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《中国基层医药》杂志可直接用缩写的常用词汇 对正文
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本期广告目次 对正文

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Analysis of clinicopathological features of gastric cardia cancer with neuroendocrine cell differentiation

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【Abstract】 Objective To investigate the clinicopathological features of gastric cardia cancer with neuroendocrine cell differentiation (NED). Methods From September 2007 to October 2014, the clinicopathological features of 70 gastric cardia cancer patients with NED and 76 cases without NED confirmed by surgical pathology specimens and immunohistochemistry (Syn and CgA) in the First Affiliated Hospital of Shantou University Medical College were retrospectively analyzed and compared. Results The positive expression rates of synaptophysin (Syn) and chromogranin A (CgA) were 43.2% and 22.6%, respectively. Tumor differentiation was significantly related with NED ($\chi^2 = 4.989, P = 0.026$). Tumors with NED were larger and had deeper invasion, but they were not statistically significant. Conclusion Immunohistochemistry is important to the diagnosis of NED. Gastric cardia cancer with NED has poorer differentiation.

【Key words】 Neuroendocrine cell differentiation; Cardiac tumor; Immunohistochemistry; Pathology, clinical
胸大肌肌皮瓣在口咽癌术后组织缺损重建中的应用价值

莫康楠  赵坚强  王可敬

【摘要】目的探讨胸大肌肌皮瓣在合并各种手术不利因素下的晚期口咽癌手术中的应用价值。方法选择行根治性手术的晚期口咽癌患者15例，均合并各种手术不利因素（如高龄、糖尿病、心血管疾病、放疗损伤等），采用胸大肌肌皮瓣同期修复组织缺损，观察组织缺损修复效果。结果15例均顺利完成手术并安全度过围手术期。手术时间4～6 h，平均5 h。皮瓣制备时间40～55 min，平均45 min。皮瓣完全成活率93%，1例(7%)远端局部皮肤坏死，1例(7%)口咽颌下瘘，2例(13%)切口局部感染，对症治疗后均愈合。结论对于合并各种手术不利因素的晚期口咽癌患者，胸大肌肌皮瓣较游离皮瓣有更高的安全性，可作为组织缺损修复的一种挽救性手段。

【关键词】肌皮瓣；胸大肌；口咽肿瘤；修复外科手术

The application of pectoralis major myocutaneous flap in reconstruction of surgical defect for oropharyngeal cancer

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【Abstract】Objective To explore the clinical value of using pectoralis major myocutaneous flap in surgery with various adverse factors for advanced oropharyngeal cancer. Methods 15 patients who presented with advanced oropharyngeal cancer were performed for radical surgery, and pectoralis major myocutaneous flaps were applied for immediate reconstruction of surgical defect. In all cases, various adverse factors (advanced age, diabetes, cardiovascular disease, radiation damage, etc.) were existed. The effect of reconstruction was observed. Results All surgeries were successful, and all patients tided over perioperative period. The average time of operation was 5 hours with a range of 4 to 6 hours. The average time cost for flap preparation was 40 minutes with a range of 40 to 55 minutes. The completely survival rate of flaps was 93%. Partial skin necrosis occurred in 1 case (7%); and submandibular fistula occurred in another one (7%). Two patients (13%) developed wound infection. All of them were healed by symptomatic treatment. Conclusion For the patients with advanced oropharyngeal cancer and various adverse factors of surgery, pectoralis major myocutaneous flap can be used as salvage measure in reconstruction of surgical defect, which is more secure than free flap.

【Key words】Musculocutaneous flap; Pectoralis muscles; Oropharyngeal neoplasms; Repair surgery


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多西他赛联合卡铂二、三线治疗晚期三阴乳腺癌临床观察

刘庆华 张明英 刘春娟 于文军 张传涛

【摘要】 目的 观察多西他赛联合卡铂 21 d 方案（TC 方案）二、三线治疗转移性三阴乳腺癌（ATNBC）患者的疗效和不良反应。方法 37 例蒽环类耐药的晚期 ATNBC 患者，多西他赛 70 mg/m²，第 1 天静脉滴注；卡铂曲线下面积（AUC）=5，第 1 天静脉滴注，21 d 为 1 个疗程，直到疾病进展或无法耐受或最多接受 6 个周期化疗。结果 37 例患者共完成 147 个周期化疗，中位化疗周期为 4 个周期。均可评价疗效和不良反应。其中完全缓解（CR）0 例，部分缓解（PR）12 例（32.43%），稳定（SD）11 例（29.73%），进展（PD）14 例（41.18%）。有效率（RR=CR+PR）为 32.43%，疾病控制率（CR+PR+SD）为 62.15%，中位疾病进展时间（TTP）3.9 个月（95% CI：4.8 ~ 8 个月），中位总生存时间（OS）10.0 个月，至随访结束，仍有 3 例患者未进展生存。治疗后主要不良反应为血液学毒性（白细胞减少 51.53%）和消化道反应（56.76%）。结论 TC 方案治疗晚期 ATNBC 患者安全有效，不良反应可以耐受。

【关键词】 乳腺肿瘤；多西他赛；卡铂

Clinical observation of docetaxel combined with carboplatin as second – or third – line treatment for patients with advanced triple – negative breast cancer Liu Qinghua, Zhang Mingying, Liu Chunjuan, Yu Wenjun, Zhang Chuantao. Department of Radiology, Weifang Yidu Central Hospital Affiliated to Weifang Medical University, Weifang, Shandong 262500, China

【Abstract】 Objective To observe the clinical efficacy and adverse reactions of docetaxel and carboplatin 21 day regimen (TC) as second – or third – line in treatment of patients with advanced triple – negative breast cancer (ATNBC). Methods 37 ATNBC patients with anthracyclines resistance were given docetaxel 70mg/m², the first day of intravenous drip, carboplatin AUC = 5, through intravenous drip on the first day, 21 days for a course of treatment, until disease progression or not tolerated or most received six cycles of chemotherapy. Results 147 cycles of chemotherapy were completed in 37 patients, and the median chemotherapy cycle was 4 cycles. The efficacy and adverse reactions could be evaluated in all patients. Among them, complete remission (CR) in 0 patient, partial remission (PR) in 12 patients (32.43%), stable (SD) in 11 patients (29.73%), and progression (PD) in 14 patients (41.18%). The effective rate (CR + PR) was 32.43%. The disease control rate (CR + PR + SD) was 62.15%, median TTP was 3.9 months (95% CI: 4 ~ 8 months), and median OS was 10 months. Until the end of follow – up, there were 3 patients with no progress. The main adverse reactions were hematological toxicity (51.53%) and gastrointestinal reaction (56.76%). Conclusion TC regimen is effective and safe in the treatment of patients with ATNBC.

【Key words】 Breast cancer; Docetaxel; Carboplatin
The clinical value of Thinprep cytology test combined with h-TERC and c-myc in the diagnosis of cervical cancer  Mao Haibo. Department of Pathology, the Traditional Chinese Medicine Hospital of Fenghua, Fenghua, Zhejiang 315500, China

【Abstract】Objective To explore the clinical value of Thinprep cytology test (TCT) combined with h-TERC and c-myc in the diagnosis of cervical cancer. Methods hTERC amplification was detected by dual-color interphase fluorescence in situ hybridization (FISH), and the results were compared with TCT and histological examination. Examination the positive which TCT, h-TERC and c-myc by pathological examination. The final diagnosis was determined by the pathological examination. Results TCT was abnormal in 26.4% of 500 case,18.0% abnormal h-TERC gene,16.0% abnormal c-myc gene. In 270 cases according to the cervical biopsy, the positive rate of chronic inflammation, cervical intraepithelial neoplasia (CIN) I, CIN II, CIN III and cervical cancer; 44.4%, 38.2%, 36.4%, 18.2%, and 7.3% respectively. The positive rates of h-TERC were 18.1%, 45.4%, 52.5%, 65.9%, and 100.0%, respectively. The positive rates of c-myc were 21.4%, 48.9%, 56.7%, 59.9%, and 100.0%, respectively. With increased pathological grade, the expressions of h-TERC and c-myc were high. Conclusion TCT combined with h-TERC and c-myc can test cervical cancer more effective.

【Key words】Cytological examination; Gene, h-TERC; Gene, myc; Uterine neoplasm

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射频消融术联合肝动脉介入术
治疗原发性肝癌的临床观察

娄玥

【摘要】目的 观察射频消融术(RFA)联合肝动脉介入疗法对原发性肝癌(PLC)的有效性和安全性。方法 选择PLC患者64例,按数字表法随机将64例患者分为两组,观察组和对照组各32例,观察组给予肝动脉插管栓塞化疗(TACE)联合RFA治疗,而对照组给予TACE治疗。治疗1年后,随访肿瘤缓解情况以及患者1,2,3年累积生存率和两组患者AST,ALT和γ-GT的变化并进行比较。结果 治疗1年后,观察组缓解率为71.9%(23/32),对照组为43.8%(14/32),两组缓解率差异有统计学意义(χ²=5.189,P<0.05);观察组1,2,3年累积生存率分别为65.6%(21/32),65.6%(21/32),62.5%(20/32),对照组分别为37.5%(12/32),28.1%(9/32),21.9%(7/32),两组差异均有统计学意义(χ²=5.067,9.035,10.83,均P<0.05);治疗2个月后,观察组AST,ALT和γ-GT水平明显优于对照组(t=4.218,2.449,8.647,均P<0.05)。结论 RFA联合TACE治疗能明显改善PLC患者的临床症状,改善患者的肝功能,有助于延长患者生存时间。

【关键词】射频消融术;肝动脉插管栓塞化疗;肝肿瘤

Clinical effect of radiofrequency ablation combined with transcatheter arterial chemoembolization for patients with hepatocellular carcinoma Lou Yue. Department of General Surgery, Shaoxing Second Hospital, Shaoxing, Zhejiang 312000, China

【Abstract】Objective To discuss the safety and feasibility of radiofrequency ablation (RFA) combined with transcatheter arterial chemoembolization(TACE) for patients with primary liver cancer(PLC). Methods 64 cases with PLC were selected and randomly divided into two groups,32 cases in each group. The observation group accepted TACE combined with RFA therapy, while the control group only received TACE treatment. Term efficacy (after 1 year) and 1,2,3 – year survival rate were compared in the two groups. The changes of liver function parameters including aspartate aminotransferase (AST), alanine aminotransferase (ALT) and γ- aminoacyl transferase (γ – GT) of the two groups were analyzed and compared. Results After 1 year of treatment, the remission rate was 71.9% (23/32) in the observation group, which in the control group was 43.8% (14/32), the difference was statistically significant (χ² = 5.189,P<0.05). The 1,2,3 – year cumulative survival rates were 65.6% (21/32),65.6% (21/32) and 62.5% (20/32) in the observation group, which in the control group were 37.5% (12/32),28.1% (9/32) and 21.9% (7/32), the differences were statistically significant (χ² = 5.067,9.035,10.83, all P<0.05). After 2 months of treatment, AST, ALT and γ – GT levels in the observation group were significantly higher than those in the control group(t = 4.218,2.449,8.647, all P<0.05). Conclusion TACE combined with RFA therapy can significantly improve the clinical symptoms of patients with PLC, which can improve liver function in patients and help prolong the survival time.

【Key words】 Radiofrequency ablation;TACE;Hepatocellular neoplasm

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经内镜逆行性胰胆管造影与经皮肝穿刺胆道引流金属支架置入治疗恶性阻塞性黄疸的疗效比较

王昱良 郑永青 杜睿 杨少宾 韦亚娜

【摘要】目的比较经内镜逆行性胰胆管造影(ERCP)与经皮肝穿刺胆道引流(PTCD)胆道金属支架置入治疗恶性阻塞性黄疸的临床效果。方法选取经ERCP胆道金属支架成功置入治疗恶性阻塞性黄疸患者42例，设为ERCP组；经PTCD胆道金属支架成功置入治疗恶性阻塞性黄疸患者38例，设为PTCD组。比较两组患者丙氨酸氨基转移酶、天冬氨酸氨基转移酶、直接胆红素、总胆红素含量的变化和并发症发生情况。结果ERCP组术后3d丙氨酸氨基转移酶、天冬氨酸氨基转移酶、直接胆红素、总胆红素含量分别为(203.94±12.53)U/L、(180.94±17.53)U/L、(185.63±17.53)μmol/L、(240.41±18.79)μmol/L，PTCD组患者术后3d丙氨酸氨基转移酶、天冬氨酸氨基转移酶、直接胆红素、总胆红素含量分别为(230.63±13.95)U/L、(209.19±19.74)U/L、(192.52±16.93)μmol/L、(266.83±20.73)μmol/L，与术前比较明显降低(均P<0.05)；ERCP组并发症发生率为4.76%，低于PTCD组的23.68%(χ²=6.02，P<0.05)。结论经ERCP与经PTCD胆道金属支架置入治疗恶性阻塞性黄疸均能有效解除梗阻，PTCD的并发症发生率稍高。

【关键词】肠镜检查；经内镜逆行胆胰管造影；经皮经肝胆管穿刺引流术；金属支架；黄疸；阻塞性；恶性

Comparison of the efficacy of endoscopic retrograde pancreatic angiography and percutaneous liver puncture biliary drainage metal stent implantation in the treatment of malignant obstructive jaundice Wang Yuliang, Zheng Yongqing, Du Rui, Yang Shaobin, Wei Yana. Department of Digestive Diseases, Yellow River Sanmenxia Hospital, Sanmenxia, Henan 472000, China

【Abstract】Objective To compare the clinical effect of ERCP and PTCD metal stent implantation in the treatment of malignant obstructive jaundice. Methods 42 patients who were treated successfully with ERCP biliary metal stent implantation in the treatment of malignant obstructive jaundice were selected as the ERCP group, 38 patients who were successfully treated with PTCD biliary metal stent implantation in the treatment of malignant obstructive jaundice, were selected as the PTCD group. The changes of alanine aminotransferase, aspartate aminotransferase, direct bilirubin, total bilirubin content and complications of patients were compared between two groups. Results On the third day of the ERCP group after operation, alanine aminotransferase, aspartate aminotransferase, direct bilirubin, total bilirubin levels were (203.94±12.53) U/L、(180.94±17.53) U/L、(185.63±17.53) μmol/L、(240.41±18.79) μmol/L, respectively, those of the PTCD group were (230.63±13.95) U/L、(209.19±19.74) U/L、(192.52±16.93) μmol/L、(266.83±20.73) μmol/L, respectively, which were significantly lower than before operation (all P<0.05). The incidence rate of complications of ERCP group was 4.76%, which was significantly lower than 23.68% of the PTCD group (χ²=6.02, P<0.05). Conclusion ERCP and PTCD biliary metal stent placement in the treatment of malignant obstructive jaundice can effectively relieve the obstruction. The incidence of complications of PTCD is slightly higher in both common complications.

【Key words】Enteroscheocele; Endoscopic retrograde pancreatic angiography; Percutaneous liver puncture biliary drainage; Metal stent implantation; Jaundice, obstructive, malignant

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磁共振弥散加权成像和动态增强成像在子宫内膜癌分期中的价值

赵修法  徐巧燕

【摘要】 目的 研究磁共振弥散加权成像(DWI)和动态增强(DCE)成像在子宫内膜癌分期中的价值。方法 选取子宫内膜癌患者200例，术前均给予磁共振DWI和磁共振DCE检查，比较两种检查方法对子宫内膜癌总体分期、肌层浸润的诊断价值。结果 磁共振DWI评估肌层浸润整体准确率为91.5%(183/200)，显著高于磁共振DCE的77.5%(155/200)，差异有统计学意义($\chi^2=11.231, P<0.05$)；磁共振DWI浅肌层和深肌层浸润准确率、灵敏度以及阳性预测值均显著高于磁共振DCE，两者差异均有统计学意义($\chi^2=9.283, 8.231, 9.021, 8.927, 8.142, 9.405, \text{均 } P<0.05$)；与病理结果比较，磁共振DWI的Kappa值为0.807，磁共振DCE的Kappa值为0.587。结论 磁共振DWI与磁共振DCE比较，对子宫内膜癌肌层浸润的准确率和灵敏度均较高。

【关键词】 磁共振弥散加权成像；动态增强；磁共振成像；子宫肿瘤

Clinical value of magnetic resonance diffusion weighted imaging and dynamic enhanced imaging in endometrial carcinoma staging Zhao Xiufa, Xu Qiaoyan. Department of MRI Room, the People’s Hospital of Xuecheng District, Zaozhuang, Shandong 277000, China

【Abstract】 Objective To study the value of magnetic resonance diffusion weighted imaging (DWI) and dynamic enhanced imaging (DCE) in endometrial carcinoma staging. Methods 200 cases with endometrial carcinoma were selected, DWI and DCE were given before operation. The diagnostic value of two kinds of examination methods for the diagnosis of endometrial carcinoma in general and basic level was compared. Results The overall accuracy of muscle invasion of magnetic resonance DWI was 91.5% (183/200), which was significantly higher than 77.5% (155/200) of magnetic resonance DCE, the difference was statistically significant ($\chi^2=11.231, P<0.05$). The accuracy, sensitivity and positive predictive value of the magnetic resonance DWI superficial and deep muscular layer were significantly higher than those of the magnetic resonance DCE ($\chi^2=9.283, 8.231, 9.021, 8.927, 8.142, 9.405, \text{all } P<0.05$). Compared with pathological results, Kappa value of magnetic resonance DWI was 0.807, Kappa value of magnetic resonance DCE was 0.587. Conclusion Magnetic resonance DWI compared with magnetic resonance DCE, the accuracy and sensitivity of the infiltration of endometrial carcinoma was higher.

【Key words】 Magnetic resonance diffusion weighted imaging; Dynamic enhancement; Magnetic resonance imaging; Uterine tumor

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择期手术治疗梗阻性结肠癌实效性及安全性研究

单剑锋

【摘要】目的探讨择期手术治疗梗阻性结肠癌患者的临床效果，为临床选择手术时机提供参考。

方法选择70例梗阻性结肠癌患者，根据患者手术时机分为对照组和观察组，各35例。对照组在患者诊断后便实施手术，观察组诊断后首先实施保守治疗，再择期对患者实施手术治疗（要考虑到保守的成功率问题，如胃肠减压等保守治疗不成功的病例需从观察组剔除，急诊手术）。对比两组患者治疗效果以及手术安全性。

结果观察组患者Ⅰ期吻合术比率91.43%（32/35），明显高于对照组的54.29%（χ² = 9.456, P = 0.001）；观察组回肠吻合术、造口术发生率为2.86%、5.71%，低于对照组（χ² = 12.328, P = 0.000；χ² = 7.983, P = 0.003）。观察组共5例患者发生6例次并发症，发生率14.29%；对照组20例患者发生25例次并发症，发生率57.14%，两组差异有统计学意义（χ² = 8.885, P = 0.002）。

结论择期手术治疗应用于梗阻性结肠癌患者可以取得更好地一次性根除效果，且安全性高，临床可考虑优先选择该方案。

【关键词】结肠肿瘤；外科手术

Clinical effect and safety evaluation of elective surgery applying in obstructive colon cancer Shan Jianfeng. Department of General Surgery Anorectal Ward, the People’s Hospital of Xinchang County, Zhejiang 312500, China

【Abstract】Objective To investigate the clinical effect and safety of elective surgery applying in obstructive colon cancer, to provide a reference for clinical surgery. Methods 70 patients with obstructive colon cancer were selected, they were divided into control group and observe group, 35 cases in each group. Surgery was used right after patients were diagnosed in the control group, conservative treatment was used in the observation group before surgery. The clinical effect and safety were compared between the two groups. Results The rate of colon cancer excision I period anastomosis in the observation group was 91.43% (32/35), which was higher than the control group (54.29%), the difference was statistically significant (χ² = 9.456, P = 0.001). The incidence rates of ileocolic anastomosis and colostomy of the observation group were 2.86%, 5.71%, which were lower than those of the control group, the differences were statistically significant (χ² = 12.328, P = 0.000; χ² = 7.983, P = 0.003). 5 patients of the observation group had 6 complications, the incidence rate of complication was 14.29%, 20 patients of the control group had 25 complications, the incidence rate of complication was 57.14%, the difference was statistically significant (χ² = 8.885, P = 0.002). Conclusion Elective surgical disposable eradication rate is higher applying in obstructive colon cancer patients with good safety, which could be a priority in clinical application.

【Key words】Colon cancer; Surgical operation
桂枝茯苓胶囊联合米非司酮治疗子宫肌瘤的效果及对生活质量的影响

戴莺莺

【摘要】目的 探讨桂枝茯苓胶囊联合米非司酮治疗子宫肌瘤临床治疗效果，并观察和分析其对患者生活质量的影响。方法 选取子宫肌瘤患者138例，采用随机数字表法随机分为对照组和观察组各69例。对照组应用米非司酮治疗；观察组应用桂枝茯苓胶囊联合米非司酮治疗。观察两组治疗效果、肿瘤体积变化，检测治疗前后卵泡生成激素（FSH）、雌二醇（E₂）和促黄体生成激素（LH）水平，评估生活质量及不良反应。结果 观察组总有效率92.75%（64/69），高于对照组的82.61%（57/69），差异有统计学意义（χ²=10.16，P<0.05）。观察组治疗后葡萄糖体积（13.35±1.17）cm³，小于对照组治疗后的（15.64±1.33）cm³，差异有统计学意义（t=9.04，P<0.05）。观察组治疗后FSH和LH分别为（30.55±6.14）U/L和（32.02±7.12）U/L，均低于对照组治疗后的（38.27±6.75）U/L和（36.91±5.38）U/L，差异均有统计学意义（t=9.07，P<0.05）。观察组治疗后E₂为（53.41±5.13）pmol/L，高于对照组治疗后的（47.82±5.19）pmol/L，差异有统计学意义（t=8.76，P<0.05）。观察组治疗后月经期和月经量分别为（4.62±0.81）d和（52.36±6.21）mL，均少于对照组治疗后的（6.71±0.86）d和（60.75±6.86）mL，差异均有统计学意义（t=6.19，P<0.05）。观察组治疗后总体生活质量、躯体功能、情绪功能和社会功能均高于对照组治疗后，差异均有统计学意义（t=10.26，9.69，10.13，10.27，P<0.05）。结论 桂枝茯苓胶囊联合米非司酮治疗子宫肌瘤具有较好的临床疗效，能够显著改善患者性激素水平和月经状况，提高其生活质量，具有较高的安全性。

【关键词】桂枝茯苓胶囊；米非司酮；子宫肌瘤；临床效果；生活质量
论著

残余胆囊结石合并胆总管结石诊治分析

郑黎明  蒋松松  陈刚  张凯

【摘要】目的 探讨残余胆囊结石合并胆总管结石的诊断、漏诊原因及治疗。方法 对34例残余胆囊结石患者中16例行残余胆囊切除术+胆总管切开取石+T管引流术，2例行胆总管切开+T管引流术，术前漏诊残余胆囊结石率56.3%（9/16）。结果16例行残余胆囊切除术，其中14例行残余胆囊切除术+胆总管探查（切开取石）+T管引流术，2例行胆总管切开+T管引流术，术后无漏诊。结论残余胆囊结石合并胆总管结石的临床症状与残余胆囊结石相似，常表现为右上腹痛、发热、寒战、黄疸、腹胀等症状，术前影像学检查较难发现小于3 cm的残余胆囊及其小结石，当同时合并胆总管结石时，更需要术中仔细探查胆囊管及胆总管，减少漏诊残余胆囊结石。

关键词 胆结石；胆总管结石；诊断；治疗

Diagnosis and analysis of residual gallbladder stone with choledocholithiasis  Zheng Liming, Jiang Songsong, Chen Gang, Zhang Kai. Department of General Surgery, Gulou Hospital of Nanjing University, Nanjing, Jiangsu 210008, China

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【Abstract】 Objective To investigate the diagnosis/misdiagnosis reason/treatment of residual gallbladder stone with choledocholithiasis. Methods The clinical data of 34 patients with residual gallbladder, 16 cases of them suffered from choledocholithiasis additionally were retrospective analyzed. Results 14 cases were treated by residual cholecystectomy + choledochotomy + T - tube drainage, 2 cases were treated by choledochotomy + T - tube drainage. Preoperative misdiagnosis of residual gallstones rate was 56.3% (9/16), 7 cases were found residual gallstones during operation. The other 2 cases were misdiagnosed residual gallstones. The rate of intraoperative and postoperative misdiagnosis was 12.5% (2/16). 18 cases with residual gallstones, 16 cases underwent residual cholecystectomy, 2 cases who were suspected with choledocholithiasis underwent residual cholecystectomy + choledochotomy, T - tube drainage. 18 cases had no preoperative and postoperative misdiagnosis. Conclusion The clinical symptom of residual gallbladder stone with choledocholithiasis was similar to residual gallstones, often characterized by upper abdominal pain, fever, chills, jaundice, abdominal distension and other symptoms. It is difficult for preoperative imageological diagnosis that less than 3 cm residual gallbladder and small stones. When choledocholithiasis at the same time, needing more intraoperative careful dissect cystic duct and common bile duct, completes the cystic duct and common bile duct exploration, reducing misdiagnose residual gallstones.

【Key words】 Gall stone; Choledocholithiasis; Diagnosis; Treatment

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高效抗逆转录病毒疗法不同干预时间对艾滋病母婴传播阻断效果的影响

陈蓉  苏虹  刘寿荣

【摘要】目的 探讨高效抗逆转录病毒疗法（HAART）在预防艾滋病母婴传播（PMTCT）中不同干预时间对阻断效果的影响。方法 选择门诊检查并住院分娩的HIV阳性妊娠妇女49例，以干预时间孕14周、孕28周、临产为界分三组，A组20例，B组19例，C组10例，对安全分娩的新生儿50例进行18个月的跟踪检测，并分析结果。结果 三组抗病毒前艾滋病感染孕产妇的基础免疫状况有可比性（P＞0.05）。抗病毒后CD4+细胞数量变化差异无统计学意义（P＞0.05）；阻断效果比较：A组婴儿0感染，B组1例婴儿感染，C组2例婴儿感染，A组和B组差异无统计学意义（χ²=0.97，P＞0.05），B组和C组差异无统计学意义（χ²=1.40，P＞0.05），A组和C组差异有统计学意义（χ²=4.08，P＜0.05）。结论 HAART对于阻断HIV母婴传播效果非常显著，如果在孕14周开始HAART，婴儿HIV感染率更低，建议及早抗病毒治疗，新生儿分娩后需加强随访和管理。

【关键词】高效抗逆转录病毒疗法；预防艾滋病母婴传播；干预时间

Study of different intervention time of HAART in PMTCT of the blocking effect

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【Abstract】Objective To investigate the HAART in PMTCT different intervention time of blocking effect.

Methods 49 cases who received out-patient examination and hospital delivery of HIV positive pregnant women were selected, the intervention time pregnant 14 weeks, pregnant 28 weeks. The patients were divided into three groups, group A (n = 20), group B (n = 19), group C (n = 10). The safe delivery, the newborn 50 out of 18 months of tracking and detection, and the results were analyzed. Results Three groups of antiviral HIV infected maternal immune status (P > 0.05), antiviral CD4+ cell number variation had no statistical significance (P > 0.05), the blocking effect was A group of infants 0 infection. In group B, 1 cases of infant infection. Group C 2 cases of infant infection. Compared between group A and group B, the difference was not statistically significant (χ² = 0.97, P > 0.05), compared between group B and group C, the difference was not statistically significant (χ² = 1.40, P > 0.05). Compared between group A and group C, the difference had statistical significance (χ² = 4.08, P < 0.05).

Conclusion HAART for blocking HIV mother to child transmission effect is very significant, if in 14 weeks pregnant initiation of HAART, the infant HIV infection rate is lower, recommended the early antiviral treatment and after childbirth to strengthen follow – up and management.

【Key words】Highly active anti retroviral therapy; Prevention of mother – to – child transmission; Intervention time

冠心病患者颈动脉内膜中层厚度、微量白蛋白尿与冠脉狭窄程度的相关性分析

王健  滕涛

【摘要】目的 观察冠心病患者尿微量白蛋白、颈动脉内膜中层厚度(CIMT)及冠脉Gensini评分水平，探讨冠脉狭窄程度与尿微量白蛋白、颈动脉内膜中层厚度的相关性。方法 选取冠心病住院患者50例及健康对照组50例，比较两组间尿微量白蛋白、CIMT及冠脉Gensini评分。结果 冠心病组尿微量白蛋白、CIMT分别为(38.36±19.51) mg/L、(1.18±0.25) mm，健康对照组尿微量白蛋白、CIMT分别为(27.52±15.44) mg/L、(0.76±0.17) mm，两组差异均有统计学意义(t=3.080，P=0.002；t=9.823，P=0.000)。冠心病组冠脉Gensini评分与尿微量白蛋白、CIMT呈正相关(r=0.288，P=0.430；r=0.308，P=0.290)。结论 冠心病患者尿微量白蛋白、CIMT与冠脉狭窄程度呈正相关，通过测定尿微量白蛋白及颈动脉内膜中层厚度，可预测冠状动脉狭窄程度。

【关键词】颈动脉内膜中层厚度；尿微量白蛋白；冠状动脉疾病

The analysis of the correlation between coronary heart disease patients with carotid intima – media thickness, microalbuminuria and the degree of coronary artery stenosis Wang Jian, Teng Tao. Department of Emergency, the Second Affiliated Hospital of Shandong University of Traditional Chinese Medicine, Jinan, Shandong 250001, China

【Abstract】Objective To observe the microdose albumin in urine, carotid intima – media thickness (CIMT) of coronary heart disease (CHD) patients' and coronary Gensini score level, to investigate the correlation between the extent of coronary stenosis and microalbuminuria, CIMT. Methods 50 cases of hospitalized patients with CHD and healthy control group of 50 cases were selected, to compare the score between the two groups of microalbuminuria, CIMT and coronary Gensini. Results CHD group; microalbuminuria and CIMT were (38.36 ± 19.51) mg/L, (1.18 ± 0.25) mm respectively. Healthy control group; microalbuminuria and CIMT were (27.52 ± 15.44) mg/L, (0.76 ± 0.17) mm respectively. Differences between the two groups were statistically significant (t = 3.080, P = 0.002; t = 9.823, P = 0.000). CHD group; coronary Gensini score was positively correlated with microalbuminuria, CIMT (r = 0.288, P = 0.430; r = 0.308, P = 0.290). Conclusion The correlation between CHD patients’ microalbuminuria, CIMT and the degree of coronary artery stenosis is positive. By measuring the microalbuminuria and CIMT, we can predict the extent of coronary artery stenosis.

【Key words】Carotid intima media thickness; Urinary albumin; Coronary artery disease
Different contrast injection rate on the analysis of 64 – slice spiral CT scan liver arterial phase enhancement

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[Abstract] Objective To discuss the different contrast injection rate on the 64 – slice spiral CT scan liver arterial phase reinforced effect. Methods 60 patients who received abdominal CT scan were selected from January 2014 to April 2015. According to the different conditions, they were divided into control group (30 cases) and liver cirrhosis group (30 cases). Then each group based on packet injection rate into 2.5 mL/s (control group 1, cirrhosis group 1) and 3.5 mL/s (control group 2, cirrhosis group 2). Select Smartprep technology contrast agent tracking all patients, when the abdominal aorta CT value ≥ 150 HU start scanning. The departure time, CT value of each group were recorded, abdominal aortic artery, simultaneous analysis of each component of image quality comparison. Results When the contrast agent injection rate of 3.5 mL/s, excellent rate of the control group (95.5 %) compared with the contrast injection rate of 2.5 mL/s (91.7 %) had no significant difference (χ² = 0.021, P = 0.638); Cirrhosis good rate (94.7 %) compared with the contrast agent injection rate of 2.5 mL/s (72.7 %) had obvious advantages, the difference was statistically significant (χ² = 5.233, P = 0.032). When the contrast agent injection rate of 2.5 mL/s, the control group, the mean abdominal aortic peak enhancement [(187.25 ± 21.00) HU] had no significant difference ( t = 0.826, P = 0.436). The average trigger time of the control group (21.68 ± 1.93) s was significantly less than the cirrhosis group (25.13 ± 2.13) s, the difference was statistically significant ( t = 2.652, P = 0.037). When the contrast agent injection rate of 3.5 mL/s, the control group, the mean abdominal aortic peak enhancement [(223.81 ± 35.00) HU] was significantly greater than the cirrhosis group [(24.57 ± 0.92) HU], the difference was statistically significant ( t = 3.362, P = 0.033). Conclusion The greater the contrast injection rate, arterial peak at the same time it increases the peak time come to shorten. When the contrast agent injection rate consistent with the control group, the average trigger time is short, high average peak enhancement. Cirrhosis needs higher contrast injection rate.

[Key words] Contrast agent; Cirrhosis; Trigger time; Peak
The effect of helicobacter pylori eradication by doxycycline, levofloxacin, bismuth potassium citrate combined with omeprazole  Deng Liang, Li Shufang, Lin Weizhang, Lao Wujian. Department of Medicine, Lunjiao Hospital of Shunde District, Foshan, Guangdong 528308, China

【Abstract】 Objective To observe the effect and safety of helicobacter pylori eradication by doxycycline, levofloxacin, bismuth potassium citrate combined with omeprazole. Methods  240 patients who infected helicobacter pylori were selected, and were randomly divided into four groups: treatment group( doxycycline, levofloxacin, bismuth potassium citrate, omeprazole ), control group A (doxycycline, levofloxacin, omeprazole ), control group B (amoxicillin, clarithromycin, bismuth potassium citrate, omeprazole ), control group C (amoxicillin, clarithromycin, omeprazole ), 60 patients in each group. Helicobacter pylori eradication treatment for 7 days, patients with gastritis stop after the course of the treatment, peptic ulcer patients continue taking omeprazole 5 weeks after 7 days treatment. All patients stopped medicine 2 weeks accepted 14 carbon breath test. And adverse events were investigated. Results In the treatment group and the control group A, B, C, the helicobacter pylori eradication rates were 93.3 %, 80.0 %, 91.7 %, 75.0 %. Compared with group A, the treatment group helicobacter pylori eradication rate increased significantly( $\chi^2 = 4.61, P < 0.05$ ). Compared with group C, the treatment group helicobacter pylori eradication rate increased significantly( $\chi^2 = 7.57, P < 0.05$ ). But compared with group B, the treatment group helicobacter pylori eradication rate had no significant difference( $\chi^2 = 0.12, P > 0.05$ ). Compared with the treatment group, group B had high incidence of oral odor( $\chi^2 = 6.56, P < 0.05$ ). Compared with the treatment group, group C had high incidence of oral odor( $\chi^2 = 5.46, P < 0.05$ ). Conclusion Doxycycline, levofloxacin, bismuth potassium citrate combined with omeprazole can improve the helicobacter pylori eradication rate significantly, and with low price, has little side effect, no need of penicillin skin test, can used for the patients poverty or allergic to penicillin.

【Key words】 Helicobacter, pylori; Doxycycline; Levofloxacin; Bismuth potassium citrate; Omeprazole
系统化社交技能技巧训练对慢性精神分裂症患者住院康复疗效的影响

樊献丽 武克文 王艳 高红锐 白丽娟

【摘要】 目的 探讨系统化社交技能技巧训练对慢性精神分裂症患者住院康复疗效的影响。方法 将符合诊断标准的76例长期住院慢性精神分裂症患者按数字表法随机分为干预组和对照组，两组患者均接受精神科常规治疗、护理及一般工娱治疗，干预组在此基础上实施12周的系统化社交技能技巧训练。采用住院精神病人康复疗效评定量表（IPROS）、住院慢性精神分裂症社会功能评定量表（SSSI）在患者干预前、干预12周末分别进行评定并比较。结果 实施12周的系统化社交技能技巧训练后，干预组社会功能缺陷级别SSSI评分明显高于对照组，差异有统计学意义（$\chi^2=8.952, P<0.05$）。干预组IPROS量表评分中工疗情况、生活能力、社交能力、讲究卫生能力、关心和兴趣、IPROS总分分别为（10.3±5.5）分、（12.1±5.7）分、（6.2±3.5）分、（3.3±3.3）分、（9.6±4.5）分、（44.6±20.4）分，对照组分别为（19.4±4.5）分、（16.5±4.7）分、（13.6±4.1）分、（5.5±3.1）分、（18.2±4.2）分、（73.2±16.3）分，两组差异均有统计学意义（$t=7.160, 4.188, 6.165, 2.568, 6.632, 8.259, P<0.05$）。干预组与干预前相比，IPROS各因子及总分的评分比较差异均有统计学意义（$t=8.165, 6.188, 8.165, 2.568, 6.632, 8.259, 19.4, 21.9, 852, P<0.01$）。结论 系统化的社交技能技巧训练能够显著提高慢性精神分裂症患者的住院康复疗效，提高其社交技能和生活质量。

【关键词】 社交技能技巧训练；精神分裂症；康复

Effects of systematic social skills training on rehabilitation in hospitalized chronic schizophrenia patients

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【Abstract】 Objective To explore the impact of the systematic social skills training on recovery of in-patients with chronic schizophrenia. Methods A total of 78 cases of long-term hospitalized patients with chronic schizophrenia were randomly divided into intervention group and control group on the basis of random number table. The two groups received psychiatric routine therapy and nursing, and general entertainment therapy, and the patients in the intervention group received group social skills training for 12 weeks. IPROS and SSSI were respectively used to evaluate two groups before the intervention, trained for 12 weeks. Results After 12 weeks of systematic social skills training, social function defect levels SSSI score in the intervention group was apparently higher than that in the control group, and the difference was significant ($\chi^2=8.952, P<0.05$). Compared with the control group (19.4±4.5) points, (16.5±4.7) points, (13.6±4.1) points, (5.5±3.1) points, (18.2±4.2) points, (73.2±16.3) points, in the intervention group public medical situation (10.3±5.5) points, life ability (12.1±5.7) points, social ability (6.2±3.5) points, antiseptic ability (3.3±3.3) points, concern and interest (9.6±4.5) points as well as the total score of IPROS (44.6±20.4), the differences were significant ($t=7.160, 6.188, 8.165, 2.568, 6.632, 8.259, P<0.05$). Compared with before intervention, each factor in IPROS and the total score in the intervention group had statistically significant differences ($t=8.165, 6.188, 8.165, 2.568, 6.632, 8.259, 19.4, 21.9, 852, P<0.01$). Conclusion The systematic social skills training can greatly promote the recovery of in – patients with chronic schizophrenia, improve their social skills and life qualities. Compared with control group, the social function of patients in the intervention group has recovered positively.

【Key words】 Social skills training; Schizophrenia; Recovery
江苏省南京市 2012-2014 年川崎病流行病学调查

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【摘要】 目的 了解南京市川崎病（KD）患儿的发病情况、分布、流行病学特征。方法 采用回顾性方法对 2012-2014 年在南京市儿童医院就诊的 KD 患儿的临床资料进行流行病学分析。结果 2012-2014 年该院共报告 KD 患儿 1446 例，其中完全 KD 占 78.5%，不完全 KD 占 21.5%；男女之比为 1.724：1。发病季节以春夏为发病高峰；发病年龄最小 1 个月，最大 14 岁，其中 1 岁以下者占 30.49%，5 岁以下者占 89.56%，≥5 岁占 10.44%；发热 1438 例，占 99.45%，结膜充血 1347 例，占 93.15%，杨梅舌 1060 例，占 73.32%，四肢末端改变 748 例，占 51.76%，皮疹 1086 例，占 75.08%，淋巴结肿大 664 例，占 45.89%。发生冠状动脉并发症病例共 131 例，占 9.05%，男女之比为 3.02：1；复发病例 14 例，复发率 0.97%。结论 KD 在南京及周边地区是儿童较常见疾病，应提高临床医生对该病的认识，做到早期诊断和治疗，对减少该病的后遗症及降低死亡率至关重要。

【关键词】 川崎病；流行病学研究

Epidemiological study of children with Kawasaki disease in Nanjing of Jiangsu Province from 2012 to 2014
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【Abstract】 Objective To evaluate the incidence and epidemiologic characteristics of Kawasaki disease (KD) in Nanjing. Methods We reviewed the medical records and reports of all patients admitted to Nanjing Children′s Hospital with KD diagnosed during 3-year periods from 2012 to 2014. Results We studied 1 446 inpatients diagnosed with KD from 2012 to 2014. There were 1 135 cases (78.5%) with complete KD. The ratio of male to female was 1.724:1. The disease occurred in all of the seasons, but the peak was from spring to summer. Age at onset ranged from 1 month to 14 years old, and the peak age group was 1 year old. Fever (99.45%) was the most common clinical symptom, followed by conjunctive congestion (93.15%), rash (73.32%), oral changes (51.76%), extremities desquamate (75.08%) and lymphadenopathy (45.89%). There were 131 (9.05%) patients with coronary aneurysm, the ratio of male to female was 3.02:1. 14 patients (0.97%) developed recurrent KD. Conclusion Patients with KD has become more and more in Nanjing, and clinical doctors should improve the understanding of KD. Early diagnosis and treatment is very important to reduce the sequelae and reduce the mortality of KD.

【Key words】 Kawasaki disease; Epidemiological studies
老年男性 2 型糖尿病合并骨质疏松相关因素分析

张清  陈雨

【摘要】目的 探讨老年男性 2 型糖尿病(T2DM)患者并发骨质疏松的相关因素，为老年糖尿病合并骨质疏松患者的防治提供指导。方法采用双能 X 线骨密度仪测定 67 例老年男性糖尿病患者骨密度(BMD)，将其分为骨质疏松组(OP)32 例、非骨质疏松组(NOP)35 例，比较两组患者的年龄、体质量指数(BMI)、糖尿病病程、空腹血糖(FPG)、糖化血红蛋白(Hba1c)、空腹胰岛素(FINS)、胰岛素敏感指数(ISI)、尿白蛋白定量(ALb)、24 h 尿蛋白定量和碱性磷酸酶(ALP)、甘油三酯(TG)、低密度脂蛋白胆固醇(LDL-C)等指标之间的差异，并进行相关性分析。结果与 NOP 组比较，OP 组患者年龄大，病程长，BMI 低，骨密度低，ALP 高，FINS 水平低，ISI 低，Hba1c 高，24 h 尿蛋白定量和 ALb 高，LDL-C 高，差异均有统计学意义 (均 P < 0.05)；老年男性 T2DM 患者的骨密度与年龄、病程、Hba1c、24 h 尿蛋白定量、ALb、ALP、LDL-C 呈负相关，与 BMI、FINS、ISI 呈正相关。结论老年男性糖尿病患者发生骨质疏松与多因素有关，高龄、糖尿病病程长、体质量低、血糖控制不佳、胰岛功能差、胰岛素抵抗、血 ALP 偏高、LDL-C 高、糖尿病肾病等均是老年男性 T2DM 合并骨质疏松的相关因素。

【关键词】糖尿病，2 型；骨密度；骨质疏松；男(雄)性；老年人；因素分析

Relative factors analysis of type 2 diabetes mellitus complicated with osteoporosis in elderly men

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【Abstract】Objective To investigate and analyze the relative factors in elderly men with type 2 diabetes mellitus(T2DM) complicated with osteoporosis(OP), thus to provide guidance for prevention of OP complicated with T2DM in elderly men. Methods Dual X – ray absorptiometry determination of bone mineral density (BMD) of 67 cases of elderly men with diabetes, men were divided into OP group ( n = 32) , NOP group ( n = 35). Then, we compared differences in body mass index(BMI) , diabetes duration, fasting plasma glucose (FPG) , glycosylated hemoglobin(Hba1c) , patients ‘age, fasting insulin(FINS) , insulin sensitivity index (ISI) , quantitative of urinary albumin(ALb) , quantitative of urinary protein in 24 hours and alkaliphosphatase level(ALP) , low density lipoprotein cholesterol(LDL-C) , triglyceride(TG) , and made correlation analysis. Results Compared with those in NOP group, patients in OP group had older age, longer disease course, smaller baric index, lower BMI, higher ALP, lower FINS, lower ISI, higher Hba1c, higher quantitative of urinary protein in 24 hours and urinary albumin, higher LDL – C, which were significantly different ( P < 0.05) ; BMD of elderly men with T2DM was negatively correlated to patients' age, disease course, Hba1c, quantitative of urinary protein in 24 hours, ALb, ALP and LDL – C, but positively correlated to BMI, FINS and ISI. Conclusion Many factors, such as elderly, low body weight, long duration of the disease, high level of blood sugar, insulin dysfunction, low insulin sensitivity, high level of blood suger, insulin dysfunction, low insulin sensitivity, high serum alkalinephosphatase, high LDL – C and diabetic nephropathy, contribute to osteoporosis in elderly men with T2DM.

【Key words】Diabetes mellitus, type 2; Bone mineral density; Osteoporosis; Men ( male) sex; Aged; Factor analysis

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轮状病毒肠炎患儿血常规变化及临床意义
吴起武

【摘要】目的探讨轮状病毒(RV)肠炎儿童血常规的变化及临床意义。方法对314例RV肠炎患儿(观察组)在治疗前和治疗5~7d后采血,用全自动血细胞分析仪测定血常规参数[白细胞计数(WBC)、血小板计数(PLT)、血小板体积(MPV)、血小板分布宽度(PDW)]，同时测定CRP，并与对照组(40例)比较。
结果治疗前观察组WBC(10.77±4.20)×10⁹/L、PLT(330.02±117.70)×10⁹/L、MPV(8.46±2.15)fL，均高于对照组[WBC(7.69±2.06)×10⁹/L、PLT(298.45±57.19)×10⁹/L、MPV(7.52±0.85)fL，t=4.569,1.670,2.746，P=0.000,0.000,0.047]，差异均有统计学意义。治疗后观察组WBC(7.76±2.83)×10⁹/L、CRP(5.18±5.82)mg/L，均较治疗前[WBC(10.77±4.20)×10⁹/L、CRP(7.70±11.28)mg/L]降低，差异均有统计学意义(t=9.794,2.810，均P=0.000)。
结论儿童RV肠炎WBC、PLT、CRP增高，不能单纯以WBC和CRP增高作为腹泻患儿应用抗生素的指征。

【关键词】轮状病毒肠炎;儿童;血常规
Clinical studies about patients with laryngeal mask airway of laparoscopy total hysterectomy Li Jizhou, Jia Wenbo, Bian Burong, Xue Lijun, Liu Qingyu, Luo Rui, Guo Yufeng. Department of Anesthesiology, the First Hospital of Yulin, Yulin, Shanxi 719000, China

Abstract Objective To observe the sedation and analgesia in surface anesthesia in conscious glossopharyngeal LMA for the clinical effect of laparoscopic hysterectomy. Methods 90 patients undergoing elective laparoscopic total hysterectomy were randomly divided into three groups, 30 cases in each group. The observation group (A group); sedation, analgesia, full surface anesthesia, control group 1 (B group) control group 2 (C group) were treated with endotracheal intubation under general anesthesia. At intubation and pull tube stage, the patients’ reaction, hemodynamic changes, pneumoperitoneum 1 h blood gas and perioperative complications were observed. Results The mean arterial pressure (MAP) and heart rate (HR) of A group were (92.7 ± 10.6) mmHg and (82.8 ± 12.1) /min. Those of B group were (98.4 ± 11.6) mmHg, (89.1 ± 11.4) /min, C group were (111.2 ± 12.5) mmHg, (104.1 ± 13.2) /min, those in A and B group were better than C group (A group and C group, t = 6.18, 6.52, P < 0.01; B group and C group, t = 4.11, 4.71, all P < 0.01). The pulse oxygen saturation (SpO2) and peak airway pressure (Paw) of A group were (99.6 ± 0.4) and (17.3 ± 2.1) mmHg, those in group B were (99.5 ± 0.5) % and (17.6 ± 2.0) mmHg, group C were (99.5 ± 0.5) % and (22.5 ± 2.8) mmHg. The differences between A group and B group were statistically significant (compared with C group, t = 14.3, 8.14, all P < 0.01; B group and C group, t = 12.7, 7.78, all P < 0.01). The incidence rates of perioperative complications and adverse reactions of A, B, C groups were 27%, 33%, 67%, that in C group was significantly higher than A group and B group (χ² = 9.64, 6.67, all P < 0.01).

Conclusion The laryngeal mask airway was used for laparoscopic total hysterectomy under the condition of sedation and analgesia, and it can shorten the time of the whole body, prevent the difficulty of intubation, emergency airway and anesthesia related complications.

Key words Laparoscopy; Hysterectomy; Anesthesia and analgesia
小切口手术与传统手术治疗小儿腹股沟疝的临床效果比较

潘海华  童锋

【摘要】目的 分析比较小切口手术与传统手术治疗小儿腹股沟疝的临床疗效, 为临床小儿腹股沟疝治疗提供理论依据。方法 选取 68 例腹股沟疝患儿作为研究对象, 随机数字表法分为对照组和观察组, 每组 34 例, 对照组采取传统手术治疗, 观察组采取小切口手术治疗, 比较两组患儿的临床效果及并发症发生情况。结果 观察组的手术时间、术中出血量、住院时间、切口长度分别为 (10.45 ± 1.35) min, (5.21 ± 0.78) mL, (1.98 ± 0.76) d, (1.04 ± 0.23) cm, 优于对照组的 (15.67 ± 3.24) min, (8.56 ± 1.87) mL, (3.78 ± 1.12) d, (2.54 ± 0.65) cm, 差异均有统计学意义 (t = 5.7600, 5.7477, 4.1717, 7.9868, 均 P < 0.05); 观察组并发症发生率为 2.94%, 显著低于对照组的 11.76%, 差异有统计学意义 (χ² = 5.7118, P < 0.05)。结论 采用小切口手术治疗小儿腹股沟疝的临床疗效显著, 该方法具有手术创伤小、疼痛轻、术后恢复快、并发症少等优点, 值得临床推广应用。

【关键词】 疝, 腹股沟; 儿童; 外科手术

Clinical study of small incision operation and traditional operation in treatment of infantile hernia

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【Abstract】 Objective To analyze the clinical effect of small incision operation and traditional operation in treatment of pediatric hernia, and to provide a theoretical basis for the clinical treatment of pediatric hernia. Methods 68 children with pediatric hernia were treated as the research subjects, they were randomly divided into control group and observation group, 34 children in each group. The control group adopted the traditional operation treatment, while the observation group was taken small incision. The clinical efficacy and complications of both two groups were compared. Results The operation time, bleeding volume, hospitalization time and incision length of the observation group were (10.45 ± 1.35) min, (5.21 ± 0.78) mL, (1.98 ± 0.76) d, and (1.04 ± 0.23) cm, which were better than those of the control group [(15.67 ± 3.24) min, (8.56 ± 1.87) mL, (3.78 ± 1.12) d, and (2.54 ± 0.65) cm, respectively], the differences were significant (t = 5.760 0.5, 7.47 7.17 7.7, 986 8, all P < 0.05). The incidence rate of complications of the observation group was 2.94%, which was significantly lower than that of the control group (11.76%), the difference was significant (χ² = 5.7118, P < 0.05). Conclusion The clinical curative effect of using small incision in the treatment of pediatric hernia is significant, this method has the advantages of small operation wound, less pain, faster postoperative recovery, less complications and other advantages, it is worthy of clinical application.

【Key words】 Hernia, inguinal; Children; Surgical operation
尿中性粒细胞明胶相关性载脂蛋白和肾损伤分子 1 水平监测在预测对比剂肾病中的意义

李朋 李睿 胡威 徐建辉 徐业成 易日霞 王丹丹 杨海珍

【摘 要】目的 探讨冠脉介入前后尿中性粒细胞明胶相关性载脂蛋白（NGAL）和肾损伤分子 1（KIM-1）水平监测在早期预测对比剂肾病中的意义。方法 收集 249 例行冠脉介人治疗的冠心病患者的临床资料，根据术后是否发生对比剂肾病分为对比剂肾病组（n = 21）和非对比剂肾病组（n = 228），于术前及术后 4h、12h、24h、48h、72h 检测血清肌酐，于术前和术后 4h、12h、24h、48h，采用 ELISA 对患者尿中 NGAL 和 KIM-1 水平进行检测，分析 NGAL、KIM-1 预测对比剂肾病的灵敏度、特异度。结果 与术前比较，对比剂肾病组术后 48h 血清肌酐水平【(101.7 ± 20.3) μmol/L】升高，差异有统计学意义（t = 15.972，P < 0.05）。与术前比较，对比剂肾病组术后 4h、12h、24h、48h 尿 NGAL 水平分别为【(12.3 ± 1.6) μg/L，(14.5 ± 1.5) μg/L，(14.1 ± 1.2) μg/L，(14.3 ± 1.4) μg/L】，均升高（t = 18.672, 11.817, 15.942 和 17.641, 均 P < 0.05）；术后 24h、48h 尿 KIM-1 水平分别为【(5.1 ± 0.9) μg/L，(5.5 ± 1.3) μg/L】，均升高（t = 9.672 和 14.381, 均 P < 0.05）。对比剂肾病组术后 4h、12h、24h 尿 NGAL 水平均高于非对比剂肾病组，术后 24h、48h 尿 KIM-1 水平均高于非对比剂肾病组，差异均有统计学意义（t = 17.838, 19.370, 13.996, 18.172, 2.792, 3.307, 均 P < 0.05）。Pearson 相关分析显示，对比剂肾病组术后 4h 尿 NGAL 水平和 24h 尿 KIM-1 水平均与术后 48h 血清肌酐水平呈正相关（r = 0.698, 0.576, 均 P < 0.05）。ROC 曲线分析显示，尿 NGAL 水平预测对比剂肾病曲线下面积 0.963（95% CI: 0.931-0.995），灵敏度 85.7%，特异度 94.3%；尿 KIM-1 水平预测对比剂肾病曲线下面积 0.839（95% CI: 0.768-0.909），灵敏度 81.0%，特异度 72.8%。结论 行介入治疗后发生对比剂肾病患者于术后 4h 出现尿 NGAL 水平升高，术后 24h 尿 KIM-1 水平升高，均早于血肌酐，有望成为早期判定急性肾损伤及预测介入术后对比剂肾病的指标。

【关键词】 冠状动脉介入术；经皮；对比剂肾病；中性粒细胞明胶相关性载脂蛋白；肾损伤分子 1

The significances of monitoring urine NGAL and KIM-1 levels before and after coronary intervention in early predication of contrast-induced nephropathy  Li Peng, Li Rui, Hu Wei, Xu Jianhui, Xu Yecheng, Yi Rixia, Wang Dandan, Yang Haizhen. Department of Cardiology, the Central Hospital of Xiaogan, Xiaogan, Hubei 432000, China

【Abstract】Objective To investigate the significances of monitoring urine neutrophil gelatinase-associated apolipoprotein (NGAL) and kidney injury molecule 1 (KIM-1) levels before and after coronary intervention in early predication of contrast-induced nephropathy. Methods The clinical data of 249 patients with coronary heart disease undergoing percutaneous coronary intervention were collected. All patients were divided into contrast-induced nephropathy group (n = 21) and non-contrast-induced nephropathy group (n = 228) according to whether had contrast-induced nephropathy. Before surgery and 4h, 12h, 24h, 48h after surgery, the levels of serum creatinine were tested. Before surgery and 4h, 12h, 24h, 48h after surgery, the levels of urinary NGAL and KIM-1 were detected using enzyme-linked immunosorbent assay (ELISA). Results Compared with before surgery, the serum creatinine level of contrast-induced nephropathy patients after surgery 48h 【(101.7 ± 20.3) μmol/L】 was elevated, the difference was statistically significant (t = 15.972, P < 0.05). Compared with before surgery, the urinary NGAL levels of contrast-induced nephropathy patients after surgery 4h ~ 48h were【(12.3 ± 1.6) μg/L，(14.5 ± 1.5) μg/L，(14.3 ± 1.4) μg/L，】which were significantly elevated (t = 8.672, 11.817, 15.942 and 17.641, all P < 0.05), and the urinary KIM-1 levels after surgery 24h and 48h were【(5.1 ± 0.9) μg/L，(5.5 ± 1.3) μg/L】，which were elevated, the differences were statistically significant (t = 9.672, 14.381, all P < 0.05). The urinary NGAL levels of contrast-induced nephropathy patients after surgery 4h ~ 48h were higher than non-contrast-induced nephropathy patients, and the urinary KIM-1 levels after surgery 24h and 48h were higher than non-contrast-induced nephropathy patients, the differences were statistically significant (t = 17.838, 19.370, 13.996, 18.172, 2.792, 3.307, all P < 0.05). Pearson correlation analysis showed that the urinary NGAL levels after 4h and
urinary KIM-1 levels after 24h were positively correlated with serum creatinine levels after surgery 48h ($r = 0.698$, 0.576, all $P < 0.05$). ROC curve analysis showed that urinary NGAL levels in predicting contrast-induced nephropathy, the area under the curve was 0.963 (95% CI: 0.931–0.995), sensitivity was 85.7%, and specificity was 94.3% for urinary KIM-1 levels, those were 0.839 (95% CI: 0.768–0.909), 81.0% and 72.8%. **Conclusion** The urinary NGAL levels of contrast-induced nephropathy patients after interventional treatment 4h were increased, and the urinary KIM-1 levels appeared increased after surgery 24h, which were earlier than serum creatinine. They were expected to be early indicators for determining acute kidney injury and predicting contrast-induced nephropathy after intervention treatment.

**Key words**  Coronary intervention, percutaneous; Contrast-induced nephropathy; Neutrophil gelatinase-associated apolipoprotein; Kidney injury molecule-1

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氟哌噻吨美利曲辛治疗伴有腹痛的功能性胃肠病疗效观察

沈金花 杜丽君

【摘要】目的研究并分析氟哌噻吨美利曲辛片（黛力新）应用于腹痛症状明显的功能性胃肠病（FGIDs）的治疗效果。方法82例伴有腹痛的FGIDs患者，按照随机原则分成A组（n=40）和B组（n=42），A组实施常规治疗模式，B组在A组的基础上加用黛力新进行治疗，对两组治疗总有效率以及不良反应发生情况进行对比分析。结果B组治疗总有效率（90.24%）明显高于A组（65.85%），差异有统计学意义（χ²=4.538，P<0.05）；两组在治疗过程中无严重不良反应出现，两组不良反应发生率进行对比，差异无统计学意义（P>0.05）。结论黛力新应用于腹痛症状明显的FGIDs治疗能够取得令人满意的治疗效果，该药能够明显缓解腹痛症状，且安全性高，不会引起严重不良反应。

【关键词】功能性胃肠病；氟哌噻吨美利曲辛；腹痛；临床疗效

The clinical efficacy of fluoride faction shouted tons melitracen sheet for functional gastrointestinal disorders with abdominal pain symptoms

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【Abstract】Objective To study and analyze the effect of fluoride faction shouted tons melitracen sheet (Deanxit) on abdominal pain symptoms of functional gastrointestinal disorders (FGIDs). Methods 82 patients with abdominal pain FGIDs were randomly divided into A group (n = 40) and B group (n = 42). A group was given conventional treatment, group B was given deanxit treatment on the basis of A group. The treatment efficacy and the total incidence of adverse reactions were analyzed. Results The total effective rate of group B (90.24%) was significantly higher than that in group A (65.85%), the difference was statistically significant (χ² = 4.538, P < 0.05). There were no serious adverse reactions observed during treatment in the two groups, the incidence rate of adverse reactions between the two groups had no statistically significant difference (P > 0.05). Conclusion Deanxit in the treatment of FGIDs can achieve satisfactory therapeutic effect, the drug can significantly alleviate the symptoms, and it is safe and without serious side effects.

【Key words】Functional gastrointestinal disorders; Fluoride faction shouted tons melitracen; Abdominal pain; Clinical efficacy
慢性乙型肝炎患者196例临床检验结果与中医辨证分型关系的探讨

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【摘要】目的 为慢性乙型肝炎患者的中医辨证分型与临床检验结果建立起对应关系，从而为中医治疗提供客观的诊疗依据。方法196例慢性乙型肝炎患者，按中医辨证分型的结果分为五组(肝肾阴虚型35例，湿热中阻型24例，脾肾阳虚型26例，瘀血阻络型42例，肝郁脾虚型69例)，均检测乙型肝炎病毒的脱氧核糖核酸(HBV-DNA)，乙型肝炎五项包括乙型肝炎表面抗原(HBsAg)、乙型肝炎表面抗体(HBsAb)、乙型肝炎E抗原(HBeAg)、乙型肝炎E抗体(HBeAb)和乙型肝炎核心抗体(HBcAb)，总胆红素(TBIL)，血清丙氨酸氨基转移酶(ALT)，麝香草酚浊度实验(TTT)。结果在HBV-DNA检测方面，五组患者多数呈阳性，整体进行比较，组间差异无统计学意义(P=0.937)。但在乙型肝炎五项、TBIL、ALT和TTT检测方面，均体现出检测结果与中医辨证分型的对应关系。如在TTT检测方面，肝肾阴虚型和肝郁脾虚型患者中，多数患者TTT检测结果介于7～10之间，两组依次与其他三组比较，差异均有统计学意义(P值均为0.000)；湿热中阻型和瘀血阻络型患者中，TTT检测结果普遍<6，两组依次与其他三组比较，差异均有统计学意义(P值均为0.000)；脾肾阳虚型患者中，TTT检测结果普遍>10，与其他四组比较，差异均有统计学意义(P值均为0.000)。结论慢性乙型肝炎患者的中医辨证分型与临床检验结果具有一定的相关性。

【关键词】肝炎；乙型；慢性；临床实验室技术；医学，中国传统

The relationship between syndrome differentiation of TCM and clinical test results of 196 cases with chronic hepatitis B

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【Abstract】Objective To establish the corresponding relationship between syndrome differentiation of TCM and clinical test results in chronic hepatitis B patients, and thus to provide objective evidence for TCM treatment. Methods 196 patients with chronic hepatitis B, according to the Chinese medicine dialectical typing results were divided into five groups(liver kidney yin deficiency syndrome type 35 cases, Shire Zhongzhu type 24 cases, Yang deficiency of spleen and kidney syndrome type 26 cases, damp heat resistance type and blood stasis syndrome type 42 cases, liver stagnation and spleen deficiency syndrome type 69 cases). HBV-DNA, hepatitis B, TBIL, ALT, TTT were detected. Results In the HBV-DNA test, the majority of the five groups were positive, the overall comparison, the difference was not statistically significant (P = 0.937). But in the second liver five, TBIL, ALT and TTT detection, the detection results were reflected in the corresponding relationship between TCM syndrome differentiation. Such as in TTT detection, liver kidney yin deficiency syndrome type and liver stagnation and spleen deficiency syndrome type group of patients, most patients with TTT detection results between 7 and 10, two groups sequentially compared with the other three groups, the differences were statistically significant (all P = 0.000); damp heat resistance type and blood stasis type in the patients group, TTT detection results were generally less than 6, two groups in turn compared with the other three groups, the differences were statistically significant (all P = 0.000); Yang deficiency of spleen and kidney in the patients group, TTT detection results were generally more than 10, and compared with the other four groups, the differences were statistically significant (all P = 0.000). Conclusion TCM syndrome differentiation of chronic hepatitis B patients has a certain correlation with the clinical test results.

【Key words】Hepatitis, type B, chronic; Clinical laboratory techniques; Medicine, Chinese traditional
论著

豫东南人群不同性别、年龄、体质量指数CYP2C19基因多态性分析

尚鹏超

【摘要】目的研究豫东南人群细胞色素P450同工酶CYP2C19基因型及等位基因突变频率，了解性别、年龄、BMI对CYP2C19遗传多态性的影响。方法应用基因芯片方法对161例（男性87例，女性74例；年龄26~82岁，体质量指数17~31）豫东南健康人群进行CYP2C19基因多态性分析。结果该实验共检测CYP2C19的6个不同基因突变型，CYP2C19*1/*1（40.4%），CYP2C19*1/*2（39.1%），CYP2C19*2/*2（14.9%），CYP2C19*1/*2（3.1%），CYP2C19*2/*2（2.5%），CYP2C19*3/*3（0%）；等位基因CYP2C19*2（35.7%），CYP2C19*3（2.8%）。87例男性组野生型纯合子CYP2C19*1/*1（39.1%），等位基因CYP2C19*2（39.1%），CYP2C19*2（3.1%），74例女性组野生型纯合子CYP2C19*1/*1（41.9%），等位基因CYP2C19*2（32.3%），CYP2C19*3（2.5%）。103例≥58岁组野生型纯合子CYP2C19*1/*1（47.6%），等位基因CYP2C19*2（39.8%），CYP2C19*3（3.7%），58例<58岁组野生型纯合子CYP2C19*1/*1（27.6%），等位基因CYP2C19*2（31.7%），CYP2C19*3（19.9%）。BMI>25组野生型纯合子CYP2C19*1/*1（37.7%），等位基因CYP2C19*2（32.9%），CYP2C19*3（1.2%），BMI<25组野生型纯合子CYP2C19*1/*1（42.4%），等位基因CYP2C19*2（38.5%），CYP2C19*3（4.3%）。结论豫东南受试人群中CYP2C19*2和*3的基因型在不同性别、年龄、BMI之间的发生频率无明显差异。

【关键词】CYP2C19基因型；等位基因；基因频数；野生纯合子；慢代谢型

Analysis of CYP2C19 gene polymorphism among different sex, age, and BMI in the southeast of Henan province
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【Abstract】Objective To study the frequency of CYP2C19 genotype and allele mutation of cytochrome P450 in the southeast part of Henan province, and to understand the effect of sex, age, body mass index (BMI) on the genetic polymorphism of CYP2C19. Methods Genetic polymorphism analysis of CYP2C19 gene in 161 healthy people in Henan province, using gene chip method, 87 male, 74 female, aged 26 ~ 82 years old, and BMI 17 ~ 31. Results The experiment, a total of CYP2C19 six different gene mutation type, CYP2C19 1 of (40.4%), CYP2C19 *1/*2 (39.1%), CYP2C19 *2/*2 (14.9%), CYP2C19 *1/*3 (3.1%), CYP2C19 *2/*3 (2.5%), CYP2C19 *3/*3 (0%), allele homologous CYP2C19 *2 (35.7%), follow (2.8%). 87 male wild type homozygous for CYP2C19 1 of (39.1%), allele homologous CYP2C19 *2 (39.1%), follow (3.1%), 74 female wild type homozygous for CYP2C19 1 of (41.9%), and other allele homologous CYP2C19 *2 (32.3%), follow (2.5%). 103 cases were more than or equal to 58 years old wild type homozygous for CYP2C19 1 of (47.6%), allele homologous CYP2C19 *2 (39.8%), follow (3.7%), 58 <58 years old wild type homozygous for CYP2C19 1 of (27.6%), and other allele homologous CYP2C19 *2 (31.7%), follow (1.9%). BMI >25 groups of wild – type homozygous for CYP2C19 1 of (37.7%), allele homologous CYP2C19 *2 (32.9%), follow (1.2%), BMI <25 groups of wild – type homozygous for CYP2C19 1 of (42.4%), and other allele homologous CYP2C19 *2 (38.5%), follow (4.3%). Conclusion There was no significant difference in the genotype of CYP2C19 *2 between the BMI and *3 in the southeast part of Henan province.

【Key words】CYP2C19 genotype; Allele homologous; Gene frequency; Nobu Juriko; Slow inactivator

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美托洛尔联合通心络对冠心病心功能不全患者血清超敏 C 反应蛋白及血浆 N 末端 B 型钠尿肽原水平的影响

林微  杨海燕

【摘要】目的 探讨美托洛尔联合通心络胶囊对冠心病患者血清超敏 C 反应蛋白 (hs-CRP) 及血浆 N 末端 B 型钠尿肽原 (NT-proBNP) 水平的影响。方法 将 84 例冠心病患者按照数字表法随机分为观察组及对照组各 42 例。对照组给予美托洛尔治疗, 观察组在对照组基础上给予通心络胶囊治疗, 4 周为 1 疗程, 持续治疗 3 个疗程。分别于治疗前后对两组患者行超声心动图检查, 采用免疫反射法测定两组血清 hs-CRP 水平, 采用酶联免疫法测定两组血浆 NT-proBNP 水平。结果 观察组总有效率、不良反应率分别为 95.24%、4.76%, 对照组分别为 76.19%、23.81%, 两组差异均有统计学意义 (χ² = 3.46, 4.22, P < 0.05)。与治疗前相比, 两组患者治疗后室间隔厚度 (IVST)、左心室射血分数 (LVEF)、左室舒张末内径 (LVDD)、左心室收缩模内径 (LVSD) 显著改善 (P < 0.05), 而观察组治疗后 IVST、LVEF、LVDD、LVSD 改善效果优于对照组, 差异均有统计学意义 (t = 3.996, 4.123, 3.852, 4.256, P < 0.05)。观察组治疗后血清 hs-CRP 及血浆 NT-proBNP 水平显著低于对照组, 差异均有统计学意义 (t = 5.225, 7.856, P < 0.05)。结论 美托洛尔联合通心络胶囊能有效改善患者心功能, 降低血清 hs-CRP 及血浆 BNP 水平, 提高患者临床疗效。

【关键词】美托洛尔; 通心络; 冠状动脉疾病; C 反应蛋白; B 型钠尿肽

The impact of metoprolol and tongxinluo on the levels of serum hs – CRP and NT – proBNP in patients with coronary heart disease  Lin Wei, Yang Haiyan. Department of Outpatient Pharmacy, Zhoushan Hospital of Zhejiang Province, Zhoushan, Zhejiang 316000, China

【Abstract】Objective To investigate the impact of metoprolol and tongxinluo on the levels of hypersensitivity C – reactive protein (hs – CRP) and NT – proBNP in patients with coronary heart disease. Methods 84 patients with coronary heart disease were randomly divided into the observation group (n = 42) and the control group (n = 42). The control group was given metoprolol treatment, and the observation group was given metoprolol and tongxinluo treatment for 3 months. The echocardiography before and after treatment was inspected. The levels of serum hs – CRP were measured with immune reflection method and the levels of BNP were measured with ELISA. Results The total effective rate, adverse reaction rate of the control group were 95.24% , 4.76%, and those of the observation group were 76.19% , 23.81%, the differences were statistically significant (P < 0.05). The ventricular septal thickness (IVST), left ventricular ejection fraction (LVEF), left ventricular end diastolic diameter (LVDD), left ventricular systolic touch the inside diameter (LVSD) of the observation group were improved than the control group (P < 0.05), while the IVST, LVEF, LVDD, LVSD of the observation group after treatment were better than the control group (t = 3.996, 4.123, 3.852, 4.256, all P < 0.05). The levels of serum hs – CRP and NT – proBNP of the observation group were lower than the control group (t = 5.225, 7.856, all P < 0.05). Conclusion Metoprolol combined with Tongxinluo capsule can improve cardiac function, reduce serum hs – CRP and plasma BNP levels, improve clinical outcomes of patients.

【Key words】Metoprolol; Tongxinluo; Coronary heart disease; C – reactive protein; B – type natriuretic peptide
甲氨蝶呤、米非司酮联合清宫术治疗剖宫产后子宫瘢痕部位妊娠

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【摘要】目的探讨甲氨蝶呤+米非司酮超声引导下清宫术治疗内生型剖宫产后子宫瘢痕部位妊娠(CSP)的应用价值。方法 分析43例采用甲氨蝶呤+米非司酮治疗后超声引导下清宫术治疗内生型剖宫产后子宫瘢痕部位妊娠患者的临床资料。结果39例成功，4例改开腹病灶切除术，7例清宫术后出血宫腔内放置Foley双腔导尿管压迫止血成功。结论甲氨蝶呤+米非司酮治疗后超声引导下清宫术治疗内生型剖宫产后子宫瘢痕部位妊娠是一种创伤小、安全、有效、治疗费用低的方法，尤其适用于基层医院应用。

【关键词】妊娠，异位；瘢痕；剖宫产术；清宫术；甲氨蝶呤；米非司酮

Clinical study on 45 cases with endogenous caesarean scar pregnancy  Li Xiaoqiao, Zhang Yuanfang, Department of Obstetrics and Gynecology, the First People’s Hospital of Huaihua, Huaihua 418000, China

【Abstract】Objective To study the effect of ultrasound guided curettage after methotrexate and mifepristone in the treatment of endogenous caesarean scar pregnancy. Methods A retrospective analysis was performed on 43 patients of endogenous caesarean scar pregnancy undergoing treatment of ultrasound guided curettage after methotrexate and mifepristone. Results 39 cases were successful, 4 cases were transformed to laparotomy because of intraoperative blood loss, 7 cases of bleeding after curettage were successful by uterine cavity placed double lumina Foley catheter. Conclusion Ultrasound guided curettage after methotrexate and mifepristone is a safe, effective, little trauma and low cost method in the treatment of endogenous caesarean scar pregnancy, it especially adapts to primary hospital.

【Key words】Pregnancy, ectopic; Cicatrix; Cesarean section; Curettage; Methotrexate; Mifepristone

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阿奇霉素序贯疗法对支原体肺炎患儿炎性因子及体液免疫功能的影响

叶军

【摘要】目的：探讨阿奇霉素序贯疗法对支原体肺炎患儿炎性因子及体液免疫功能的影响。

方法：选取342例支原体肺炎患儿为研究对象，根据随机数字表法分为对照组168例，观察组174例，前者接受红霉素序贯治疗，后者接受阿奇霉素序贯疗法治疗。

结果：治疗前，白细胞介素4（IL-4）、白细胞介素6（IL-6）、C反应蛋白（CRP）和肿瘤坏死因子-α（TNF-α）水平两组间比较差异均无统计学意义（P>0.05）。在接受不同药物治疗后，观察组IL-4、IL-6、CRP和TNF-α水平下降程度与对照组比较差异均有统计学意义（t=10.913，11.047，9.919，53.207，均P<0.01）。治疗前，患儿免疫球蛋白M（IgM）、免疫球蛋白G（IgG）及免疫球蛋白A（IgA）水平两组间比较差异均无统计学意义（P>0.05）。两组治疗后IgM、IgG及IgA水平与治疗前比较均有降低，而降低程度仅IgM、IgG在两组间比较差异有统计学意义（t=3.178，3.034，均P<0.01）。

结论：阿奇霉素序贯疗法对小儿支原体肺炎的临床治疗效果优于红霉素，能改善患儿炎性因子指标和调节体液免疫功能，促进患儿恢复健康，具有临床推广意义。

【关键词】肺炎；支原体；阿奇霉素；炎性因子；免疫；体液；儿童；投药方法

Effect of azithromycin sequential therapy on inflammatory cytokines and humoral immune function in the treatment of children with mycoplasma pneumonia Ye Jun. Department of Pediatrics, the People’s Hospital of Lin'an, Lin'an, Zhejiang 311300, China

【Abstract】Objective To explore the effect of azithromycin sequential therapy on inflammatory cytokines and humoral immune function in the treatment of children with mycoplasma pneumonia. Methods 342 children with mycoplasma pneumonia were divided into control group（168 cases）treated with erythromycin sequential therapy and observation group（174 cases）treated with azithromycin sequential therapy based on the random number table. The changes of inflammatory cytokines and humoral immune function were recorded and compared. Results The levels of interleukin 4（IL-4）, interleukin 6（IL-6）, C-reactive protein（CRP） and tumor necrosis factor-α（TNF-α） had no significant differences between the two groups before accepting different treatments（P>0.05）. The decreased levels of IL-4, IL-6, CRP and TNF-α of the observation group after treatment were greater than the control group（t=10.913, 11.047, 9.919, 53.207, all P<0.01）. The levels of immunoglobulin M（IgM）, immunoglobulin G（IgG） and immunoglobulin A（IgA） had no significant differences between the two groups before accepting different treatments（P>0.05）. After treatment, the decrease of IgM and IgG between the two groups had significant differences（t=3.178, 3.034, all P<0.01）.

Conclusion Azithromycin sequential therapy for the treatment of children with mycoplasma pneumonia has better clinical efficacy than erythromycin sequential therapy, which can improve inflammatory cytokines index and regulate humoral immune function. It has considerable value in the clinical application.

【Key words】Pneumonia; mycoplasma; Azithromycin; Inflammatory cytokines; Immunity, body fluid; Children; Administer drug

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严重多发伤 226 例诊治分析

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【摘要】目的 探讨严重多发伤在急诊重症监护病房 (EICU) 的诊治策略。方法 回顾性分析 226 例严重多发伤患者的临床资料, 手术治疗 188 例, 非手术治疗 38 例。结果 本组患者中,肺部感染, 肺不张 46 例 (20.3%), 多器官功能障碍综合征 (MODS) 41 例 (18.1%), 急性呼吸窘迫综合征 (ARDS) 35 例 (15.5%), 应激性溃疡伴出血 19 例 (8.4%)。抢救成功 198 例 (87.6%), 死亡 28 例 (12.3%)。早期死亡原因主要是重型颅脑损伤, 后期主要死于多脏器功能衰竭。结论 EICU 在综合治疗严重多发伤中起到非常重要作用, 可明显提高严重多发伤的救治成功率。

【关键词】严重多发伤；急诊重症监护病房

Analysis of diagnosis and treatment of 226 cases with severe multiple injuries in EICU Huang Mingwei, Chen Gang, Kong Laifa, Zhang Deyi, Ni Xiaowei, Wang Jian, Xie Wenlin. Department of Emergency Medicine Center, Jinhua Central Hospital, Jinhua, Zhejiang, 321000, China

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【Abstract】Objective To explore the strategies of diagnosis and treatment of severe multiple injuries in Emergency Intensive Care Unit (EICU). Methods The clinical data of 226 patients with severe multiple injuries were analyzed retrospectively. 188 patients were treated by surgical operation, and 38 patients were not treated by surgical operation. Results Among these patients, 46 patients (accounted for 20.3%) were with pulmonary infection and atelectasis, 41 patients (accounting for 18.1%) were with multiple – organ dysfunction syndrome (MODS), 35 patients (accounted for 15.5%) were with acute respiratory distress syndrome (ARDS), and 19 patients (accounted for 8.4%) were with stress ulceration and bleeding. 198 patients (accounted for 87.6%) were successfully rescued, and 28 patients (accounted for 12.3%) died. The main cause of death in the early stage was the serious craniocerebral injury, and the main cause of death in the later stage was the multiple – organ dysfunction. Conclusion EICU plays a very important role in comprehensive treatment of severe multiple injuries, and can obviously increase the success rate of treatment and cure of severe multiple injuries.

【Key words】Severe multiple injuries; Emergency intensive care unit

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不同给药途径应用替罗非班在急性 ST 段抬高型心肌梗死急诊经皮冠状动脉介入术中的效果比较

庾海清 邓斌 赖绍斌 莫晓华 郑晓丹 黄雪梅

【摘要】目的 研究替罗非班静脉内注射、冠状动脉内注射两种不同给药途径在急性 ST 段抬高型心肌梗死急诊 PCI 中的应用价值。方法 选取行急诊 PCI 的急性 ST 段抬高型心肌梗死患者 108 例为研究对象, 将患者按随机数字表法分为观察组和对照组, 各 54 例, 观察组 PCI 治疗时通过冠脉内注射首剂量替罗非班, 对照组通过静脉内注射, 比较两组治疗后的血管造影结果、心电图、实验室相关指标及不良事件发生情况。结果 观察组治疗前 TIMI 2 级及 3 级比率、初始校正 TIMI 计帧数明显低于对照组, 差异有统计学意义 (χ²/t = 4.32, 4.59, 5.25, P < 0.05)。观察组在治疗后 MBG 2 级或 3 级比率、术后校正 TIMI 计帧数明显高于对照组, 差异有统计学意义 (χ²/t = 4.11, 4.85, 5.87, P < 0.05)。观察组 PCI 治疗术后 1 h ST 完全回落例数、EF 增加值、室壁运动分数指数增加值分别为 53 例、(8.02 ± 6.94)%、(0.41 ± 0.28), 均明显高于对照组的 36 例、(5.87 ± 6.54)%、(0.28 ± 0.27) (χ²/t = 5.32, 4.32, 3.65, P < 0.05)。两组不良事件发生情况无统计学意义 (χ² = 0.52, P > 0.05)。结论 与静脉内注射的给药途径相比, 替罗非班冠状动脉内给药可改善急性 ST 段抬高型心肌梗死患者 PCI 治疗术后心肌灌注水平, 促进左室功能恢复, 且安全性高。

【关键词】心肌梗死; 替罗非班; 投药; 静脉; 投药; 冠状动脉

Comparison of the effect of different ways of using tirofiban in patients with acute ST segment elevation myocardial infarction undergoing percutaneous coronary intervention Yu Haiqing, Deng Bin, Lai Shaobin, Mo Yuemei, Zheng Xiaodan, Huang Xuemei. Department of CCU, the First People’s Hospital of Zhaoqing, Zhaoqing, Guangdong 526200, China

【Abstract】Objective To study tirofiban intravenous injection, coronary artery injection of the two different methods in acute ST segment elevation myocardial infarction, the application of emergency PCI. Methods Patients underwent emergency PCI with acute ST segment elevation myocardial infarction as the research subjects, a total of 108 cases, the patients were randomly divided into the observation group and control group, 54 patients in each group. In the observation group, the first dose of tirofiban was injected into the coronary artery. The control group was treated by intravenous injection. The results of the two groups were compared. Results Before treatment, TIMI level 2 and level 3 ratio, initial corrected TIMI frame count of the observation group were significantly lower than the control group (χ²/t = 4.32, 4.59, 5.25, all P < 0.05). After treatment, MBG level 2 or level 3 ratio, post-operative corrected TIMI frame count of the observation group were significantly higher than the control group (χ²/t = 4.11, 4.85, 5.87, all P < 0.05). 1 h after PCI treatment, the number of cases of ST fully back, the added value of EF, plaque index scores of observation group were 53 cases, (8.02 ± 6.94)%、(0.41 ± 0.28) respectively, which were significantly higher than those of the control group 36 cases, (5.87 ± 6.54)%、(0.28 ± 0.27) (χ²/t = 5.32, 4.32, 3.65, all P < 0.05). Adverse events of the two groups had no significant difference (χ² = 0.52, P > 0.05). Conclusion Compared with intravenous injection, tirofiban in the treatment of acute ST segment elevation myocardial infarction by intracoronary injection can improve the level of myocardial perfusion after PCI operation, promote the recovery of left ventricular function, and has high security.

【Key words】 Myocardial infarction; Tirofiban; Dosing, vein; Dosing, coronary artery

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茶碱缓释片联合噻托溴铵干粉治疗稳定期慢性阻塞性肺疾病的疗效观察

李志杰

【摘要】目的 研究茶碱缓释片联合噻托溴铵干粉治疗稳定期慢性阻塞性肺疾病(COPD)的临床疗效。方法 将140例稳定期COPD患者，按照随机数字表法将患者分为研究组和对照组，每组70例。对照组给予茶碱缓释片治疗，研究组给予茶碱缓释片联合噻托溴铵干粉治疗。应用生活质量量表(QLC)评价患者的生活质量，采用6 min步行距离(6MWD)评价患者运动耐力，并测量治疗前、后患者的1 s用力呼气量( FEV$_1$)、FEV$_1$/用力肺活量(FVC)、基质金属蛋白酶-9(MMP-9)以及白细胞介素-8(IL-8)，比较两组不良反应。结果 两组治疗后FEV$_1$、FEV$_1$/FVC分别为(1.49±0.04)L、(56.02±3.21)%和(1.89±0.21)L、(59.98±2.09)%，均显著优于治疗前(t=7.98,9.03,8.03,8.32,均P<0.05)，且研究组治疗后显著优于对照组(t=7.21,8.23,均P<0.05)；两组治疗后6MWD和QLC分别为(301.19±18.08)m、(67.19±2.31)分和(342.89±8.07)m、(75.21±5.25)分，均显著优于治疗前(t=7.98,8.03,7.28,7.43,均P<0.05)，且研究组治疗后显著优于对照组(t=8.03,8.47,均P<0.05)；两组治疗后MMP-9和IL-8水平分别为(524.58±7.02)ng/mL、(7.23±1.04)ng/mL和(419.26±6.39)ng/mL、(6.09±0.06)ng/mL，均显著优于治疗前(t=7.52,8.13,7.23,7.41,均P<0.05)，且研究组治疗后显著优于对照组(t=8.45,8.91，均P<0.05)；两组不良反应比较无统计学意义(χ$^2=1.33，P>0.05$)。结论 茶碱缓释片联合噻托溴铵干粉治疗稳定期COPD疗效确切，能改善患者的肺功能，提高患者的生活质量。

【关键词】肺疾病，慢性阻塞性；肺功能；茶碱；噻托溴铵

Clinical efficacy of theophylline combined with tiotropium dry powder in the treatment of stably chronic obstructive pulmonary disease Li Zhijie. Department of Respiratory, Xiaogang Hospital of Beilun District, Ningbo, Zhejiang 315803, China

【Abstract】Objective To study the clinical efficacy of theophylline combined with tiotropium dry powder in the treatment of stably chronic obstructive pulmonary disease (COPD). Methods 140 patients with stable COPD were divided into the study group and control group according to the random number table method, 70 patients in each group. The control group was treated with theophylline, while the study group was treated with theophylline combined with tiotropium dry powder. The quality of life was evaluated by quality of life scale (QLC), the exercise tolerance was estimated by 6 min walk distance (6MWD), and the forced expiratory volume in one second (FEV$_1$), FEV$_1$/forced vital capacity (FVC), matrix metalloproteinase enzyme-9 (MMP-9) and interleukin-8 (IL-8) were detected in two groups before and after treatment. The adverse reactions of two groups were compared. Results After treatment, FEV$_1$, FEV$_1$/FVC of the two groups were (1.49±0.04)L, (3.21±56.02)% and (1.89±0.21)L, (59.98±2.09)%, respectively, which were significantly better than before treatment (t=7.98, 9.03, 8.03, 8.32, all P<0.05), and which of the study group after treatment were significantly better than the control group (t=7.21, 8.23, all P<0.05). 6MWD and QLC after treatment of the two groups were (301.19±18.08)m, (67.19±2.31) points and (342.89±8.07)m, (75.21±5.25) points, which were significantly better than before treatment (t=7.98, 8.03, 7.28, 7.43, all P<0.05), and which of the study group after treatment were significantly better than the control group (t=8.03, 8.47, all P<0.05). MMP-9 and IL-8 levels of two groups after treatment were (524.58±7.02)ng/mL, (7.23±1.04)ng/mL and (419.26±6.39)ng/mL, (6.09±0.06)ng/mL, which were significantly better than before treatment (t=7.52, 8.13, 7.23, 7.41, all P<0.05), and which of the study group after treatment were significantly better than the control group (t=8.45, 8.91, all P<0.05). The difference of adverse reactions of two groups was not statistically significant (χ$^2=1.33，P>0.05$). Conclusion Theophylline combined with tiotropium dry powder has an exact efficacy in the treatment of stable COPD, which can improve the lung function and the quality of life of patients.
【摘要】目的探讨老年痴呆患者合并吸入性肺炎(AP)危险因素，并提出干预对策，为临床诊治提供参考。方法选择2013年1月至2014年6月322例老年痴呆患者，统计吸入性肺炎发生率，对患者年龄、性别、洼田饮水试验分级、基础疾病、误吸等潜在因素进行单因素及多因素分析，分析发生吸入性肺炎危险因素，并总结防治对策。结果多因素分析显示侵入性操作(95%CI=1.884~6.362，P=0.001)、洼田饮水试验分级(95%CI=2.184~9.636，P=0.000)、营养不良(95%CI=2.501~11.114，P=0.000)、格拉斯哥昏迷评分(95%CI=1.271~3.569，P=0.011)、基础性疾病(95%CI=1.694~5.319，P=0.011)是老年痴呆患者发生吸入性肺炎的危险因素(P<0.05)。结论老年痴呆患者合并吸入性肺炎危险因素较多，应做好排痰护理、口腔护理等工作，降低肺炎发生概率。【关键词】痴呆；肺炎；吸入性；老年人；危险因素

Analysis of risk factors of Alzheimer’s patients with aspiration pneumonia and intervention Yang Huifang, Song Yongliang, Ye Yaling. Department of Geriatrics, the Second Hospital of Jinhua, Jinhua, Zhejiang 321016, China

【Abstract】Objective To investigate risk factors of Alzheimer’s patients with aspiration pneumonia and intervention, to provide a reference for clinical treatment. Methods From January 2013 to June 2014, 322 patients with Alzheimer’s disease were selected, the incidence of aspiration pneumonia was analyzed, and the age, gender, depression, et al. were analyzed to get risk factors of aspiration pneumonia, and summarized countermeasures. Results Multivariate analysis showed that underlying diseases (95%CI=1.694~5.319，P=0.011), invasive procedures (95%CI=1.884~6.362，P=0.001), depression, et al. were risk factors for Alzheimer patients with aspiration pneumonia (P<0.05). Conclusion Alzheimer’s patients with inhalation pneumonia have multiple risk factors, more expectoration should be done for caring, e. g. oral care, in order to reduce the probability of pneumonia.

【Key words】 Dementia; Pneumonia, aspiration; Aged; Risk factors

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经尿道前列腺等离子双极电切术治疗良性前列腺增生症的临床观察

陈巍杰  李海松  姜域城

【摘要】目的 探讨良性前列腺增生症应用经尿道前列腺等离子双极电切(TUPKP)治疗的临床效果，为临床选择术式提供参考。方法 选择100例良性前列腺增生患者，按照治疗术式分为对照组与观察组，对照组50例采用TURP术式治疗，观察组50例患者采用TUPKP术式治疗。术后随访3个月，对比两组患者留置尿管时间、腺体组织质量等临床指标，对比两组生活质量指数、国际前列腺症状评分、并发症等指标。结果 观察组手术时间(60.54±8.37)min，术中出血量(104.33±21.37)mL，住院时间(7.09±2.35)d，均优于对照组(70.24±12.22)min,(188.76±21.36)mL,(8.63±2.76)d，两组差异均有统计学意义(t=5.441,P=0.012; t=8.326,P=0.001; t=6.216,P=0.006)；术后观察3个月，观察组最大尿流率(19.05±4.11)mL/s，残留尿量(28.74±4.55)mL，IPSS(5.12±1.27)分，QOL(1.43±0.24)分，均优于对照组的(14.24±3.77)mL/s，(20.85±5.11)mL，IPSS(6.95±1.44)分，QOL(2.03±0.32)分，两组差异均有统计学意义(t=8.763,P=0.000; t=7.616,P=0.003; t=5.472,P=0.011; t=8.044,P=0.002)；观察组并发症发生率10.00%，明显低于对照组的22.00%，两组差异有统计学意义(χ2=5.437,P=0.012)。结论 TUPKP治疗良性前列腺增生症临床效果显著，可有效改善患者临床症状及生活质量，安全性高，值得临床推广应用。

【关键词】前列腺增生症；经尿道前列腺等离子双极电切；经尿道前列腺电切

Clinical studies of transurethral bipolar plasma cutting and transurethral resection for benign prostatic hyperplasia

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【Abstract】Objective To investigate clinical value of transurethral bipolar plasma cutting and transurethral resection for benign prostatic hyperplasia, to provide a reference for clinical treatment. Methods 100 cases with benign prostatic hyperplasia were selected, according to surgical treatment, they were divided into control group and observation group. 50 patients in the control group received TURP surgical treatment, 50 patients in the observation group were given TUPKP surgical treatment. The patients were followed up for 3 months, the indwelling catheter time, weight and other clinical indicators of glandular tissue were compared, serum sodium and hemoglobin levels were observed, the quality of life index, international Prostate Symptom Score, complications and other indicators were compared.

Results In the observation group, operative time was (60.54±8.37) min, blood loss was (104.33±21.27) mL, hospital stay was (7.09±2.25) d, which were shorter than those of the control group (70.24±12.22) min, (188.76±21.36) mL, (8.63±2.76) d, the differences were statistically significant (t=5.441,P=0.012; t=8.326,P=0.001; t=6.216,P=0.006). In the observation group after three months, the maximum flow rate was (19.05±4.11) mL/s, the residual urine volume was (28.74±4.55) mL, the IPSS was (5.12±1.27) points, the QOL was (1.43±0.24) scores, all were better than those of the control group (14.24±3.77) mL/s, (20.85±5.11) mL, (6.95±1.44) points, (2.03±0.32) points, the differences were statistically significant (t=8.763,P=0.000; t=7.616,P=0.003; t=5.472,P=0.011; t=8.044,P=0.002). The incidence rate of complication in the observation group was 10.00%, which was significantly lower than 22.00% in the control group, the difference was statistically significant (χ2=5.437,P=0.012).

Conclusion TUPKP treatment for benign prostatic hyperplasia has significant clinical effect, which can effectively improve the clinical symptoms and quality of life with good safety, it is worthy of clinical application.

【Key words】Benign prostatic hyperplasia; TUPKP; TURP

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高风险甲状腺术中显露喉返神经作用分析

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【摘要】  目的  探讨高风险甲状腺手术中显露喉返神经对预防喉返神经受损的临床作用，并分析神经检测临床价值，为临床诊治提供参考。方法  选择高风险甲状腺手术患者132例，根据术中是否显露喉返神经分为观察组80例，对照组52例，比较两组喉返神经受损率、手术时间等临床指标；观察组80例患者根据是否实施神经监测分为监测组36例，未监测组44例，比较两组寻找神经时间、喉返神经损伤率等指标。结果  观察组手术时间（133.66±21.48）min，明显长于对照组，组间差异有统计学意义（t=3.994，P=0.025）；术中出血量与住院费用两组间差异无统计学意义（P>0.05）；观察组与对照组低钙血症、永久性损伤发生率相近，组间差异无统计学意义（P>0.05）；观察组喉返神经损伤率为2.50%，明显低于对照组，组间差异有统计学意义（χ²=5.794，P=0.008）；监测组喉返神经定位时间（4.78±0.94）min，明显短于未监测组，差异有统计学意义（t=7.168，P=0.001）；监测组喉返神经损伤率为2.78%，与未监测组差异无统计学意义（χ²=0.911，P=0.338）。结论  高风险甲状腺手术中显露喉返神经可以有效降低喉返神经受损率，神经监测可以有效加快神经定位时间，但对降低喉返神经损伤率无明显效果。

【关键词】  高风险；甲状腺；喉返神经；损伤

Clinical analysis of the protective effect of RLN revealed for RLN in high – risk thyroid surgery  Sun Ping, Wang Haiming, Yu Mingjun, Shen Haibin. Department of Surgery, the Third People’s Hospital of Hangzhou, Hangzhou, Zhejiang 310009, China

【Abstract】  Objective To investigate the protective effect of RLN revealed for RLN in high – risk thyroid surgery, and the clinical value of detecting nerve, thus to provide a reference for clinical treatment. Methods  132 patients of thyroid high – risk surgery were selected, according to whether to explode laryngeal nerve, they were divided into exposed group (80 cases) and non – exploded group (52 cases). The recurrent laryngeal nerve damage rate, clinical indicators of operation time were compared between the two groups. In the explode group, 80 patients according to whether implementation of the nerve monitoring, were divided into the monitored group (36 cases) and non – monitored group (44 cases). The hours to find the nerve, recurrent laryngeal nerve injury rates and other indicators were compared. Results  The operative time of the exposed group was (133.66 ± 21.48) min, which was significantly longer than the non – exploded group, difference was statistically significant (t = 3.994, P = 0.025). The exposed group had similar incidence of hypocalcemia compared with the other groups, there was no statistically significant difference (P > 0.05). The revealing recurrent laryngeal nerve injury rate of the exposed group was 2.50%, which was significantly lower than the non – exploded group, difference was statistically significant (χ² = 5.794, P = 0.008). The recurrent laryngeal nerve positioning time of the monitoring group was (4.78 ± 0.94) min, which was significantly shorter than the unmonitored group, difference was statistically significant (t = 7.168, P = 0.001). The recurrent laryngeal nerve injury rate of the monitoring group was 2.78%, showed no significant difference (χ² = 0.911, P = 0.338). Conclusion  In a high risk thyroid surgery, explode recurrent laryngeal nerve can reduce the rate of recurrent laryngeal nerve damage, nerve monitoring can effectively speed up the nerve localization time, but has no significant effect on reduce the rate of recurrent laryngeal nerve injury.

【Key words】  High risk; Thyroid; Recurrent laryngeal nerve; Damage

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度洛西汀单用与联合重复经颅磁刺激治疗广泛性焦虑障碍的疗效比较

侯占岭

【摘要】目的 探讨度洛西汀单用与联合重复经颅磁刺激治疗广泛性焦虑障碍(GAD)的临床疗效及安全性。方法 将60例GAD患者采用数字表法随机分为两组,对照组30例单用度洛西汀治疗,观察组30例给予度洛西汀联合重复经颅磁刺激治疗,比较两组临床疗效及不良反应。结果对照组总有效率为70.0%,观察组总有效率为76.7%,两组总有效率差异无统计学意义(χ²=2.44,P>0.05)。两组治疗1、2、4、6周时汉密尔顿焦虑量表(HAMA)评分均较治疗前明显降低(t=6.23,7.44,7.73,7.78,8.42,8.53,9.60,9.81,均P<0.05)。治疗1周时观察组HAMA评分明显低于对照组(t=6.77,P<0.05),而治疗2、4、6周时两组HAMA评分差异均无统计学意义(t=2.20,1.87,2.41,均P>0.05)。观察组不良反应发生率(23.3%)明显低于对照组(36.7%),两组差异有统计学意义(χ²=7.44,P<0.05)。结论度洛西汀单用与联合重复经颅磁刺激治疗GAD疗效相当,但联合治疗起效更快,安全性更好,能够缩短药物起效时间,提高患者治疗依从性,更适合临床推广应用。

【关键词】度洛西汀;重复经颅磁刺激;广泛性焦虑障碍

The effect of duloxetine alone comparison with the united repetitive transcranial magnetic stimulation in the treatment of generalized anxiety disorder Hou Zhanling. Department of Psychiatry Two, the Sixth People’s Hospital of Datong, Datong, Shanxi 037025, China

【Abstract】Objective To evaluate the efficacy and safety for duloxetine alone and combined with repetitive transcranial magnetic stimulation in the treatment of generalized anxiety disorder (GAD). Methods 60 GAD patients were randomly divided into two groups using number table. 30 cases in the control group were given duloxetine treatment, and 30 patients in the observation group were given duloxetine combined with repetitive transcranial magnetic stimulation treatment. The clinical efficacy and adverse reactions were compared. Results The total effective rate of the control group was 70.0 %, which of the observation group was 76.7 %, the difference between the two groups was not significant ( χ² = 2.44, P > 0.05 ). When treatment 1, 2, 4, 6 weeks, Hamilton Anxiety Scale (HAMA) score were significantly lower than before treatment ( t = 6.23, 7.44, 7.73, 7.78, 8.42, 8.53, 9.60, 9.81, all P < 0.05 ). 1 week after treatment, HAMA score of the observation group was significantly lower than the control group ( t = 6.77, P < 0.05 ). 2, 4, 6 weeks after treatment, HAMA score between the two groups had no significant differences ( t = 2.20, 1.87, 2.41, all P > 0.05 ). The incidence rate of adverse reactions of the observation group (23.3%) was significantly lower than the control group (36.7%), the difference was statistically significant ( χ² = 7.44, P < 0.05 ). Conclusion The efficacy of duloxetine alone and combined with repetitive transcranial magnetic stimulation in treatment of GAD is fairly, but combination therapy has faster onset, better security, it is possible to shorten the time of onset of drug and improve patients’ treatment compliance, which is more suitable for clinical application.

【Key words】Duloxetine; Repetitive transcranial magnetic stimulation; Generalized anxiety disorder

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改良 Miccoli 术式甲状腺双侧次全切除术治疗 Graves 病效果分析

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【摘要】目的 探讨改良 Miccoli 术式甲状腺双侧次全切除术治疗 Graves 病的临床效果，为临床治疗提供参考。方法 选择 Graves 病患者 80 例，根据手术方式分为对照组与观察组，对照组 44 例行直视下小切口甲状腺双侧次全切除术治疗，观察组 36 例患者行改良 Miccoli 术式。比较两组手术成功率、手术指标、围术期临床指标。结果 观察组 VAS 评分、住院时间、并发症发生率分别为 (3.04 ± 0.64)分、(3.25 ± 3.29) mL、(81.19 ± 6.68) min，均明显优于对照组，差异均有统计学意义 (t = 5.214, P < 0.001; t = 14.514, P < 0.001; t = 6.514, P < 0.001)。两组手术均顺利进行，成功率均为 100.00%。观察组切口长度、手术出血量、手术时间分别为 (3.04 ± 0.64) cm、(32.25 ± 3.29) mL、(81.19 ± 6.68) min，均明显优于对照组，差异均有统计学意义 (t = 5.214, P < 0.001; t = 14.514, P < 0.001; t = 6.514, P < 0.001)。

【关键词】改良 Miccoli 术式；甲状腺双侧次全切除术；Graves 病

Clinical effect of Miccoli surgical thyroid bilateral subtotal resection for Graves disease Yin Junping, Li Wenhua, Shen Xiaoping. Department of Cancer Surgery, Zhejiang Xiaoshan Hospital, Hangzhou, Zhejiang 311201, China

【Abstract】Objective To investigate clinical effect of Miccoli surgical thyroid bilateral subtotal resection for Graves disease, to provide a reference for clinical treatment. Methods 80 patients with Graves disease were selected, they were divided into the observation group and the control group according to the surgical approach. 44 patients in control group were taken small incision under direct vision routine bilateral subtotal thyroid treatment, 36 patients in the observation group took Miccoli surgical. Surgical success rate, surgical index were compared between two groups. Results The patients of the two groups were operated smoothly, the success rate was 100.00% in the observation group, the incision length, blood loss, operative time were (3.04 ± 0.64) cm, (32.25 ± 3.29) mL, (81.19 ± 6.68) min respectively, which were significantly less than those of the control group, the differences were statistically significant (t = 5.214, P < 0.001; t = 14.514, P < 0.001; t = 6.514, P < 0.001). The VAS score, length of stay, incidence rate of complication in the observation group were (1.93 ± 0.43), (3.82 ± 0.79), (5.26%), which were significantly better than those in the control group, the differences were statistically significant (t = 5.697, P < 0.001; t = 4.654, P = 0.009; χ² = 11.214, P = 0.000). The hospitalization cost of the observation group was (943.65 ± 565.76) Yuan, which was significantly higher than the control group, the difference was statistically significant (P < 0.05). The cut rating of the observation group was (8.35 ± 2.15), which was significantly higher than the control group, the difference was statistically significant (P < 0.05). The hyperthyroidism relapse during follow – up, the incidence of thyroid dysfunction between the two groups had no significant difference (χ² = 0.568, P = 0.311; χ² = 0.604, P = 0.294). Conclusion Miccoli improved surgical incision and under direct vision thyroid bilateral subtotal resection both have similar clinical effects for Graves disease, Miccoli surgery has smaller trauma, more satisfaction incision, but under direct vision small incisions has lower treatment costs.

【Key words】Improved surgical Miccoli; Thyroid bilateral subtotal resection; Graves disease

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论著

重复经颅磁刺激联合舍曲林治疗帕金森后抑郁的疗效观察
赵国君 陶锋

【摘要】目的探讨重复经颅磁刺激联合舍曲林治疗帕金森后抑郁的疗效。方法将80例帕金森后抑郁患者按数字表法随机分为研究组、对照组，每组40例。对照组单用舍曲林治疗，研究组采用重复经颅磁刺激联合舍曲林治疗，两组患者均治疗4周。于治疗前及治疗后1,2,4周分别评定汉密尔顿抑郁量表（HAMD）、帕金森病统一评分量表（UPDRS）及副反应量表（TESS）评分，比较两组临床疗效。结果研究组治疗后2,4周HAMD评分分别为（18.44±5.56）分、（10.51±4.27）分，均明显低于对照组的（21.23±5.18）分、（14.05±4.10）分（t_{2w} = -2.322, t_{4w} = -3.782, \text{均} P < 0.05）；研究组治疗后2,4周UPDRS量表得分分别为（30.14±4.92）分、（28.39±3.38）分，均明显低于对照组的（33.74±4.87）分、（31.09±3.94）分（t_{2w} = -3.289, t_{4w} = -3.290, \text{均} P < 0.05）；研究组临床显效率为77.5%，明显高于对照组的45.0%（\chi^2 = 4.450, P < 0.05）。结论重复经颅磁刺激联合舍曲林治疗帕金森后抑郁的疗效优于单用舍曲林。

【关键词】重复经颅磁刺激；舍曲林；帕金森病；抑郁
Clinical characteristics of infectious mononucleosis with Epstein – Barr virus and mycoplasma pneumoniae infection in children  Liang Shaoyuan, Chen Guangdao, Tang Minxian. Department of Pediatrics, the Central Hospital of Panyu District, Guangzhou, Guangdong 511400, China  

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【Abstract】 Objective To explore the clinical characteristics of infectious mononucleosis (IM) with Epstein – Barr virus (EBV) and mycoplasma pneumoniae (MP) infection in children. Methods Children with IM who were all positive for EBV and hospitalized in our department from January 2008 to July 2015 were included and divided into the EBV + MP group and the EBV group according to the results of MP. The manifestations, laboratory variables and outcomes were compared in the two groups. Results Of all these 61 cases, 18 children (29.51%) were accompanied with EBV and MP infection. The age of the EBV + MP group was older than the EBV group [(4.44 ± 2.75) vs (2.90 ± 2.08) years, t = 2.401, P = 0.02]. Moderate to severe enlarged tonsils, hepatomegaly and complications (especially cough and gastrointestinal symptoms) were more common in the EBV + MP group than the EBV group with significant differences (remarkable tonsillitis; 88, 89 vs 48, 84%, hepatomegaly; 55.56 vs 13.95%, complications; 72.22 vs 44.19%; χ² = 8.529, 10.719 and 3.999 respectively; P = 0.003, 0.001 and 0.046 respectively). The WBC and lymphocyte counts, percentage of abnormal lymphocyte and the levels of glutamyl transpeptidase in the EBV + MP group were also significantly higher than the EBV group [WBC counts; (18.17 ± 7.17) × 10⁹/L vs (13.70 ± 7.12) × 10⁹/L], lymphocyte counts; (11.61 ± 6.04) × 10⁹/L vs (7.65 ± 4.82) × 10⁹/L, abnormal lymphocyte proportion; (20.69 ± 13.03) % vs (13.00 ± 11.20) %, serum glutamyl transpeptidase; (99.41 ± 91.20) U/L vs (47.95 ± 69.22) U/L; t = 2.231, 2.716, 2.215 and 2.239 respectively; P = 0.029, 0.009, 0.031 and 0.029 respectively). But the average hospital stay and the recovery time of manifestations showed no significant differences in the two groups (P > 0.05). Conclusion IM children with EBV and MP infection have more cases with moderate to severe enlarged tonsils, hepatomegaly and complications, moreover present higher lymphocyte and similar outcomes. MP should be tested in all IM children. The early diagnosis and treatment are the keys to improve the prognosis of IM children with EBV and MP infection.  

【Key words】 Infectious Mononucleosis; Epstein – Barr virus; Mycoplasma pneumoniae; Clinical characteristics; Children
先端帽辅助在结肠镜单人操作中的应用价值

刘玉兰  李和平

【摘要】目的探讨先端帽在结肠镜单人操作过程中的应用价值。方法526例结肠镜单人操作中使用先端帽辅助为观察组，428例常规结肠镜单人操作为对照组，比较肠镜进入回肠末端成功率、并发症、疼痛评分、平均操作时间。结果观察组通过回盲瓣成功率为98.42%，高于对照组的93.45%，两组差异有统计学意义（χ²=16.38, P<0.01）；观察组疼痛评分≤3分521例，>3分5例，对照组疼痛评分≤3分366例，>3分62例，两组差异有统计学意义（χ²=66.21, P<0.01）；观察组未发生并发症，对照组发生并发症14例，两组差异有统计学意义（χ²=17.46, P<0.01）；观察组平均操作时间（5.22±0.0）min，对照组平均操作时间（10.36±1）min，两组差异有统计学意义（t=4.32, P<0.01）。结论结肠镜单人操作过程中应用先端帽辅助使视野更加开阔、清晰，操作更加方便、省时，能有效防止肠黏膜损伤，减轻患者疼痛，提高肠镜检查患者的依从性。

【关键词】先端帽；结肠镜检查
雾化吸入不同剂量糖皮质激素联合复方异丙托溴铵治疗慢性阻塞性肺疾病急性加重的疗效观察

王敏慧

【摘要】目的观察雾化吸入不同剂量布地奈德联合复方异丙托溴铵溶液治疗慢性阻塞性肺疾病急性加重(AECOPD)患者的临床疗效。方法将108例AECOPD患者按数字表法随机分为Ⅰ组54例和Ⅱ组54例,所有患者均进行常规方法治疗,其中Ⅰ组再雾化吸入布地奈德2 mg,2次/d,复方异丙托溴铵溶液2.5 mL,2次/d,连用14 d;Ⅱ组雾化吸入布地奈德2 mg,3次/d,复方异丙托溴铵溶液2.5 mL,3次/d,连用14 d。治疗前后观察患者体征改善情况,进行肺功能检测,6 min步行试验、呼吸困难评分、动脉血气分析。结果Ⅱ组FEV₁%预计值、FEF₂₅% ~ ₇₅%明显高于Ⅰ组(t=3.393,3.617,均P<0.05);Ⅱ组FEV₁/FVC明显低于Ⅰ组(t=3.652,P<0.05);Ⅱ组动脉血气指标PaO₂、PaCO₂改善幅度明显优于Ⅰ组(t=3.767,3.648,均P<0.05);6 min步行试验步行距离明显高于Ⅰ组(t=3.668,P<0.05),Ⅱ组呼吸困难评分明显低于Ⅰ组(t=3.815,P<0.05);Ⅰ组,Ⅱ组再次入院率分别为16.67%(9/54),5.56%(4/54),两组差异无统计学意义(X²=2.186,P>0.05)。结论雾化吸入布地奈德(2 mg,3次/d)联合复方异丙托溴铵溶液(2.5 mL,2次/d)能够相互协同叠加起效,更快改善临床症状与体征,明显改善了患者的肺功能及活动能力,且安全性好,患者依从性高,是治疗AECOPD的理想方法。

【关键词】肺疾病;慢性阻塞性;异丙托溴铵;布地奈德

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发热伴血小板减少综合征 65 例临床特征分析

马艳丽  赵文革

【摘要】  目的 分析发热伴血小板减少综合征的流行病学及临床特征，为防治该病提供科学依据。方法 对 65 例发热伴血小板减少综合征患者资料进行回顾性分析。结果 4~11 月份为发病季节，其中 6~9 月份为发病高峰，占全年总发病例数的 81.5%；发病年龄 23~72 岁（平均 54.3 岁），以中老年为主；患者以从事农业和渔业生产者为主，48 例（73.8%），部分病例有明确蜱虫咬伤史；有人传人家族性聚集现象；临床表现多样，主要表现为发热、极度厌食、全身酸痛、头痛等感染中毒症状，主要体征为腹股沟淋巴结肿大、皮肤、黏膜出血点等；多脏器功能损害；实验室检查 WBC 总数减少 5 例（84.6%），血小板下降 65 例（100.0%）；ALT 升高 43 例（66.1%），AST 升高 48 例（73.8%），LDH 升高 39 例（60.0%）。肌酸激酶（CK）升高 52 例（80.0%）。肌酸激酶同工酶（CK-MB）升高 39 例（60.0%）。尿素氮（BUN）升高 11 例（16.9%），肌酐（CRE）升高 15 例（23.0%）。重要脏器出血及多脏器衰竭是主要死亡原因：5 例多脏器功能衰竭，3 例脑出血、脑疝；1 例消化道出血；1 例弥漫性血管内凝血。结论 发热伴血小板减少综合征作为一种新发传染病，易误诊、漏诊，应加强培训，提高对该病的认识，早诊断、早治疗，减少疾病的危害程度。

【关键词】 发热伴血小板减少综合征；新型布尼亚病毒；多脏器损害；临床特征

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腹腔镜在急腹症诊断与治疗中的应用效果分析

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【摘要】目的探讨腹腔镜在诊断与治疗急腹症患者中的应用效果。方法回顾性分析58例急腹症患者行腹腔镜诊断与治疗的临床资料。结果所有患者经腹腔镜探查得以明确诊断，镜下明确诊断率100%，43例在腹腔镜下完成手术（占74%），12例中转开腹（占21%），3例无需手术治疗（占5%）。所有患者均达到临床治愈。结论腹腔镜在急腹症患者的应用中由最初的单纯明确诊断，逐渐过渡到诊治一体化。腹腔镜检查创伤小，恢复快，值得临床推广。

【关键词】腹腔镜检查；急腹症；诊断；治疗

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舍曲林联合阿立哌唑治疗难治性抑郁症效果分析

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【摘要】目的评价舍曲林联合阿立哌唑治疗难治性抑郁症的有效性和安全性。方法将70例难治性抑郁症患者利用数字表法随机分为研究组(36例,使用舍曲林联合阿立哌唑治疗)和对照组(34例,使用舍曲林单药治疗)进行为期8周的治疗,使用汉密尔顿抑郁量表(HAMD)及焦虑量表(HAMA)评定两组患者的临床疗效,使用不良反应量表(TESS)评定两组患者的不良反应。结果治疗8周后,研究组HAMD(33.97±5.85)分,低于对照组HAMD的(38.15±6.78)分(t=5.224,P=0.006);研究组HAMA评分(32.78±2.90)分,低于对照组的(36.82±4.90)分(t=4.125,P=0.01);研究组TESS评分[(6.18±1.59)分]与对照组[(6.16±1.80)分]比较差异无统计学意义(t=1.12,P=0.1)。结论舍曲林联合阿立哌唑治疗难治性抑郁症安全、有效,且疗效优于舍曲林。

【关键词】抑郁症;舍曲林;阿立哌唑;单纯随机对照研究

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两种微创方法治疗嵌顿性输尿管上段结石的效果比较

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【摘要】  目的  比较微创经皮肾镜碎石取石术与经尿道输尿管镜碎石取石术治疗输尿管上段嵌顿性结石的临床疗效，为临床手术方案的选择提供依据。方法  选取输尿管上段嵌顿性结石患者128例，采用随机数字表法分为A组和B组各64例。A组采用微创经皮肾镜碎石取石术进行治疗，B组采用经尿道输尿管镜碎石取石术进行治疗。比较两组的手术时间、中转开放手术的比例、术中出血量以及术后住院天数；比较两组术后3d和术后1个月的结石清除情况；同时比较两组术后并发症发生情况。结果  两组手术时间差异无统计学意义；A组的中转开放手术率为0.00%，显著低于B组的10.34%（χ² = 6.29, P < 0.05）；A组术中出血量为(70.36 ± 13.81) mL，术后住院时间为(6.47 ± 1.62) d，均显著多于B组的(31.08 ± 8.47) mL、(4.31 ± 1.18) d，(t = 6.67, 5.37, 均 P < 0.05)；A组术后3 d的结石清除率为96.88%，术后1个月的结石清除率为98.44%，显著高于B组的46.88%、84.38%，差异有统计学意义(χ² = 39.57, 8.05, 均 P < 0.05)；两组术后并发症发生率差异无统计学意义(χ² = 1.69, P > 0.05)。结论  相对于经尿道输尿管镜碎石取石术，微创经皮肾镜碎石取石术能够更有效地清除结石，是治疗输尿管上段嵌顿性结石较为理想的手术方式。

【关键词】  输尿管结石；微创经皮肾镜碎石取石术；经尿道输尿管镜碎石取石术

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采用间歇无创通气治疗慢性阻塞性肺疾病急性加重
并重度呼吸衰竭的临床观察

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【摘要】目的 探讨间歇双水平气道正压(BiPAP)无创通气在治疗慢性阻塞性肺疾病急性加重(AECOPD)并重度呼吸衰竭的临床疗效。方法 46例AECOPD合并重度呼吸衰竭的患者在常规的抗感染、解痉平喘、祛痰、激素等综合治疗基础上给予间歇BiPAP无创通气，在通气前、通气3～4h以及72h后评价生命体征以及血气分析指标。结果 46例中好转39例，无效7例，有效率84.8%；动脉血PaCO₂在治疗3～4h后显著降低(t=2.454,P<0.05)，继续治疗72h后可进一步下降，与治疗前相比明显下降(t=4.158,P<0.01)。结论间歇无创通气治疗AECOPD合并重度呼吸衰竭疗效确切，值得基层医院临床推广应用。

【关键词】通气；人工；肺疾病；慢性阻塞性；呼吸衰竭

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不同剂量米非司酮治疗子宫肌瘤的疗效及安全性分析

任玮玮 王浩然

【摘要】目的 探讨不同剂量米非司酮治疗子宫肌瘤的临床疗效及安全性。方法 将收治的 90 例子宫肌瘤患者按照数字表法随机分为低剂量组（A 组，米非司酮 10 mg, 1 次/d, 口服）、中剂量组（B 组，米非司酮，12.5 mg, 1 次/d, 口服）及高剂量组（C 组，米非司酮，25 mg, 1 次/d, 口服），各 30 例。治疗 3 个月后，比较三组患者的临床疗效、血清激素水平变化情况及不良反应发生情况。结果 A、B、C 三组治疗后子宫肌瘤体积分别为（2.52 ± 1.12）cm³、（1.51 ± 1.10）cm³、（1.50 ± 1.02）cm³, 均较治疗前明显缩小; B 组和 C 组治疗后子宫肌瘤体积均较 A 组明显缩小, 差异均有统计学意义（t = 5.12, 4.85, 均 P < 0.05）; B 组和 C 组治疗后子宫肌瘤体积差异无统计学意义（P > 0.05）。A、B、C 三组治疗后 FSH、LH、E₂ 及 P 等水平较治疗前明显改善, B 组和 C 组治疗后较 A 组明显下降, 差异均有统计学意义（t = 3.69, 3.58, 4.11, 4.01, 5.42, 5.31, 4.75, 4.62, 均 P < 0.05）。A、B、C 三组治疗 3 个疗程后总有效率分别为 76.67%、93.33%、96.67%, B 组和 C 组总有效率均明显高于 A 组 (χ² = 4.26, 5.19, 均 P < 0.05), B 组和 C 组总有效率差异无统计学意义 (χ² = 0.35, P > 0.05)。A、B、C 三组不良反应发生率分别为 3.33%、13.33%、40.00%, A、B 组不良反应发生率均明显低于 C 组 (χ² = 11.88, 5.45, 均 P < 0.05), B 组和 A 组差异无统计学意义 (χ² = 1.96, P > 0.05)。结论 米非司酮治疗子宫肌瘤效果肯定，每天口服米非司酮 12.5 mg 可能是较为理想的治疗剂量，是治疗子宫肌瘤有效且安全的剂量。

【关键词】 米非司酮; 子宫肌瘤; 剂量效应关系
支气管镜检查在肺癌诊断中的研究进展

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支气管镜检查（Bronchoscopy）是经口腔或鼻腔将一种细而长的支气管镜置入患者下呼吸道并对其进行内窥镜操作的方法，广泛用于肺癌的筛查和诊治。支气管镜检查能够将大约70%的肺癌患者明确诊断[1]。

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光、声敏剂进展研究

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光、声敏剂目前广泛应用于光动力疗法（photodynamic therapy，PDT）和声动力治疗（sonodynamic treatment，SDT）的研究，在皮肤癌\(^1\)、食管癌\(^2\)、支气管癌\(^3\)、膀胱癌\(^4\)等，尤其对于许多放化疗治疗无效的晚期癌症患者，光、声动力治疗能有效地减轻病痛、提高生命质量，同时它对一些非肿瘤性疾病如鲜红斑痣、关节炎、血管损伤、银屑病、老年性眼底黄斑病的治疗效果也令人满意\(^5\)，因此，无论对化学还是生命科学而言，光、声敏剂的研究都已成为重要的研究领域。光、声敏剂的研究使得PDT、SDT成为继手术、化疗、放疗之后的第四种安全、有效、快捷、毒副作用小的治疗方法\(^6\)，然而人们对其应用的认识与了解却是微乎其微的。本文旨在通过对光、声敏剂的由来、结构、分类、作用机制与应用等概述来提高人们对光、声敏剂的认识与了解。

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羟基红花黄色素 A 的研究新进展

张霞

红花属菊科植物，含红花黄色素及红花苷，其主要活性成分羟基红花黄色素 A (Hydroxysafflor yellow A, HSYA) 属于黄酮类化合物，是红花黄色素中含量最高的成分。近年来，由于肿瘤、心血管疾病的高发和高病死率，研究红花及其有效成分的功效得到了学者们越来越多的关注 [1-2]。相关药理研究结果显示，HSYA 具有增加冠状动脉血流量，抗心肌缺血，抑制血栓形成，降低血脂，抗炎，镇痛，抗氧化等作用。现就 HSYA 的药理研究和临床应用综述如下。

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自我管理培训课程对脑梗死偏瘫患者日常生活活动能力的影响

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【摘要】目的 探讨自我管理培训课程对脑梗死偏瘫患者日常生活活动能力的影响。方法 将160例脑梗死偏瘫患者按数字表法随机分为对照组与观察组各80例，对照组接受常规的住院期间和出院前的健康教育；观察组接受规范的自我管理课程培训，共6节课，每节课均安排有完成整个培训课程，已经出院返回家庭、社区的病友参加，以小组形式，通过动机性访谈，诱导患者找出自身存在问题，患者自己保存疾病管理清单，所涉及的有关技术由护理人员进行讲授、训练和反复强化。于入组时、出院时、出院后1个月、6个月，分别采用一般自我效能感量表对患者自我效能进行测评，改良 Barthel 指数评定日常生活活动能力。结果 入组时两组患者 Barthel 评分差异无统计学意义（P > 0.05）；而观察组在出院时、出院后1个月、6个月日常生活活动能力得分[（50 ± 7）分，（70 ± 10）分，（85 ± 11）分]均显著高于对照组[（44 ± 6）分，（52 ± 8）分，（70 ± 9）分]，差异均有统计学意义（t = 3.98, 19.45, 9.23, 均 P < 0.05）。结论 开展规范的自我管理培训课程可明显提高脑梗死偏瘫患者的日常生活活动能力。

【关键词】脑梗死；偏瘫；生活活动能力；自我管理；培训

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孕期健康教育对母乳喂养及产褥期急性乳腺炎的影响

戎波侠  汪忠意

【摘要】 目的 探讨孕期健康教育对母乳喂养及产褥期急性乳腺炎的影响，为临床健康教育的实施提供参考。方法 选取分娩初产妇 282 例，采用随机数字表法分为观察组和对照组各 141 例。对照组按照产科护理常规进行干预，观察组在对照组护理干预措施的基础上，给予针对性的孕期健康教育。两组产妇分娩后均获得 2 个月的随访，对比两组产妇产后新生儿喂养方式的选择情况及其产褥期急性乳腺炎的发生率。结果 观察组产妇产后新生儿纯母乳喂养率（82.27%）显著高于对照组（67.38%），差异有统计学意义（χ² = 8.30, P < 0.05）；观察组产妇产褥期急性乳腺炎发生率（3.55%）显著低于对照组（11.35%），差异有统计学意义（χ² = 6.22, P < 0.05）。结论 孕期健康教育可有效提高产妇产后的纯母乳喂养率，降低产褥期急性乳腺炎的发生率，值得推广应用。

【关键词】 妊娠期；健康教育；母乳喂养；乳腺炎

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【摘 要】目的 了解农村卫生技术人员的中医药服务能力、认知水平和培训需求。方法 对株洲市四县—市部分村卫生室、个体诊所及乡镇卫生院医生的基本情况、中医药服务能力、认知水平以及中医药知识培训需求等问题进行问卷调查，并进行统计分析。结果 农村卫生技术人员对中医药服务的认知现状较好，100% 的卫生技术人员相信中医药能治愈疾病，99.7% 的卫生技术人员知晓中医的辨证论治和中药药性；中医诊疗设施和中药饮片的配备较齐全；但中医药服务能力偏低，中医诊疗水平不高，对中医传统疗法的操作技能不熟练，只有 18.8% 的卫生技术人员能非常熟练地运用中医四诊和辨证论治，能熟知 100 种以上中药性味、功效和主治的只占 38.8%；只有 35.3% 的卫生技术人员会毫针刺法，37.6% 的卫生技术人员会推拿按摩法，5.7% 的卫生技术人员会耳针法，26.5% 的卫生技术人员会穴位敷贴法，34.8% 的卫生技术人员会穴位注射法，2.9% 的卫生技术人员会穴位埋线法，22.8% 的卫生技术人员会药浴法；对中医药知识培训需求情况的调查显示，非常需要和一般需要对中医四诊和辨证论治基础知识、中药和方剂基础知识、中医传统疗法操作技能进行培训的卫生技术人员分别为 98.9%、97.8%、96.9%。结论 农村卫生技术人员的中医药服务能力有待进一步提高，在今后的中医适宜技术培训中，应强化中医四诊、辨证论治、中药方剂等基础知识以及中医传统疗法操作技能等方面的培训。
【关键词】医学，中国传统；卫生技术人员；农村；调查

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舒适护理干预对手血管吻合术患者术后疼痛、情绪及健康状态影响的研究
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【摘要】 目的 评价舒适护理干预对手血管吻合术患者术后情绪、疼痛及健康状态的影响，为患者术后康复提供指导。方法 选择手血管吻合术术后患者186例，采用数字表法随机分成舒适护理干预（n=93）、常规干预组（n=93），舒适护理干预组采用专门制定的舒适护理干预 + 常规措施，常规干预组采用常规措施，分别采用视觉模拟疼痛评分法、Zung焦虑自评量表、抑郁自评量表、健康状况量表SF-36评估术后两组患者疼痛、负面情绪、健康状况的差异性。结果 舒适护理干预组较常规干预组0级、I级疼痛率高【0级：舒适护理干预组36（29.89%），常规干预组15（16.48%）；I级：舒适护理干预组34（39.08%），常规干预组21（23.08%）】，差异有统计学意义（0级：$\chi^2$=13.485，$P=0.000$；I级：$\chi^2$=5.335，$P=0.024$）；舒适护理干预组较常规干预组焦虑、抑郁得分低【焦虑：舒适护理干预组（52.38±5.16）分，常规干预组（57.28±6.14）分，差异有统计学意义（t=5.571，$P=0.000$；抑郁：t=4.481，$P=0.024$）】；舒适护理干预组较常规干预组在躯体化、人际关系敏感、抑郁、焦虑、敌对、恐怖、偏执、精神病性维度得分低【舒适护理干预组：躯体化（1.41±0.32）分，人际关系敏感（1.68±0.51）分，抑郁（1.51±0.42）分，焦虑（1.66±0.41）分，敌对（1.51±0.46）分，恐怖（1.44±0.37）分，偏执（1.52±0.42）分，精神病性（1.34±0.35）分；常规干预组：躯体化（1.58±0.41）分，人际关系敏感（1.86±0.50）分，抑郁（1.66±0.43）分，焦虑（1.57±0.40）分，敌对（1.76±0.44）分，恐怖（1.64±0.38）分，偏执（1.77±0.41）分，精神病性（1.58±0.33）分】，差异有统计学意义（躯体化：t=3.074，$P=0.002$；强迫：t=1.060，$P=0.291$；人际关系敏感：t=2.378，$P=0.019$；抑郁：t=2.353，$P=0.020$；焦虑：t=3.459，$P=0.001$；敌对：t=3.706，$P=0.000$；恐怖：t=3.555，$P=0.001$；偏执：t=4.018，$P=0.000$；精神病性：t=4.709，$P=0.000$）。结论 舒适护理干预对手血管吻合术患者术后情绪、疼痛及健康状态影响有积极影响，值得临床应用推广。

【关键词】 护理干预；血管吻合术；疼痛；焦虑；抑郁

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普外科实习护生实习焦虑与心理韧性、心理资本的相关性研究

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【摘要】目的 探讨心理韧性、心理资本对普外科实习护生实习焦虑的影响，为普外科实习护生心理干预提供依据。方法 采用整群抽样方法对临床584名普外科实习护生运用焦虑自评量表、心理韧性量表、心理资本量表进行调查，对调查结果进行分析。结果 不同性别、学历水平、实习阶段的实习护生焦虑自评得分 [男(49.64 ± 9.18)分，女(44.91 ± 6.93)分；大、中专(48.83 ± 8.46)分，本科(45.36 ± 7.22)分；早期(实习前1/3时间)(42.73 ± 6.46)分，中期(49.26 ± 8.56)分，晚期(实习后1/3时间)(46.23 ± 7.64)分]差异有统计学意义(性别：t=2.225，P=0.027；学历水平：t=4.947，P=0.000；实习阶段：F=29.417，P=0.000)；不同性别、学历水平的实习护生心理韧性得分 [男(62.35 ± 6.35)分，女(67.87 ± 7.24)分；大、中专(64.72 ± 7.19)分，本科(66.19 ± 8.47)分]差异有统计学意义(性别：t=2.508，P=0.012；学历水平：t=2.111，P=0.035)。实习焦虑与心理韧性各维度、心理资本各维度的相关性均呈负相关(焦虑得分与心理韧性各维度心理韧性、坚韧、自强、乐观相关系数分别是：r = -0.624，P = 0.000；r = -0.560，P = 0.000；r = -0.653，P = 0.013)。焦虑得分与心理资本各维度自我效能感、希望、乐观、韧性相关系数分别是：r = -0.173，P = 0.000；r = -0.218，P = 0.000；r = -0.104，P = 0.042；r = -0.168，P = 0.000)，相关系数r分布在-0.653～-0.104。多元回归显示焦虑自评量表得分的影响因素有：学历、实习时期、家庭经济水平，心理韧性，心理资本(心理资本：B = -3.279，t = 12.832，P = 0.000；心理韧性：B = -5.158，t = 31.888，P = 0.000；家庭经济水平：B = 3.889，t = 6.548，P = 0.000；实习时期：B = -3.741，t = 5.390，P = 0.000；学历：B = -0.965，t = 4.188，P = 0.000)。结论 临床护理管理者应通过提高心理韧性，心理资本水平，降低普外科实习护生实习焦虑。

【关键词】 实习护生；焦虑；心理韧性；心理资本；普外科