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执行编委 胡世莲 郑芙林 英文审校 黄河胜 责任编辑 黄力毅 责任排版 常海洋
内镜下括约肌切开取石术联合腹腔镜胆囊切除术治疗胆囊结石合并胆总管结石的疗效比较

陈杰  汪曙红

【摘要】目的 比较腹腔镜胆囊切除术联合腹腔镜胆总管切开取石(ERCP/S+LC)与内镜下括约肌切开取石术联合腹腔镜胆囊切除术(ERCP/S+LC)治疗胆囊结石合并胆总管结石的疗效。方法 回顾性分析280例胆囊结石合并胆总管结石患者的资料,根据治疗方案分为LCBDE组(A组60例)和ERCP/S+LC组(B组220例)。比较两种治疗方法的疗效。结果A、B两组手术用时、术后住院时间、住院费用、胆总管结石大小、结石清除率、术后并发症发生率分别为(95.58±22.66)min、(87.46±40.25)min、(15.18±5.46)d、(14.32±4.21)d、(2.45±0.32)万元、(2.89±0.64)万元、(1.12±0.34)cm、(1.39±0.38)cm、96.6%、91.0%、1.6%、3.2%。两组手术结石清除率差异无统计学意义(χ²=1.44,P>0.05),LCBDE组的住院费用略低于ERCP/S+LC组,但差异无统计学意义(t=0.923,P>0.05)。ERCP/S+LC组术后并发症发生率要高于LCBDE组,差异有统计学意义(χ²=4.17,P<0.05)。结论LCBDE组和ERCP/S+LC组均是治疗胆囊结石合并胆总管结石的有效微创疗法,在临床上可根据患者实际情况选择使用。

【关键词】胆囊结石病;胆总管结石;胆囊切除术;腹腔镜

Comparison of the effect of ERCP/S + LC and LCBDE in the treatment of cholecystolithiasis patients with concurrent choledocholith.

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【Abstract】Objective To compare the effect of endoscopic retrograde cholangiopancreatography sphincterotomy plus laparoscopic cholecystectomy (ERCP/S + LC) and laparoscopic common bile duct exploration (LCBDE) in the treatment of cholecystolithiasis patients with concurrent choledocholith. Methods Retrospective analysis was made of information of 280 cholecystolithiasis patients with concurrent choledocholith, who were randomly divided into group A (n=60) and group B (n=220). Group A was arranged with LCBDE and group B was treated ERCP/S + LC. The operation time, hospital stay after operation, hospitalization fee, size of common bile duct calculi, stone clearance rate and the incidence of postoperative complications were compared. Results The operation time, hospital stay after operation, hospitalization fee, size of the common bile duct calculus, stone clearance rate and the incidence of postoperative complications of group A & B were (95.58±22.66)min vs. (87.46±40.25)min, (15.18±5.46)d vs. (14.32±4.21)d, (2.45±0.32)万元 vs. (2.89±0.64)万元, (1.12±0.34)cm vs. (1.39±0.38)cm, 96.6% vs. 91.0% and 1.6% vs. 3.2%. There was no significant difference in calculus clearance rate between the two treatments(χ²=1.44,P>0.05). Patients in LCBDE group spent slightly less on hospitalization expenses than patients in ERCP/S + LC group, but there was no significant difference shown(t=0.923,P>0.05). Patients in ERCP/S + LC group had suffered a relatively high incidence of complications than patients in LCBDE group, and significant difference was found(χ²=4.17,P<0.05). Conclusion Both LCBDE and ERCP/S + LC are effective minimally invasive therapies for concurrent cholecystolithiasis and choledocholith, and should be clinically applied in accordance with their specific characteristics.

【Key words】Cholecystolithiasis; Choledocholithiasis; Laparoscopic
论著

经脐单孔腹腔镜与传统手术治疗小儿腹股沟斜疝的疗效比较

程学远 黄忠

【摘要】目的 比较经脐单孔腹腔镜与传统手术治疗小儿腹股沟斜疝的有效性及安全性。方法 选取腹股沟斜疝患儿共100例，分为对照组（n=50）和观察组（n=50）。对照组给予开放式疝囊高位结扎术，观察组给予经脐单孔腹腔镜疝囊高位结扎术。比较两组患儿各项手术指标、术后并发症及疝复发率。结果 观察组术中出血量、切口长度、手术时间及住院时间分别为（18.1±5.9）mL，（1.3±0.3）cm，（27.4±7.9）min，（4.5±1.2）d，对照组分别为（38.7±8.1）mL，（2.2±0.4）cm，（46.7±9.2）min，（7.4±1.3）d，组间差异具有统计学意义（t=3.439, 3.811, 2.872, 2.878, P=0.026, 0.019, 0.045, 0.049）。观察组和对照组术后并发症发生率分别为8.0%（4/50）和24.0%（12/50），组间比较差异有统计学意义（χ²=4.762, P=0.029）。术后随访1年，观察组和对照组疝复发率分别为0%（0/50）和12%（6/50），组间比较差异有统计学意义（χ²=6.383, P=0.012）。结论 采用经脐单孔腹腔镜术治疗小儿腹股沟斜疝安全有效，有利于防止术后复发，值得临床推广使用。

【关键词】 疝；腹股沟；腹腔镜；小儿；单孔

The study of totally transumbilical single-port laparoscopic herniorrhaphy and traditional surgery in treatment with pediatric indirect inguinal hernia Cheng Xueyuan, Huang Zhong. Department of General Surgery, the People’s Hospital of Beihai, Beihai, Guangxi 536000, China

【Abstract】Objective To compare the effect and safety of totally transumbilical single-port laparoscopic herniorrhaphy and traditional surgery in treatment with pediatric indirect inguinal hernia. Methods 100 children with indirect inguinal hernia were divided into control group (n = 50) and observation group (n = 50). The control group was given to traditional surgery. The observation group was given to totally transumbilical single-port laparoscopic herniorrhaphy. The operation related index, postoperative complications and hernia recurrence rate were compared between the two groups. Results The intraoperative bleeding, incision length, operation time and hospital stays of the observation group respectively were (18.1±5.9) mL, (1.3±0.3) cm, (27.4±7.9) min and (4.5±1.2) d, those of the control group respectively were (38.7±8.1) mL, (2.2±0.4) cm, (46.7±9.2) min and (7.4±1.3) d, the difference was statistically significant (t = 3.439, 3.811, 2.872, 2.878, P = 0.026, 0.019, 0.045, 0.049). The postoperative complications rate of observation the group and the control group were respectively 8.0% (4/50) and 24.0% (12/50), the difference was statistically significant (χ² = 4.762, P = 0.029). Postoperative follow-up of 1 year, the hernia recurrence rate of the observation group and the control group respectively was 0% (0/50) and 12% (6/50), the difference was statistically significant (χ² = 6.383, P = 0.012). Conclusion Using totally transumbilical single-port laparoscopic herniorrhaphy treat with pediatric indirect inguinal hernia is safe and effective. It is beneficial to prevent recurrence, and is worth clinical promotion.

【Key words】 Hernia; Inguen; Laparoscope; Child; Single – port

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腹腔镜与开腹阑尾切除术治疗穿孔性阑尾炎的效果比较

郭志芳 王江平 耿华雄 刘瑞红

【摘要】 目的 比较腹腔镜与开腹阑尾切除术治疗穿孔性阑尾炎的临床效果。方法 选择 107 例穿孔性阑尾炎患者进行研究。观察组 54 例行腹腔镜阑尾切除术，对照组 53 例行传统开腹阑尾切除术。比较两组切口大小、术中出血量、手术时间、住院时间等围手术期指标及并发症发生率。结果 两组手术时间差异无统计学意义（t = 1.286, P > 0.05），观察组切口大小（2.5 ± 0.3）cm、术中出血量（10.3 ± 3.4）mL、住院时间（5.4 ± 0.9）d，均优于对照组的（4.2 ± 0.4）cm、（19.4 ± 4.2）mL 和（6.5 ± 1.1）d，差异均有统计学意义（t = 24.901, 12.329, 5.666, 均 P < 0.05）。观察组并发症发生率为 3.4%，低于对照组的 15.1%，差异有统计学意义（χ² = 3.940, P < 0.05）。结论 腹腔镜阑尾切除术具有创伤小、恢复快、并发症少、住院时间短等优点，效果优于开腹阑尾切除术，值得推广应用。

【关键词】 阑尾炎；肠穿孔；腹腔镜检查；外科手术

Comparison of the effect of laparoscopic and open appendectomy in the treatment of perforated appendicitis

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【Abstract】 Objective To compare the clinical effect of laparoscopic and open appendectomy in the treatment of perforated appendicitis. Methods 107 patients with perforated appendicitis were selected as the research object and were divided into two groups. The observation group (54 cases) received laparoscopic appendectomy while the control group (53 cases) received traditional open appendectomy. The size of incision, the amount of bleeding during operation, time of operation and hospitalization and other perioperative indexes and the incidence rate of complications were compared between the two groups. Results The operation time between the two groups had no statistical significance (t = 1.286, P > 0.05). The incision size [(2.5 ± 0.3) cm], the amount of intraoperative bleeding [(10.3 ± 3.4) mL] and hospitalization time [(5.4 ± 0.9) d] of the observation group were better than those of [(4.2 ± 0.4) cm], [(19.4 ± 4.2) mL] and [(6.5 ± 1.1) d] in the control group, the differences were statistically significant (t = 24.901, 12.329, 5.666, all P < 0.05). The occurrence rate of complications of the observation group was 3.4%, which was lower than 15.1% of the control group, the difference was statistically significant (χ² = 3.940, P < 0.05). Conclusion Laparoscopic appendectomy has the advantages of less trauma, faster recovery, less complications, shorter hospitalization time, etc. And its effect is better than open appendectomy and worthy of popularization and application.

【Key words】 Appendicitis; Intestinal perforation; Laparoscopy; Surgical procedures, Operative
河北省任丘地区老年人高尿酸血症与血脂相关性的研究

徐丽华 颜应琳 于凯 杨红娜 李芳 高素颖 何艳

【摘要】目的：探讨任丘地区城乡60~70岁老年人高尿酸血症（HUA）与血脂的相关性，为指导该地区老年人疾病防治提供依据。方法：采用整群随机抽样法，以任丘市城乡年龄60~70岁的常住居民为筛查对象，共计5010名，其中男性2163名（43.2%），女性2847名（56.8%），平均年龄（64.29±3.05）岁，进行血尿酸（UA）、总胆固醇（TC）、甘油三酯（TG）、高密度脂蛋白胆固醇（HDL-L）、低密度脂蛋白胆固醇（LDL-L）检测。分析UA与性别、血脂之间的相关性。采用Logistic回归方法对HUA与血脂各组分之间的关系进行分析。结果：任丘地区老年人HUA的患病率为6.1%，其中老年男性HUA的患病率为9.8%，老年女性HUA的患病率为3.2%。男性HUA组中尿酸（UA）、TG、LDL-L水平分别为464.10（438.00~508.65）μmol/L、1.54（1.00~2.19）mmol/L、2.66（2.25~3.22）mmol/L，高于尿酸正常组的294.00（249.90~338.08）μmol/L、1.13（0.84~1.65）mmol/L、2.57（2.12~3.01）mmol/L（均P<0.05）。女性HUA组中尿酸（UA）、TG、LDL-L水平分别为454.15（434.15~480.78）μmol/L、2.14（1.47~3.18）mmol/L、2.96（2.52~3.76）mmol/L，高于尿酸正常组的209.00（209.00~299.80）μmol/L、1.53（1.10~2.20）mmol/L、2.87（2.40~3.33）mmol/L（均P<0.05）。多因素Logistic回归分析显示，TG是HUA的独立危险因素，HDL-L为HUA的保护因素。结论：HUA与血脂密切相关，以TG、HDL-L为著，根据血脂异常情况进行HUA筛查并干预，可减少心脑血管等疾病的发生。

【关键词】尿酸；高尿酸血症；血脂

Analysis of correlation between hyperuricemia and blood lipids of the elderly in Hebei Renqiu

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【Abstract】Objective: To investigate the hyperuricemia (HUA) and the correlation of blood lipids of the 60~70 years people in Renqiu area, and to provide the basis for guiding prevention and treatment of the elderly disease the region. Methods: According to the cluster random sampling method, Renqiu permanent residents with the age of 60 to 70 years were selected as a screening object. In the total 5010 cases screened object, 2163 were male (43.2%), 2847 were female (56.8%), with an average age of (64.29±3.05) years. The data of blood uric acid and total cholesterol (TC), triglyceride (TG), high-density lipoprotein (HDL-C), low-density lipoprotein (LDL-C) were collected. The relationship between blood uric acid and blood lipids were analyzed. Logistic regression method was used to analysis the relationship between the hyperuricemia and lipids components. Results: The overall prevalence of hyperuricemia in Renqiu was 6.1% (9.8% in male, 3.2% in female). In men HUA group, the levels of blood uric acid, TG and LDL-L were 464.10 (438.00~508.65) μmol/L, 1.54 (1.00~2.19) mmol/L, 2.66 (2.25~3.22) mmol/L, which were higher than those of normal uric acid group of 294.00 (249.90~338.08) μmol/L, 1.13 (0.84~1.65) mmol/L and 2.57 (2.12~3.01) mmol/L (P<0.05). In women HUA group, the levels of blood uric acid, TG and LDL-L were 454.15 (434.15~480.78) μmol/L, 2.14 (1.47~3.18) mmol/L, 2.96 (2.52~3.76) mmol/L, which were higher than those of normal uric acid group of 209.00 (209.00~299.80) μmol/L, 1.53 (1.10~2.20) mmol/L and 2.87 (2.40~3.33) mmol/L (P<0.05). Logistic multi-factor regression analysis showed that TG was an independent risk factor for hyperuricemia, and that HDL-L and gender were protective factors. Conclusion: Hyperuricemia is closely associated with blood lipid, especially with TG and HDL-L, so we could screening HUA by blood lipid, which can reduce the occurrence of cardiovascular disease effectively.
染色体9p21 上两个单核苷酸多态性位点与新疆维汉两族2型糖尿病人群大血管病变的相关性研究

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目的 研究染色体9p21上两个单核苷酸多态性(SNP)位点(rs2383206, rs10757278)在新疆维汉两族人群中的分布，探讨与所有病例中大血管病变(冠状动脉病变，颈动脉硬化及外周动脉病变)发生率的相关性及危险因素；进一步研究在2型糖尿病(T2DM)中维汉两族染色体9p21上两个SNP位点(rs2383206, rs10757278)与大血管病变发生率的相关性及大血管病变的相关危险因素。

方法 选择内分泌科住院T2DM患者497例，其中维吾尔族298例，汉族199例；心内科非T2DM患者215例，其中维吾尔族93例，汉族122例，共712例。用PCR-SNPStream技术对rs2383206, rs10757278位点进行SNP分型及分析，对结果进行统计学分析。

结果 所有大血管病变组中按维、汉分组，两个SNP位点的基因型分布差异无统计学意义(rs2383206: $\chi^2 = 5.570, P = 0.062$; rs10757278: $\chi^2 = 2.721, P = 0.257$)，所有T2DM患者中按有无大血管病变分组，两个SNP位点的基因型分布差异无统计学意义(rs2383206: $\chi^2 = 0.120, P = 0.950$; rs10757278: $\chi^2 = 1.027, P = 0.598$)。Logistic逐步回归分析显示，维族T2DM患者大血管病变与增龄相关($\chi^2 = 28.820, P = 0.000$), 与脂肪肝相关($\chi^2 = 5.210, P = 0.020$)；汉族T2DM患者大血管病变与增龄($\chi^2 = 19.980, P = 0.000$), 空腹血糖(FPG)水平高($\chi^2 = 4.070, P = 0.044$), 糖化血红蛋白控制不佳相关($\chi^2 = 4.280, P = 0.040$)。

结论 染色体9p21上两个SNP位点(rs2383206, rs10757278)与维、汉所有病例大血管病变无相关性。增龄、FPG升高、糖化血红蛋白控制不佳伴脂肪肝是大血管病变发生的危险因素。

【关键词】 9p21 单核苷酸基因多态性；大血管病变；糖尿病, 2型
Conclusion This study found that there's no correlation between two single nucleotide polymorphisms (SNPs) loci (rs2383206, rs10757278) on chromosome 9 p21 large with macrovascular in Uygur group and Han group. Increasing age, higher FPG and poor controlled with glycosylated hemoglobin combined with fatty liver were the risk factors for macrovascular.

【Key words】 9p21 single nucleotide polymorphism genes; Macrovascular; Diabetes mellitus, Type 2
The clinical effect of specific immune therapy for children with allergic rhinitis and its influence on the level of serum IL-17 and IL-35  

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【Abstract】 Objective  To study the clinical effect of specific immune therapy for children with allergic rhinitis (AR) and its influence on the level of serum IL-17 and IL-35. Methods  174 children with AR were chosen as the research group, who were used specific immune therapy for 24 months. In same period, 110 cases of healthy children were selected as the control group. Curative effect was evaluated by rhinitis symptoms total score (TRSS) points rate. quality of life was evaluated by nasal conjunctivitis related quality of life questionnaire (RQLQ) score. Pulmonary function before and after treatment, serum Eos counting, IL-17, IL-35 were detected. Results  (1) In research group, the total effective rate after treatment of 2 years was 89.66%, which was significantly higher than 71.26% after treatment of 1 year, there was statistically significant difference ($\chi^2 = 18.716, P < 0.05$). (2) In the research group, TRSS score and RQLQ score after treatment of 1 year and 2 years were lower than that before treatment ($t = 28.360, 42.850, 7.749, 48.780, 42.850$, all $P < 0.05$), and the data after treatment of 2 years were less than that after treatment of 1 year ($t = 19.207, 10.558$, all $P < 0.05$). (3) In the research group, FEV1/predictive value after treatment of 1 year and 2 years elevated compared to that before the treatment, the airway resistance value/forecast and Eos count were lower than that before the treatment ($t = 15.972, 27.811, 48.780, 62.211, 10.930, 25.360$, all $P < 0.05$). FEV1/predictive value after treatment of two years was higher than that after treatment of 1 year, airway resistance value/forecast and Eos counts were less than that after treatment of 1 year ($t = 8.728, 14.707, 16.488$, all $P < 0.05$). Conclusion  Effect of specific immune treatment on children with allergic rhinitis is better, specific immune treatment can improve the
clinical symptoms, inhibit IL-17, promote IL35 and improve lung function and quality of life of patients.

【Key words】 Rhinitis, Allergic, Perennial; Immunotherapy; Interleukin – 17; Interleukin – 35
冠状动脉介入诊疗术后 TR-Band 止血器止血策略的研究

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【摘要】目的 通过观察冠状动脉介入诊疗术后 TR-Band 压迫止血器的止血效果及与血管周围并发症的发生情况及舒适度情况，寻找 TR-Band 压迫止血器的最佳止血策略。方法采用前瞻性研究，将 150 例经冠状动脉路径行冠状动脉介入诊疗术冠心病患者按数字表法随机分为三组，A 组的 TR-Band 压迫止血器初始放气时间 3 h，每次 2 mL，总压迫时间 10 h；B 组的 TR-Band 压迫止血器初始放气时间 2 h，每次 3 mL，总压迫时间 8 h；C 组的 TR-Band 压迫止血器初始放气时间 1 h，每次 2 mL，总压迫时间 6 h。观察并比较三组患者的止血效果，止血器初始放气时间及压迫时间一次。结果 三组压迫止血后，术后 2 h 指指血氧饱和度均正常，三组间差异无统计学意义 ( \( P > 0.05 \) )；A 组皮损、血肿、淤青、桡动脉闭塞发生例数分别为 4, 3, 5, 2 例，B 组分别为 3, 4, 6, 1 例，C 组分别为 2, 5, 6, 0 例，三组皮损、血肿、淤青、桡动脉闭塞局部并发症差异无统计学意义 ( \( P > 0.05 \) )；三组舒适度（麻木、肿胀、疼痛）差异均有统计学意义（\( F_{\text{麻木}} = 8.215, F_{\text{肿胀}} = 7.657, F_{\text{疼痛}} = 7.985, \text{均 } P < 0.01 \)）。结论 TR-Band 压迫止血器在冠状动脉介入诊疗术后可以达到有效止血，不同的放气时间、压迫时间及每次放气量的合理调节对患者的舒适度产生一定的影响。

【关键词】止血；TR-Band 止血器；冠状动脉介入术

Strategy of postoperative TR – Band tourniquet to stop bleeding in coronary interventional treatment

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【Abstract】Objective To observe the different methods of hemostasis and comfort of the TR – Band compression hemostasis device after coronary intervention and to find the best strategy for TR – Band to stop the bleeding.

Methods 150 patients with coronary artery disease were randomly divided into three groups according to the digital table method. The initial time of TR – Band compression hemostasis of group A was 3 h, ( once per hour, 2 mL per time, total compression time was 10 h), while that of group B was 2 h ( once in every two hours, 3 mL per time, total compression time was 8 h), and that of group C was 1 h ( once per hour, 2 mL per time, total compression time was 6 h). Thumb oxygen saturation, complications and comfort level in the three groups of patients were observed and compared.

Results The differences between the three groups of oppression hemostasis before and after 2 h thumb oxygen saturation were normal, the three groups had no statistical significance ( \( P > 0.05 \) ). Lesions, hematoma, bruising and radial artery occlusion occurred rate of group A were respectively 4, 3, 5, 2 cases, those of group B were 3, 4, 6, 1 cases, and those of group C were 2, 5, 6, 0 cases. Lesions, hematoma, bruising, radial artery occlusion of local complication incidence of the three groups showed no statistical significance ( \( P > 0.05 \) ). The comfort level (numbness, swelling, pain) of the three groups had statistically significant differences ( \( F_{\text{numbness}} = 8.215, F_{\text{swelling}} = 7.657, F_{\text{pain}} = 7.985, \text{均 } P < 0.01 \) ). Conclusion TR – Band compression hemostasis device can achieve effective hemostasis in the treatment of coronary artery intervention. And the reasonable adjustment of different bleeding time, compression time and the amount of bleeding can affect the comfort of patients.

【Key words】Hemostasis; TR – Band hemostat; Coronary intervention

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血清降钙素原、白细胞介素 6 在腰椎间盘突出症患者早期诊断与预后评估中的意义

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【摘要】目的 探讨血清降钙素原（PCT）、白细胞介素 6（IL-6）在腰椎间盘突出症患者早期诊断与预后评估中的价值，及其与病程、腰椎功能的相关性。方法 收集腰椎间盘突出症患者 100 例（观察组）及非腰椎源性疾病患者 35 例（对照组），对术前临床症状均给予日本骨科学会腰椎功能评分（JOA 评分），应用酶联免疫吸附法测定两组患者 PCT 和 IL-6 的含量变化，通过直线相关分析探讨 PCT、IL-6 与病程等的相关性。结果 观察组血清 PCT、IL-6 含量分别为（22.76 ± 1.73）ng/L、（215.34 ± 2.37）ng/L，对照组血清 PCT、IL-6 含量分别为（9.75 ± 2.36）ng/L、（51.22 ± 2.65）ng/L，两组差异均有统计学意义（t = 44.46, 463.37, 均 P < 0.001）；IL-6 与腰椎间盘突出症患者病程呈负相关（r = −0.32, P = 0.000），与患者 JOA 评分呈正相关（r = 0.35, P = 0.001）；PCT 与患者病程呈正相关（r = 0.45, P = 0.003）。结论 PCT、IL-6 在腰椎间盘突出症早期诊断中有一定的作用，且与患者病程、腰椎功能情况变化有一定的相关性。

【关键词】椎间盘移位；降钙素原；白细胞介素 6

A study on the role of procalcitonin (PCT) and interleukin −6 (IL −6) in the early diagnosis and prognostic evaluation of the patients with lumbar intervertebral disc herniation Liu Xiaogang, Yin Lanfang, Deng Qiang. Department of Orthopedics, Weihai Hospital of Qingdao University, Weihai, Shandong 264200, China Corresponding author: Deng Qiang. Email: 106491866@qq.com

【Abstract】Objective To explore the value of procalcitonin (PCT) and interleukin −6 (IL −6) in the early diagnosis and prognostic evaluation of the patients with lumbar intervertebral disc herniation, and their correlation with the course and lumbar function. Methods 100 patients with lumbar disc herniation (study group) and 35 patients with lumbar non-borne diseases (control group) were collected, their preoperative clinical symptoms were scored on the basis of the lumbar scoring system of Japanese Orthopaedic Association (JOA), the enzyme − linked immunosorbent assay was applied to determining the content changes of PCT and IL −6 of the two groups, and the linear correlation analysis was used to explore the relevance of PCT and IL −6 to the course. Results The contents of the PCT and IL −6 in the study group’s serum were respectively (25.13 ± 0.86) ng/L and (10.26 ± 0.36) ng/L, while those in the control group’s serum were respectively (223.85 ± 0.61) ng/L and (50.11 ± 1.23) ng/L, both with statistical significance (t = 2.542, 2.06, P < 0.01). The IL −6 was positively correlated with the disease duration of the patients with lumbar disc herniation (r = 0.32, P = 0.000), and negatively correlated with their JOA score (r = −0.45, P = 0.003), and the PCT was positively correlated with the patients’ disease duration (r = 0.35, P = 0.001), and negatively correlated with their JOA score (r = −0.53, P = 0.005). Conclusion The PCT and IL −6 have a certain role in the early diagnosis of lumbar disc herniation, and have some relevance to the course of disease and the lumbar function changes.

【Key words】Intervertebral disc displacement; Procalcitonin; Interleukin −6
苦参素在良性气管狭窄病变腔内治疗的应用分析

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【摘要】 目的 初步探讨局部喷洒苦参素注射液在良性气管狭窄病变腔内治疗的有效性及其副作用。
方法 收集 35 例良性气管狭窄病变患者的临床资料，通过评估咳嗽、气短等临床症状，胸部高分辨 CT (HRCT) 三维重建、超细支气管镜下观察狭窄程度及长度，依照各病因、狭窄情况的不同而采取相应序贯多种介入联合治疗方法之后，采用一次性内镜喷洒管喷洒苦参素注射液。依据狭窄部位的长度、程度，截面部位水肿严重程度，且狭窄长度 ≥ 2 cm 或截面积 < 正常截面积 50% 即选择高浓度 (1 200 mg/mL)，否则选择低浓度 (600 mg/mL)。术后 1 周根据临床症状、HRCT 的三维重建、超细支气管镜下的检查动态观察病情变化，超细支气管镜下观察狭窄程度及长度 1次，累计 2～4 次。总体随访时间 3 个月，期间主要观察患者咳嗽、咳痰或痰血、呼吸困难变化情况等。结果 完全有效 11 例，基本有效 17 例，完全无效 7 例，总有效率为 80.0% (28/35)。总体并发症发生率为 42.8% (15/35)，无死亡病例发生。无与苦参素注射液局部喷洒直接相关并发症发生。结论 气管镜下局部喷洒苦参素注射液有可能在抑制瘢痕形成、阻断气管再狭窄等方面发挥一定的作用，具有安全性较高、疗效确切、操作简便等优点，值得进一步研究探讨。
【关键词】 苦参素；支气管镜检查；治疗；腔内；气管良性狭窄

A applicational analysis about the effect of Marine Injection on combined therapy of benign tracheobronchial stenosis  Chen Xujun, Lu Ye, Cui Hufang, Wu Yiqun, Huang Yihua, Wu Cuihua, Chen Minghong. Department of Respiratory Section II, the Third Hospital of Xiamen, Affiliated to Fujian University of Traditional Chinese Medicine, Xiamen, Fujian 361100, China

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【Abstract】Objectives To preliminarily explore the effect and adverse reaction of Marine Injection combined therapy through local spray in benign tracheobronchial stenosis. Methods 19 cases of bronchial tuberculosis were collected in our department. By assessing cough, shortness of breath and other symptoms, chest high – resolution CT (HRCT) of three – dimensional reconstruction, and length were observed by ultrafine bronchial stenosis. According to the pathogeny and types of stenosis, combined multiple intervention were sequentially adopted, and then Marine Injection was sprayed throughoscope – off endoscopic spray tube. All the subjects were divided into the two groups, the higher concentration Marine injection (1 200 mg/mL) group was chosen with the condition of serious inflammation, edema, ulcer and necrosis, obvious local granulation tissue hyperplasia, severe scar stenosis, and the length of stenosis greater than 2 cm or the sectional area of stenosis less than 50% of the normal sectional area, otherwise the low concentration group was chosen. The subjects were reexamined by clinical symptoms, high – resolution CT (HRCT) of three – dimensional reconstruction, and ultrafine bronchoscopy a week after the surgery to dynamically observe the local changes. Depending on the situation, the injection was sprayed once a week, adding up to 2 – 4 times. Follow – up visit lasted for 3 months, cough, expectoration or hemoptysis, and dyspnea were observed. Results 11 cases were effective fully, 17 cases were effective substantially, 7 cases were ineffective, the total effective rate was 80% (28/35). The overall complication rate was 42.8% (15/35), no deaths occurred. No complications related to local spraying of Marine were seen. Conclusion Local spray of Marine Injection may have preferable effect that inhibits scar formation and prevention airway restenosis. It is worth further study with a high security, precise clinical effect, easy operation and etc.

【Key words】Marine; Bronchoscopy examination; Treatment; Intracavity; Benign tracheal stenosis

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不同甲状腺切除术对老年甲状腺癌患者术后生活质量的影响

冯建忠

【摘要】目的 比较不同的甲状腺切除术对老年甲状腺癌患者术后生活质量的影响。方法 选择老年甲状腺癌患者56例，根据手术方式的不同将患者分为观察组25例和对照组31例，其中观察组患者接受小切口改良术治疗，对照组患者接受常规甲状腺切除术治疗。记录和比较两组患者的手术时间、术中出血量、术中输血量、术后引流量、住院时间、治疗后1个月后的并发症情况以及VAS疼痛评分和SF-36生活质量评分，并进行统计分析。结果 观察组的手术时间、术中出血量、术中输血量、术后引流量以及住院时间明显低于对照组，差异均有统计学意义（t=3.568,2.139,6.368,3.716,3.569,均P<0.05）；观察组的VAS评分和SF-36评分分别为（2.02±0.25）分和（77.21±8.13）分，明显优于对照组的（2.61±0.29）分和（43.46±5.63）分，差异均有统计学意义（t=3.867,4.568，均P<0.05）；观察组和对照组的并发症总发生率分别为16.0%（4/25）和35.5%（11/31），差异均有统计学意义（χ²=0.035, P<0.05）。结论 小切口改良术治疗老年甲状腺癌患者具有更好的疗效，且患者并发症少，明显提升其生活质量，在临床上值得推广应用。

【关键词】甲状腺切除术；老年甲状腺癌；生活质量

Explore the efficacy of different thyroidectomy surgery on postoperative quality of life in elderly patients with thyroid cancer Feng Jianzhong. Department of Surgery, the People’s Hospital of Deqing, Huzhou, Zhejiang 313200, China

【Abstract】Objective To compare the efficacy of different thyroidectomy surgery on postoperative quality of life in elderly patients with thyroid cancer. Methods 56 patients with thyroid cancer in the hospital from August 2011 to October 2014 were selected, and they were divided into observation group and control group according to the different methods of treatment. Patients in the observation group accepted small incision improvement while the control group accepted conventional thyroidectomy. The operation time, intra-operative blood loss, intra-operative blood transfusion, postoperative drainage, length of hospitalization period, complications occurring, VAS pain score and SF-36 score 1 month after treatment in two groups were recorded for statistical analysis. Results In the observation group, the operation time, intra-operative blood loss, intra-operative blood transfusion, postoperative drainage, length of hospitalization period were obviously lower than these in the control group, the difference was statistically significant (t=3.568,2.139,6.368,3.716,3.569, all P<0.05). The VAS pain score and SF-36 score in the observation group of (2.02±0.25) points and (77.21±8.13) points were obviously higher than these in the control group of (2.61±0.29) points and (43.46±5.63) points, the difference was statistically significant (t=3.867,4.568,all P<0.05). The rates of postoperative complication in the control group and the observation group were respectively 16.0% (4/25) and 35.5% (11/31), the difference was statistically significant (χ²=0.035, P<0.05). Conclusion Small incision improvement has a better curative effect with fewer complications and can improve quality of life for patients with thyroid cancer, thus it’s worth popularization and application in clinic.

【Key words】Thyroidectomy surgery;Senile thyroid cancer;Quality of life
论著

原发性高血压患者血浆中性粒细胞明胶酶相关脂质运载蛋白和血清胱抑素的变化及临床意义

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【摘要】目的 检测原发性高血压(Essential hypertension, EH)患者血浆中性粒细胞明胶酶相关脂质运载蛋白(neutrophil gelatinase–associated lipocalin, NGAL)和血清胱抑素 C(CysC)的浓度并探讨其临床意义。方法 选取 92 例 EH 患者为 EH 组,另选取 88 例健康体检者作为健康对照组。对所有入选对象分别检测血浆 NGAL 和血清 CysC 的浓度及各项生化指标,各组间进行比较。结果 EH 组血浆 NGAL 浓度为(149.22±11.52)μg/L,血清 CysC 的浓度为(0.92±0.03)mmol/L;健康对照组血浆 NGAL 浓度为(101.4±7.71)μg/L,血清 CysC 的浓度为(0.71±0.02)mmol/L。EH 组血浆 NGAL 浓度和血清 CysC 浓度均明显高于对照组(F=27.491, P<0.01; F=24.646, P<0.01);且血浆 NGAL 浓度在 EH1 级、2 级和 3 级间呈逐渐增高趋势。血浆 NGAL 与血清 CysC 浓度呈正相关(r=0.48, P<0.01)。结论 EH 患者血浆 NGAL 和血清 CysC 的水平明显升高,且与高血压的分级及由高血压引起的肾脏损伤程度密切相关,两者均可作为早期发现 EH 引起的肾功能损害的诊断指标。

【关键词】高血压;粒细胞;明胶酶类;明胶酶;膜转运蛋白质类;胱抑素 C

Changes of plasma NGAL and serum CysC in patients with essential hypertension and its clinical significance

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【Abstract】Objective To explore the levels of neutrophil gelatinase–associated lipocalin(NGAL) and Serum cystatin C(CysC) in plasma in essential hypertension(EH) and to discuss their clinical significance. Methods 92 patients with essential hypertension were selected as EH group. At the same time, 88 healthy subjects were selected as the healthy control group. The levels of plasma NGAL, serum CysC and some other biochemical markers were detected. The results were statistically processed. Results The level of Plasma NGAL in EH group was (149.22 ± 11.52) μg/L and the level of serum CysC in EH group was (0.92 ± 0.03) mmol/L. The level of Plasma NGAL in the healthy control group was (101.4 ± 7.71) μg/L and the level of serum CysC in the healthy control group was (0.71 ± 0.02) mmol/L. The levels of Plasma NGAL and serum CysC were significantly increased in EH group compared with those of the healthy control group (F = 27.491, P < 0.01; F = 24.646, P < 0.01). Plasma NGAL was positively correlated with the degree of EH and the level of serum CysC (r = 0.48, P < 0.01). Conclusion Plasma NGAL and serum CysC were significantly increased in EH patients, with a significant positive correlation to the degree of nephropathy damage. Both of them can become diagnostic measurements for early diagnosis of nephropathy damage induced by EH.

【Key words】Hypertension; Granulocytes; Gelatinases; Membrane transport proteins; CysC

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利巴韦林雾化治疗呼吸道合胞病毒性毛细支气管炎的疗效观察

李根  张建青

【摘要】目的 探讨利巴韦林雾化吸入对呼吸道合胞病毒(RSV)性毛细支气管炎患儿的疗效及血清白介素6(IL-6)、白介素10(IL-10)和半胱氨酰白三烯(CysLTs)水平的影响。方法 选择81例RSV性毛细支气管炎患儿，按随机数字表法分为观察组和对照组。两组患儿均予布地奈德等雾化吸入及对症支持治疗，症状消失后停药。观察组在此基础上予加用利巴韦林雾化吸入。比较两组住院及症状消失时间，观察两组患儿治疗前、后血清IL-6、IL-10和CysLTs水平的变化。结果 观察组住院时间、喘憋、咳嗽及肺部啰音消失时间分别(6.58±1.36)d、(4.86±1.31)d、(4.00±1.52)d，对照组分别为(8.92±1.12)d、(2.68±1.22)d、(7.34±1.39)d，两组差异均有统计学意义(t=-8.387,P＜0.05)。治疗后，观察组血清IL-6、IL-10和CysLTs水平差异均无统计学意义(均P＞0.05)。结论 相比布地奈德雾化吸入治疗，早期利巴韦林联合布地奈德等雾化吸入治疗RSV性毛细支气管炎的疗效确切，能缩短RSV性毛细支气管炎患儿的临床症状消失时间及住院时间，减轻气道局部炎性反应。

【关键词】呼吸道合胞病毒; 毛细支气管炎; 利巴韦林

The curative effect of inhaled ribavirin in children with respiratory syncytial virus bronchiolitis  Li Gen, Zhang Jianqing. The Graduate School of Guangdong Medical University, Zhanjiang, Guangdong 524000, China

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【Abstract】Objective To investigate the clinical effect of inhaled ribavirin on the therapeutic actions and the expression of interleukin 6 (IL-6), interleukin 10 (IL-10) and CysLTs in children with RSV bronchiitis. Methods 81 cases of children with RSV bronchiitis, were chosen and randomly divided into observing group and control group. Two groups of children were inhaled pulmicort Respules and accessed others support treatment, until the symptoms disappeared. But observing group were added with ribavirin atomization. Treatments time and symptoms disappearance time in the hospital were compared, and the serum IL-6, IL-10 and CysLTs level changes before and after treatment were observed. Results Treatments time and symptoms (wheezing, coughing, dry and wet rale) disappearance time in observation group were shorter than those of the control group with (6.58±1.36) d vs. (8.92±1.12) d, (2.68±1.22) d vs. (7.34±1.39) d and (4.00±1.52) d vs. (7.34±1.39) d, which with significant differences (t=-8.387, -7.012, -8.267, -6.887, all P＜0.01). Before the treatment, two groups had no significant difference (P＞0.05). After treatment, the levels of IL-6 and CysLTs were significantly lower in the observation group, and the levels of IL-10 were higher with (76.59±10.77) ng/L vs. (43.25±3.97) ng/L, (34.40±7.19) ng/mL vs. (48.26±8.36) ng/mL and, (43.25±3.97) ng/L vs. (31.39±4.81) ng/L. The significant differences were observed in two groups (t=-16.74, -8.024, 12.315, all P＜0.05). Conclusion Compared with general therapy, the curative effect was significant. Combined inhaled ribavirin and pulmicort respulas in RSV bronchiolitis early, can reduce patients' clinical symptoms and the treatment time.

【Key words】Respiratory syncytial virus; Bronchiolitis; Ribavirin
静脉注射丙种球蛋白治疗川崎病无反应的相关因素分析

王琴

【摘要】目的 讨川崎病患儿采用静脉注射丙种球蛋白 (IVIG) 治疗发生对治疗无反应性的相关危险因素, 为临床早期调整治疗方案提供依据。方法 回顾性分析187例川崎病患儿的临床资料, 根据 IVIG 治疗的敏感性分为敏感组 (160例) 和非敏感组 (27例), 比较两组患儿入院时的基线资料、临床表现差异, 并进行 Logistic 回归分析筛选相关因素。结果 非敏感组患儿的白细胞计数 (WBC)、中性粒细胞计数 (N)、血红蛋白 (Hb)、C反应蛋白 (CRP)、红细胞沉降率 (ESR)、白蛋白 (Alb)、总胆固醇 (TB)、免疫球蛋白 (IgG) 测定值分别为 (18.4±5.4)×10^9/L、(0.72±0.16)×10^9/L、(99.2±11.3) g/L、(108.4±43.2) mg/L、(75.5±21.8) mm/h、(29.8±3.1) g/L、(21.6±9.3) μmol/L、(11.8±3.4) g/L, 敏感组分别为 (15.1±4.3)×10^9/L、(0.62±0.13)×10^9/L、(109.5±10.4) g/L、(73.5±41.5) mg/L、(55.3±19.4) mm/h、(33.8±3.5) g/L、(12.9±8.8) μmol/L、(7.6±3.5) g/L, 两组差异均有统计学意义 (P<0.05)。Logistic 回归分析结果显示; 对川崎病患儿采用 IVIG 治疗的无反应性主要前三位危险因素为 ESR (OR=2.083), TB (OR=1.632), CRP (OR=1.592), 而高 Hb (OR=0.743), Alb (OR=0.447) 可以降低 IVIG 治疗的无反应性风险。结论 初诊时较高的 WBC, N, CRP, ESR, TB, IgG 水平可能加大川崎病患儿发生 IVIG 治疗的无反应性风险, 而高 Hb, Alb 水平有利于降低这一风险因素。

【关键词】川崎病; 静脉注射丙种球蛋白; 无反应性; 危险因素

Correlation factor analysis of intravenous immunoglobulin with no response to treatment in Kawasaki Disease

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【Abstract】Objective To study treatment has no risk factors associated with response to treatment with intravenous gamma globulin (IVIG) protein in children with Kawasaki disease, so as to provide basis for clinical early treatment scheme. Methods The clinical data of 187 cases of Kawasaki disease in children were retrospective analyzed. Patients were divided into sensitive group (160 cases) and non sensitive group (27 cases) according to the sensitivity of IVIg treatment, differences in baseline data were compared between the two groups of children admitted to hospital. Related factors were screened by clinical manifestations and logistic regression analysis. Results In children of non sensitive group, white blood cell count (WBC), neutrophil cell count (N), hemoglobin (HB), C-reactive protein (CRP), erythrocyte sedimentation rate (ESR), albumin (ALB), total bilirubin (TB) and immunoglobulin (IgG) values were determined respectively of (18.4±5.4)×10^9/L、(0.72±0.16)×10^9/L、(99.2±11.3) g/L、(108.4±43.2) mg/L、(75.5±21.8) mm/h、(29.8±3.1) g/L、(21.6±9.3) μmol/L and (11.8±3.4) g/L. The data of sensitive group were (15.1±4.3)×10^9/L、(0.62±0.13)×10^9/L、(109.5±10.4) g/L、(73.5±41.5) mg/L、(55.3±19.4) mm/h、(33.8±3.5) g/L、(12.9±8.8) μmol/L and (7.6±3.5) g/L. The difference between the two groups was statistically significant (P<0.05). Logistic regression analysis results showed that ESR (OR=2.083), TB (OR=1.632), CRP (OR=1.592) were three main risk factors of IVIG in the treatment of children with Kawasaki disease, and high Hb (OR=0.743), Alb (OR=0.447) could reduce the risk of IVIG treatment. Conclusion In the first visit, higher WBC, N, CRP, ESRTBand IgG levels may increase the reactive risk of IVIG treatment in children with Kawasaki disease.

【Key words】Kawasaki disease; Intravenous immunoglobulin; No response; Risk factors

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血清同型半胱氨酸、N-末端脑钠肽前体水平与老年冠心病患者冠状动脉病变程度的相关性研究

丁玲岩 马志芳 游美 孟立军

【摘要】 目的 探讨老年冠心病患者血清同型半胱氨酸(Hcy)、N-末端脑钠肽前体(NT-proBNP)水平与冠状动脉病变程度之间的关系及意义。方法 选择冠脉造影检查，年龄≥60岁的冠心病患者129例作为研究对象，检测血清Hcy及NT-proBNP水平，并行冠脉造影检查，造影结果正常24例(对照组)、稳定型心绞痛(SAP)组28例，非ST段抬高型急性冠状动脉综合征(NSTEACS)组47例，急性ST段抬高型心肌梗死(AMI)组30例，采用Gensini评分评估冠状动脉病变严重程度，并分析患者血清Hcy、NT-proBNP水平与冠脉造影冠状动脉病变程度之间的关系。结果 AMI组血清Hcy、NT-proBNP水平分别为(18.13±8.26)μmol/L、(450.45±230.45)pg/mL，显著高于NSTEACS组[(16.96±9.04)μmol/L、(300.96±170.94)pg/mL]，SAP组[(14.35±5.31)μmol/L、(130.35±85.31)pg/mL]及对照组[(10.19±3.18)μmol/L、(65.19±40.18)pg/mL][(t=5.73,3.64;P=0.05),NSTEACS组平均Hcy、NT-proBNP水平明显高于SAP组及对照组(t=5.06,3.54;P=0.05),SAP组平均Hcy、NT-proBNP水平高于对照组(t=5.89,4.23;P<0.05)。冠脉狭窄多支病变、双支病变、单支病变患者血清Hcy、NT-proBNP水平分别为(16.13±7.26)μmol/L、(14.35±7.29)μmol/L、(12.67±6.48)μmol/L、(416.45±210.45)pg/mL、(240.54±160.71)μmol/L、(120.76±140.57)pg/mL，三组比较差异均有统计学意义(F=13.15,140.25;P<0.05,P<0.01)。血清Hcy、NT-proBNP水平与Gensini评分有明显相关性(r=0.342,P<0.05;r=0.962,P<0.01)。

结论 血清Hcy、NT-proBNP水平与老年冠心病患者冠状动脉病变程度、狭窄支数呈正相关。测定血清Hcy、NT-proBNP水平对于老年冠心病患者的冠脉病变程度和病情的评估具有重要的临床意义。

【关键词】 同型半胱氨酸;N-末端脑钠肽前体;冠状动脉疾病;老年人

Correlation between serum homocysteine,N–terminal brain natriuretic peptide levels and extent of coronary artery lesions in elderly patients with coronary heart disease  Ding Lingyan, Ma Zhifang, You Mei, Meng Lijun. Department of Medicine Cardiovascular, Binzhou central hospital, Binzhou, Shandong 251700, China

【Abstract】 Objective To investigate the relationship between serum homocysteine (Hcy) and N–terminal brain natriuretic peptide (NT–proBNP) and the severity of coronary artery disease in elderly patients with coronary heart disease (CHD). Methods 129 cases of inpatient with concurrent coronary angiography whose age was over 60 years old were selected as the research object. Serum Hcy and NT-proBNP level were detected, and parallel coronary angiography were administrated. Angiography was normal in 24 cases (CONTROL group), while 28 cases were stable angina pectoris (SAP group), non ST segment elevation acute coronary comprehensive syndrome group (NSTEACS group) had 47 cases, acute ST segment elevation myocardial infarction group had 30 cases (AMI group). was used to The severity of coronary artery lesions were assessed by Gensini score and the relationship between serum Hcy and NT-proBNP levels and coronary angiography in the diagnosis of coronary artery disease severity were analyzed. Results AMI group, the mean serum Hcy and NT-proBNP levels[(18.13±8.26)μmol/L, (450.45±230.45)pg/mL] were significantly higher than those of NSTEACS group[(16.96±9.04)μmol/L, (300.96±170.94)pg/mL], SAP group[(14.35±5.31)μmol/L, (130.35±85.31)pg/mL] and control group[(10.19±3.18)μmol/L, (65.19±40.18)pg/mL] (t=5.73,3.64;P=0.05). In NSTEACS group, average of Hcy and NT-proBNP levels were significantly higher than those of SAP group and control group (t=5.06,3.54;P=0.05). In SAP group, the average of Hcy and NT-proBNP levels were higher than those in the control group (t=5.89,4.23;P<0.05). The levels of serum Hcy and NT –proBNP in patients with coronary artery stenosis, double vessel disease and single vessel disease were(16.13±7.26)μmol/L, (7.29±14.35)μmol/L, (12.67±6.48)pg/mL, (210.45±416.45) pg/mL and (160.71±140.57) pg/mL, the difference was statistically
significant \( F = 140.25, F = 13.15; P < 0.05, P < 0.01 \). The levels of serum Hcy and NT – proBNP were significantly correlated with Gensini score \( r = 0.342, P < 0.05; r = 0.962, P < 0.01 \). **Conclusion** Correlation between serum Hcy, NT – proBNP levels in elderly patients with coronary heart disease and the severity of coronary artery disease and stenosis count is positive. Determining the levels of serum Hcy and NT – proBNP in patients with coronary heart disease and the assessment of the severity of the disease has important clinical significance.

**[Key words]** Homocysteine; N – terminal brain natriuretic peptide precursor; Coronary artery disease; Aged.

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在不孕症治疗中的价值

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【摘要】 目的 探讨子宫输卵管造影联合 B 超监测卵泡在不孕症治疗中的临床价值。方法 将 146 例不孕症患者按照数字表法随机分为观察组和对照组各 73 例，其中对照组采用综合优化治疗，而观察组则在综合优化治疗的基础上进行优势输卵管侧助孕治疗。所有患者均接受子宫输卵管造影，而观察组则采用子宫输卵管造影联合 B 超监测卵泡以确定患者的优势卵泡，比较两组患者的妊娠情况。结果 146 例不孕症患者经子宫输卵管造影检查后发现输卵管积水 39 例，占 26.71%，输卵管阻塞 29 例，占 19.86%，输卵管通而不畅 51 例，占 34.93%，输卵管通畅 27 例，占 18.49%。观察组和对照组不孕症患者的两侧输卵管的造影情况比较差异无统计学意义（P>0.05）。观察组的宫内妊娠率（41.10%）明显高于对照组（20.55%）（χ² = 7.23，7.32，均 P<0.05）。异位妊娠率（28.77%）则明显低于对照组（50.68%）（χ² = 10.57，5.92，13.85，均 P<0.05）。结论 子宫输卵管造影联合超声监测卵泡发育，能准确预测排卵日期，指导助孕干预措施，提高不孕者的宫内妊娠率，预防异位妊娠的发生。

【关键词】 子宫输卵管造影；超声监测；卵泡；不孕症

Observation of the therapeutic effect of combining hysterosalpingography and B ultraphonic monitor for the follicle on the infertilitas feminis  Le Huaizhe, Sun Liangrong, Liu Jinlin. Department of Ultrasound, the Sixth People’s Hospital of Cixi, Cixi, Zhejiang, 315000, China

【Abstract】 Objective To investigate the therapeutic effect of combining hysterosalpingography and B ultraphonic monitor for the follicle on the infertilitas feminis. Methods 146 infertility patients were randomly divided into observation group and control group according to digital table method, 73 cases in each group. Patients in control group were treated with comprehensive optimization of treatment, while the observation group received fallopian canal side of progesterone based on the integrated optimization of treatment. All patients underwent uterine oviduct radiography, and the observation group used the fallopian tube with contrast − enhanced ultrasound in monitoring follicle to identify patients with dominant follicle. The pregnancy rate was compared between two groups. Results 146 cases of infertility patients with the uterus and fallopian tube radiography inspection found hydrosalpinx in 39 cases, accounted for 26.71%, 29 cases of tubal blockage, accounted for 19.86%, tubal and the poor in 51 cases (34.93%) , fallopian tube was through 27 cases (18.49%). There was no significant difference in the contrast between the two sides of the fallopian tube in the observation group and the control group (P > 0.05). The intrauterine pregnancy rate of the observation group (41.10%) was significantly higher than the control group (20.55%), while the ectopic pregnancy rate (28.77%) was significantly lower than the control group (50.68%) (χ² = 7.23, 7.32, all P < 0.05). The ectopic pregnancy in patients with tubal obstruction was significantly higher than that of tubal obstruction, tubal obstruction and tubal tubal type (χ² = 10.57, 5.92, 13.85, all P < 0.05). Conclusion Combining hysterosalpingography and B ultraphonic monitor can accurately predict the date of ovulation, help guide the pregnancy intervention measures, improve the infertility of intrauterine pregnancy rate and prevent the occurrence of ectopic pregnancy.

【Key words】 Hysterosalpingography; B ultraphonic monitor; Follicle; Infertilitas feminis

DOI: 10.3760/cma.j.issn.1008-6706.2015.18.015
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新生儿败血症病原学变迁及耐药性的临床研究
邓茂文 蔡强

【摘要】目的 探讨近年来宜宾市及周边地区新生儿败血症的病原学及耐药性特点，以期达到对临床诊治和预防的指导。方法 通过对365例败血症中167例血培养阳性的新生儿败血症的病原学及耐药性进行回顾性分析，并分析新生儿败血症的病原学变迁及耐药性特点。结果 在365例新生儿败血症血培养标本中，阳性病例167例，阳性率为45.75%，其中占首位的致病菌为表皮葡萄球菌58例（占34.73%），其次致病菌依次分别为溶血葡萄球菌29例（占17.37%）、金黄色葡萄球菌22例（占13.17%），其他球菌占15例（占8.98%），肺炎克雷伯菌感染18例（占10.78%），大肠埃希菌15例（占8.98%），其他革兰阴性细菌感染10例（占5.99%）。表皮葡萄球菌、溶血葡萄球菌感染率明显呈上升趋势。革兰阳性球菌对青霉素、头孢唑啉、苯唑青霉素、头孢西丁的耐药性高，对三代头孢、亚胺培南、美罗培南的耐药性较高，且有增加的趋势；对万古霉素敏感性100.00%。革兰阴性杆菌对氨苄青霉素、头孢唑啉及三代头孢等耐药率高，对亚胺培南、美罗培南高度敏感。结论 新生儿败血症的病原菌主要是葡萄球菌，其中最主要是凝固酶阴性的葡萄球菌（Coagulase-Negative Staphylococci CoNS），革兰阳性菌中表皮葡萄球菌、溶血葡萄球菌感染上升明显，革兰阴性菌中大肠埃希菌呈上升趋势。新生儿败血症细菌耐药有增高趋势，加强对耐药性的检测显得十分重要。

【关键词】婴儿，新生；败血症；病原学；耐药性

Clinical study on pathogenic flux and drug resistance of neonatal sepsis Deng Maowen, Cai Qiang. Department of Pediatrics, the People’s Hospital of Yibin, Yibin, Sichuan 644000, China

【Abstract】 Objective To study the characteristic of etiology and drug resistance of neonatal sepsis for rational use antibiotics in clinic. Methods The etiology and drug resistance of 167 positive hemoculture examples of 365 neonatal sepsis examples were retrospectively analyzed, and the characteristic of etiology diversify and drug resistance characteristic of neonatal sepsis were also analyzed. Results In 365 blood culture examples of neonatal sepsis, there were 167 positive cases, positive ratio was 45.75%. Among pathogenic bacterium, the first etiology was staphylococcus epidermidis, there were fifty – eight examples and account of 34.73%. The second was staphylococcus haemolyticus and accounts twenty – nine examples and 17.37%. The third was staphylococcus aureus which had twenty – two examples and account 13.17%. The annual infection rate of staphylococcus epidermidis and staphylococcus haemolyticus in the second five years were increased obviously. Gram – positive coccus drug resistance to penicillin, cephalazolin, oxazocilline and cefoxitin were very high and the rate of the second five years were higher than that of the first five years. Gram – positive coccus drug resistance to third – generation cephaloporins and imipenem and meropenem were higher than vancomycin and the rate of the second five years were higher than that of the first five years. Gram – positive coccus was 100.00% sensitive to vancomycin. Gram negative bacilli drug resistance rate to penbritin and cephalazolin and third – generation cephaloporins was the highest. Gram negative bacilli to meropenem and imipenem was hypersensitive in all antibiotics. Conclusion The chief pathogenic bacteria of neonatal septicemia is staphylococci. Among pathogenic bacterium, the main pathogenic bacteria is CoNS, and staphylococcus epidermidis and staphylococcus haemolyticus goes up significantly. Among gram – negative bacilli, the escherichia coli goes up. The drug resistance to bacteria goes up in neonatal sepsis, it is very important to monitor the drug resistance.

【Key words】 Infant, Newborn; Epticemia; Etiology; Drug resistance

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老年急性肺血栓栓塞症患者影响因素分析及预后观察

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【摘要】目的 探讨老年急性肺血栓栓塞症（PTE）患者的相关影响因素，并观察其预后，分析预防控制策略以降低发生率。方法 选择老年急性PTE患者50例，采用回顾调查分析相关影响因素并进行预防控制。结果 老年急性PTE患者主要发生疾病为合并慢性疾病42.00%（21/50）、合并下肢深静脉血栓形成（DVT）26.00%（13/50）及近期创伤、骨折、手术等20.00%（10/50）。老年急性PTE患者年龄≥70岁、卧床时间≥1个月的发生率为58.00%（29/50）和62.00%（31/50），均高于年龄<70岁、卧床时间<1个月患者的发病率，差异均有统计学意义（χ²=9.26, 9.80，均P<0.05）。结论 老年急性PTE主要与年龄、卧床时间、合并慢性疾病、合并下肢DVT及近期创伤、骨折、手术与多种因素密切相关，并相互交叉。在护理过程中掌握PTE的诱发危险因素，并采取有效的措施预防控制以减少或避免急性PTE的发生，改善患者预后。

【关键词】肺栓塞；危险因素；预后；老年人
促红细胞生成素联合铁剂对慢性心力衰竭合并贫血患者红细胞分布宽度的影响

林娟 高一丹

【摘要】 目的：研究促红细胞生成素联合铁剂对慢性心力衰竭合并贫血患者红细胞分布宽度（RDW）的影响。方法：选取慢性心力衰竭合并贫血患者148例，采用数字表法随机分为治疗组和对照组各74例。两组患者均接受规范化抗心衰治疗，治疗组在对照组基础上予促红细胞生成素和铁剂治疗。测定两组治疗前后RDW的变化，分析RDW与其他检测指标的相关性。结果：治疗组治疗后RDW为（13.08 ± 0.792）%，明显低于对照组的（14.32 ± 0.864）%（r = -8.974, P < 0.01）。治疗组治疗前RDW与NT-末端脑钠肽前体（NT-proBNP）、超敏C-反应蛋白（hs-CRP）呈正相关（r = 0.783, P < 0.01；r = 0.870, P < 0.01），与肌酐、血红蛋白呈负相关（r = -0.338, P < 0.01；r = -0.743, P < 0.01）。治疗组治疗前后RDW差值与NT-proBNP、hs-CRP、C反应蛋白差值呈正相关（r = 0.783, P < 0.01；r = 0.680, P < 0.01），与血红蛋白差值呈负相关（r = -0.459, P < 0.01），与肌酐、尿酸、LDL、胆固醇、甘油三酯、LVEF差值无明显相关性。结论：促红细胞生成素联合铁剂能有效改善慢性心力衰竭合并贫血患者心功能，纠正贫血，降低RDW水平。RDW水平与慢性心力衰竭合并贫血患者病情的严重程度呈正相关，可作为慢性心力衰竭合并贫血的患者病情评估及疗效判断的观察指标之一。

【关键词】 促红细胞生成素；铁剂；心力衰竭；充血性；贫血；红细胞分布宽度

Influence of erythropoietin therapy with oral iron supplementation on red blood cell distribution width in chronic heart failure patients with anemia

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【Abstract】Objective To analyze the effect of erythropoietin therapy with oral iron supplementation on red blood cell distribution width (RDW) in chronic heart failure patients with anemia. Methods 148 patients of chronic heart failure with anemia from September 2014 to March 2015 in our hospital were included and randomly divided into two groups with the random number table, with 74 cases in each group. The control group were treated with conventional anti heart failure therapy, the treatment group were treated with erythropoietin and oral iron supplementation on the basis of routine treatment for four weeks. RDW was tested by automatic five classification blood analyzer. The correlation between RDW and other detection indexes was analyzed. Results The levels of RDW in the treatment group were significantly lower than those of the control group (13.08 ± 0.792 vs 14.32 ± 0.864), r = -8.974, P < 0.01). Before treatment, bivariate analysis in the treatment group showed that RDW had positive correlation with NT-proBNP and high-sensitivity C-related protein (hs-CRP) (r = 0.783, P < 0.01; r = 0.870, P < 0.01), but negative correlation with serum creatinine (Cr) and hemoglobin (r = -0.338, P < 0.01; r = -0.743, P < 0.01). After treatment, bivariate correlations analysis in the treatment group showed that the difference of RDW was positive correlation with the difference of NT-proBNP, high-sensitivity C-related protein (hs-CRP) (r = 0.783, P < 0.01; r = 0.680, P < 0.01), but negative correlation with the difference of hemoglobin (r = -0.459, P < 0.01), and no correlation with the others (Cr, UA, LDL, TC, TG and LVEF). Conclusion On the basis of conventional anti heart failure treatment, erythropoietin therapy with oral iron supplementation against anemia could improve heart function of CHF and decrease the levels of RDW. RDW may be served as one of observing indexes of the worsening and effect judgment in chronic heart failure patients with anemia.

【Key words】Erythropoietin production; Iron; Heart failure, Congestive; Anemia; Red blood cell distribution width

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胃癌患者血清中热休克蛋白 70 和 p53 的表达水平及其与幽门螺杆菌感染的相关性研究

曹春宇 李松财 刘祖炳

【摘要】目的探讨胃癌患者血清中热休克蛋白 70 (HSP70) 和 p53 的表达水平及其与幽门螺旋杆菌 (H. pylori) 的相关性。方法选择 50 例胃癌患者作为研究对象，其中 I - II 期 30 例，Ⅲ期 20 例；22 例伴淋巴结转移，28 例无淋巴结转移。选择 40 名健康者为健康对照组。检测受试者血清 HSP70、p53 水平。结果胃癌组血清 HSP70、p53 表达水平高于健康对照组，差异均有统计学意义（t = 12.53, 16.79, 均 P < 0.01）。随着胃癌临床分期的增加，血清 HSP70、p53 水平呈升高趋势（t = 4.68, 5.29, 均 P < 0.01）。同时，伴淋巴结转移的患者血清 HSP70、p53 表达水平高于无淋巴结转移的患者，差异均有统计学意义（t = 3.82, 4.39, 均 P < 0.01）。胃癌组 H. pylori 阳性患者血清 HSP70、p53 表达水平高于 H. pylori 阴性患者，差异均有统计学意义（t = 4.72, 4.17, 均 P < 0.01）。结论胃癌患者血清中 HSP70、p53 表达明显增高，并且 HSP70、p53 的表达与胃癌的进展、预后及 H. pylori 感染密切相关。

【关键词】胃肿瘤；螺杆菌，幽门；HSP70 热休克蛋白质类；基因，p53

The expression levels of serum HSP70 and P53 in gastric cancer and its correlation with helicobacter pylori infection  Cao Chunyu, Li Songcai, Liu Zubing. Department of Gastroenterology, the Maternal and Children Health Care Hospital of Zhoushan, Zhoushan, Zhejiang 316000, China

【Abstract】Objective To study the expression levels of serum HSP70 and p53 in gastric cancer and its correlation with helicobacter pylori infection. Methods 50 patients with gastric cancer were selected as the research object. Among 50 cases, 30 cases were stage I - II, 20 cases were stage III, 22 cases were with lymph node metastasis and 28 cases were without lymph node metastasis. 40 healthy subjects were selected as the healthy control group. The serum levels of HSP70 and p53 were detected. Results In the gastric cancer group, the serum levels of HSP70 and p53 were markedly higher than those of the healthy control group, and the difference was statistically significant (t = 12.53, 16.79, all P < 0.01). Moreover, with progressing of clinical stage of gastric cancer, the serum levels of HSP70 and p53 showed a trend of increasing (t = 4.68, 5.29, all P < 0.01). The serum expression levels of HSP70 and p53 in gastric cancer with lymph node metastasis were significantly higher than those of patients without lymph node metastasis and the difference was still statistically significant (t = 3.82, 4.39, all P < 0.01). The serum levels of HSP70 and p53 in the gastric cancer group with Hp positive were much higher, compared to those of cases with Hp negative and the difference was also statistically significant (t = 4.72, 4.17, all P < 0.01). Conclusion In the gastric cancer patients, the serum expression level of HSP70 and p53 are increased. The expression of HSP70 and p53 are closely related to the progress and prognosis of gastric cancer and Hp infection.

【Key words】Stomach neoplasms; Helicobacter pylori; HSP70 Heat – shock proteins; Genes, p53
超声刀联合双极电凝镊用于甲状腺手术的效果观察

孙思敬 路忠志 李敏 翟震 李东生

【摘要】 目的 观察超声刀结合双极电凝镊在开放甲状腺手术中应用效果。方法 采用整群随机抽样的方法选取甲状腺手术患者80例，依据治疗方法将这些患者分为两组，即研究组(n=40)和对照组(n=40)。给予对照组患者超声刀结合传统丝线结扎方法治疗，给予研究组患者超声刀结合双极电凝镊治疗，然后对两组患者的手术相关指标及并发症发生情况进行统计分析。结果 和对照组(90.5±3.6) min,(6.5±0.6)d,(40.5±2.0)mL,(50.3±1.4)mL,(6.6±0.5)cm相比，研究组患者手术时间、住院时间(58.5±5.4) min,(3.4±0.2)d均显著较短(t=6.965,3.143,均 P<0.05)，术中出血量、术后引流量(5.0±1.4)mL,(1.0±0.6)mL均显著较少(t=4.541,3.747,均 P<0.05)，并发症发生率(2.5%) (1/40)显著低于对照组(10.0%) (4/40)(χ² = 9.35, P<0.05)。结论 超声刀结合双极电凝镊在开放甲状腺手术中应用效果显著。

【关键词】 超声刀结合双极电凝镊;开放甲状腺手术;应用效果

Application effects observation of ultrasonic scalpel combined with bipolar coagulation tweezers on open thyroid surgery

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【Abstract】Objective To investigate the application effects of ultrasonic scalpel combined with bipolar coagulation tweezers on open thyroid surgery. Methods 80 cases of thyroidectomy patients were randomly selected. These patients were divided into two groups by random cluster sampling method, which were the study group (n = 40) and control group (n = 40). The control group of patients were given ultracision ligature methods combined with traditional therapy, while the study group of patients were given ultrasonic scalpel combined with bipolar coagulation tweezers treatment. And then the surgical related indicators and complications of the two groups of patients were statistically analyzed. Results Compared with the control group of (90.5 ± 3.6) min, (6.5 ± 0.6) d, (40.5 ± 2.0) mL, (50.3 ± 1.4) mL and (6.6 ± 0.5) cm, the operative time and length of stay of the study group of patients (58.5 ± 5.4) min and (3.4 ± 0.2) d were significantly shorter (t = 6.965, 3.143, all P < 0.05); the blood loss and postoperative drainage of (5.0 ± 1.4) mL and (1.0 ± 0.6) mL were significantly less (t = 4.541, 3.747, all P < 0.05); the cut diameter of (3.8 ± 0.3) cm was significantly shorter (t = 3.365, P < 0.05); the complication rate of 2.5% (1/40) was significantly lower than the control group 10.0% (4/40) (χ² = 9.35, P<0.05). Conclusion The application effects of ultrasonic scalpel combined with bipolar coagulation tweezers on open thyroid surgery are obvious.

【Key words】 Ultrasonic scalpel combined with bipolar coagulation tweezers; Open thyroid surgery; Application effect
超声弹性成像技术用于前列腺癌的诊断价值

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【摘要】 目的 评价超声弹性成像技术用于诊断前列腺癌的有效性与安全性。方法 选取疑似前列腺癌患者 83 例，分别对其应用经直肠超声弹性成像（TRTE）和经直肠超声成像（TRUS）技术进行诊断。以患者的手术病理为诊断依据，比较两种方法的诊断效果。结果 83 例患者共有结节 102 个，其中有 44 例患者的病理结果为良性，共 49 个结节；39 例为恶性，共 53 个结节。102 个结节中有 47 个为内腺结节，占 46.08%；55 个为外腺结节，占 53.92%。共发现癌灶 54 个，TRTE 检出 36 个，检出率为 66.67%；TRUS 检出 24 个，检出率为 44.44%。TRTE 诊断的敏感性、特异性以及准确性分别为 66.67%、68.65% 与 67.64%，均高于相应 TRUS 诊断的 44.44%、64.58% 与 53.92%，各项比较差异有统计学意义（χ² = 10.710，P < 0.05；χ² = 3.879，P < 0.05；χ² = 4.084，P < 0.05）。所选患者的良性、恶性前列腺结节病理检查结果与 TRTE、TRUS 检查结果差异均无统计学意义（均 P > 0.05）。结论 将超声弹性成像技术用于诊断前列腺癌具有很好的敏感性、特异性以及准确性，可提高临床诊断效果，值得临床推广应用。

【关键词】 超声弹性成像技术；前列腺癌；诊断

ThediagnosisvalueofultrasoundelastographyappliedinprostatecancerXuHaifei,LeiJianming,ZhangChunlai,ZhangJingjing.DepartmentofUltrasound,People'sHospitalofLishui,Lishui,Zhejiang323000,China

【Abstract】ObjectiveToevaluate the efficacy and safety of ultrasound elastography in the diagnosis of prostate cancer. Methods 83 patients with prostate cancer were selected and diagnosed by transrectal ultrasound elastography (TRTE) and transrectal ultrasound (TRUS). The surgical pathology of the patients was used as diagnosis basis, and the efficacy of the two methods was evaluated. Results There were 102 nodules of all the 83 patients, 44 patients' surgical pathology were benign, a total of 49 nodules, 39 cases were vicious, a total of 53 nodules, 47 nodules were gland nodules, accounting for 46.08% and 55 nodules were outer gland nodules, accounting for 53.92% of all the 102 nodules. There were 54 foci, the TRTE detected 36 foci, the detection rate was 66.67%, and TRUS detected 24 foci, the detection rate was 44.44%. The sensitivity, specificity and accuracy rates of TRTE were 66.67%, 68.65% and 67.64%, which were higher than 44.44%, 64.58% and 53.92% of TRUS, and the differences were statistically significant (χ² = 10.710, P < 0.05; χ² = 3.879, P < 0.05; χ² = 4.084, P < 0.05). The differences of pathological findings and TRTE, TRUS findings of the benign and malignant prostate nodules were not statistically significant (P > 0.05). Conclusion It has higher diagnostic sensitivity, specificity and diagnostic accuracy for ultrasound elastography in the diagnosis of prostate cancer, which can improve the clinical diagnostic performance and worthy of clinical application.

【Key words】Ultrasound elastography; Prostate cancer; Diagnosis

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血清干扰素γ、肿瘤坏死因子α、白细胞介素10在溃疡性结肠炎中的水平变化及其与幽门螺杆菌感染的相关性

叶咸德 颜小丹

【摘要】目的探讨血清干扰素γ(IFN-γ)、肿瘤坏死因子α(TNF-α)、白细胞介素10(IL-10)在溃疡性结肠炎(UC)中的水平变化及其与幽门螺旋杆菌(Hp)的相关性。方法选择80例UC患者为研究对象,80例UC患者中50例处于活动期,30例处于缓解期,50例UC患者中轻度14例,中度26例,重度10例,选择30名健康者为对照组。检测血清IFN-γ,TNF-α,IL-10水平及Hp感染情况。结果活动期组血清TNF-α,IL-10水平高于缓解期组和对照组,差异有统计学意义([54.75±5.92]ng/L比[23.69±4.15]ng/L与[20.45±4.01]ng/L,F=36.79,P=0.000; [35.16±6.72]ng/L与[25.12±5.37]ng/L与[23.96±5.21]ng/L,F=35.68,P=0.000],活动期组血清IFN-γ水平低于缓解期组和对照组,差异有统计学意义([14.98±3.15]ng/L与[26.06±4.31]ng/L与[27.16±4.39]ng/L,F=35.68,P=0.000])。随着UC活动期患者病情的加重,TNF-α,IL-10水平呈升高趋势(\(F=32.81,24.95,\text{均}P<0.05\)),IFN-γ呈降低趋势(\(F=22.29,20.05,\text{均}P<0.05\))。50例UC活动期患者中,18例Hp阳性,32例Hp阴性,UC活动期组Hp阳性患者血清TNF-α,IL-10水平高于Hp阴性患者,差异有统计学意义(\(t=4.62,4.35,\text{均}P<0.01\))。UC活动期组Hp阳性患者血清IFN-γ水平低于Hp阴性患者,差异有统计学意义(\(t=5.91,\text{均}P<0.01\))。结论UC活动期患者TNF-α,IL-10高表达,IFN-γ低表达,IFN-γ,TNF-α,IL-10的表达与Hp感染密切相关。

【关键词】结肠炎,溃疡性;干扰素γ;肿瘤坏死因子α;白细胞介素10;螺杆菌,幽门

The changes of serum IFN-γ, TNF alpha, and IL-10 levels in ulcerative colitis and its relevance to helicobacter pylori infection

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【Abstract】Objective To study the changes of serum IFN-γ, TNF alpha and IL-10 levels in ulcerative colitis and its relevance to helicobacter pylori infection. Methods 80 UC patients were selected as the research object, and 50 cases of 80 patients were in the activity stage of UC, 30 patients were in remission. In the 50 patients with active UC, 14 cases were mild, 26 cases were moderate, and 10 cases were severe. 30 healthy subjects were set as healthy controls. Detection of serum IFN-γ, TNF alpha, IL-10 levels and Hp infection were made. Results The serum TNF alpha and IL-10 levels of the activity group were higher than those of the remission group and the control group, the difference was statistically significant([54.75±5.92] ng/L vs. [23.69±4.15] ng/L vs. [20.45±4.01] ng/L,F=36.79,F=35.68,P=0.000; [35.16±6.72] ng/L vs. [25.12±5.37] ng/L vs. [23.96±5.21] ng/L,F=35.68,P=0.000]). As the aggravating of patients with UC in activity stage, TNF alpha and IL-10 levels showed a trend of increase(\(F=32.81,24.95,\text{all} P<0.05\)), while IFN-γ showed a trend of reduction(\(F=22.29,20.05,\text{all} P<0.05\)). In 50 cases of active UC patients, 18 patients with Hp positive, 32 cases were Hp negative. In active UC group Hp positive patients’ serum TNF alpha and IL-10 levels higher than the Hp negative patients, the difference was statistically significant(\(t=4.62,4.35,\text{all} P<0.01\)). Serum levels of IFN-γ of active UC patients with Hp positive group was lower than the Hp negative patients, the difference was statistically significant(\(t=5.91,\text{all} P<0.01\)). Conclusion In active UC patients expression of TNF alpha and IL-10 are high, and IFN-γ expression is low. The expression of IFN-γ,TNF alpha and IL-10 are closely related to Hp infection.

【Key words】Colitis, Ulcerative; Interferon gamma; Tumor necrosis factor alpha; Interleukin 10; Helicobacter pylori

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宫颈阴道分泌物非磷酸化胰岛素样生长因子结合蛋白1与残余羊水指数监测在未足月胎膜早破中的诊断价值

薄树春    杨文东

【摘要】目的通过对疑似未足月胎膜早破（PPROM）孕妇进行宫颈阴道分泌物非磷酸化胰岛素样生长因子结合蛋白1（IGFBP-1）监测，探讨快速诊断PPROM的方法，以及残余羊水对母儿预后的影响。方法采用快速层析法对96例疑似PPROM孕妇进行宫颈阴道分泌物IGFBP-1检测，腹部B超监测AFI，分析病因，比较妊娠结局及新生儿预后情况。结果92例宫颈阴道分泌物IGFBP-1阳性者均确诊为PPROM，导致PPROM的危险因素主要为：生殖道感染、流产、引产史，原因不明（包括无证据的感染、胎膜发育不良或其他不明原因）、双胎、多胎、巨大儿、臀位或头盆不称、妊娠期高血压疾病、子宫肌瘤或畸形，营养不良及羊水过多。92例PPROM孕妇，破膜至分娩时间为（105.7±13.9）h，剖宫产率为51.1%，孕妇发热率为7.6%，胎盘早剥率为4.3%，胎儿宫内发育迟缓率为14.1%，围产期感染率为21.7%，新生儿窒息率为7.6%，新生儿死亡率为7.6%。AFI≤40mm组与AFI>40mm组比较，破膜至分娩时间显著缩短（t=10.904，P<0.05），新生儿死亡率显著升高（χ²=4.359，P<0.05）。结论宫颈阴道分泌物IGFBP-1与AFI监测，可快速诊断PPROM，也可评估妊娠结果及新生儿预后。

【关键词】胎膜早破；非磷酸化胰岛素样生长因子结合蛋白1；残余羊水指数；诊断

Value of non-phosphorylated insulin-like growth factor binding protein-1 in cervical vaginal excretion and residual amniotic fluid index monitoring in the diagnosis of premature rupture of membranes    Bao Shuchu, Yang Wendong. Department of Obstetrics and Gynecology, the Second People's Hospital of Dongying, Dongying, Shandong 257335, China

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【Abstract】Objective To explore the method of rapid diagnosis preterm premature rupture of membrane (PPROM) and prognosis factors of residual amniotic fluid in mother and infant through monitoring nonphosphorylated insulin-like growth factor binding protein-A (IGFBP-1) and the residual amniotic fluid index (AFI) of the cervicovaginal secretions from PPROM women. Methods 96 cases of PPROM were tested IGFBP-1 of cervicovaginal secretions, AFI were tested by abdominal ultrasound through fast chromatography methods, and the cause was analyzed. The pregnancy outcome and neonatal prognosis were compared. Results 92 cases positive of IGFBP-1 were diagnosed with PPROM. The risk factors of PPROM were mainly reproductive tract infections, abortion, induced labor history and unknown causes (including no evidence of infection, fetal membrane dysplasia unclear or other factors), the twins, multiplets, macrosomia, breech or cephalopelvic disproportion, gestational hypertension disease, uterine fibroids or deformity, malnutrition and polyhydramnios. In the 92 patients with PPROM pregnant women, the duration from premature rupture of membrane to delivery was (105.7±13.9) h, cesarean section rate was 51.1%, fever rate of pregnant women was 7.6%, the rate of placental abruption was 4.3%, the rate of fetal distress was 14.1%, perinatal infection rate was 21.7%, and neonatal asphyxia rate was 7.6%, the neonatal mortality was 7.6%. To compare the AFI≤40mm group with AFI>40 mm group, the duration from premature rupture of membrane to delivery was shortened remarkably (t=10.904, P<0.05), the neonatal mortality rate was significantly increased (χ²=4.359, P<0.05). Conclusion Measurement of IGFBP-1 and AFI in cervicovaginal secretions can rapid diagnosis PPROM and evaluate the results of pregnancy and neonatal prognosis, and can guide clinical improvement of pregnancy safety and reduce neonatal mortality.

【Key words】Premature rupture of membranes; Insulin-like growth factor binding protein-1; Amniotic fluid index; Diagnose
舒洛地特联合雷公藤多苷治疗中危度特发性膜性肾病的临床观察

蔡小巧

【摘要】目的 观察舒洛地特和雷公藤多苷治疗中危度特发性膜性肾病(IMN)的临床疗效。方法 将52例IMN患者(病理分期为Ⅰ～Ⅱ期,24 h尿蛋白定量4～8 g/d)采用数字表法随机分为对照组和观察组,每组26例。对照组给予常规治疗和雷公藤多苷片口服,观察组在对照组治疗基础上加用舒洛地特。疗程6个月。比较两组治疗前后24 h尿蛋白定量(24 hUpro)、血清肌酐(CR)、丙氨酸氨基转氨酶(ALT)、白蛋白(Alb)、活化部分凝血酶时间(APTT)、纤维蛋白原(Fbg)、总胆固醇(TC)等,比较两组的临床疗效,观察不良反应。结果 两组治疗6个月后24 h Upro、Fbg、TC均较治疗前显著下降(对照组t =5.754, 2.096, 3.781,观察组t =5.412, 5.043, 6.200, P <0.05),而ALB显著升高(对照组t =2.519,观察组t =4.672, P <0.05)。两组CR、ALT在治疗前后差异均无统计学意义(P >0.05)。观察组治疗后APTT较治疗前显著延长(t =5.115, P <0.05)。治疗后两组间比较,观察组ALB、APTT分别为(30.2 ±3.6) g/L、(36.1 ±2.7)s,显著高于对照组的(27.8 ±4.1) g/L、(33.8 ±3.1)s(t =2.243, 2.853, P <0.05), 24 h Upro、Fbg、TC均显著低于对照组(t =2.176, 4.072, 2.555, P <0.05)。观察组临床有效率为53.8%,明显高于对照组的26.9%(χ²=5.042, P >0.05)。两组均未见严重不良反应。结论 舒洛地特联合雷公藤多苷治疗中危度IMN较单独应用雷公藤多苷临床疗效更加确切,安全性较好。

【关键词】肾小球肾炎,膜性; 雷公藤多苷; 舒洛地特; 治疗结果

The clinical observation of the effects of sulodexide and tripterygium glycosides on the idiopathic membranous nephropathy in stage Ⅰ～Ⅱ Cai Xiaoqiao. Department of Nephrology, Wenzhou Hospital of Chinese Traditional and Western Medicine, Wenzhou, Zhejiang, 325000, China

【Abstract】Objective To observe the effect of sulodexide and tripterygium glycosides on the idiopathic membranous nephropathy in stage Ⅰ～Ⅱ. Methods 52 adult patients with idiopathic membranous nephropathy (pathologic stage Ⅰ～Ⅱ stage, 24 h urinary protein 4 ~8 g/d) were randomly divided into the control group and observation group, with 26 cases in each group. The cases in the control group were treated by conventional treatment and tripterygium glycosides tablet, and the observation group were treated with sulodexide based on the therapy of control group. Six months was a course. 24 h urinary protein excretion(24hUpro), serum creatinine (CR), alanine aminotransferase(ALT), albumin (ALB), activated partial thromboplastin time(APTT), fibrinogen (Fbg) and total cholesterol(TC) were compared before and after treatment. The clinical efficacy and adverse reactions of the two treatments were observed. Results After 6 months of treatment, 24hUpro, Fbg and TC of the two groups were significantly decreased than those before treatment (control group: t =3.754, 2.096, 3.781, observation group: t =5.412, 5.043, 6.200, P <0.05), while serum ALB was significantly higher (control group: t =2.519, observation group: t =4.672, P <0.05). CR and ALT had no significant difference between before and after treatment (all P >0.05). APTT was significantly longer than that before treatment (t =5.115, P <0.05). After treatment, ALB and APTT of the observation group were (30.2 ±3.6) g/L and (36.1 ±2.7)s, which were significantly higher than (27.8 ±4.1) g/L and (33.8 ±3.1)s of the control group (t =2.243, 2.853, P <0.05), while 24hUpro, Fbg and TC were significantly lower than those of the control group (t =2.176, 4.072, 2.555, P <0.05). The clinical effect of the observation group was 53.8%, which was significantly higher than the control group’s 26.9% (χ²= 5.042, P >0.05). Both groups had no serious adverse reactions. Conclusion The clinical efficacy of sulodexide and tripterygium glycosides tablet may be more precise than alone tripterygium for IMN, which is safety.

【Key words】Gomerulonephritis, Membranous; Tripterygium glycosides; Sulodexide; Treatment outcome

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糖尿病患者合并口腔颌面部间隙感染
20 例治疗分析

汪艳飞

【摘要】目的 探讨糖尿病患者合并口腔颌面部间隙感染的治疗方法及效果。方法 回顾性分析 20 例糖尿病患者合并口腔颌面部间隙感染的临床资料。结果 20 例口腔颌面部间隙感染合并糖尿病患者均治疗痊愈，平均治疗时间（18.4 ± 2.8）d。细菌培养结果阳性 20 例，阳性率 100%，其中链球菌感染 15 例，肺炎克雷伯菌感染 4 例，白色念球菌感染 1 例。手术切开引流术者共 20 例，行气管切开者共 4 例。结论 糖尿病患者比普通人更易发生颌面部间隙感染，且往往病情较重，治疗较为棘手，除了针对感染局部进行治疗外还需重视对患者全身情况的改善，减少严重并发症发生的风险。

【关键词】糖尿病；感染；综合疗法

Analysis of 20 cases of patients with diabetes merged oral and maxillofacial space infection  Wang Yanfei. Department of Stomatology, the Traditional Chinese Medicine Hospital of Jiangshan, Jiangshan, Hengzhou, Zhejiang 324100, China

【Abstract】Objective To discuss the methods of treating diabetes merged oral and maxillofacial space infection and their effects. Methods Clinical data of 20 patients with diabetes merged oral and maxillofacial space infection were retrospectively analyzed. Results All 20 cases of patients with diabetes merged oral and maxillofacial space infection were cured. The mean length of treatment was (18.4 ± 2.8) days. There were 20 cases of positive results of bacterial culture, the positive rate was 100%, and there were 15 cases of streptococcal infection, 4 cases of klebsiella pneumoniae infection, 1 case of candida albicans infection. 20 cases of patients was given incision and drainage, 4 cases given incision of trachea. Conclusion It was easier for patients with diabetes having maxillofacial space infection, and more serious illness, more difficult for treating. Local infection should be treated, and systemic conditions should be improved as well. The risks of occurrence of serious complications should be reduced.

【Key words】Diabetes; Infection; Comprehensive modality therapy

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鸦胆子油乳联合 TP 方案双径路治疗恶性胸腔积液的临床观察

胡晓鸣 连文波

【摘要】 目的 观察鸦胆子油乳联合 TP 方案双径路治疗非小细胞肺癌 (NSCLC) 恶性胸腔积液的近期疗效和不良反应。方法 收集经病理学确诊的 NSCLC 恶性胸腔积液患者 91 例，均以胸腔内置入中心静脉导管引流胸腔积液，按治疗方式分为 A 组 (21 例)：胸腔内注入鸦胆子油乳每次 60 mL，2 次/周；B 组 (33 例)：紫杉醇 150 mg/m² 第 1 天静脉化疗，顺铂 60 mg/m² +0.9% 氯化钠注射液 30 mL 第 1 天胸腔内注入，3 周重复；C 组 (38 例)：联合应用 A 组和 B 组治疗；治疗 6 周后比较三组近期疗效及不良反应。结果 与 A、B 组比较，C 组客观缓解率 (81.6%) 最高 (χ² = 8.605, P < 0.05)，完全缓解率 (55.3%) 最高 (χ² = 10.384, P < 0.05)，进展率 (5.3%) 最低 (χ² = 8.649, P < 0.05)；三组均未出现严重不良反应，A 组未发生白细胞减少，比较 B、C 组，差异有统计学意义 (χ² = 8.999, P < 0.05)。结论 鸦胆子油乳联合 TP 方案双径路治疗 NSCLC 恶性胸腔积液疗效较高，优于单独化疗或腔内治疗，不良反应可耐受。

【关键词】 胸腔积液，恶性；癌，非小细胞肺；鸦胆子油乳

Clinical observation of double-way chemotherapy on brucea javanica oil emulsion combined with TP regimen in treating malignant pleural effusion of NSCLC  Hu Xiaoming, Lian Wenbo. Department of Oncology, Southwest Aluminum Hospital of Chongqing, Chongqing 401326, China

【Abstract】 Objective To evaluate short-term clinical efficacy and adverse effects of brucea javanica oil emulsion (BJOE) combined with TP regimen in treating malignant pleural effusion (MPE) of non–small cell lung cancer (NSCLC) by double-way chemotherapy. Methods Totally 91 patients with MPE of NSCLC diagnosed by pathology were builted into the central venous catheter. The patients were assigned to group A, B and C according to therapies. Group A (21 cases) accepted infusion of BJOE 60mL into thoracic cavity twice a week. Group B (33 cases) accepted TP regimen therapy, which included paclitaxel (TAX) intravenous chemotherapy at a dose of 150mg/m² and cisplatin (DDP) injecting into thoracic cavity at a dose of 60mg + 0.9% sodium chloride injection 30mL in first day, the therapy was repeated every 3 weeks. Group C (38 cases) combined the therapies of group A’s and B’s. Clinical efficacy and adverse effects were evaluated after 6 weeks. Results The objective response rate (81.6%) for group C was higher than group A or B (χ² = 8.605, P < 0.05), the same result were in CR ratio (55.3%) (χ² = 10.384, P < 0.05) and PD ratio (5.3%) (χ² = 8.649, P < 0.05). There were no serious adverse effects in the three groups. The occurring rate of white blood cell reduction in group A was lower than those of group B and C, there was statistically significance (χ² = 8.999, P < 0.05). Conclusion The efficacy of BJOE combined with TP regimen in treating MPE of NSCLC by double-way chemotherapy is better than that of single chemotherapy or alone intrathoracic treatment, and the adverse effects could be well tolerated.

【Key words】 Pleural effusion, Malignant; Carcinoma, Non-Small – Cell Lung; Brucea javanica oil emulsion

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泪道逆行置管术与泪囊鼻腔吻合术
治疗慢性泪囊炎临床效果比较

古泉

【摘要】目的 比较泪道逆行置管术与泪囊鼻腔吻合术治疗慢性泪囊炎的效果。方法 选择慢性泪囊炎患者共 104 例，按抽签法分别分为观察组和对照组，其中观察组患者 64 例，对照组患者 40 例。观察组给予泪道逆行置管术，对照组给予泪囊鼻腔吻合术，两组均给予相同的术后护理。比较两组手术相关情况和治疗效果。结果 术后 3 个月观察组治疗有效 63 例，有效率 98.44% ，对照组治疗有效 40 例，治疗有效率 100.00% ，组间差异无统计学意义（χ² = 0.185, P > 0.05）。术后 6 个月，观察组治疗有效 62 例，有效率 96.88% ，对照组治疗有效 40 例，有效率 100.00% ，组间差异无统计学意义（χ² = 0.306, P > 0.05）。术后 12 个月，观察组治疗有效 59 例，有效率 92.19% ，对照组治疗有效 38 例，治疗有效率 95.00% ，组间差异无统计学意义（χ² = 0.227, P > 0.05）。观察组手术时间（10.8 ± 2.7）min，对照组手术时间（40.1 ± 9.6）min，观察组平均手术时间短于对照组（t = 18.074, P < 0.05）。观察组住院时间（2.5 ± 0.3）d，对照组（6.3 ± 1.4）d，观察组住院时间短于对照组（t = 3.171, P < 0.05）。观察组住院费用（1467.1 ± 26.7）元，对照组（1971.6 ± 59.1）元，观察组住院费用少于对照组（t = 39.482, P < 0.05）。结论 泪道逆行置管术治疗慢性泪囊炎能获得与鼻腔泪囊吻合术相同的近期治疗效果，且安全性更好，手术操作难度更低，治疗总费用更为低廉，值得临床推广。

【关键词】泪道逆行置管；泪囊鼻腔吻合术；慢性泪囊炎；鼻泪管阻塞；安全性

Comparison of effect of lacrimal ducts retrograde intubation and dacryocystorhinostomy in treating chronic dacryocystitis  Gu Quan. Department of Ophthalmology, the First People’s Hospital of Tongxiang, Jiaxing, Zhejiang 314500, China

【Abstract】Objective To compare the effect of lacrimal ducts retrograde intubation and dacryocystorhinostomy in treating chronic dacryocystitis. Methods 104 patients with chronic dacryocystitis were selected and divided into observation group and control group by lottery. There were 64 cases in observation group and 40 cases in control group. Lacrimal ducts retrograde intubation was given in observation group, while dacryocystorhinostomy was given in control group. Same postoperative care was given in both two groups. The surgery related conditions and effect of treatment were compared. Results There were 63 effective cases in the observation group in 3 months after operation, the effective rate was 98.44% , 40 effective cases in the control group, the effective rate was 100.00% , and there was no significant difference between the two groups (χ² = 0.185, P > 0.05). There were 62 effective cases in the observation group in 6 months after operation, the effective rate was 96.88% , 40 effective cases in the control group, the effective rate was 100.00% , and there was no significant difference between the two groups (χ² = 0.306, P > 0.05). There were 59 effective cases in the observation group in 12 months after operation, the effective rate was 92.19% , 38 effective cases in the control group, the effective rate 95.00% , and there was no significant difference between the two groups (χ² = 0.227, P > 0.05). The mean operation time in the observation group was (10.8 ± 2.7) min, while (0.1 ± 9.6) min in the control group, the mean operation time in the observation group was shorter than that in the control group (t = 18.074, P < 0.05). The mean hospitalization in the observation group was (2.5 ± 0.3) days, while (6.3 ± 1.4) days in the control group, the mean hospitalization in the observation group was shorter than that in the control group (t = 3.171, P < 0.05). The mean hospital expenses in the observation group was (1467.1 ± 26.7) yuan, while (1971.6 ± 59.1) yuan in the control group, the mean hospital expenses in the observation group was less than that in the control group (t = 39.482, P < 0.05). Conclusion The recent therapeutic effects of lacrimal ducts retrograde intubation and dacryocystorhinostomy in treating chronic dacryocystitis were same, and it was safer, lower operative difficult, less treatment expenses to applying lacrimal ducts retrograde intubation. It was worthy of clinical application.

【Key words】Lacrimal ducts retrograde intubation; Dacryocystorhinostomy; Chronic dacryocystitis; Naso-lacrimal duct obstruction; Safety
经皮椎体后凸成形术联合唑来膦酸治疗骨质疏松性胸腰椎压缩性骨折

【摘要】 目的 探讨经皮椎体后凸成形术联合唑来膦酸治疗骨质疏松性胸腰椎压缩性骨折的临床疗效。方法 回顾性分析2010年2月至2013年12月在某医院骨科住院治疗的骨质疏松性胸腰椎压缩性骨折患者67例，其中7例行经皮椎体后凸成形术患者纳入研究。根据患者术后是否应用唑来膦酸，将入选患者分为对照组（未应用唑来膦酸组）和观察组（应用唑来膦酸组）两组，其中对照组39例，观察组28例。比较两组患者于术前、术后3 d及末次随访时的视觉模拟疼痛评分（VAS）、Oswestry功能障碍指数（ODI）、椎体前中柱平均高度、脊柱后凸 Cobb角及椎体前中柱平均高度术后及末次随访时的腰椎骨密度值（BMD）。结果 治疗前，两组VAS、ODI、椎体前中柱平均高度、脊柱后凸 Cobb角差异均无统计学意义（t=0.308，P=0.758；t=0.476，P=0.635；t=0.397，P=0.693；t=0.342，P=0.733），治疗后3 d，两组VAS、ODI、椎体后凸 Cobb角差异均无统计学意义（t=25.820，P<0.001），而椎体前中柱平均高度与末次随访时的椎体前中柱平均高度比较两组间差异均无统计学意义（t=4.779，P=0.009；t=16.801，P<0.001；t=9.717，P<0.001；t=7.525，P<0.001，）<br><br>【关键词】 骨质疏松性骨折；胸椎；腰椎；椎体成形术；唑来膦酸

Percutaneous kyphoplasty combined with zoledronic acid in the treatment of osteoporotic vertebral compression fractures  Shen Wen. Department of Orthopedics Traumatology, the Traditional Chinese Medicine Hospital of Xuanwu District, Beijing 100050, China

【Abstract】Objective To investigate the therapeutic effect of osteoporotic vertebral compression fractures treated by percutaneous kyphoplasty combined zoledronic acid. Methods Patients admitted to our hospital’s department of orthopedics from February 2010 to December 2013 were reviewed, and 67 patients underwent percutaneous kyphoplasty were admitted. According to the application of zoledronic acid or not, they were divided into 2 groups, with 39 cases and 28 cases, respectively. On 67 patients before surgery, 3 days after surgery, the end of follow-up surgery, the levels of VAS, ODI, Cobb angle, vertebral height average recovery rate and Cobb angle were compared. The BMD was also compared before and after surgery. Results There was no difference between the two groups in all above indices before treatment (t=0.308, P=0.758; t=0.476, P=0.635; t=0.397, P=0.693; t=0.342, P=0.733). 3 days after surgery, the levels of VAS, ODI, and Cobb angle all decreased (t=25.820, P<0.001 vs. t=24.988, P<0.001; t=16.801, P<0.001 vs. t=17.008, P<0.001), while vertebral height average recovery rate were increased in both groups (t=8.300, P<0.001 vs. t=6.363, P<0.001), but there was no difference between the two groups(t=0.308, P=0.758; t=0.476, P=0.635; t=0.397, P=0.693; t=0.342, P=0.733). In the end of follow-up surgery, there was a significant difference between the two groups (t=4.779, P<0.001; t=16.801, P<0.001; t=9.717, P<0.001). There was no difference between the two groups in BMD (t=0.479, P>0.05). Conclusion Percutaneous kyphoplasty combined zoledronic acid has an excellent effect on osteoporotic vertebral compression fractures, it is worthy promoting.

【Key words】Osteoporotic Fractures; Thoracic Vertebrae; Lumbar Vertebrae; Vertebroplasty; Zoledronic Acid
肺部感染控制窗为切换点行序贯通气治疗重症肺炎合并呼吸衰竭疗效观察

邵晓云 齐燕

【摘要】 目的 探讨肺部感染控制窗为切换点行序贯通气治疗重症肺炎合并呼吸衰竭临床疗效。方法 选择重症肺炎并发呼吸衰竭患者 102 例，采用随机数字表法将所有患者分为对照组和观察组，各 51 例，观察组应用肺部感染控制窗为切换点行序贯通气治疗，对照组常规进行序贯通气治疗。主要观察指标为通气前后血氧分压（PaO₂）、二氧化碳分压（PaCO₂）和血氧饱和度（SaO₂）的变化，两组患者相关治疗时间和症状改善时间及呼吸机相关性肺炎（VAP）等并发症结果。结果 观察组通气后 PaO₂ 和 SaO₂ 分别为（75.60±2.89）mmHg 和（0.78±0.09），均高于对照组通气后（70.48±3.16）mmHg 和（0.71±0.11），且两组通气后均高于治疗前，差异均有统计学意义（t=12.44, 11.85, 14.16, 13.42, P＜0.05）；观察组通气后 PaCO₂ 为（49.21±3.22）mmHg，低于对照组通气后的（54.35±3.82）mmHg，且两组治疗后均低于治疗前，差异均有统计学意义（t=11.30, 10.92, 13.26, 14.08, P＜0.05）；观察组患者机械通气总时间、呼吸困难缓解时间、肺部啰音消失时间和住院时间分别为（5.24±1.83）d、（38.13±2.91）h、（6.72±0.40）d 和（15.33±3.18）d，均低于对照组，差异均有统计学意义（t=9.87, 10.21, 10.46, 11.08, P＜0.05）；观察组总的良好反应及病死率（9.80%）低于对照组（19.61%）(χ²=9.85, P＜0.05)。结论 肺部感染控制窗为切换点行序贯通气治疗重症肺炎合并呼吸衰竭临床疗效较好，能够显著提高肺功能并改善预后，降低患者并发症的发生。

【关键词】 肺炎；呼吸功能不全；时间因素；通气机；机械

The clinical effect of pulmonary infection control window for sequence ventilation on treatment of severe pneumonia with respiratory failure Shao Xiaoyun, Qi Yan. Department of Intensive Care Unit, the Second Hospital of Shaoxing, Shaoxing, Zhejiang 312000, China

【Abstract】 Objective To explore the clinical effect of pulmonary infection control window for sequence ventilation on treatment of severe pneumonia with respiratory failure, and to observe and analyze the prognosis. Methods 102 severe pneumonia patients complicated with respiratory failure were selected. They were divided into the observation group and the control group by the random number table method. The patients of the observation group were treated with pulmonary infection control window for sequence ventilation treatment, the control group were treated with conventional sequence ventilation treatment. The change of blood oxygen partial pressure(PaO₂), carbon dioxide partial pressure(PaCO₂) and blood oxygen saturation(SaO₂) before and after ventilation, and the treatment time and symptoms improve time and the complications such as ventilator associated pneumonia(VAP) of the two groups were observed. Results PaO₂ and SaO₂ of the observation group after the ventilation were (75.60±2.89) mmHg and (0.78±0.09), which were higher than control group after the ventilation (70.48±3.16) mmHg and (0.71±0.11), and data of two groups after ventilation were higher than those before the treatment, differences were statistically significant (t = 11.30, 10.92, 13.26, 14.08, all P < 0.05). PaCO₂ of the observation group after the ventilation was 49.21±3.22 mmHg, which was lower than that of control group after the ventilation of 54.35±3.82 mmHg, and data of two groups after treatment was lower than before treatment, the differences were statistically significant (t = 12.44, 11.85, 14.16, 13.42, all P < 0.05). The total mechanical ventilation time of the observation group, respiratory difficulty relief time, lung then disappear time and hospital stay time were (5.24±1.83) d, (38.13±2.91) h, (6.72±0.40) d and (15.33±3.18) d, which were lower than those of control group, the differences were statistically significant (t = 9.87, 10.21, 10.46, 11.08, all P < 0.05). The general adverse reaction and the death rate of the observation group was 9.80% (5/51), which was lower than 19.61% of the control group(χ²=9.85, P<0.05). Conclusion There was effect of pulmonary infection control window for sequence ventilation treatment of severe pneumonia with respiratory failure, and it could improve effectively lung function and the prognosis and reduce the incidence of complications.

【Key words】 Pneumonia; Respiratory Insufficiency; Time Factors; Ventilators; Mechanical
三种宫内节育器避孕效果比较

孙莉

【摘要】目的 比较三种宫内节育器(IUD)的避孕效果和副反应发生情况。方法 选取2012年6月至2013年6月在枣庄市峄山区计划生育服务站自愿接受放置吉妮IUD、爱母IUD、花式IUD的育龄女性683例，随访1年，比较三种宫内节育器的避孕效果和副反应发生情况。结果 吉妮组脱落率为0.88%，显著低于爱母组的3.95%和花式组的4.41% ($\chi^2 = 4.565, 5.514, P < 0.05$)；爱母组因症取出率为5.26%，显著高于吉妮组(1.75%)和花式组(1.32%) ($\chi^2 = 4.145, 5.543, P < 0.05$)；爱母组累积续用率为90.35%，低于吉尼组的96.93%和花式组的95.59% ($\chi^2 = 8.286, 4.784, P > 0.05$)。结论 三种IUD均适合于阴道分娩月经恢复后放置，但花式IUD的副反应小，续用率相对较高，值得临床应用。

【关键词】女性；节育器；避孕，人工；不良反应

The clinical effect comparison of three types of intrauterine devices  Sun Li. Women’s Clinic, Family – Planning Service Outlet of Yi – shan District in Zaozhuang City, Zaozhuang, Shandong 277300, China

【Abstract】Objective To compare the clinical effect of three types of intrauterine devices and their adverse events. Methods From June 2012 to June 2013, 683 women of reproductive age underwent the insertion of Gyne Fix-IN IUD, Mecu IUD and HCa280 IUD in Family – Planning Service Outlet of Yi – shan District in Zaozhuang City were collected in this study. The patients were followed up for 1 year. The clinical effect and adverse events of three types of intrauterine devices were compared. Results The expulsion rate of Gyne FixIN IUD (0.88%) group was lower than those in the Mecu IUD (3.95%) and HCa280 IUD (4.41%) group ($\chi^2 = 4.565, 5.514, P < 0.05$). And the removal rate for medical reasons of Mecu IUD group (5.26%) was higher than those in the FixIN IUD (1.75%) and HCa280 IUD (1.32%) group ($\chi^2 = 4.145, 5.543, P < 0.05$). The continuation rate of Mecu IUD (90.35%) group was higher than those in the FixIN IUD (96.93%) and HCa280 IUD (95.59%) group ($\chi^2 = 8.286, 4.784, P > 0.05$). The pregnancy rate of three groups were no significant difference ($P > 0.05$). Conclusion The three kinds of IUDs could be used as the first menstrual period returns after vaginal delivery. HCa280 IUD has good clinical effect. The effective contraception rate is high while adverse events are low. It is worthy of clinical use.

【Key words】Female (female) sex; Birth control device; Contraception, artificial; Adverse reactions

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神经精神性狼疮 30 例临床分析

张丽卿  王建宝

【摘要】目的 探讨系统性红斑狼疮(SLE)发生神经精神系统损害(NPLE)的临床特点和危险因素。方法 回顾性分析160例SLE患者的临床资料，其中30例确诊NPLE，分析NPLE与常见自身抗体、其他脏器损害的关系，并比较SLE疾病活动评分(SLEDAI)与NPLE的关联性。结果 NPLE患者血清中抗核抗体(ANA)、抗Sm抗体、抗RNP抗体、抗SSA抗体、抗ds-DNA抗体阳性率与无NPLE患者相比差异均无统计学意义(χ²=0.947,0.013,1.194,0.023,0.745，P=0.194,0.910,0.274,0.879,0.388)；肾脏损害、雷诺现象、间质性肺炎、肺血栓栓塞症、口腔溃疡、颜面红斑、胸膜炎、心包炎、发热、肺动脉高压、光过敏、脱发在有无NPLE组间差异无统计学意义(χ²=0.419,1.383,0.721,0.201,1.368,1.194,0.055,0.946,0.262,2.503,0.628,2.898,0.075, P=0.517,0.324,0.396,1.000,0.024,2.274,0.815,0.331,0.069,0.011,0.428,0.089,0.785)，而手足血管炎与NPLE的发生明显相关(χ²=3.996, P=0.046)。NPLE组SLEDAI评分为27.63±2.26分，明显高于无NPLE组的13.83±0.25分(t=8.446, P=0.000)。结论NPLE的发生与常见自身抗体阳性无相关性，与其他脏器受累无关，而手足血管炎，SLEDAI评分>15分是NPLE发生的危险因素。部分病例可以脑病为首发表现。及早诊断，甲泼尼龙冲击联合免疫抑制剂治疗可以有效提高疾病缓解率，减少死亡，改善预后。

【关键词】红斑狼疮；系统性；狼疮脑病；危险因素；预后

Clinical analysis of 30 cases of nervous systemic lupus erythematosus  Zhang Lijing, Wang Jianbao. Department of Rheumatology, Fenyang Hospital of Shanxi Province, Fenyang, Lyuliang, Shanxi 032200, China

【Abstract】Objective To investigate clinical characteristics, pathogenesis and its risk factors of neuropsychiatric lupus erythematosus (NPLE). Methods 160 cases of SLE patients, including 30 cases of diagnosed NPLE, were analyzed retrospectively. The relationship between the appearance of NPLE and common autoantibodies, other organ involvement and SLE disease activity score (SLEDAI) were analyzed. Results Such antibody positive rates of anti nuclear antibody(ANA), anti Sm antibody, anti - RNP antibody, anti SSA antibody, anti ds - DNA antibody had no significant difference between NPLE and non NPLE, the value of χ² was 0.947,0.013,1.194,0.023,0.745 respectively, the value of P was 0.194,0.910,0.274,0.879,0.388 respectively. Renal involvement, Raynaud phenomenon, interstitial pneumonia, pulmonary thromboembolism, oral ulcer, arthritis, facial erythema, pleuritis, pericarditis, fever, pulmonary hypertension, photo - allergy and alopecia in the two groups had no difference, the value of χ² was respectively 0.419, 1.383,0.721,0.201,1.368,1.194,0.055,0.946,0.262,2.503,0.628,2.898 and 0.075, the value of P was 0.517,0.324,0.396,1.000,0.024,2.274,0.815,0.331,0.069,0.011,0.428,0.089 and 0.785 respectively. But the occurrence of hand and foot vasculitis in NPLE was significantly higher (χ²=3.996, P=0.046). SLEDAI of NPLE was higher than non NPLE(t=8.446, P=0.000). Conclusion There was no correlation with the occurrence of NPLE and common autoantibodies, other organ involvements. Hand and foot vasculitis and higher SLEDAI more than 15 points were the risk factors of NPLE. Encephalopathy may be the initial manifestation to some of SLE cases. Early diagnosis and methylprednisolone pulse treatment combined with immunosuppressive therapy can effectively improve the remission of the disease, reduce mortality and improve prognosis.

【Key words】Lupus erythematosus, systemic; Neuropsychiatric lupus erythematosus; Risk factors; Prognosis
综合方法治疗老年性高血压疗效观察

胡玉姿 周学华

【摘要】目的探索以综合全程的方法治疗老年性高血压，并与传统西药治疗进行疗效比较，为今后指导临床高血压的治疗提供借鉴。方法选择老年性高血压患者162例，按照收治的先后顺序以及知情同意的原则，随机分为观察组和对照组，对照组仅给予常规的西药联合治疗，即硝苯地平缓释片联合厄贝沙坦片。观察组按照健康管理的思路，建立健康档案，评估患者心血管风险等级后按照危险程度差异化治疗。低、中危的连续监测血压，开展健康教育，重点干预其生活方式，建立良好心态，血压控制不稳的再考虑用药。对于高危与很高危的患者，除去上述治疗外，需要马上用药并辅以中药汤剂治疗。观察组每月随访1次，随访6个月后测量血压，评估治疗有效率和不良反应情况。结果观察组总有效率为96.7%（89/92），显著高于对照组的82.8%（58/70）（χ²=9.12, P＜0.01），差异有统计学意义。观察组随访6个月后，观察组的收缩压降至（126.1±21.5）mmHg（t=7.548, P＜0.01）；舒张压降至（79.5±9.5）mmHg（t=10.703, P＜0.01），比入院时有显著下降。对照组随访6个月后，收缩压降至（145.3±26.7）mmHg（t=1.979, P＞0.05），有明显下降，舒张压有所下降，但差异无统计学意义（P＞0.05）。观察组患者的降压效果更好，且两组患者不良反应均较小，差异无统计学意义。结论在健康管理的思路下，对患者进行全程的治疗，提高患者对于高血压的知晓率，建立健康的生活方式，科学合理的用药，这些方法的综合运用可以有效的提高老年性高血压的治疗效果，值得推广和应用。

【关键词】综合方法；老年；高血压

The curative effect of comprehensive treatments for senile hypertension

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【Abstract】Objective To study comprehensive methods for senile hypertension and compared with conventional western medicine treatment, and provide reference to guide clinical hypertension treatment for the future.

Methods 162 cases with senile hypertension were selected in our hospital, according to the order of treatment and the principle of informed consent, they were randomly divided into observation group and control group. The control group was given conventional western medicine treatment, the Nifedipine sustained release tablets joint irbesartan tablets. Based on the thoughts of health management, we established health records for observation group firstly, then assessed cardiovascular risk among patients. The patients with low, moderate risk were conducted the continuous monitoring of blood pressure, health education, the key intervention in their way of life, established a good mentality. If the blood pressure was still unstable and out of control, we began to consider the use of drug. For patients with high risk or very high risk, besides the treatment considered, they needed immediate medical treatment supplemented by traditional Chinese medicine. Observation group was followed up for 1 time, and lasting for 6 months, then their blood pressure was measured again, the treatment effect and adverse reactions were evaluated.

Results The total effective rate of observation group was 96.7% (89/92), which was significantly higher than that of control group 82.8% (58/70), χ² = 9.12, P<0.01, the difference was statistically significant. After following up for 6 months, the systolic blood pressure of observation group fell to (126.1±21.5) mmHg, t = 7.548, P<0.01; diastolic blood pressure fell to (79.5±9.5) mmHg, t = 10.703, P<0.01, the change was significantly different than before. The systolic blood pressure of control group fell to (145.3±26.7) mmHg, t = 1.979, P>0.05, there was markedly reduced, diastolic blood pressure decreased too, but there was no statistical difference (P>0.05). So the effect of observation group was better than control group. Meanwhile, some adverse reaction occurred in both groups, but there was no significant difference.

Conclusion With the thinking of health management for aged patients with hypertension, offer full – course treatment for them in order to increase the awareness of hypertension and establish healthy lifestyle, guide scientific and rational drug use. The integrated use of these methods can effectively improve the effect of the treatment of senile hypertension, which is worthy of popularization and application.

【Key words】Comprehensive method; Aged people; Hypertension
磷肌酸钠联合丹参多酚酸盐治疗冠心病心力衰竭疗效观察

闫文珍  黄淑田

【摘要】目的观察磷酸肌酸联合丹参多酚酸盐治疗冠心病心力衰竭的临床疗效。方法114例冠心病心力衰竭患者为研究对象，采用随机数字表法分为对照组55例和研究组59例；两组均给予抗心力衰竭常规治疗，研究组在此基础上，给予磷酸肌酸钠联合丹参多酚酸盐；观察并比较两组患者的临床疗效。结果研究组总有效率为96.61%（57/59），明显高于对照组的85.45%（47/55），差异有统计学意义（χ² = 4.427, P = 0.035）。治疗前，两组左心射血分数（LVEF）、左室舒张末内径（LVEDD）、左室收缩末内径（LVESD）和6 min步行距离差异均无统计学意义（均P > 0.05）；治疗后，研究组LVEDD和LVESD值均下降，LVEF和6 min步行距离均升高，差异有统计学意义（P < 0.05），研究组LVSD、LVEDD低于对照组，LVEF及6 min步行距离高于对照组，差异均有统计学意义（均P < 0.05）；两组均未发现与治疗相关的并发症或副作用。结论磷酸肌酸钠联合丹参多酚酸盐能够改善患者心功能各项指标，且副作用少。

【关键词】冠心病心衰；丹参多酚酸盐；磷酸肌酸

The effect of creatine phosphate combined with salvia miltiorrhiza polyphenols acid salt in treatment of coronary heart disease with heart failure  Yan Wenzhen, Huang Shutian. Department of Internal, the People’s Hospital of Datong County, Shanxi 037300, China

【Abstract】Objective To explore the effect of creatine phosphate combined with salvia miltiorrhiza polyphenols acid salt in treatment of coronary heart disease heart failure. Methods 114 cases of patients with coronary heart disease heart failure were selected as research objectives, who were treated in our hospital from August 2012 to August 2014. And they were randomly divided into control group(55 cases) and research group(59 cases) according to the number table method. Routine therapy of heart failure were given in both groups and the research group were added creatine phosphate combined with salvia miltiorrhiza polyphenols acid salt. The clinical efficacy of two groups of patients were observed and compared. Results The total effective rate in research group was 96.61% (57/59), significantly higher than 85.45% (47/55) in control group, the difference was statistically significant (χ² = 4.427, P = 0.035). Before treatment, the left ventricular ejection fraction (LVEF), left ventricular end diastolic diameter (LVEDD), left ventricular end systolic diameter (LVESD) and 6 min walking distance of two groups had no significant difference (P > 0.05). After treatment, the LVEDD and LVESD of research group were decreased and LVEF and 6 minutes walking distance of two groups were increased, the difference was statistically significant (P < 0.05), the LVEDD and LVESD of research group were lower than that of the control group and LVEF and 6 minutes walking distance were higher than that of control group, the difference was statistically significant (P < 0.05). No complications or side effects related to the treatment were found in both groups. Conclusion On the basis of routine therapy of heart failure, the effect of creatine phosphate sodium combined with salvia miltiorrhiza polyphenols acid salt in treatment of coronary heart disease heart failure can improve cardiac function of the patients with the indicators, and the clinical effect is obvious, and side effects is rarely observed.

【Key words】Coronary heart disease heart failure; Salvia miltiorrhiza polyphenols acid salt; Creatine phosphate
缬沙坦、甲泼尼龙联合环磷酰胺治疗以蛋白尿为主 IgA 肾病的临床研究

蒲燕飞

【摘要】目的 评价缬沙坦、甲泼尼龙联合环磷酰胺治疗以蛋白尿为主 IgA 肾病的临床疗效及其安全性。方法 将 118 例以蛋白尿为主 IgA 肾病患者按随机数字法分为研究组 (60 例) 与对照组 (58 例)。对照组给予缬沙坦胶囊 (80 mg/d) 和甲泼尼龙片 (1 mg·kg⁻¹·d⁻¹) 治疗, 研究组在此基础上联合环磷酰胺 (CTX) 冲击治疗 (0.5 ~ 1.0 g/m², 每月 1 次, 治疗 10 次), 均治疗 12 个月。观察两组治疗后的临床疗效, 24 h 尿蛋白定量和血浆清蛋白 (ALB) 的变化情况。结果 研究组和对照组的临床总有效率分别为 79.33% 和 43.10%, 研究组显著高于对照组 (X² = 19.401, P < 0.01); 研究组 24 h 尿蛋白定量从治疗前的 (2.0 ± 1.3) g/24 h 显著下降到治疗后第 12 个月的 (0.9 ± 0.2) g/24 h (t = 7.184, P < 0.01), ALB 水平从治疗前的 (32.2 ± 4.2) g/L 显著上升至治疗后第 12 个月的 (39.5 ± 4.8) g/L (t = 5.335, P < 0.01), 研究组治疗后 4, 6, 8, 10, 12 个月后 24 h 尿蛋白定量显著低于对照组 (t = 3.461, 3.854, 4.021, 3.976, 3.365, 均 P < 0.05), 研究组治疗 8, 10, 12 个月后 ALB 水平显著高于对照组 (t = 3.850, 5.020, 5.560, 均 P < 0.05)。结论 缬沙坦、甲泼尼龙联合环磷酰胺治疗以蛋白尿为主 IgA 肾病, 能更有效降低尿蛋白, 保护肾功能。

【关键词】 肾小球肾炎, IGA; 缬沙坦; 环磷酰胺; 蛋白尿; 前白蛋白

Clinical study on valsartan and methylprednisolone combined with cyclophosphamide for treatment of IgA nephropathy with prevailing proteinuria  Pu Yanfei. Department of Pharmacy, the First People’s Hospital of Tonglu County, Hangzhou, Zhejiang 311500, China

【Abstract】Objective To evaluate the clinical efficacy and safety of valsartan and methylprednisolone combined with cyclophosphamide for treatment of IgA nephropathy with prevailing proteinuria. Methods 118 cases of IgA nephropathy patients with prevailing proteinuria were divided into the research group (60 cases) and control group (58 cases) according to random number table. Patients in the control group were given valsartan capsules (80mg/d) and methylprednisolone tablets (1mg·kg⁻¹·d⁻¹), patients in the research group were given cyclophosphamide tablets on the basis of control group (0.5 ~ 1.0 g/m², 1 time/month, a total of 10 times). All the patients were treated for 12 months. The clinical efficacy, 24 h urine protein quantitative and plasma-albumin (ALB) were observed before and after treatment. Results After treatment, the clinical efficacy of research group and control group were 79.33% and 43.10%, the data of research group was significantly higher than that of the control group (X² = 19.401, P < 0.01), the 24 h urine protein quantitative of the research group was significantly decreased from (2.0 ± 1.3) g/24 h before treatment to (0.9 ± 0.2) g/24 h in the 12 month after treatment (t = 7.184, P < 0.01), the ALB of the research group was significantly increased from (32.2 ± 4.2) g/L before treatment to (39.5 ± 4.8) g/L in the 12 month after treatment (t = 5.335, P < 0.01), the 24 h urine protein quantitative of the research group after 4, 6, 8, 10, 12 month were significantly lower than those in the control group (t = 3.461, 3.854, 4.021, 3.976, 3.365, all P < 0.05), the ALB of research group after 8, 10, 12 month were significantly higher than those in control group (t = 3.850, 5.020, 5.560, all P < 0.05). Conclusion Valsartan combined methylprednisolone can more effectively reduce urinary protein and protect renal function for the treatment of IgA nephropathy.

【Key words】 Glomerulonephritis, IGA; Valsartan; Cyclophosphamide; Proteinuria; Prealbumin

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病毒灭活血浆与白蛋白复方氯化钠注射液行血浆置换治疗重症系统性红斑狼疮疗效比较

李鑫 李晶

【摘要】目的 比较病毒灭活血浆与白蛋白复方氯化钠注射液（林格液）进行血浆置换（PE）治疗重症系统性红斑狼疮（SLE）的临床疗效。方法 选取重症SLE患者75例，按数字表法将患者随机分为病毒灭活血浆组（A组）37例和白蛋白加林格液代血浆组（B组）38例，观察两组PE前后免疫球蛋白（IgG、IgA、IgM）、红细胞沉降率（ESR）、补体（C3）、C反应蛋白（CRP）、血尿素氮（BUN）、血清肌酐（Cr）等指标的变化。比较两组系统性红斑狼疮疾病活动性指数（SLEDAI）评分系统积分变化，不良反应发生率及临床疗效。结果A组患者行PE治疗后，实验室指标除IgM（t=0.509，P>0.05）外，其余指标均明显下降，差异均有统计学意义（t=29.447，7.186，56.447，41.867，12.841，92.675，92.980，均P<0.01）；B组患者IgG，ESR，BUN，CREA与置换前差异无统计学意义（t=0.565，1.165，0.902，均P>0.05）；IgA，CRP，C3与置换前差异均无统计学意义（t=9.4±1.2分，B组总有效率为77.3%，SLEDAI积分为13.8±1.1分，两组差异均有统计学意义（χ²=8.831，t=15.560，均P<0.01）。A组不良反应发生率为15.3%，B组为16.2%，两组差异无统计学意义（χ²=0.509，P>0.05）。结论 用地塞米松和血浆置换治疗重型SLE临床疗效优于白蛋白林格液。

【关键词】置换液；血浆置换；红斑狼疮；系统性

Comparison of the effects of virus inactivation of plasma and albumin in plasma exchange liquid gallinger therapy on the treatment of severe systemic lupus erythematosus Li Xin, Li Jing. Department of Blood Transfusion, the General Hospital of Shanxi Datong Coal Group. Datong. Shanxi 037003, China

【Abstract】Objective To compare the clinical curative effect of virus inactivating activity of plasma and albumin compound sodium chloride injection in liquid plasma exchange (PE) for the treatment of severe systemic lupus erythematosus(SLE). Methods A total of 75 cases of severe SLE patients were randomized according to the number table method patients for virus inactivation of plasma group A(37 cases) and liquid albumin plasma group B (38 cases). The changes of immunoglobulin protein (IgG, IgA, IgM), ESR, complement C3, C-reactive protein (CRP), blood urea nitrogen (BUN) and serum creatinine (CR) index in the two groups were observed before and after PE. Clinical SLEDAI(systemic lupus erythematosus disease activity index) score changes, adverse reactions occurred rate and clinical efficacy of two groups were compared. Results After treatment of group A was treated with PE, laboratory indicators except IgM (t=0.509, P>0.05), other indexes were significantly decreased, differences were statistically significant (t=29.447,186,56.447,41.867,12.841,92.675,92.980, all P<0.01). In group B, the IgM, IgA, CRP, C3 and preoperative showed no statistical significance (t=0.565,1.165,0.902, all P>0.05), while IgG and ESR, bun, crea and replacement of the differences have statistical significance (t value were 28.999,194.9,40,634,40.634104.918, P value <0.01). Total efficiency of groups of A was 91.9%, the average clinical SLEDAI score was (9.4±1.2) points, total efficiency of group B was 77.3%, clinical SLEDAI score was (13.8±1.1) points and the difference between the two groups were statistically significant (χ²=8.831, t=15.560, P<0.01). In group A, the adverse reaction rate was 15.3%, that of group B was 16.2%, there was no significant difference between the two groups (χ²=0.509, P>0.05). Conclusion The clinical curative effect of virus inactivation of plasma replacement solution in treatment of severe SLE is better than that of albumin by Ringer’s solution.

【Key words】Replacement fluid; Plasma exchange; Systemic lupus erythematosus

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慢性乙型肝炎患者及 HBV 携带者 CD$_8^+$ T 细胞表面活化分子 CD$_{38}$ 和人类白细胞抗原-DR 表达研究

陈雪芳 周亚娣

【摘要】 目的 研究慢性乙肝 (CHB) 患者阿德福韦酯治疗前后及 HBV 携带者 CD$_8^+$ T 细胞表面活化分子 CD$_{38}$ 和人类白细胞抗原-DR (HLA-DR) 表达情况，并探讨其与疾病进展的关系。 方法 收集 32 例经阿德福韦酯治疗的 CHB 患者、31 例 HBV 携带者及 28 例健康对照者，采用流式细胞术检测 TB cells 和 CD$_8^+$ T 细胞表面活化分子 CD$_{38}$ 及人类白细胞抗原-DR (HLA-DR) 的表达。 结果 CHB 患者治疗前 CD$_38^+\text{CD}^8^+\text{T}$ 细胞比例为 $(58.4 \pm 12.7)\%$，显著高于 HBV 携带者的 $(46.8 \pm 8.5)\%$ 和健康对照组的 $(24.3 \pm 7.9)\%$，阿德福韦酯治疗后显著降低 $(43.8 \pm 9.9)\%$，HBV 携带者 CD$_38^+\text{CD}^8^+\text{T}$ 细胞比例健康对照组 $(F = 8.27, P = 0.000)$。CHB 患者治疗前 CD$_{38}^+\text{HLA-DR}^+\text{T}$ 细胞比例为 $(43.3 \pm 12.5)\%$，显著高于健康对照组的 $(9.8 \pm 5.7)\%$ $(F = 13.48, P = 0.000)$，但与 HBV 携带者的 $(37.1 \pm 11.3)\%$ 差异无统计学意义。阿德福韦酯治疗后显著下降，仍高于正常水平 $(P < 0.05)$。结论 HBV 感染可以引起 CD$_8^+$ T 活化水平显著降低，阿德福韦酯抗病毒治疗能够降低 CD$_8^+$ T 的活化。CD$_8^+$ T 活化水平是良好的 HBV 感染病情评价指标。

【关键词】 乙型肝炎, 慢性；免疫活化；CD38；人类白细胞抗原-DR

Expression of CD$_{38}$ and HLA – DR on CD$_8^+$ T cells in patients with chronic hepatitis B and HBV carriers

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【Abstract】 Objective To determine the expression of CD$_{38}$ and HLA – DR on CD$_8^+$ T cells in patients with chronic hepatitis B and HBV carriers, and to discuss the relationship between immune activation and disease progression of HBV infection. Methods Thirty – two chronic hepatitis B patients receiving adefovir dipivoxil treatment, 31 HBV carriers and 28 normal controls were collected. The counts of CD$_8^+$ and CD$_8^+$ T cells and the percentage of CD$_8^+$ CD$_{38}^+$ and CD$_8^+$ HLA – DR + T cells were tested by flow cytometry. HBV DNA and liver function were tested in the central laboratory of our hospital. Results The percentage of CD$_8^+$ CD$_{38}^+$ T cells in CHB patients was $(58.4 \pm 12.7)\%$，and was higher than that in HBV carriers $(46.8 \pm 8.5)\%$ and normal controls $(46.8 \pm 8.5)\%$，and decreased after adefovir dipivoxil treatment $(34.2 \pm 9.4)\%$ $(F = 8.27, P = 0.000)$. The percentage of CD$_8^+$ CD$_{38}^+$ T cells in HBV carriers was $(43.3 \pm 12.5)\%$，and was much higher than that in normal controls $(9.8 \pm 5.7)\%$ $(F = 13.48, P = 0.000)$. The percentage of CD$_8^+$ HLA – DR + T cells in CHB patients was higher than that in normal controls, but similar to that in HBV carriers $(37.1 \pm 11.3)\%$. CD$_8^+$ HLA – DR + T cells in CHB patients also decreased after adefovir dipivoxil treatment $(P < 0.05)$. Conclusion Our study demonstrates that activation of CD$_8^+$ T cells is increased in HBV infection but decreased by adefovir dipivoxil treatment. The percentages of CD$_8^+$ CD$_{38}^+$ and CD8 + HLA – DR + T are good markers for disease progression of HBV infection.

【Key words】 Hepatitis B, Chronic; Immune activation; CD38; Human leukocyte antigen – DR
乳果糖对慢性功能性便秘患者的血浆胃动素和一氧化氮的影响

陈爱萍 钱卫珍 王勇杰 叶子

【摘要】 目的 探讨乳果糖对慢性功能性便秘患者血浆胃动素（MTL）和一氧化氮（NO）水平的影响。方法 选取慢性功能性便秘患者54例为观察对象，分研究组29例和对照组24例，两组均给予基础治疗，研究组：乳果糖口服液每次10g，每天3次，治疗6周；观察两组患者血浆MTL、NO的变化。结果 研究组：治疗前MTL 203.71ng/mL，治疗6周后MTL 371.03ng/mL，治疗前后MTL水平差异有统计学意义（P<0.05）；治疗前NO 120.52ng/mL，治疗后NO 69.01ng/mL，治疗前后NO下降水平差异有统计学意义（P<0.05）。对照组：治疗前MTL 206.21ng/mL，治疗后MTL 279ng/mL，治疗前后MTL水平差异有统计学意义（P<0.05）；治疗前NO 123.92ng/mL，治疗后NO 98.75ng/mL，治疗前后NO下降水平差异有统计学意义（P<0.05）。研究组治疗后MTL水平高于对照组，NO低于对照组，MTL、NO分别比较，差异均有统计学意义（P<0.05）。结论 乳果糖可以改善血浆胃肠激素的分泌，促进MTL分泌，降低NO的合成。

【关键词】 慢性功能性便秘；胃动素；一氧化氮；乳果糖口服液

The effect of lactulose oral solution in the treatment of patients with chronic functional constipation and its influence on the level of MTL and NO

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【Abstract】 Objective To explore the effect of lactulose oral solution in the treatment of patients with chronic functional constipation and its influence on the level of MTL and NO. Methods 54 cases of patients were selected with primary glaucoma who were treated in our hospital from June 2013 to October 2014 as research objective, and they were randomly divided into research group (29 cases) and control group (25 cases) according to the number table method. All of the patients were given treatment as diet adjusting, defecating exercise and so on. The research group got extra treatment as taking lactulose oral solution 10 g, 2 to 3 times per day, for 6 weeks. Results MTL in the research group before treatment was 203.71ng/mL, and it was 371.03ng/mL after treatment for 6 weeks, there was statistically significance on difference of MTL levels between before treatment and after treatment (P<0.05). NO in the research group before treatment was 120.52ng/mL, and it was 69.01ng/mL after treatment for 6 weeks, there was statistically significance on difference of NO levels between before treatment and after treatment (P<0.05). MTL in the control group before treatment was 206.21ng/mL, which was 279ng/mL after treatment for 6 weeks, there was statistically significance on difference of MTL levels between before treatment and after treatment (P<0.05). NO in the control group before treatment was 123.92ng/mL, which was 98.75ng/mL after treatment for 6 weeks, there was statistically significance on difference of NO levels between before treatment and after treatment (P<0.05). MTL levels in the research group after treatment was higher than that in the control group when NO levels was lower than that in the control group, the difference was statistically significant (P<0.05). Conclusion Lactulose can improve the secretion of gastrointestinal hormones in plasma such as promoting the secretion of MTL and reducing the synthesis of NO.

【Key words】 Chronic functional constipation; Motilin; NO; Lactulose oral solution

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影响脑动静脉畸形栓塞术后颅内出血的高危因素分析

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【摘要】目的 探讨影响脑动静脉畸形（cAVM）栓塞术后颅内出血的高危因素。方法 回顾性分析经过畸形血管团栓塞治疗的230例脑动静脉畸形患者的临床资料，记录术后3d内颅内出血的发生情况，采用非条件Logistic回归法统计分析术后颅内出血的高危因素。结果 术后共有15例患者出现颅内出血，治疗后畸形血管团面积为（2.18±0.91）cm²，与治疗前（6.67±1.56）cm²相比患者畸形血管团面积明显缩小（t=9.627，P<0.05）。Logistic回归分析显示患者的年龄、性别、出血史、癫痫史、SM分级及cAVM大小与术后颅内出血无关（均P>0.05），单次栓塞面积≥36.5%（P=0.031）和患者有既往高血压史（P=0.025）是栓塞术后患者颅内出血的高危因素。结论 患者单次栓塞面积过大（≥36.5%）或术前有高血压史可诱发脑动静脉畸形栓塞术后颅内出血，密切观察血管栓塞情况，术后3d内严格降低患者血压对预防患者术后继发颅内出血有一定帮助。

【关键词】脑动静脉畸形；颅内出血；高危因素

Risk factors of intracranial hemorrhage after endovascular therapy of cerebral arteriovenous malformation embolization

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【Abstract】Objective To study the risk factors of intracranial hemorrhage after endovascular therapy of cerebral arteriovenous malformations embolization. Methods the clinical records and images of 230 patients with cAVMs were retrospectively reviewed. Patients with intracranial hemorrhage after endovascular therapy in 3 days were recorded and the risk factors of hemorrhage by using multivariate logistic regression for guiding the treatment strategy were studied. Results There were 15 patients occurred intracerebral hemorrhages. After treatment the area of cAVMs was significantly smaller than that before treatment[（2.18±0.91）cm² vs（6.67±1.56）cm²], the difference was a statistically significant （t=9.627, P<0.05）. A partial AVM reduction of ≥36.5% （P=0.031） and hypertension （P=0.025） were considered as risk factors for hemorrhage after endovascular therapy of cAVMs. Conclusion Patients receives a partial AVM reduction of ≥36.5% or with hypertension history have a tendency of increasing hemorrhage after endovascular therapy of cAVMs. It’s helpful for preventing intracerebral hemorrhage if the arterial blood pressure maintains after endovascular therapy.

【Key words】Cerebral arteriovenous malformations; Endovascular embolization; Hemorrhage; Risk factor

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左西孟旦治疗顽固性心力衰竭的疗效观察

袁鹏 刘敏 杨冬

【摘要】目的 观察左西孟旦治疗顽固性心力衰竭的疗效。方法 将 84 例顽固性心力衰竭患者随机 (简单随机化) 分为观察组和对照组,在常规纠正心力衰竭的基础上,观察组加用左西孟旦治疗,对照组加用米力农注射治疗。比较两组治疗前后的 B 型脑钠肽前体 (NT-proBNP) 及左室射血分数 (LVEF)。结果 治疗后,观察组与对照组 NT-proBNP 水平及 LVEF 均有明显改善 (对照组治疗后: NT-proBNP(975.14 ± 247.01) ng/mL、LVEF(0.36 ± 0.18)% ; 观察组治疗后 NT-proBNP(832.14 ± 224.78) ng/mL、LVEF(0.42 ± 0.36)% ), 与对照组治疗后差异有统计学意义 (NT-proBNP: t = 165.2, P < 0.01; LVEF: t = 115.8, P < 0.01); 观察组改善更明显 (与治疗前比较, NT-proBNP; t = 230.2, P < 0.05; LVEF; t = 215.2, P < 0.01)。结论 左西孟旦能改善顽固性心力衰竭患者左心功能不全的症状和体征, 改善患者心功能。

【关键词】左西孟旦; 心力衰竭; 米力农; B 型脑钠肽前体; 左室射血分数

Curative effect of levosimendan on treatment of patients with refractory heart failure Yuan Peng, Liu Min, Yang Dong. Department of Cardiology, Jiaozhou Central Hospital, Qingdao, Shandong 266300, China

【Abstract】Objective To evaluate clinical curative effect of levosimendan therapy on patients with refractory heart failure. Methods A total of 84 patients with refractory heart failure were randomly and equally divided into levosimendan group and routine treatment group. Both groups received routine antihypertensive medication, levosimendan group received levosimendan therapy while routine treatment received milrinone injection therapy additionally. Changes of left ventricular ejection fraction (LVEF) and plasma level of N terminal pro type B natriuretic peptide (NT-proBNP) were compared between two groups before and after treatment. Results Compared with routine treatment group, there were significant increase in total effective rate of LVEF[ (0.36 ± 0.18)% vs. (0.42 ± 0.36)% ], and in NT-proBNP[ (975.14 ± 247.01) ng/mL vs. (832.14 ± 224.78) ng/mL]. The effect before and after treatment of levosimendan group were more obviously ( NT-proBNP: t = 165.2, P < 0.01; LVEF: t = 115.8, P < 0.01). Conclusion Levosimendan can significantly improve heart function, decrease NT-proBNP level in patients with refractory heart failure.

【Key words】Levosimendan, Heart failure, Milrinone injection, N terminal pro type B natriuretic peptide, Left ventricular ejection fraction

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【摘要】目的 探讨黄体酮治疗先兆流产时孕妇血清孕酮诱导的封闭因子(PIBF)水平变化及临床意义,为黄体酮治疗先兆流产提供理论参考。方法 选取先兆流产孕妇(观察组)及无先兆流产孕妇(对照组)各50例。观察组给予黄体酮治疗,采用酶联免疫吸附法(ELISA)检测观察组治疗前及治疗2周后对照组入
选时及入选后2周血清孕酮及PIBF水平变化。结果 观察组黄体酮治疗后47例患者保胎成功,保胎成功率94.00%,保胎流血停止时间8.42 d,腹痛消失时间11.32 d;观察组PIBF(313.52 ± 90.43) mmol/L,低于对照组的(398.47 ± 104.25) mmol/L,差异有统计学意义(t = 10.90, P < 0.05);观察组治疗2周后孕酮(92.35 ± 20.85) mmol/L,高于治疗前的(74.49 ± 14.22) mmol/L,较对照组同一时点孕酮水平[(83.26 ± 20.14) mmol/L和(78.05 ± 15.38) mmol/L]高,差异有统计学意义(t = 7.96,8.11, P < 0.05);P
IBF观察组治疗2周后(510.73 ± 87.49) mmol/L,高于对照组同一时点的(498.26 ± 69.88) mmol/L,差异有统计学意义(t = 4.35, P < 0.05)。随访观察组保胎成功孕妇足月分娩率为95.74%,分娩胎儿未见畸形发生,对照组孕妇足月分娩率为94.00%,分娩胎儿未见畸形发生,足月分娩率比较差异无统计学意义(P > 0.05)。结论 妊娠早期PIBF降低可能是引起先兆流产的原因之一,采用黄体酮治疗能上调PIBF的表达,可能通过此途径起到了保胎作用,因此在采用黄体酮保胎时监测PIBF水平变化有助于评估保胎疗效。【关键词】流产·先兆;孕酮诱导的封闭因子;黄体酮

Progesterone treatment of threatened abortion, maternal serum levels of progesterone – induced blocking factor and its clinical significance Shi Nayu, Shi Ruisheng. Department of Obstetrics and Gynecology, Maternity Hospital of Hangzhou, Hangzhou, Zhejiang 310008, China

【Abstract】 Objective To investigate the treatment of threatened abortion progesterone maternal serum progesterone – induced blocking factor (PIBF) levels and clinical significance, in order to be able to provide theoretical references of progesterone treatment of threatened abortion. Methods Threatened abortion women (study group) and non – threatened abortion women (control group), 50 patients in the observation group given progesterone therapy, enzyme – linked immunosorbent assay (ELISA) was used to detect serum progesterone and PIBF levels of the observation group before treatment and two weeks later, the control group was selected and named after two weeks. Results Observation group after treatment 47 patients' progesterone tocolysis successful, success rate was 94.00%, tocolysis bleeding stop time 8.42 d, abdominal pain time 11.32 d. PIBF of the observation group was (313.52 ± 90.43) mmol/L, which was lower than that of the control group (398.47 ± 104.25) mmol/L, the difference was statistically significant (t = 10.90, P < 0.05). The progesterone of the observation group after 2 weeks of treatment was (92.35 ± 20.85) mmol/L, which was higher than before treatment (74.49 ± 14.22) mmol/L, compared with progesterone levels of the control group at the same time (83.26 ± 20.14) mmol/L and (78.05 ± 15.38) mmol/L, the difference was statistically significant (t = 7.96,8.11, P < 0.05), PIBF after 2 weeks of treatment in the observation group was (510.73 ± 87.49) mmol/L, which was higher than that of the control group at the same time (498.26 ± 69.88) mmol/L, the difference was statistically significant (t = 4.35, P < 0.05). Follow – up observation group miscarriage successful term delivery rate 95.74% of pregnant women, childbirth fetal malformations seen in the control group of pregnant women at term birth rate was 94.00%, no delivery fetal malformation, the difference of full – term delivery rate was not statistically significant (P > 0.05). Conclusion Reduced PIBF during early pregnancy may be one of the reasons of threatened abortion, the use of progesterone therapy can increase PIBF expression, possibly through this pathway plays a role in tocolysis, so when using progesterone tocolysis monitoring PIBF levels helps evaluate the efficacy of tocolysis.【Key words】 Abortion, Threatened; Progesterone – induced blocking factor; Progesterone

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CT 血管成像在颅内动脉瘤诊断中的价值

夏立栋 胡少波

【摘要】 目的 探讨多层螺旋 CT 血管成像技术（multislice spiral CT angiography, MSCTA）在诊断颅内动脉瘤中的应用价值。方法 对动脉瘤性蛛网膜下腔出血患者 40 例采用 MSCTA 诊断颅内动脉瘤,并以数字减影血管造影（digital subtraction angiography, DSA）作为金标准,评价 MSCTA 对颅内动脉瘤诊断的灵敏性、特异性及准确性。结果 40 例患者中共在 32 例患者中检出动脉瘤 34 个,均行动脉瘤夹闭术并被术中证实。经 MSCTA 检查检出动脉瘤 33 例,检出动脉瘤 34 个,其中大部分患者为单发 (31 例),多发 1 例,假阳性 1 例,为眼动脉起始部动脉瘤。DSA 检查 32 例患者中检出 34 个动脉瘤,但是其中单发 30 例,多发 2 例。与 DSA 作为金标准,评价 MSCTA 对颅内动脉瘤诊断的灵敏性、特异性及准确性分别为 100%、87.50%、97.50%。MSCTA 检出瘤颈宽度 1.85~4.33 mm,平均瘤颈宽度 (3.65±1.85 mm); DSA 检出瘤颈宽度 1.52~4.48 mm,平均瘤颈宽度 (3.41±1.96 mm); 经统计学分析发现两种方法检出的平均瘤颈宽度比较无统计学意义 (t = 0.78, P > 0.05)。但是从检出的最小值来看, DSA 还是存在一定的优势。结论 MSCTA 对颅内动脉瘤检查的灵敏度高,可以作为外科治疗或介入治疗颅内动脉瘤的筛选方法,但仍不能完全替代 DSA。

【关键词】 CT 血管成像;数字减影血管造影;颅内动脉瘤

The value of CT angiography in diagnosis of intracranial aneurysms  Xia Lidong, Hu Shaobo. Department of Radiology, the People’s Hospital of Xinchang County, Shaoxing, Zhejiang 312500, China

【Abstract】 Objective To study the application value of multislice spiral CT angiography (MSCTA) in diagnosis of intracranial aneurysms. Methods MSCTA was used to diagnose intracranial aneurysms in 40 patients with subarachnoid hemorrhage. Subtraction angiography digital (DSA) was used as the gold standard to evaluate the sensitivity, specificity and accuracy of MSCTA for diagnosis of intracranial aneurysms. Results In 40 patients, 34 aneurysms were detected in 32 patients and they were all confirmed by incarcereation of aneurysm. The aneurysms were detected in 33 cases by MSCTA, and the aneurysms were 34. Most of them were single (31 cases), 1 case was multiple and 1 case was false positive. DSA was detected in 32 patients with 34 aneurysms, but single in 30 cases and multiple in 2 cases. DSA as the gold standard, the sensitivity, specificity and accuracy of MSCTA in diagnosis of intracranial aneurysms were 100%, 87.50% and 97.50% respectively. MSCTA detected aneurysm neck width 1.85~4.33 mm, average aneurysm neck width was (3.65±1.85) mm. DSA detected aneurysm neck width 1.52~4.48 mm, average aneurysm neck width was (3.41±1.96) mm. The average tumor neck width detected by the two methods had no statistically significant difference (t = 0.78, P > 0.05). But from the minimum of the detection, DSA still had certain advantages. Conclusion The sensitivity of MSCTA for intracranial aneurysms was high. It can be used as a method for surgical treatment of intracranial aneurysms, but it still can not completely replace the DSA.

【Keywords】 CT angiography angiography; Digital subtraction angiography; Intracranial aneurysms

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未婚女性人工流产术后心理健康状况与影响因素分析

【摘要】目的应用SCL-90量表，调查未婚女性人工流产术后心理健康状况，并分析影响其人工流产心理健康的因素，为进行有效地干预措施提供指导。方法采用整群抽样的方法，运用SCL-90量表对247例人工流产的未婚女性进行问卷调查，并运用SPSS18.0软件对数据进行统计分析。结果人工流产未婚女性健康状况躯体化、强迫、人际关系敏感、敌对、抑郁、恐怖及精神病性等8个维度评分均高于全国常模，差异有统计学意义（t=3.553,P=0.000;t=3.641,P=0.000;t=1.891,P=0.015;t=2.642,P=0.008;t=3.189,P=0.001; t=2.251,P=0.025;t=4.796,P=0.000;t=5.288,P=0.00）；低年龄水平人工流产未婚女性健康状况躯体化、人际关系敏感、抑郁、焦虑、敌对、恐怖和精神病性等7个维度评分均高于高年龄水平（t=1.56±0.37,P=0.004;t=1.54±0.43,P=0.017;t=1.59±0.39,P=0.035;t=1.63±0.48,P=0.011）。结论应关注人工流产未婚女性心理健康状况，加强健康干预。

【关键词】未婚女性；人工流产；心理健康；影响因素；效应；信度
经皮椎间孔镜技术作为一种应用在临床的新型技术，有着创伤小、恢复快、临床效果显著等优点，越来越受到广大医生及病人的重视。从 1998 年 YESS 技术的产生到 2002 年 TESSYS 技术的提出，脊柱微创外科领域中经皮椎间孔镜技术的研究也越来越受到骨科专业人员的关注，越来越引起骨科领域专家的重视。在不断的临床运用中，我们对这一技术的认识有了长足的进步。特别是近几年来，临床上经皮椎间孔镜手术代替传统开放手术治疗腰椎间盘突出症，术后效果显著，得到广大临床医生及患者的认可，同时也有许多临床医生为充分发挥该技术的优势不断探索，用来解决其它脊柱疾病取得了良好的效果。为了让骨科同行能迅速对经皮椎间孔镜技术有一个全面的认识，现就该领域研究作一概述。
强直性脊柱炎早期诊治进展

马超  魏金栋  张洪相

强直性脊柱炎(ankylosing spondylitis，AS)是一种以累及脊柱和髋骼关节为特征的系统性自身免疫炎症性疾病，是其他脊柱关节病(spondyloarthropathies，SpA)的原型，常危害20～30岁的青壮人，在我国患病率0.3%左右[1]，临床上多数表现为炎性腰背痛、僵硬与活动受限，晚期可发生脊柱畸形和关节僵直，致残率高。目前，虽然对AS发病机制尚不明确，但随着对AS治病因素研究的不断深入，近年来对其诊断和治疗的新方法取得了可喜进步，现将AS早期诊断及治疗的研究现状综述如下。

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丙泊酚影响脑组织水通道蛋白4的研究进展

周立杰 宋春雨

脑水肿是许多中枢神经系统病变时共同的病理过程，脑水肿导致颅内压增高可造成神经功能损害，是神经系统疾病预后不良的主要原因之一，当颅内压进一步增高时可发展为脑疝甚至危及生命[1]。目前临床有很多药物可以治疗脑水肿，比如渗透性脱水剂、袢利尿剂以及高张液体等，但是脑水肿的发生率依然很高，严重影响着患者的生存质量和生命安全。丙泊酚是临床常用的脂溶性静脉麻醉药，随着对丙泊酚药理特性的进一步研究了解，丙泊酚的脑保护作用也越来越多地得到证实，被广泛用于神经外科手术的麻醉以及颅脑损伤病人的镇静[2]。丙泊酚的脑保护作用机制有很多，其中可能与其抗氧化性，抑制细胞内的钙超载，调节兴奋性氨基酸受体介导神经毒性作用，影响炎症因子的表达，以及抑制细胞凋亡反应等有关。有研究证明，丙泊酚可以通过调节脑组织水通道蛋白4(AQP4)的表达[3]，减轻脑水肿的发生。

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三参滋胃饮配合健康教育治疗慢性萎缩性胃炎的临床观察

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【摘要】  目的  探讨三参滋胃饮配合健康教育对慢性萎缩性胃炎的临床疗效，为临床治疗方案的制定提供参考。方法  选取慢性萎缩性胃炎，且中医证型属于胃阴虚型的患者 78 例，数字表法随机分为观察组和对照组各 39 例。对照组采用中药三参滋胃饮加减口服进行治疗，观察组在对照组治疗措施的基础上，采用心理健康教育疗法进行干预。治疗 3 个月后，对比两组患者治疗前后的焦虑自评量表、抑郁自评量表评估结果；对比两组患者的临床疗效以及治疗前后的中医证候评分结果。结果  观察组治疗后的焦虑自评量表评估结果为（43.75 ±5.87）分，抑郁自评量表评估结果为（44.41 ± 5.71）分，均显著低于对照组（t=5.35, 5.22, 均 P<0.05）；经过治疗后，观察组的显效率为 53.85%，有效率为 43.59%，总有效率为 97.44%，观察组的显效率显著高于对照组（χ² = 4.25, P<0.05），而两组患者总有效率差异无统计学意义；两组患者治疗后的证候评分均显著低于治疗前（t=5.01, 5.03, 4.67, 3.98, 6.88, 7.24, 6.12, 5.77, 均P<0.05），观察组治疗后胃脘部疼痛评分为（0.91 ± 0.83）分，胃脘部胀痛评分为（0.64 ± 0.71）分，纳呆评分为（0.51 ± 0.68）分，大便干结评分为（0.42 ± 0.67）分，均显著低于对照组治疗后（t=3.92, 5.05, 4.14, 4.31, 均 P<0.05）。结论  在三参滋胃饮治疗的基础上，配合健康教育能够更有效地缓解慢性萎缩性胃炎患者的临床症状，提高该病的临床治疗效果。

【关键词】  三参滋胃饮；心理健康教育疗法；慢性萎缩性胃炎

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持续关爱式健康教育对妊娠期糖尿病孕妇心理状态的影响

余许仙  程红霞

【摘要】目的 研究持续关爱式健康教育对妊娠期糖尿病孕妇心理状态的影响。方法 选择妊娠期糖尿病患者 104 例，采用随机数字表法分为观察组和对照组，各 52 例。对照组予妊娠期糖尿病患者常规健康教育，观察组予以持续关爱式健康教育，比较两组健康教育后 SAS 评分、SDS 评分、自我管理水平及血糖控制情况。结果 观察组健康教育后 SAS 评分、SDS 评分分别为 (36.65 ± 4.09) 分、(37.76 ± 5.28) 分，对照组分别为 (46.34 ± 5.34) 分、(47.44 ± 4.65) 分，两组健康教育后 SAS 评分、SDS 评分均较健康教育前明显下降，但观察组下降更加明显（t = 6.28, 9.49, 5.03, 5.05, 均 P < 0.05）。观察组健康教育后自我管理水平较健康教育前及对照组健康教育后明显提高，组内、组间差异均有统计学意义（χ² = 60.30, 66.65, 69.49, 63.03, 60.30, 27.85, 53.74, 55.12, 均 P < 0.05）；对照组健康教育后饮食自我控制能力较健康教育前明显增加，组内差异亦有统计学意义（χ² = 10.40, P < 0.05）。观察组健康教育前、健康教育后血糖控制人数分别为 15 例、50 例，对照组为 13 例、27 例，两组健康教育后血糖控制人数均较健康教育前明显增加（χ² = 50.25, 7.96, 均 P < 0.05），但观察组增加更为明显（χ² = 26.46, P < 0.05）。结论 持续关爱式健康教育可明显减轻妊娠期糖尿病患者焦虑、抑郁心理，增加患者自我管理水平，改善血糖控制情况。

【关键词】 健康教育; 妊娠糖尿病; 心理
团体治疗联合认知行为疗法对宫颈癌术后患者负性情绪的影响

陈珍琦  叶晓君  张琼  王洪萍

【摘要】  目的  探讨团体治疗联合认知行为疗法对宫颈癌根治术后患者负性情绪的影响。方法  选择行根治术治疗的宫颈癌患者97例为研究对象，按照出院时间分为对照组和干预组，对照组(n=50)按常规的宫颈癌出院计划实施延续护理，干预组(n=47)以团体治疗联合认知行为疗法为基础进行延续护理。1年后，应用焦虑自评量表(SAS)和癌因性疲乏自评量表(CFS)比较干预效果。结果  干预后，干预组患者SAS(52.47±11.44)分，低于对照组的(57.62±10.58)分，两组差异有统计学意义(t=2.298，P=0.024)；干预组患者CFS(18.36±8.69)分，低于对照组患者(22.04±9.22)分，两组差异有统计学意义(t=2.020，P=0.046)。结论  团体治疗联合认知行为疗法能够有效降低宫颈癌术后患者焦虑情绪和癌因性疲乏水平，对其负性情绪有积极的影响。

【关键词】  焦虑；子宫肿瘤；心理治疗

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规范化护理干预对早发型重度子痫前期患者预后的影响

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【摘要】目的 探讨规范化护理应用在早发型重度子痫患者中的护理效果及新生儿结局情况。方法 选择早发型重度子痫患者 92 例，采用随机数字表法分为观察组和对照组，对照组给予常规治疗，观察组在对照组基础联合规范化护理，记录两组临床围产结局情况。结果 观察组产前妊娠周（36.93 ± 1.13）周，期待治疗天数（8.34 ± 1.52）d，剖宫产 41 例，产妇并发症发生 2 例，护理满意度 91.30%；对照组产前妊娠周（34.71 ± 2.36）周，期待治疗天数（13.76 ± 2.66）d，剖宫产 30 例，产妇并发症发生 10 例，护理满意度 71.74%，组间对比，差异均有统计学意义（t 或 χ² = 5.754, 11.998, 7.466, 6.133, 5.844，均 P < 0.05）。观察组新生儿体质量（2.93 ± 0.31）kg，Apgar 评分（7.81 ± 0.73）分，围生儿生存率 91.30%；对照组新生儿体重（2.54 ± 0.12）kg，Apgar 评分（6.14 ± 0.44）分，围生儿生存率 73.91%，组间对比差异均有统计学意义（t 或 χ² = 7.957, 13.288, 4.842，均 P < 0.05）。结论 采用规范化护理应用在早发型重度子痫患者中可以缩短期待治疗时间，延长终止妊娠周，提升剖宫产率，改善围产儿结局情况，值得在临床上推广应用。

【关键词】子痫前期；规范化护理；妊娠结局

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早期康复护理对脑卒中患者认知功能恢复及生活质量的影响

康梅芳  刘秀梅

【摘要】目的 探讨早期康复护理应用在脑卒中患者中对认知能力和生活质量的影响。方法 将130例脑卒中患者采用随机数字表法分为两组，每组65例。对照组给予常规护理，观察组采用早期康复护理措施，记录两组护理效果。结果 观察组干预后运动功能量表评分（FMA评分）（56.63±11.54）分，MMSE评分（26.31±1.32）分；对照组干预后FMA评分（42.31±7.89）分，MMSE评分（21.58±3.89）分，差异有统计学意义（t=8.2587，9.2833，均P<0.05）。观察组干预后躯体功能（72.53±10.78）分，心理功能（71.77±11.43）分，社会功能（70.92±9.79）分，物质功能（74.28±12.52）分；对照组干预后躯体功能（64.26±7.55）分，心理功能（63.67±8.11）分，社会功能（59.27±6.73）分，物质功能（65.92±8.15）分，差异有统计学意义（t=5.0661, 4.6596, 7.6346, 4.5117，均P<0.05）。结论 早期康复护理应用在脑卒中患者可以改善患者神经功能，提升患者生活质量，值得在临床推广应用。

【关键词】卒中；认知；生活质量；康复护理

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延续护理对乳腺癌患者心理状态的影响

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【摘要】目的  评价延续护理对乳腺癌患者心理状态的影响。方法  将68例乳腺癌患者按住院号尾数奇偶数分组,奇数(36例)为观察组,偶数为对照组(32例),观察组再出院后采用延续护理对患者进行干预,对照组按常规进行出院指导。分别于出院前1~2天,出院后6周对两组的癌症患者希望水平和焦虑抑郁症状进行比较。结果  观察组癌症患者希望水平明显优于对照组(25.72±6.10分,观察组35.04±7.13分,P<0.05),焦虑抑郁症状显著改善[HAD(a)评分对照组(9.8±2.6分,观察组(9.5±4.8分),HAD(d)评分对照组(5.5±3.1分,观察组(5.7±4.5分,P<0.05)。结论  采用延续护理,能帮助乳腺癌患者提高希望水平,缓解焦虑抑郁情绪,消除自我挫败感,提升正确应对疾病的信心,有利于乳腺癌患者身心恢复。

【关键词】乳腺肿瘤;延续护理;心理状态

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