever) recovery time, serum IL - 2, IL - 6, IL - 10 and hs - CRP levels at admission and after treatment, and the incidence of adverse reactions were statistically compared between the two groups. **Results** The clinical efficacy of the study group (mild constipation, rash, nausea) was better than the control group [19 cases (50.00%) vs. 11 cases (28.95%), 16 cases (42.11%) vs. 15 cases (39.47%), 3 cases (7.89%) vs. 12 cases (31.58%)], the difference was statistically significant ($Z = 2.358, P < 0.05$). The recovery time of stool character [(45.58 ± 10.11)h], stool frequency [(44.96 ± 10.03)h], dehydration [(33.15 ± 10.27)h], vomit [(18.16 ± 6.46)h], and fever [(25.51 ± 10.32)h] of the study group were less than those of the control group ($t = 9.618, 8.344, 8.557, 3.921, 9.487$, all $P < 0.05$). The serum levels of IL - 2,

IL - 6, IL - 10 and hs - CRP before treatment between the two groups had no statistically significant differences (all $P > 0.05$). After treatment, the serum levels of IL - 2 and IL - 10 in the study group were higher than those in the control group, the serum levels of IL - 6 and hs - CRP were lower than those in the control group, the differences were statistically significant ($t = 5.545, 7.705, 7.090, 10.352$, all $P < 0.05$). The incidence rate of adverse reactions between the study group and the control group had no statistically significant difference (10.52% vs. 13.15%, $\chi^2 = 0.000, P > 0.05$). **Conclusion** Montmorillonite powder combined with racecadotril granules in the treatment of rotavirus enteritis can effectively relieve the clinical symptoms, improve the serum inflammatory factors level, reduce the inflammatory reaction in vivo, improve the therapeutic effect and has high safety.

【Key words】 Montmorillonite powder; Racecadotril granules; Rotavirus enteritis; High - sensitivity C - reactive protein; Interleukin; Safety

DOI:10.3760/cma.j.issn.1008-6706.2019.03.017

丁溴东莨菪碱联合坦索罗辛辅助体外冲击波碎石治疗泌尿系结石的疗效及对血清炎性因子的影响

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【摘要】 目的 研究丁溴东莨菪碱静脉滴注联合坦索罗辛口服辅助体外冲击波碎石(ESWL)治疗泌尿系结石的疗效,并探讨其对患者血清炎性因子的影响。**方法** 选择2016年1月至2017年5月兰溪市人民医院收治的泌尿系结石患者96例,采用随机数字表法分为对照组($n=42$)与观察组($n=54$),对照组行丁溴东莨菪碱辅助ESWL治疗,观察组在对照组的基础上加用坦索罗辛治疗,比较两组治疗前后VAS评分、临床效果、不良反应及血清C反应蛋白(CRP)、肿瘤坏死因子- α (TNF- α)等炎性因子的影响。**结果** 治疗前,两组VAS评分差异无统计学意义($t=0.274, P>0.05$);治疗后,观察组VAS评分为(2.21 ± 0.28)分,明显低于对照组VAS评分(4.75 ± 0.63)分($t=7.935, P<0.05$)。观察组结石清除率96.30%(52/54)明显高于对照组结石清除率71.43%(30/42)($\chi^2=6.712, P<0.05$);观察组疼痛消失时间为(10.86 ± 1.54)d,明显低于对照组疼痛消失时间(7.02 ± 1.25)d($t=7.468, P<0.05$);观察组结石排出时间为(9.01 ± 1.53)h,明显低于对照组结石排出时间(13.25 ± 2.21)h($t=8.035, P<0.05$)。治疗前,两组血清CRP、TNF- α 水平差异无统计学意义($t=0.152, 0.185, P>0.05$);治疗后,观察组血清CRP水平为(11.64 ± 1.75)mg/L,明显低于对照组CRP水平(18.94 ± 2.03)mg/L($t=7.008, P<0.05$);治疗后,观察组血清TNF- α 水平为(13.95 ± 2.01)mg/L,明显低于对照组TNF- α 水平(20.76 ± 3.18)mg/L($t=7.008, P<0.05$)。观察组不良反应总发生率为5.56%,明显低于对照组不良反应总发生率26.19%($\chi^2=9.572, P<0.05$)。**结论** 泌尿系结石行丁溴东莨菪碱静脉滴注联合坦索罗辛口服辅助ESWL治疗,可有效减轻患者疼痛,有效降低血清炎性因子水平,提高结石清除率,并发症少,值得临床推广及应用。

【关键词】 丁溴东莨菪碱; 体外冲击波; 坦索罗辛; 泌尿系结石; 碎石疗法; 炎性因子

基金项目:浙江省金华市科学技术研究计划项目(2014-3-109)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.018

Effect of scopolamine butylbromide injection combined with tamsulosin oral auxiliary extracorporeal shock wave lithotripsy in the treatment of urinary calculi and influence on serum inflammatory factors

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【Abstract】 Objective To study the effect of scopolamine butylbromide injection combined with tamsulosin oral auxiliary extracorporeal shock wave lithotripsy (ESWL) in the treatment of urinary calculi, and to investigate its effect on serum inflammatory factors. **Methods** From January 2016 to May 2017, 96 patients with urinary calculi in the People's Hospital of Lanxi were selected and randomly divided into control group ($n=42$) and observation group ($n=54$). The control group received scopolamine butylbromide assisted ESWL treatment, the observation group treated with tamsulosin on the basis of the control group. The VAS score, clinical efficacy, adverse reactions and serum C reactive protein (CRP), tumor necrosis factor alpha (TNF- α) and other inflammatory factors were compared between the two groups. **Results** Before treatment, no statistically significant difference in VAS score was found between the two groups ($t=0.274, P>0.05$). After treatment, the VAS score of the observation group was (2.21 ± 0.28) points, which was significantly lower than that of the control group [4.75 ± 0.63] points ($t=7.935, P<0.05$). The stone clearance rate in the observation group was 96.30% (52/54), which was significantly higher than that in the control group [71.43% (30/42)] ($\chi^2=6.712, P<0.05$). The time of disappearance of pain in the observation group was (10.86 ± 1.54)d, which was significantly lower than that in the control group [7.02 ± 1.25]d ($t=7.468, P<0.05$). The lithotripsy time of the observation group was (9.01 ± 1.53)h, which was significantly shorter than that of

the control group [(13. 25 ± 2. 21) h] ($t = 8. 035, P < 0. 05$). Before treatment, there were no statistically significant differences in serum CRP and TNF - levels between the two groups ($t = 0. 152, 0. 185, \text{all } P > 0. 05$). After treatment, the serum level of CRP in the observation group was (11. 64 ± 1. 75) mg/L, which was significantly lower than that in the control group [(18. 94 ± 2. 03) mg/L] ($t = 7. 008, P < 0. 05$). After treatment, the serum TNF - level in the observation group was (13. 95 ± 2. 01) mg/L, which was significantly lower than that in the control group [(20. 76 ± 3. 18) mg/L] ($t = 7. 008, P < 0. 05$). The incidence rate of adverse reactions of the observation group was 5. 56% , which was significantly lower than 26. 19% of the control group ($\chi^2 = 9. 572, P < 0. 05$). **Conclusion** Urinary calculi underwent intravenous infusion of scopolamine butylbromide combined with tamsulosin oral adjuvant ESWL therapy, can effectively reduce the pain of patients, reduce the serum levels of inflammatory cytokines, improve the stone clearance rate, and with less complications, it is worthy of clinical popularization and application.

【Key words】 Scopolamine hydrobromide; Extracorporeal shock wave; Tamsulosin; Urinary calculi; Gravel therapy; Inflammatory cytokines

Fund program: Science and Technology Research Planning Project of Jinhua City, Zhejiang Province (2014 - 3 - 109)

DOI:10. 3760/cma. j. issn. 1008-6706. 2019. 03. 018

肾动脉不同阻断方式对后腹腔镜下保留肾单位手术的临床疗效分析

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【摘要】 目的 探讨肾动脉不同的阻断方式对后腹腔镜下保留肾单位手术的临床疗效。方法 选择行后腹腔镜下保留肾单位手术的肾肿瘤手术患者 118 例为研究对象,根据肾动脉阻断方式的不同分为全阻断组 61 例和选择性阻断组 57 例,比较两组患者的临床疗效。结果 两组年龄、性别、患肾部位和切除部位差异均无统计学意义(均 $P > 0.05$)。全阻断组阻断时间、手术时间、术中出血量、术后第 1 天引流量分别为(22.58 ± 4.62) min、(138.75 ± 21.76) min、(108.47 ± 75.39) mL、(137.36 ± 18.34) mL,选择性阻断组分别为(28.61 ± 4.59) min、(103.26 ± 18.64) min、(132.58 ± 68.43) mL、(163.15 ± 15.87) mL,两组差异均有统计学意义($t = 5.356, -8.247, 7.463, 10.358$, 均 $P < 0.01$);两组术后住院时间[(8.36 ± 2.19) d 比(7.78 ± 2.35) d]差异无统计学意义($P > 0.05$)。两组术前肌酐水平和肾小球滤过率差异无统计学意义($P > 0.05$);术后,全阻断组肌酐、肾小球滤过率分别为(106.38 ± 32.76) $\mu\text{mol/L}$ 、(33.53 ± 6.14)%,选择性阻断组分别为(95.26 ± 25.49) $\mu\text{mol/L}$ 、(38.27 ± 5.29)%,两组差异均有统计学意义($t = -2.154, 4.572$, 均 $P < 0.05$)。结论 肾动脉全阻断术的手术时间较短,出血量较大,术后肌酐上升较多,肾小球滤过率降低明显,对于较小的单肾手术尽量采用选择性肾动脉阻断术,术中出血少,术后效果更好。

【关键词】 肾癌; 阻断疗法; 肾动脉; 腹腔镜检查; 肾单位; 肾脏热缺血; 临床对照试验

DOI:10.3760/cma.j.issn.1008-6706.2019.03.019

Analysis of clinical curative effect of using different blocking methods to renal artery in laparoscopic nephron sparing surgery

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【Abstract】 Objective To explore the clinical curative effect of using different blocking methods to renal artery in laparoscopic nephron sparing surgery. **Methods** A total of 118 cases admitted in the Affiliated Heji Hospital of Changzhi Medical College who reserved the nephron routine after laparoscopic surgery of renal tumor surgery were selected. According to different methods of renal artery block, the patients were divided into the whole block group (61 cases) and selective blocking group (57 cases). The clinical curative effects of the two groups were compared.

Results The differences of age, sex, suffering from kidney area and excising were not statistically significant between the two groups (all $P > 0.05$). The blocking time, operation time and intraoperative blood loss, drainage at postoperative 1 day in the whole block group were (22.58 ± 4.62) min, (138.75 ± 21.76) min, (108.47 ± 75.39) mL and (137.36 ± 18.34) mL, respectively, which in the selective block group were (28.61 ± 4.59) min, (103.26 ± 18.64) min, (132.58 ± 68.43) mL and (163.15 ± 15.87) mL, respectively, the differences were significant between the two groups ($t = 5.356, -8.247, 7.463, 10.358$, all $P < 0.01$). The postoperative hospital stay [(8.36 ± 2.19) d vs. (7.78 ± 2.35) d] had no statistically significant difference between the two groups ($P > 0.05$). There were no statistically significant differences in preoperative creatinine level and glomerular filtration rate between the two groups (all $P > 0.05$). After operation, the creatinine and glomerular filtration rate in the whole block group were (106.38 ± 32.76) $\mu\text{mol/L}$, (33.53 ± 6.14)% statistically, which in the selective block group were (95.26 ± 25.49) $\mu\text{mol/L}$, (38.27 ± 5.29)% statistically, the differences were statistically significant between the two groups ($t = -2.154, 4.572$, all $P < 0.05$). **Conclusion** Renal artery block has shorter operation time, larger haemorrhage amount, increased postoperative creatinine, reduced glomerular filtration rate, for a small single kidney surgery, using selective renal artery block as far as possible, it has less intraoperative bleeding, and postoperative effect is better.

【Key words】 Kidney carcinoma; Withholding treatment; Renal artery; Laparoscopy; Nephrons; Kidney warm; Controlled clinical trial

DOI:10.3760/cma.j.issn.1008-6706.2019.03.019

超声引导下经皮扩张气管切开术在危重症患者治疗中的应用价值

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【摘要】 **目的** 探讨超声引导下经皮扩张气管切开术在危重症患者治疗中的应用价值。**方法** 选取衢州市人民医院 2016 年 1 月至 2018 年 1 月收治的危重症患者 95 例,采用随机数字表法分为对照组($n=47$)和观察组($n=48$),对照组患者采取传统气管切开术,观察组患者采取超声引导下经皮扩张气管切开术,观察两组患者手术情况,包括手术出血量、手术时间、切口长度、拔管时间、切口愈合时间、住院时间等,并记录两组术后并发症发生情况及死亡情况。**结果** 观察组手术出血量、手术时间、切口长度及切口愈合时间分别为(12.91 ± 1.36) mL、(10.05 ± 1.14) min、(1.46 ± 0.32) cm、(5.48 ± 0.39) d,均低于对照组的(38.54 ± 3.47) mL、(27.43 ± 2.29) min、(3.25 ± 0.68) cm、(7.64 ± 0.72) d,组间差异均有统计学意义($t=40.098, 39.616, 13.888, 15.381, P=0.000, 0.000, 0.000, 0.000$);观察组拔管时间、住院时间分别为(14.19 ± 1.14) d、(20.17 ± 1.85) d,对照组拔管时间、住院时间分别为(14.23 ± 1.17) d、(20.26 ± 1.89) d,组间差异均无统计学意义($t=0.142, 0.198, P=0.886, 0.843$);观察组术后并发症发生率为 6.25%,低于对照组的 21.28%,组间差异有统计学意义($\chi^2=9.515, P=0.002$);观察组 ICU 死亡率、住院死亡率分别为 2.08%、4.17%,对照组 ICU 死亡率、住院死亡率分别为 10.64%、12.77%,组间差异均无统计学意义($\chi^2=2.937, 2.277, P=0.087, 0.131$)。**结论** 超声引导下经皮扩张气管切开术可改善危重症患者的手术情况,减少住院时间,并发症较少,死亡率低,在危重症救治中具有良好的临床价值。

【关键词】 危重症; 超声检查; 经皮扩张气管切开术; 传统气管切开术; 住院时间; 手术情况; 死亡率; 并发症

基金项目:浙江省衢州市指导性科技项目(2016084)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.020

Clinical value of ultrasound guided percutaneous dilatation tracheotomy in critical ill patients

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【Abstract】 **Objective** To explore the effect of ultrasound guided percutaneous dilatation tracheotomy in critical ill patients. **Methods** From January 2016 to January 2018, 95 critical ill patients who were treated in the People's Hospital of Quzhou were selected. According to the random number table method, they were divided into control group ($n=47$) and observation group ($n=48$). The patients in the control group were treated with traditional tracheotomy, and the patients in the observation group were treated with percutaneous dilatation tracheotomy under ultrasonic guidance. The operation condition of the two groups was observed, including operative bleeding volume, operative time, incision length, extubation time, incision healing time, hospitalization time and so on. The postoperative complications and mortality were recorded in the two groups. **Results** The operative bleeding volume, operative time, incision length and incision healing time in the observation group were (12.91 ± 1.36) mL, (10.05 ± 1.14) min, (1.46 ± 0.32) cm, (5.48 ± 0.39) d, respectively, which were lower than those in the control group [(38.54 ± 3.47) mL, (27.43 ± 2.29) min, (3.25 ± 0.68) cm, (7.64 ± 0.72) d], there were statistically significant differences between the two groups ($t=40.098, 39.616, 13.888, 15.381, P=0.000, 0.000, 0.000, 0.000$). The extubation time, hospitalization time in the observation group were (14.19 ± 1.14) d, (20.17 ± 1.85) d, respectively, which in the control group were (14.23 ± 1.17) d, (20.26 ± 1.89) d, respectively, there were no statistically significant differences between the two groups ($t=0.142, 0.198, P=0.886, 0.843$). The incidence rate of postoperative complications in the observation group was 6.25%, which was lower than 21.28% in the control group, there was statistically significant difference between the two groups ($\chi^2=9.515, P=0.002$). The ICU mortality and hospitalization mortality in the observation group were 2.08% and 4.17%, respectively, which in the control group were 10.64% and 12.77%, respectively, there were no statistically significant differences between the two groups ($\chi^2=2.937, 2.277, P=0.087, 0.131$).

Conclusion Ultrasound guided percutaneous dilatation tracheostomy can improve operation condition, reduce hospitalization time, and has less complications, low mortality, which has good clinical value in critical ill care.

【Key words】 Critical ill; Ultrasound; Percutaneous dilatation tracheotomy; Traditional tracheotomy; Hospitalization time; Operation condition; Mortality; Complication

Fund program: Guiding Science and Technology Project of Quzhou City, Zhejiang Province (2016084)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.020

抗缪勒管激素评估系统性红斑狼疮患者 卵巢储备功能的效果评价

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【摘要】 目的 评价抗缪勒管激素评估系统性红斑狼疮(SLE)患者卵巢储备功能的效果。**方法** 收集枣庄市立医院 2015 年 6 月至 2018 年 6 月收治的女性 SLE 患者 80 例, 其中入组前使用环磷酰胺为 A 组(35 例), 未使用环磷酰胺为 B 组(45 例), 选取同期健康女性志愿者 30 例为对照组。于月经周期的第 3 d, 采用酶联免疫吸附试验法对各组抗缪勒管激素水平进行检测, 采用微粒子酶免疫分析法对各组血清雌激素、卵泡刺激素水平进行检测, 同时经阴道超声记录并比较各组双侧卵巢窦卵泡数。**结果** A 组血小板减少、肾炎、溶血性贫血及精神神经表现发生率分别为 54.29% (19/35)、85.71% (30/35)、37.14% (13/35)、22.86% (8/35), 均明显高于 B 组的 48.89% (22/45)、53.33% (24/45)、13.33% (6/45)、0% (0/45) ($\chi^2 = 6.33, 9.41, 6.16, 9.03$, 均 $P < 0.05$)。A 组抗缪勒管激素[(1.09 ± 0.33) g/L]和卵巢窦卵泡数[(8 ± 2) 个]较 B 组[(1.98 ± 0.62) g/L、(12 ± 4) 个]、对照组[(3.37 ± 1.11) g/L、(15 ± 5) 个]均明显降低, 三组差异均有统计学意义 ($F = 46.07, 25.90$, 均 $P < 0.01$); 三组血清雌激素及卵泡刺激素水平差异均无统计学意义 ($F = 1.16, 0.97$, 均 $P > 0.05$)。年龄 > 30 岁的 SLE 患者抗缪勒管激素水平[(0.98 ± 0.31) g/L]较 ≤ 30 岁者[(1.86 ± 0.60) g/L]明显降低, 环磷酰胺累积量 > 10 g 的患者抗缪勒管激素水平[(0.36 ± 0.11) g/L]较 ≤ 10 g[(1.76 ± 0.52) g/L]明显降低 ($t = 7.54, 11.30$, 均 $P < 0.01$)。经 Pearson 相关性分析发现, 抗缪勒管激素与 SLE 患者年龄、环磷酰胺的累积量均呈负相关关系 ($r = -0.56, -0.45$, 均 $P < 0.01$)。**结论** 抗缪勒管激素对女性 SLE 患者的卵巢储备功能具有良好的评估价值, 抗缪勒管激素水平与患者年龄和环磷酰胺累积量密切相关, 临床中对年龄超过 30 岁、环磷酰胺累积量超过 10 g 者应谨慎使用环磷酰胺。

【关键词】 抗缪勒管激素; 红斑狼疮, 系统性; 卵巢功能试验; 环磷酰胺; 雌激素类; 卵泡刺激素; 卵巢窦卵泡; 年龄组; 女(雌)性

DOI:10.3760/cma.j.issn.1008-6706.2019.03.021

Evaluation of ovarian reserve function in patients with systemic lupus erythematosus by anti - Mueller hormone

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【Abstract】 Objective To evaluate the effect of anti - Mueller hormone on ovarian reserve in female patients with systemic lupus erythematosus(SLE). **Methods** The clinical data of 80 women with SLE in the Department of Rheumatism of Zaozhuang Municipal Hospital from June 2015 to June 2018 were collected. The patients used cyclophosphamide before entering the group were selected as A group (35 cases), and patients who didn't use cyclophosphamide were selected as B group (45 cases), and 30 healthy female volunteers were selected as the control group at the same time. All of them were normal menstrual cycle. At the third day of the menstrual cycle, the levels of anti - Mueller hormones were detected by enzyme linked immunosorbent assay. The serum levels of estrogen and alveolar hormone were detected by microparticle enzyme immunoassay, and the number of ovarian sinus follicles in each group was recorded by transvaginal ultrasound. **Results** The incidence rate of thrombocytopenia, nephritis, hemolytic anemia and neuropsychiatric manifestations in A group were 54.29% (19/35), 85.71% (30/35), 37.14% (13/35) and 22.86% (8/35), respectively, which were significantly higher than those in B group [48.89% (22/45), 53.33% (24/45), 13.33% (6/45), 0.00% (0/45)] ($\chi^2 = 6.33, 9.41, 6.16, 9.03$, all $P < 0.05$). The number of anti - Mueller hormone [(1.09 ± 0.33) g/L] and numbers of ovarian sinus follicle [(8 ± 2)] in A group

were significantly lower than those in B group [$(1.98 \pm 0.62) \text{g/L}$, (12 ± 4)] and control group [$(3.37 \pm 1.11) \text{g/L}$, (15 ± 5)], which showed significant differences ($F = 46.07, 25.90$, all $P < 0.05$), but there were no statistically significant differences in serum estrogen and follicular stimulating hormone levels among the three groups ($F = 1.16, 0.97$, all $P > 0.05$). The level of anti - Mueller hormone in patients with SLE aged > 30 years [$(0.98 \pm 0.31) \text{g/L}$] was significantly lower than patients ≤ 30 years old [$(1.86 \pm 0.60) \text{g/L}$], and the level of anti - Mueller hormone in patients with cyclophosphamide accumulation $> 10 \text{ g}$ [$(0.36 \pm 0.11) \text{g/L}$] was significantly lower than that of 10 g [$(1.76 \pm 0.52) \text{g/L}$] ($t = 7.54, 11.30$, both $P < 0.01$). The results of Pearson correlation analysis showed that the anti - Mueller hormone showed negative correlation with the age of SLE and the accumulation of cyclophosphamide ($r = -0.56, -0.45$, both $P < 0.01$). **Conclusion** The use of anti - Mueller hormone has good evaluation value for ovarian reserve function in female patients with SLE, and the level of anti - Mueller hormone is closely related to the age and the accumulation of cyclophosphamide. Therefore, cyclophosphamide should be used carefully in patients who are over 30 years old and the cumulative amount of cyclophosphamide over 10 g.

【 Key words 】 Anti-mueller hormone; Lupus erythematosus, systemic; Ovarian function tests; Cyclophosphamide; Estrogens; Follicle stimulating hormone; Ovarian sinusoidal follicles; Age groups; Female

DOI:10.3760/cma.j.issn.1008-6706.2019.03.021

早期治疗妊娠合并亚临床甲状腺功能减退症对妊娠结局的影响

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【摘要】 目的 分析妊娠合并亚临床甲状腺功能减退症(SCH)的早期治疗对妊娠结局的影响。**方法** 将2013年1月至2015年6月在宁波市北仑区妇幼保健院妇保科诊断为SCH的孕妇128例按照随机数字表法分为观察组和对照组,每组64例,观察组采用左甲状腺素进行早期治疗,对照组采取常规观察,未服药。对两组孕妇的妊娠结局进行分析。**结果** 治疗后,观察组并发症发生率:子痫前期(4.69%)、胎儿生长不良(1.56%)、胎膜早破(7.81%)、羊水量少(4.69%)、胎盘早剥(0.00%)、产后出血(3.12%),对照组并发症发生率:子痫前期(17.19%)、胎儿生长不良(10.94%)、胎膜早破(21.88%)、羊水量少(15.63%)、胎盘早剥(6.25%)、产后出血(12.50%),两组差异均有统计学意义($\chi^2 = 5.133, 4.800, 5.006, 4.195, 4.129, 3.905, P = 0.023, 0.028, 0.025, 0.041, 0.042, 0.048$)。治疗后,观察组不良妊娠结局发生率:早产(3.12%)、剖宫产(60.94%)、流产(0.00%)、胎儿宫内窘迫(4.69%)、围产儿死亡(0.00%),对照组不良妊娠结局发生率:早产(12.50%)、剖宫产(79.69%)、流产(7.81%)、胎儿宫内窘迫(15.63%)、围产儿死亡(6.25%),差异均有统计学意义($\chi^2 = 3.905, 5.389, 5.203, 4.195, 4.129, P = 0.048, 0.020, 0.023, 0.041, 0.042$)。**结论** 妊娠合并SCH对患者产科并发症和妊娠结局有不同程度影响,早期采取左甲状腺素治疗可以明显降低产科并发症和不良妊娠结局的发生率。

【关键词】 妊娠; 甲状腺功能减退症,亚临床; 左甲状腺素; 胎膜早破; 剖宫产; 妊娠结局

DOI:10.3760/cma.j.issn.1008-6706.2019.03.022

Influence of early treatment of pregnancy combined with subclinical hypothyroidism on pregnancy outcome

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【Abstract】 Objective To analyze the influence of early treatment of pregnancy combined with subclinical hypothyroidism (SCH) during pregnancy on pregnancy outcome. **Methods** From January 2013 to June 2015, 128 pregnant women who were diagnosed as SCH in the Maternal and Child Health Hospital of Beilun District were randomly divided into the observation group and control group according to the digital table, with 64 cases in each group. The observation group was given levothyroxine early treatment, while the control group adopted conventional hospitalization, unexposed. Pregnancy outcomes of the two groups were analyzed. **Results** After treatment, the incidence rates of complications in the observation group: preeclampsia (4.69%), poor fetal growth (1.56%), premature rupture of membranes (7.81%), less amniotic fluid volume (4.69%), placental abruption (0%), postpartum hemorrhage (3.12%); the incidence rates of complications in the control group: preeclampsia (17.19%), poor fetal growth (10.94%), premature rupture of membranes (21.88%), less amniotic fluid volume (15.63%), placental abruption (6.25%), postpartum hemorrhage (12.50%), and there were statistically significant differences between two groups ($\chi^2 = 5.133, 4.800, 5.006, 4.195, 4.129, 3.905, P = 0.023, 0.028, 0.025, 0.041, 0.042, 0.048$). After treatment, the incidence rates of adverse pregnancy outcomes: preterm birth (3.12%), cesarean section (60.94%), abortion (0.00%), fetal distress (4.69%), perinatal death (0.00%); the incidence rates of adverse pregnancy outcomes in the control group: preterm birth (12.50%), cesarean section (79.69%), abortion (7.81%), fetal distress (15.63%), perinatal death (6.25%), and the differences between the two groups were statistically significant ($\chi^2 = 3.905, 5.389, 5.203, 4.195, 4.129, P = 0.048, 0.020, 0.023, 0.041, 0.042$). **Conclusion** Pregnancy complicated with SCH has different degree influence on patients with obstetric complications and outcome of pregnancy, early effective drug treatment can significantly reduce the incidence of obstetric complications and adverse pregnancy outcomes.

【Key words】 Pregnancy; Hypothyroidism, subclinical; L-thyroxine; Pregnancy outcome; Cesarean delivery; Premature rupture of membranes

DOI:10.3760/cma.j.issn.1008-6706.2019.03.022

枸地氯雷他定片与氯雷他定分散片治疗过敏性鼻炎的疗效比较

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【摘要】 目的 比较枸地氯雷他定片与氯雷他定分散片治疗过敏性鼻炎的疗效、不良反应及其对白三烯 B₄(LTB₄)、白细胞介素 4(IL-4)、IL-10 及 γ -干扰素(INF- γ)的影响。**方法** 选取苍南县第二人民医院 2015 年 6 月至 2016 年 6 月收治的过敏性鼻炎患者 110 例为研究对象,采用随机数字表法分为对照组、观察组各 55 例。对照组采用氯雷他定治疗,观察组采用枸地氯雷他定分散片治疗,两组疗程均为 14 d。比较两组临床疗效、不良反应及 LTB₄、IL-4、IL-10、INF- γ 水平变化。**结果** 观察组总有效率为 94.5%(52/55),显著高于对照组的 80.0%(44/55)($\chi^2 = 6.310, P < 0.05$)。观察组不良反应发生率为 16.4%(9/55),对照组为 20.0%(11/55),两组差异无统计学意义($P > 0.05$)。治疗前,两组 LTB₄、IL-4、IL-10、INF- γ 水平差异均无统计学意义(均 $P > 0.05$);治疗 14 d 后,观察组 LTB₄、IL-4、IL-10、INF- γ 分别为(67.74 ± 10.15) ng/L、(52.37 ± 5.12) μ g/L、(81.26 ± 11.78) μ g/L、(94.47 ± 7.87) μ g/L,对照组分别为(80.32 ± 9.97) ng/L、(62.95 ± 5.45) μ g/L、(96.32 ± 11.57) μ g/L、(86.74 ± 7.63) μ g/L,两组差异均有统计学意义($t = 7.124, 5.262, 4.654, 3.718$, 均 $P < 0.05$)。**结论** 枸地氯雷他定片和氯雷他定分散片均能有效治疗过敏性鼻炎,降低 LTB₄、IL-4、IL-10 水平,升高 INF- γ 水平,且不良反应较少,但枸地氯雷他定疗效更显著。

【关键词】 鼻炎,变应性,季节性; 枸地氯雷他定片; 氯雷他定分散片; 白三烯 B₄; 白细胞介素 4; 白细胞介素 10; 干扰素 γ

DOI:10.3760/cma.j.issn.1008-6706.2019.03.023

Comparison of effect of desloratadine citrate disodium tablets and loratadine dispersible tablets in treatment of patients with allergic rhinitis

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【Abstract】 Objective To compare the efficacy and adverse reactions of desloratadine citrate disodium tablets and loratadine dispersible tablets in treatment of patients with allergic rhinitis, and their influence on leukotriene B₄(LTB₄), interleukin - 4 (IL - 4), interleukin - 10 (IL - 10) and interferon gamma (INF - γ).

Methods From June 2015 to June 2016, a total of 110 patients with allergic rhinitis in the Second People's Hospital of Cangnan County were selected and randomly divided into control group and observation group according to the digital table, with 55 cases in each group. The control group was given loratadine dispersible tablets, while the observation group was given desloratadine citrate disodium tablets. Both two groups were treated for 14 days. The clinical efficacy, adverse reactions and changes of LTB₄, IL - 4, IL - 10, INF - γ levels before and after treatment were compared between the two groups. **Results** The total effective rate of the observation group was 94.5%, which was significantly higher than 80.0% of the control group ($\chi^2 = 6.310, P < 0.05$). The incidence rate of adverse reactions in the observation group was 16.4%, which was similar to 20.0% in the control group. Before treatment, there were no statistically significant differences in LTB₄, IL - 4, IL - 10, INF - γ levels between the two groups (all $P > 0.05$). After 2 weeks of treatment, the levels of LTB₄, IL - 4, IL - 10 and INF - γ in the observation group were (67.74 ± 10.15) ng/L, (52.37 ± 5.12) μ g/L, (81.26 ± 11.78) μ g/L, (94.47 ± 7.87) μ g/L, respectively, which in the control group were (80.32 ± 9.97) ng/L, (62.95 ± 5.45) μ g/L, (96.32 ± 11.57) μ g/L, (86.74 ± 7.63) μ g/L, respectively, there were statistically significant differences between the two groups ($t = 7.124, 5.262, 4.654, 3.718$, all $P < 0.05$).

Conclusion Both desloratadine citrate disodium tablets and loratadine dispersible tablets can effectively treat patients with allergic rhinitis, improve the symptoms and physical signs, reduce the levels of LTB₄, IL - 4 and IL - 10, increase the level of INF - γ , and the adverse reactions are less and slight, but the efficacy of desloratadine citrate disodium tablets is better than loratadine dispersible tablets.

【Key words】 Rhinitis, allergic, seasonal; Desloratadine citrate disodium tablets; Loratadine dispersible tablets; Leukotriene B₄; Interleukin-4; Interleukin-10; Interferon-gamma

DOI:10.3760/cma.j.issn.1008-6706.2019.03.023

甲状腺微小乳头状癌患病风险预测指标研究

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【摘要】 目的 分别观察游离三碘甲状腺原氨酸(FT_3)、游离甲状腺素(FT_4)、促甲状腺素(TSH)、甲状腺过氧化物酶抗体(TPOAb)、甲状腺球蛋白(TG)、甲状腺球蛋白抗体(TGAb)与甲状腺微小乳头状癌发病风险之间的关联性。方法 回顾性收集 2017 年 1-12 月于黑龙江省医院普外科手术治疗的甲状腺微小乳头状癌患者 135 例,同时期手术治疗的甲状腺良性结节患者 310 例,收集术前部分检验资料,包括: FT_3 、 FT_4 、TSH、TPOAb、TG、TGAb。结果 微小癌组血清 TSH、TG 水平均显著高于良性结节组($Z = 2.666, P = 0.004; Z = 2.499, P = 0.006$)。按照 TSH 水平将 445 例入选者重新分组: < 0.35 mIU/L 组 59 例; ≥ 0.35 并 < 1.0 mIU/L 组 162 例; ≥ 1.0 并 < 2.0 mIU/L 组 152 例; ≥ 2.0 并 < 4.94 mIU/L 组 72 例,四组微小乳头状癌发生率分别为:22.03%、23.46%、28.95%、55.56%,其中 ≥ 2.0 并 < 4.94 mIU/L 组患病率最高($\chi^2 = 12.924, P = 0.005$)。按照 TG 水平再将入选者重新分组: < 20 ng/mL(阴性)组 170 例; > 20 ng/mL(阳性)组 275 例,两组微小癌发生率分别为:22.35%、35.27%,其中阳性组患病率显著升高($\chi^2 = 4.552, P = 0.033$)。结论 TSH 和 TG 可以作为甲状腺微小乳头状癌患病风险的预测指标。

【关键词】 促甲状腺素; 甲状腺球蛋白; 甲状腺乳头状癌; 甲状腺结节

基金项目:黑龙江省卫生计生委科研项目(2018091)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.024

Investigation of risk predictor of papillary thyroid microcarcinoma

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Fund program: Scientific Research Projects of Heilongjiang Health and Family Planning Commission(2018091)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.024

血氨和血清白细胞介素水平与肝硬化致肝性脑病相关性分析

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【摘要】 目的 探讨血氨和血清白细胞介素 18(IL-18)水平与肝硬化致肝性脑病相关性。方法 选取武警山西省总队医院 2016 年 1 月至 2017 年 12 月收治的肝硬化致肝性脑病患者 49 例为观察组,同时选取同期该院收治的非肝性脑病肝硬化患者 51 例为对照组,测定两组患者血清 IL-18 和血氨水平。分析血氨和血清 IL-18 水平与肝硬化致肝性脑病相关性。**结果** 观察组血氨和血清 IL-18 水平均明显高于对照组,差异均有统计学意义[(83.34 ± 9.53) μmol/L 比 (19.68 ± 3.53) μmol/L, (61.02 ± 8.57) ng/L 比 (22.81 ± 3.86) ng/L, $t = 13.942$ 、 15.274 , 均 $P < 0.001$];肝硬化致肝性脑病患者中,West-Haven 分级中 I 级、II 级、III 级、IV 级患者的血氨和血清 IL-18 水平差异均有统计学意义($F = 21.670$ 、 19.87 , 均 $P < 0.05$),且各级之间两两比较差异均有统计学意义($t = 4.975$ 、 7.667 、 3.750 、 5.647 、 5.618 、 6.147 、 4.976 、 5.694 、 3.938 、 5.147 、 4.236 、 6.107 , 均 $P < 0.05$);根据相关性结果显示:血氨与血清 IL-18 水平呈正相关($r = 0.059$, $P < 0.05$),血氨和血清 IL-18 水平与肝硬化致肝性脑病患者严重程度呈正相关($r = 0.042$, $P < 0.05$)。**结论** 血氨和血清 IL-18 水平与肝硬化致肝性脑病的严重程度密切相关,且血氨和血清 IL-18 水平呈正相关,通过对血氨与血清 IL-18 水平的测定,能够为临床肝硬化致肝性脑病的诊断以及预后评价提供参考。

【关键词】 肝硬化; 肝性脑病; 血氨; 白细胞介素 18

DOI:10.3760/cma.j.issn.1008-6706.2019.03.025

Correlation analysis between serum ammonia, serum IL - 18 levels and hepatic encephalopathy caused by hepatocirrhosis

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DOI:10.3760/cma.j.issn.1008-6706.2019.03.025

多肝段联合切除 + 术中胆道镜取石术治疗 复杂肝内胆管结石的效果探究

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【摘要】 目的 分析多肝段联合切除 + 术中胆道镜取石术治疗复杂肝内胆管结石的效果。方法 选取浙江省台州医院肝胆外科 2015 年 6 月至 2017 年 3 月收治的复杂肝内胆管结石患者 100 例为研究对象,采用随机数字表法分成对照组和研究组各 50 例,对照组行多肝段联合切除术治疗,研究组行肝段联合切除 + 术中胆道镜取石术治疗,比较两组术中出血量、手术时间、住院时间、手术并发症、随访复发情况以判断临床疗效。结果 两组术中出血量、手术时间、住院时间差异均无统计学意义($t=0.50, 1.39, 1.15$, 均 $P>0.05$);两组胆瘘、腹腔积液发生率和有效率差异均无统计学意义($\chi^2=0.18, 1.00, 0.85$, 均 $P>0.05$);研究组肝功能衰竭(0.00%)、胸腔积液(4.00%)以及感染(4.00%)发生率均显著低于对照组(12.00%、26.00%、28.00%)($\chi^2=4.43, 7.84, 9.00$, 均 $P<0.05$);随访 1 年,研究组胆管炎(2.00%)、胆管结石(0.00%)的复发率均显著低于对照组(20.00%、16.00%)($\chi^2=6.54, 6.66$, 均 $P<0.05$)。结论 多肝段联合切除 + 术中胆道镜取石术治疗复杂肝内胆管结石相对单纯采用多肝段联合切除术治疗具有并发症少、复发率低的优势,临床宜推广。

【关键词】 结石; 胆管,肝内; 胆瘘; 胸腔积液; 胆管炎

DOI:10.3760/cma.j.issn.1008-6706.2019.03.026

Effect of multiple hepatectomy combined with intraoperative choledochoscopy in the treatment of complex intrahepatic bile duct stones

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DOI:10.3760/cma.j.issn.1008-6706.2019.03.026

宫颈癌、宫颈癌前病变与生殖道感染的相关性及危险因素分析

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【摘要】 **目的** 探讨宫颈癌、宫颈癌前病变与生殖道感染的相关性及危险因素研究,提高临床医师对该病的诊治能力。**方法** 选取惠东县人民医院 2013 年 7 月至 2017 年 7 月经阴道镜检查、宫颈活检诊断为宫颈癌和(或)宫颈上皮内瘤变(CIN)的 240 例患者作为实验组,选取同期在该院治疗的宫颈炎,但无 CIN 或宫颈癌的 240 例患者作为对照组,对两组患者均进行细菌性阴道炎(EBV)、沙眼衣原体(CT)、生殖道人乳头状瘤病毒(HPV)、单纯疱疹病毒 II(HSV-2)的检测,分析 CIN 及宫颈癌和生殖道病原体感染的相关性。**结果** 实验组 CIN I、II、III 期和宫颈癌的 EBV 感染率分别为 27.5%、26.25%、33.33% 和 32.43%,均明显高于对照组的 7.09%,差异均有统计学意义($\chi^2 = 8.43, 7.46, 6.50, 5.87$, 均 $P < 0.05$);CT 感染率 CIN I 期为 22.50%,与对照组(9.17%)相比,差异无统计学意义($\chi^2 = 2.03, P > 0.05$);CIN II 和 III 期以及宫颈癌的 CT 感染率分别为 27.78%、33.33%、35.14%,均高于对照组(9.17%),差异均有统计学意义($\chi^2 = 7.03, 7.68, 8.69$, 均 $P < 0.05$);HPV 检出率:实验组从宫颈癌到 CIN I 期,检出率逐渐降低,分别为:97.30%、92.15%、59.72%、31.25%,与对照组(4.58%)比较,差异均有统计学意义($\chi^2 = 76.58, 82.35, 65.42, 54.48$, 均 $P < 0.05$);HSV2 检出率:实验组 CIN I、II、III 期及宫颈癌的检出率分别为:11.25%、16.00%、21.56%、27.03%,与对照组(1.67%)比较,差异均有统计学意义($\chi^2 = 11.58, 10.35, 9.42, 8.48$, 均 $P < 0.05$)**结论** 宫颈癌、宫颈癌前病变与生殖道感染具有密切的相关性,临床医生需高度重视。

【关键词】 癌前病变; 宫颈癌; 生殖道感染; 危险因素; 阴道镜

DOI:10.3760/cma.j.issn.1008-6706.2019.03.027

Relationship between cervical cancer, precancerous cervical lesions and genital tract infections and risk factors analysis

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DOI:10.3760/cma.j.issn.1008-6706.2019.03.027

健康宣教路径模式用于经外周静脉穿刺中心静脉置管治疗老年人重度慢性阻塞性肺疾病的效果观察

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【摘要】 目的 观察健康宣教路径模式用于经外周静脉穿刺中心静脉(PICC)置管治疗老年重度慢性阻塞性肺疾病(COPD)患者的效果。方法 选择杭州师范大学附属医院 2016 年 2 月至 2017 年 2 月收治的行 PICC 置管老年 COPD 患者 200 例,以干预前、后 1 年分别设为对照组(100 例)和观察组(100 例),其中对照组采用常规健康教育干预,观察组采用健康宣教路径模式干预,比较两组患者健康宣教知识掌握率、不良反应发生率及护理满意度。结果 对照组患者置管相关知识、带管注意事项及常见问题处理知识掌握率分别为 67.00%、70.00%、72.00%;观察组患者置管相关知识、带管注意事项及常见问题处理知识掌握率分别为 94.00%、97.00%、96.00%;观察组健康宣教知识掌握率显著高于对照组($\chi^2 = 9.14$ 、 9.33 、 9.07 , 均 $P < 0.05$);对照组和观察组患者不良反应发生率分别为 13.00%、3.00%;观察组不良反应发生率显著低于对照组($\chi^2 = 10.26$, $P < 0.05$);对照组和观察组患者护理满意度分别为 77.00%、96.00%;观察组患者护理满意度显著高于对照组($\chi^2 = 12.47$, $P < 0.05$)。结论 健康宣教路径模式用于 PICC 置管老年重度 COPD 患者可显著改善相关医学知识掌握情况,预防不良反应发生,且有助于提高护理满意程度。

【关键词】 健康教育; 肺疾病,慢性阻塞性; 导管插入术,中心静脉; 病人满意度; 老年人

DOI:10.3760/cma.j.issn.1008-6706.2019.03.028

Effect of health education path model on peripherally inserted central catheter in elderly patients with severe chronic obstructive pulmonary disease

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DOI:10.3760/cma.j.issn.1008-6706.2019.03.028

循证护理用于阑尾炎穿孔感染患者术后护理的效果分析

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【摘要】 目的 探讨循证护理用于阑尾炎穿孔感染患者术后护理中的应用效果。**方法** 将 2015 年 1 月至 2017 年 6 月在忻州市人民医院接受手术治疗的 100 例阑尾炎穿孔感染患者纳入作为研究对象,采取计算机随机数字分组法将这 100 例患者分为对照组与观察组,每组 50 例。对照组采取常规护理,观察组采取循证护理。比较两组患者的术后恢复情况、并发症发生情况、心理状态评分、生活质量评分、护理满意度。**结果** 观察组术后排气恢复时间 $[(2.34 \pm 0.86) \text{d}]$ 、住院时间 $[(4.05 \pm 1.12) \text{d}]$ 均明显短于对照组 $[(3.29 \pm 1.05) \text{d}、(5.76 \pm 1.69) \text{d}]$ ($t = 4.949、5.964$,均 $P = 0.000$);观察组并发症发生率为 4%,明显低于对照组的 18%($\chi^2 = 5.005, P = 0.025$);两组护理后的焦虑评分、抑郁评分均较护理前显著降低($t = 8.132、13.610、11.169、17.876$,均 $P = 0.000$),而在护理后,观察组焦虑评分 $[(36.58 \pm 6.92) \text{分}]$ 、抑郁评分 $[(34.59 \pm 5.82) \text{分}]$ 均低于对照组 $[(45.69 \pm 7.37) \text{分}、(43.25 \pm 6.05) \text{分}]$ ($t = 6.372、7.294, P = 0.000、0.000$);观察组在躯体健康、心理健康、物质生活、社会功能等方面的生活质量评分均高于对照组($t = 7.641、6.408、6.614、7.073$,均 $P = 0.000$);观察组的护理满意度为 98%,明显高于对照组的 84%($\chi^2 = 5.983, P = 0.014$)。**结论** 在阑尾炎穿孔感染患者的术后护理中,应用循证护理模式进行干预,可有效减少术后并发症发生,促进术后恢复,还可改善患者的心理状态和生活质量,提升患者对护理服务的评价。

【关键词】 阑尾炎; 穿孔; 感染; 护理**基金项目:**山西省自然科学基金项目(2012011044 - 1)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.029

Analysis of effect of evidence – based nursing on postoperative care of patients with perforated appendicitis infection

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Fund program: Natural Science Foundation of Shanxi Province(2012011044 - 1)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.029

优质护理对重症监护病房患者非计划性拔管的影响

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【摘要】 目的 探讨优质护理对重症监护病房(ICU)患者非计划性拔管的影响。**方法** 选取义乌市中心医院 2015 年 1 月至 2017 年 1 月 ICU 收治且行气管插管治疗的重症患者 120 例为研究对象,采用随机数字表法将患者分为对照组、观察组,每组 60 例。对照组采取传统方法进行护理,观察组采取优质护理,比较两组非计划性拔管率、再插管率、ICU 治疗时间、住院时间、舒适度评分、心理状态评分、护理满意度。**结果** 观察组非计划性拔管率、再插管率分别为 3.33%、6.67%,对照组分别为 13.33%、20.00%,观察组均低于对照组($\chi^2 = 3.927, 4.615$, 均 $P < 0.05$);观察组 ICU 治疗时间、住院时间分别为 (4.62 ± 1.04) d、 (7.39 ± 1.87) d,均显著短于对照组的 (5.73 ± 1.27) d、 (9.54 ± 2.12) d ($t = 5.238, 5.891$, 均 $P < 0.05$);干预后,对照组的舒适度、心理状态评分均较干预前显著改善($t = 6.702, 8.909, 10.307$, 均 $P < 0.05$),观察组的舒适度、心理状态评分也均较干预前显著改善($t = 12.950, 14.909, 19.582$, 均 $P < 0.05$),而观察组的舒适度评分 [(99.49 ± 14.21) 分] 高于对照组 [(85.37 ± 13.65) 分],其心理状态评分 [(36.58 ± 6.92) 分、 (34.59 ± 5.82) 分] 均低于对照组 [(45.69 ± 7.37) 分、 (43.25 ± 6.05) 分],差异均有统计学意义($t = 5.551, 6.980, 10.242$, 均 $P < 0.05$);观察组患者的护理满意度为 95.00%,对照组仅为 78.33%,两组差异有统计学意义($\chi^2 = 7.212, P < 0.05$)。**结论** 针对重症监护病房患者施以优质护理,可有效减少其非计划性拔管,有利于缩短其治疗时间,还可提高患者在 ICU 监护期间的舒适体验,使患者保持良好的心理状态,提高患者对护理工作的满意度。

【关键词】 重症监护病房; 非计划性拔管; 护理

基金项目:浙江省科技计划项目(2013C33216)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.030

Effect of quality care on unplanned extubation in ICU patients

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DOI:10.3760/cma.j.issn.1008-6706.2019.03.030

舒适护理用于股骨颈骨折患者的效果分析

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【摘要】 目的 观察舒适护理用于股骨颈骨折患者的临床护理效果。**方法** 选择大同市第五人民医院骨科 2015 年 2 月至 2016 年 2 月收治的股骨颈骨折患者 86 例为研究对象。采用随机数字表法分为常规组、观察组,每组 43 例。常规组实施常规护理,观察组在常规护理的基础上给予舒适护理。观察并比较两组患者护理前后心理状态[焦虑自评量表(SAS)评分、抑郁自评量表(SDS)评分]、疼痛程度[视觉模拟评分法(VAS)评分]、髋关节功能(Harris)以及患者满意度。**结果** 护理干预后,观察组 SAS 评分为(28.46 ± 5.23)分、SDS 评分为(29.46 ± 5.28)分,均低于常规组的(32.44 ± 6.21)分、(33.58 ± 6.27)分,差异均有统计学意义($t = 3.21, 3.30, P < 0.05$);观察组 VAS 评分为(2.42 ± 0.55)分,低于常规组的(4.25 ± 0.88)分,两组差异有统计学意义($t = 11.56, P < 0.05$);观察组 Harris 评分为(91.52 ± 2.47)分,优于常规组的(82.45 ± 3.22)分,两组差异有统计学意义($t = 14.66, P < 0.05$);观察组护理满意度为 95.35%,明显高于常规组的 79.07%,两组差异有统计学意义($\chi^2 = 5.11, P < 0.05$)。**结论** 采用舒适护理干预可改善股骨颈骨折患者的髋关节功能,缓解其疼痛症状,改善患者的心理状态,值得进一步推广。

【关键词】 股骨颈骨折; 临床护理研究

基金项目:山西省卫生和计划生育委员会中医科研课题(2014ZY14)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.031

Effect of comfortable nursing for patients with femoral neck fracture

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Fund program: Research Topic of Traditional Chinese Medicine of Shanxi Provincial Health and Family Planning Commission (2014ZY14)

DOI:10.3760/cma.j.issn.1008-6706.2019.03.031

快速康复外科护理对胃肠外科患者术后胃肠功能恢复及并发症发生率的影响

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【摘要】 目的 探讨快速康复外科护理对胃肠外科患者术后胃肠功能恢复及并发症发生率的影响。**方法** 选择 2017 年 1 月至 2018 年 1 月丽水市人民医院胃肠外科收治的 100 例腹腔镜手术患者为研究对象,采用随机数字表法将入组患者分为对照组和观察组各 50 例。对照组应用常规护理,观察组应用快速康复外科护理。比较两组患者胃肠功能恢复情况、应激反应及术后并发症发生率。**结果** 经过不同的护理干预方式,观察组患者首次排气时间、首次进食时间、首次下床时间、术后胃管留置时间及术后住院时间[(65.15 ± 6.43)h, (48.35 ± 4.86)h, (25.72 ± 2.76)h, (9.95 ± 1.16)h, (8.65 ± 0.98)d]均少于对照组[(72.36 ± 7.26)h, (69.65 ± 7.03)h, (47.56 ± 5.11)h, (25.76 ± 2.65)h, (11.35 ± 1.36)d],差异有统计学意义($t = 5.257, P = 0.000; t = 17.623, P = 0.000; t = 26.591, P = 0.000; t = 38.646, P = 0.000; t = 11.389, P = 0.000$)。手术前,两组患者平均动脉压、心率、空腹血糖及肾上腺素水平的比较,差异无统计学意义($P > 0.05$);经过术后护理 24 h,观察组上述指标水平[(12.23 ± 2.02)kPa, (81.93 ± 8.22)次/min, (5.75 ± 1.11)mmol/L, (123.62 ± 12.31)ng/L]均低于对照组[(13.98 ± 2.45)kPa, (85.78 ± 8.79)次/min, (6.21 ± 1.33)mmol/L, (151.65 ± 15.65)ng/L],差异有统计学意义($t = 3.897, P = 0.000; t = 2.262, P = 0.013; t = 1.878, P = 0.032; t = 9.954, P = 0.000$)。经过快速康复外科护理,观察组患者并发症发生率为 4.00% (2/50),低于对照组的 18.00% (9/50),差异有统计学意义($\chi^2 = 5.005, P = 0.025$)。**结论** 对腹腔镜胃肠外科手术患者实施快速康复外科护理,可以有效改善其胃肠功能,减轻机体应激反应,降低术后并发症的发生风险,有助于患者快速病情恢复。

【关键词】 护理; 胃肠手术; 肠道功能; 术后排气时间; 胃管留置时间; 平均动脉压; 心率; 应激反应; 术后并发症

DOI:10.3760/cma.j.issn.1008-6706.2019.03.032

Effect of fast track surgery nursing on gastrointestinal function recovery and incidence of postoperative complications in gastrointestinal surgery patients

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DOI:10.3760/cma.j.issn.1008-6706.2019.03.032

心理护理联合无保护会阴助产对初产妇妊娠结局和新生儿窒息评分的影响

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【摘要】 目的 探讨心理护理联合无保护会阴助产对初产妇妊娠结局和新生儿窒息评分的影响。**方法** 选取 2017 年 4 月至 2018 年 1 月在嘉兴市妇幼保健院进行自然分娩的 100 例初产妇为研究对象,按照随机数字表法将产妇分为观察组和对照组,每组 50 例。对照组采用传统助产法,观察组采用心理护理联合无保护会阴助产。比较两组初产妇妊娠结局、会阴损伤情况新生儿窒息评分和产妇心理情况。**结果** 观察组产妇阴道分娩率为 90.00%,高于对照组的 72.00%,差异有统计学意义($\chi^2 = 5.263, P = 0.022$);观察组新生儿 Apgar 评分(8.53 ± 0.83)分,高于对照组的(8.24 ± 0.81)分,差异有统计学意义($t = 1.768, P = 0.040$);观察组会阴侧切率为 16.00%,低于对照组的 42.00%,差异有统计学意义($\chi^2 = 8.208, P = 0.004$);两组产妇第二产程时间差异无统计学意义($P > 0.05$)。观察组产妇会阴完整例数高于对照组,差异有统计学意义($\chi^2 = 19.643, P = 0.000$);观察组产妇会阴撕裂数、会阴切开数、会阴疼痛 VAS 评分及阴道出血量均少于对照组,差异均有统计学意义($\chi^2 = 4.110, P = 0.043; \chi^2 = 8.208, P = 0.004; t = 8.256, P = 0.000; t = 15.549, P = 0.000$)。护理后,对照组和观察组产妇的 HAMA、HAMD 评分均得到改善,差异均有统计学意义($t = 8.876, 18.262, 7.311, 10.211$, 均 $P = 0.000$),观察组产妇 HAMA、HAMD 评分改善情况优于对照组[(31.12 ± 3.36)分比(38.32 ± 3.79)分;(37.63 ± 4.03)分比(40.21 ± 4.62)分],差异均有统计学意义($t = 10.052, P = 0.000; t = 2.976, P = 0.002$)。**结论** 心理护理联合无保护会阴助产,可以更好的缓解初产妇不良心理状态,有利于保护会阴完整性,降低会阴损伤率,提高新生儿 Apgar 评分,值得临床推广应用。

【关键词】 自然分娩; 助产学; 妊娠结局; 会阴切开术; 窒息,新生儿; 疼痛; 心理疗法; 护理
DOI:10.3760/cma.j.issn.1008-6706.2019.03.033

Effect of psychological nursing combined with unprotected perineum midwifery on pregnancy outcome and neonate asphyxia score

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DOI:10.3760/cma.j.issn.1008-6706.2019.03.033

儿童过敏性紫癜的治疗进展

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【摘要】 过敏性紫癜是儿童时期常见的一种免疫介导的系统性血管炎,临床表现主要是明显的皮肤紫癜、关节炎、胃肠道症状及急性肾小球肾炎等。临床上过敏性紫癜引起的紫癜性肾炎已经严重危害到儿童的生命健康,目前对其治疗仍没有统一的治疗标准,本文从西医和中医两个方面,就儿童过敏性紫癜的治疗进展做一综述。

【关键词】 过敏性紫癜; 儿童; 治疗

DOI:10.3760/cma.j.issn.1008-6706.2019.03.034

Progress in treatment of henoch – schonlein purpura in children

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【Abstract】 Henoch – schonlein purpura is a common immune – mediated systemic vasculitis in childhood, and its clinical manifestations are mainly skin purpura, arthritis, gastrointestinal symptoms and acute glomerulonephritis. Clinically, purpura nephritis caused by henoch – schonlein purpura has seriously jeopardized children's life and health. At present, there is still no uniform treatment standard for the treatment of this disease. This article reviews the progress of the treatment of anaphylactoid purpura in children from two aspects of western medicine and traditional Chinese medicine.

【Key words】 Henoch-schonlein purpura; Child; Therapy

DOI:10.3760/cma.j.issn.1008-6706.2019.03.034