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Outcome analysis of 71 patients with laryngeal squamous cell carcinoma

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【Abstract】Objective To investigate the prognosis relevant factors of laryngeal squamous cell carcinoma (LSCC). Methods From January 2013 to December 2013, the clinical data of 71 patients with LSCC who were initially treated in Zhejiang Tumor Hospital were retrospectively analyzed. Results Univariate analysis showed that there were statistically significant differences in survival rate between the group of supraglottic type and glottic type (60.0% vs. 86.3%, χ2 = 6.284, P < 0.05), the group of N0 and N+ (41.7% vs. 86.4%, χ2 = 16.803, P < 0.01), the group of early and late stage (93.6% vs. 50.0%, χ2 = 19.854, P < 0.01). There were no statistically significant differences in survival rate between the group of age 50 ~ 60 vs. >60, 60 ~ 70 vs. >70, 60 ~ 60 vs. >60, 60 ~ 70 vs. >70 (88.9% vs. 88.2% vs. 88.2%, 88.9% vs. 88.2% vs. 88.2%, 88.9% vs. 88.2% vs. 88.2%), the group of T1 + T2 vs. T1 + T2 + T3 + T4 (83.6% vs. 62.5%, χ2 = 3.623, P > 0.05), the group of high, medium, low differentiated andunsigned (75.0% vs. 69.7% vs. 83.3% vs. 91.7%, χ2 = 3.780, P > 0.05), the group of surgery, radiotherapy and surgery + radiotherapy (74.3% vs. 90.9% vs. 71.4%, χ2 = 2.437, P > 0.05). Multivariate analysis showed that age (P = 0.003), treatment (P = 0.048) had significant effect on the prognosis of patients, but tumor location (P = 0.766), T stage (P = 0.677), N stage (P = 0.482), clinical stage (P = 0.825), the degree of pathological differentiation (P = 0.206) had no significant effect on the prognosis of patients. Conclusion More aggressive treatment should be supplied for patients with N+, advanced clinical stage and age whom the prognosis are usually poor. In addition, the proportion of tracheal tube extraction should be appreciated.

【Key words】Laryngeal tumor; Squamous cell carcinoma; Diagnosis; Treatment; Surgery; Lymph node metastasis; Neck dissection; Prognosis

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两种垂直部分喉切除术对声门型喉癌患者喉部功能、术后拔管率及生存率的影响

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【摘要】目的研究两种垂直部分喉切除术对声门型喉癌患者喉部功能、术后拔管率及生存率的影响。

方法 选择湖州市福音医院2013年1月至2014年1月治疗的声门型喉癌患者150例,采用随机数字表法分为观察组75例和对照组75例。对照组应用传统垂直部分喉切除术,观察组采用改良垂直半喉切除术。观察两组患者的术后生存率、拔管率、拔管时间及并发症发生情况等。结果观察组拔管率为100.00% (75/75),对照组拔管率为97.33% (73/75),差异无统计学意义(x² = 2.027, P > 0.05);观察组拔管时间为 (11.85 ± 0.49) d, 对照组拔管时间为 (14.55 ± 0.56) d, 差异有统计学意义 (t = 31.424, P < 0.05)。观察组吞咽功能分级Ⅰ级67例 (89.33%), Ⅱ级8例 (10.67%), 吞咽功能优于对照组, 差异有统计学意义 (Z = 5.238, P < 0.05)。两组患者术后1年和术后2年的生存率差异均无统计学意义 (均P > 0.05), 观察组患者术后3年的生存率为97.33% (73/75), 对照组为88.00% (66/75) (χ² = 4.807, P < 0.05)。两组患者均未出现咽瘘, 对照组出现5例切口感染, 观察组出现1例切口感染, 两组患者并发症发生率差异无统计学意义 (均P > 0.05)。结论改良垂直半喉切除术治疗声门型喉癌患者能有效缩短拔管时间,较好地保存患者喉部吞咽功能, 提高3年生存率, 但拔管率、并发症发生率与传统垂直部分喉切除术并无明显差异。

【关键词】喉肿瘤; 喉; 喉切除术; 喉垂直部分切除术; 声门型喉癌; 术后拔管率; 寿命表

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Effects of two kinds of vertical partial laryngectomy on laryngeal function, postoperative extubation rate and survival rate of patients with glottic laryngeal carcinoma

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【Abstract】Objective To study the effects of two kinds of vertical partial laryngectomy on laryngeal function, postoperative extubation rate and survival rate of patients with glottic laryngeal carcinoma. Methods From January 2013 to January 2014, one hundred and fifty patients with glottic carcinoma who treated in Huzhou Gospel Hospital were selected. The patients were divided into observation group and control group by random number table method, with 75 cases in each group. The control group used the traditional vertical partial laryngectomy, the observation group was treated with modified vertical partial laryngectomy. The postoperative survival rate, extubation rate, extubation time and complications were observed in the two groups. Results The extubation rate was 100.00% (75/75) in the observation group and 97.33% (73/75) in the control group, the difference was statistically significant between the two groups (x² = 2.027, P > 0.05). The extubation time in the observation group was (11.85 ± 0.49) d, which in the control group was (14.55 ± 0.56) d, the difference was statistically significant between the two groups (t = 31.424, P < 0.05). There were 67 cases (89.33%) with grade 0 and 8 cases (10.67%) with grade 1 in the observation group. The swallowing function of the observation group was stronger than that of the control group (Z = 5.238, P < 0.05). The 1-year and 2-year survival rates of the two groups were similar (all P > 0.05). The 3-year survival rate of the observation group was 97.33% (73/75), which of the control group was only 88.00% (66/75), the difference was statistically significant between the two groups (χ² = 4.807, P < 0.05). There was no pharyngeal fistula in both two groups. There were 5 incision infections in the control group, and 1 incision infection in the observation
group. There was no statistically significant difference in the incidence rate of complications between the two groups ($\chi^2 = 2.778, P > 0.05$). **Conclusion** Improved vertical hemilaryngectomy therapy for patients with glottic laryngeal carcinoma can effectively shorten the time of extubation, better preserve swallowing function, improve the long-term survival rate, and the extubation rate and complication rate are similar with the traditional vertical partial laryngectomy.

**Key words** Laryngeal neoplasms; Larynx; Laryngectomy; Vertical partial laryngectomy glottic carcinoma; Postoperative extubation rate; Life tables

**Fund program:** Huzhou Science and Technology Bureau of Zhejiang Province (2015GY21)

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【摘要】 目的 评价老年性聋患者近亲属的心理健康状况,并探讨其影响因素。方法 采用症状自评量表(SCL-90)中文版对2015年7月至2017年7月就诊于扬州大学附属医院耳鼻咽喉科门诊的老年性聋患者157例的近亲属进行测定,计算其躯体化、强迫症状、人际关系、抑郁、焦虑、敌对、恐怖、偏执及精神病性的评分,并与国人标准常模进行比较。同时记录所有受试患者的临床资料,同时采用Pearson相关分析,对SCL-90与各项因素的相关性进行分析;再运用单因素分析和多元逐步回归方法分析相关影响因素。结果 老年性聋近亲属SCL-90总分为(146.3±42.8)分,总分及总均分与中国常模差异均有统计学意义(t = 14.557, 14.765, 均P < 0.05);其中躯体化、人际关系敏感、抑郁、焦虑项目因子分高于中国常模,差异均有统计学意义(t = 5.417, 13.588, 20.857, 22.475, 均 P < 0.05)。年龄、睡眠情况、教育程度、患者是否佩戴助听器及患者听力损失程度对老年性聋患者近亲属SCL-90总评分有影响(t = 2.188, 0 < P < 0.05)与老年性聋患者近亲属SCL-90总评分呈正相关;而近亲属睡眠情况(t = -2.004, P < 0.05)及患者是否佩戴助听器(t = -4.643, P < 0.05)与老年性聋患者近亲属SCL-90总评分呈负相关。结论 老年性聋患者近亲属有轻度心理健康损害,伴有抑郁、焦虑情绪;年龄、睡眠情况、教育程度、患者是否佩戴助听器及患者听力损失程度是影响其总体心理健康状况的重要因素。应从健康整体观出发,重视老年性聋患者近亲属的身心健康。

【关键词】 老年性聋; 近亲属; 精神卫生; 抑郁; 焦虑; 因素分析,统计学

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Psychopathological characteristics and its influencing factors in families of presbycusis patients

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【Abstract】Objective To investigate the psychopathological characteristics in families of presbycusis patients and its influencing factors. Methods The psychopathological characteristics were evaluated with the Symptom Checklist – 90(SCL-90) Chinese version in 157 families of presbycusis patients in the Affiliated Hospital of Yangzhou University from July 2015 to July 2017. Somatization, obsessive – compulsive disorder, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, psychoticism and other were assessed and compared with the Chinese standard norm. The correlation between SCL – 90 and related data had also been analyzed. The general information and clinical data of patients were analyzed. Results The SCL – 90 score in the FPP group was (146.3 ± 42.8) points. The total score and total average score of SCL – 90 had statistically significant difference between the FPP group and the Chinese standard group (t = 14.557, 14.765, all P < 0.05). The scores of somatization, interpersonal sensitivity, depression and anxiety factors in the FPP group were higher than those in the Chinese standard group (t = 5.417, 13.588, 20.857, 22.475, all P < 0.05). Age, sleeping condition, educational level, hearing aids and the level of patients’ hearing loss were correlated with the total score of SCL – 90 in FPP (all P < 0.05). Multiple linear regression analysis showed that age (t = 2.550, P < 0.000), the educational level (t = 4.087, P < 0.000), and the level of patients’ hearing loss (t = 2.188, P < 0.05) were positively correlated with TSL – 90, and sleeping condition (t = -2.004, P < 0.05) and hearing aids (t = -4.643, P < 0.05) were negatively associated with TSL – 90. Conclusion The psychopathological characteristics are generally poor in families with presbycusis patients, accompanied by obvious depression and anxiety; and age, sleeping condition, educational level,
hearing aids and the level of patients’ hearing loss are important influencing factors. It is important to pay attention to overall health in families with presbycusis patients.

【Key words】 Presbycusis; Elderly; Family relations; Mental health; Depression; Anxiety; Factors analysis, statistical

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鼻内镜窦口鼻道复合体手术治疗慢性鼻窦炎的疗效及生存质量观察

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目的 观察鼻内镜下窦口鼻道复合体手术治疗慢性鼻窦炎的疗效及其对患者生活质量的影响。
方法 选择 2014 年 3 月至 2017 年 5 月湖州市中心医院收治的慢性鼻窦炎患者 270 例为研究对象，采用随机数字表法分为对照组和观察组各 135 例。观察组患者接受鼻内镜下窦口鼻道复合体手术治疗，对照组患者采取局部切除、局部糖皮质激素喷鼻、上颌窦穿刺冲洗等综合治疗。术后随访 6 个月，观察临床治疗效果，采用生活质量健康调查量表 (SF-36) 和鼻－鼻窦炎疾病特异性生活质量量表 (SNOT-20) 对患者进行评估。
结果 末次随访时，观察组治愈率 84.4%，好转率 13.3%；对照组治愈率 45.2%，好转率 20.0%，观察组临床疗效显著优于对照组 (Z = 7.291, P < 0.001)。治疗后 3 个月，观察组 SF-36 量表中生理角色评分 (69.5 ± 14.1) 分，总体健康评分 (62.9 ± 11.4) 分，以及 SNOT-20 量表中 20 个总条目得分 (15.5 ± 3.4) 分和 5 大条目得分 (8.1 ± 3.7) 分，均较治疗前明显改善 (t = 4.881, 5.102, 20.283, 14.360, 均 P < 0.05)。治疗后 6 个月，观察组生理功能、生理角色、机体疼痛、活力、社会功能、情绪角色、心理健康和总体健康评分分别为 (86.8 ± 11.5) 分、(81.0 ± 12.1) 分、(82.8 ± 12.7) 分、(70.4 ± 11.0) 分、(84.5 ± 13.0) 分、(73.4 ± 11.6) 分、(87.0 ± 12.4) 分和 (68.7 ± 16.4) 分，均明显优于对照组的 (83.8 ± 11.4) 分、(69.5 ± 12.4) 分、(78.5 ± 13.1) 分、(68.4 ± 11.9) 分、(74.7 ± 11.1) 分、(73.4 ± 11.1) 分、(67.4 ± 11.9) 分，差异均有统计学意义 (t = 2.153, 7.712, 2.738, 2.012, 6.710, 4.195, 5.388, 2.450, 均 P < 0.05)；而 20 个总条目得分和 5 大条目得分与 3 个月时比较差异均无统计学意义 (均 P > 0.05)。结论 鼻内镜下窦口鼻道复合体手术治疗慢性鼻窦炎的临床效果尚满意，患者总体症状和生活质量基本恢复正常，但必须擤鼻涕、流黏稠鼻涕、夜间睡眠不好、鼻涕向后流和注意力不集中等 5 大问题仍未得到彻底解决。

【关键词】 耳鼻喉外科手术；内窥镜检查；鼻窦疾病；窦口鼻道复合体；慢性鼻窦炎；临床效果；生活质量

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Clinical effect of ostimeatal complex surgery on chronic sinusitis under nasal endoscope

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【Abstract】Objective To analyze the clinical effect of ostimeatal complex surgery on chronic sinusitis under nasal endoscope. Methods A total of 270 patients with chronic sinusitis treated in Huzhou Central Hospital from March 2014 to May 2017 were selected. The patients were randomly divided into control group and observation group according to the digital table, with 135 cases in each group. The observation group received ostimeatal complex surgery under nasal endoscope. The control group was treated with local excision, local glucocorticoid injection, and maxillary sinus puncture and irrigation. The patients were followed up for 6 months after surgery, the clinical effect was observed. The life quality of patients was evaluated with 36 – items short form health survey (SF – 36) and sino – nasal outcome test – 20 (SNOT – 20). Results At the last follow – up, the cure rate of the observation group was 84.4%, the improvement rate was 13.3%, the cure rate of the control group was 45.2%, and the improvement rate was 20.0%. The clinical efficacy of the observation group was significantly better than that of the control group (Z = 7.291, P < 0.001). Three months after treatment, the physiological role score [(69.5 ± 14.1) points] and general health score [(62.9 ± 11.4) points], the total score of 20 items [(15.5 ± 3.4) points] and 5 items [(8.1 ± 3.7) points] were significantly improved compared with those before surgery (t = 4.881, 5.102, 20.283, 14.360, P < 0.05). After 6 months, the physiological role score, general health score, 20 items and 5 items were significantly improved compared with those before surgery (t = 2.153, 7.712, 2.738, 2.012, 6.710, 4.195, 5.388, 2.450, P < 0.05), but the difference was not significant compared with those at 3 months (P > 0.05). Conclusion The clinical effect of ostimeatal complex surgery on chronic sinusitis under nasal endoscope was satisfactory, the overall symptoms and quality of life were basically restored, but the problems of sneezing, running nose, retrograde nasal discharge, poor sleep and attention were still not completely solved.
3.7 points] of SNOT-20 scale in the observation group were significantly improved ($t = 4.881, 5.102, 20.283, 14.360$, all $P < 0.05$). The scores of physiological function, physiological role, body pain, vigor, social function, emotional role, mental health and general health in the observation group were (86.8 ± 11.5 points), (81.0 ± 12.1 points), (82.8 ± 12.7 points), (70.4 ± 11.0 points), (84.5 ± 13.0 points), (73.4 ± 11.6 points), (87.0 ± 12.4 points) and (68.7 ± 16.4 points), which were significantly better than those in the control group [(83.8 ± 11.4 points), (69.5 ± 12.4 points), (78.5 ± 13.1 points), (68.4 ± 11.9 points), (74.4 ± 11.7 points), (67.4 ± 11.9 points), (78.9 ± 12.3 points) and (64.3 ± 12.9 points)], the differences were statistically significant ($t = 2.153, 7.712, 2.738, 2.012, 6.710, 4.195, 5.388, 2.450$, all $P < 0.05$). There were no statistically significant differences in the score of 20 general items and the score of 5 items compared with those at 3 months (all $P > 0.05$). Conclusion The clinical effect of ostimeatal complex surgery on chronic sinusitis under nasal endoscope is satisfactory. The overall symptoms and quality of life of the patients returned to normal, but the 5 major problems such as nasal mucus, mucus nose, bad sleep at night, nasal discharge backstreaming and inattention have not been solved thoroughly.

【Key words】 Otorhinolaryngologic surgical procedures; Endoscopy; Paranasal sinus diseases; Ostimeatal complex; Chronic sinusitis; Clinical effect; Life quality

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三种不同术式治疗鼻前庭囊肿的疗效及安全性比较

【摘要】 目的：比较鼻内镜下前庭囊肿揭盖术、唇龈沟径路前庭囊肿切除术和鼻内镜下低温等离子射频消融术治疗鼻前庭囊肿的疗效及安全性。方法：选取2013年1月至2017年12月太原市中心医院耳鼻喉科收治的鼻前庭囊肿患者90例为研究对象，根据术式不同分为鼻内镜下前庭囊肿揭盖术(A组,26例),唇龈沟径路前庭囊肿切除术(B组,36例),鼻内镜下低温等离子射频消融术(C组,28例)。比较三种术式的疗效及安全性。结果：A组手术时间为(15.5±3.6)min,伤口愈合时间为(2.3±0.9)d及C组手术用时[(16.3±4.5)min],伤口愈合时间[(2.1±0.5)d]均显著短于B组,差异均有统计学意义(t=5.268,4.698,5.624,4.267,均P<0.05);C组术中出血量[(9.3±0.6)mL]最少,其次为A组[(12.2±1.7)mL],三组差异均有统计学意义(t=8.256,7.254,均P<0.05)。三组术后伤口VAS评分差异有统计学意义(=12.674,=0.001,且C组VAS评分(1.6±0.7分)<A组(3.2±1.5分)<B组(4.9±2.3分),三组差异均有统计学意义(t=2.989,3.934,2.989,均P<0.05)。C组患者术后面部肿胀程度以轻度(39.29%)和中度(60.71%)为主,与A组、B组比较,差异均有统计学意义(2=5.226,11.541,均P<0.05)。结论：与鼻内镜下前庭囊肿揭盖术、唇龈沟径路前庭囊肿切除术比较,鼻内镜下低温等离子消融术治疗前庭囊肿的疗效最好,安全性高,痛苦小,不易复发。

【关键词】 鼻囊肿; 前庭疾病; 鼻; 导管消融术; 自然腔道内镜手术; 外科手术; 手术后并发症; 疗效比较研究

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Comparison of efficacy and safety of three different surgical methods for nasal vestibular cyst

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【Abstract】Objective: To explore the efficacy and safety of endoscopic nasal vestibular cysts, lip gingival trench path nasal vestibule excision and low temperature plasma radiofrequency ablation under nasal endoscope in the treatment of nasal vestibular cyst. Methods: From January 2013 to December 2017, ninety patients with nasal vestibular cyst admitted in Taiyuan Central Hospital were selected. According to different surgical methods, the patients were divided into nasal endoscope nasal vestibular cyst group (A group, 26 cases), cleft lip gingival vestibule cyst excision group (B group, 36 cases), low temperature plasma radiofrequency ablation group under nasal endoscopy (C group, 28 cases). The efficacy and safety of the three types of operation were compared. Results: The operation time [(15.5±3.6) min] and wound healing time [(2.3±0.9) d] in A group and the operation time [(16.3±4.5) min], wound healing time [(2.1±0.5) d] in C group were all significantly shorter than those in B group, the differences were statistically significant (t=5.268, 4.698, 5.624, 4.267, all P<0.05). The amount of bleeding in C group [(9.3±0.6) mL] was the least, followed by A group [(12.2±1.7) mL], and the difference among the three groups was statistically significant (t=8.256, 7.254, all P<0.05). The postoperative wound VAS score among the three groups was statistically significant (F=12.674, P<0.001), and the VAS score in C group [(1.6±0.7) points] was significantly lower than that in A group [(3.2±1.5) points] and B group [(4.9±2.3) points], the differences among the three groups were statistically significant (t=4.256, 3.998, 2.989, all P<0.05). The degree of facial swelling in C group was mild (39.29%) and moderate (60.71%), the differences were statistically significant compared with those in A group and B group (χ²=5.226, 11.541, all P<0.05). The incidence rate of complications in C group (0.00%) was significantly lower than that in A group (11.54%) and B group (16.67%), the difference was statistically significant (χ²=3.934, P<0.05).
Conclusion  Compared with the endoscopic nasal vestibule cysts, lip gingival trench path nasal vestibule excision, the low temperature plasma ablation under nasal endoscopy in the treatment of nasal vestibular cyst has the best efficacy, it is safe, less painful, and not easy to relapse.

【Key words】 Cysts; Vestibular diseases; Nose; Catheter ablation; Natural orifice endoscopic Surgery; Surgical procedures, operative; Postoperative complications; Comparative effectiveness research

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咪唑斯汀常规剂量联合糠酸莫米松
治疗变应性鼻炎疗效观察

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【摘要】目的 比较咪唑斯汀强化剂量与咪唑斯汀常规剂量联合糠酸莫米松方案对花粉过敏所致变应性鼻炎患者症状评分及实验室指标的影响。方法 选取台州市第一人民医院2016年6月至2018年1月收治的花粉过敏所致变应性鼻炎患者共150例,采用随机数字排列法分为A组(75例)和B组(75例),分别采用咪唑斯汀强化剂量与咪唑斯汀常规剂量+糠酸莫米松方案治疗,比较两组患者近期疗效,治疗前后鼻炎症状评分、组胺、白三烯C4、白细胞介素6(IL-6)、白细胞介素8(IL-8)、肿瘤坏死因子α(TNF-α)水平及不良反应发生率、日均治疗费用。结果B组近期疗效显著优于A组(93.33% vs. 81.33%, χ² = 9.15, P < 0.05);B组治疗后鼻炎症状评分(0.49±0.19)分、(1.02±0.20)分、(0.84±0.20)分显著低于A组(0.87±0.21)分、(1.40±0.24)分、(1.19±0.27)分;治疗前(3.13±1.06)分、(2.88±0.57)分、(2.81±0.79)分显著低于A组(2.58±0.54)分、(3.27±0.62)分、(3.96±1.05)分(t = 2.45, 2.71, 2.66, 2.89, 3.78, 3.75, 3.44, 4.53, 均P < 0.05);B组治疗后组胺、白三烯C4、IL-6、IL-8及TNF-α水平[(15.76±3.54) mg/L, (12.17±3.58) mg/L, (1.23±0.19) mg/L, (3.27±0.62) mg/L, (3.96±1.05) mg/L]均显著低于A组[(19.58±5.25) mg/L, (15.44±4.14) mg/L, (1.96±0.33) mg/L, (5.40±0.88) mg/L, (5.01±1.40) mg/L];治疗前[(24.57±7.67) mg/L, (18.90±6.33) mg/L, (2.58±0.54) mg/L, (7.66±1.17) mg/L, (6.81±1.67) mg/L]治疗后(t = 2.31, 2.50, 2.53, 2.39, 3.05, 3.60, 3.10, 3.57, 3.90, 均P < 0.05);两组不良反应发生率差异无统计学意义(P > 0.05);B组日均治疗费用显著低于A组[(7.56±1.02)元比(6.88±0.80)元,t = 3.12, P < 0.05]。结论 相较于咪唑斯汀强化剂量方案,咪唑斯汀常规剂量+糠酸莫米松方案治疗花粉过敏所致变应性鼻炎能够显著减轻鼻部症状,下调组胺、白三烯C4及炎性细胞因子水平,降低治疗费用,且安全性值得认可。

【关键词】 鼻炎, 变应性, 季节性; 过敏反应; 白细胞介素6; 白细胞介素8; 肿瘤坏死因子-α; 白三烯C4; 咪唑斯汀; 糠酸莫米松

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Effect of mizolastine conventional dose combined with momestasone furoate in the treatment of allergic rhinitis caused by pollen allergy

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【Abstract】Objective To compare the effects of mizolastine intensive dose and mizolastine conventional dose + momestasone furoate on symptom score and laboratory index of patients with allergic rhinitis caused by pollen allergy. Methods From June 2016 to January 2018, one hundred and fifty allergic rhinitis patients caused by pollen allergy were chosen in the First People’s Hospital of Taizhou and randomly divided into two groups according to the digital table, with 75 patients in each group. A group was treated with mizolastine intensive dose scheme, and B group was treated with mizolastine conventional dose + momestasone furoate. The short–term efficacy, rhinitis symptoms score, the levels of histamine, leukotrienes C4, IL-6, IL-8 and TNF-α before and after treatment, the incidence of adverse reactions and daily treatment cost of the two groups were compared. Results The short–term efficacy of B group was significantly better than that of A group (93.33% vs. 81.33%, χ² = 9.15, P < 0.05). The rhinitis symptoms scores of B group [ (0.49±0.19) points, (1.02±0.20) points, (0.95±0.28) points, (0.84±0.20) points ] after treatment were significantly lower than those of A group [ (0.87±0.21) points, (1.40±0.24) points, (1.63±0.36) points, (1.19±0.27) points ] and before treatment [ (3.13±1.06) points, (2.88±0.57) points, (2.81±0.79) points ].
The levels of histamine, leukotrienes C4, IL-6, IL-8 and TNF-α of B group [(15.76 ± 3.54) mg/L, (12.17 ± 3.58) mg/L, (1.23 ± 0.19) mg/L, (3.27 ± 0.62) mg/L, (3.96 ± 1.05) mg/L] after treatment were significantly lower than those of A group [(19.58 ± 5.25) mg/L, (15.44 ± 4.14) mg/L, (1.96 ± 0.33) mg/L, (5.40 ± 0.88) mg/L, (5.01 ± 1.40) mg/L] and before treatment [(24.57 ± 7.67) mg/L, (18.90 ± 6.33) mg/L, (2.58 ± 0.54) mg/L, (7.66 ± 1.17) mg/L] (t = 2.45, 2.71, 2.66, 2.89, 3.78, 3.75, 3.44, 4.53, all P < 0.05). There was no statistically significant difference in the incidence rate of adverse reactions between the two groups (P > 0.05). The daily treatment cost of B group after treatment was significantly less than that of A group and before treatment [(7.56 ± 1.02) CNY vs. (6.88 ± 0.80) CNY, t = 3.12, P < 0.05]. Conclusion Compared with mizolastine intensive dose scheme, mizolastine conventional dose + momestasone furoate in the treatment of patients with allergic rhinitis caused by pollen allergy can efficiently relieve the nasal symptoms, down-regulate the levels of histamine, leukotriene C4 and inflammatory cytokines, reduce the treatment cost and has the approved safety.

【Key words】 Rhinitis, allergic, seasonal; Anaphylaxis; Interleukin-6; Interleukin-8; Tumor necrosis factor-alpha; Leukotriene C4; Mizolastine; Momestasone furoate

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Analysis of characteristics and related factors of secretory otitis media after radiotherapy for nasopharyngeal carcinoma

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【Abstract】 Objective To observe the characteristics of secretory otitis media after radiotherapy for nasopharyngeal carcinoma (NPC) and analyze its related factors. Methods From January 2015 to January 2017, one hundred and eighty-four NPC patients with secretory otitis media after radiotherapy in the Fifth People’s Hospital of Datong were selected as observation group, and 56 NPC patients without secretory otitis media were selected as control group. The time and location of secretory otitis media after radiotherapy for NPC patients were observed and recorded. The clinical data of the two groups were compared, and the related factors were analyzed. Results Of the 184 patients, 67.4% patients were unilateral and 32.6% patients were double ears. Twelve months after radiotherapy, the highest incidence rate was 44.6% (82/184). Compared with the control group, the radiotherapy time of the observation group (13.6 ± 4.8 months) was longer, the radiation dose (72.7 ± 26.8 Gy) was greater, the proportion of the eustachian tube involvement (65.2%) and the T3–T4 phase of the tumor stage (55.4%) and the atrophy of the palatine tensor muscle of the palatine velum more than or equal to 30% (63.0%) were higher, and the differences were statistically significant (t = 6.231, 5.683, χ² = 8.944, 5.527, 7.198, all P < 0.05). Logistic multivariate analysis showed that the radiation dose of more than 70 Gy, palatine tensor muscle atrophy more than 30%, tumor T3–T4 stage, eustachian tube involvement and radiotherapy time were the risk factors of secretory otitis media in NPC patients after radiotherapy. Conclusion The postoperative radiotherapy of NPC with secretory otitis media is often in one side. The risk factors are the time of radiotherapy, the dose of radiotherapy, the tumor stage, the involvement of the eustachian tube and the atrophy of the palatine tensor muscle.

【Key words】 Nasopharyngeal neoplasms; Eustachian tube; Otitis media with effusion; Radiotherapy; Radiation dosage; Muscular atrophy; Neoplasm staging; Factor analysis, statistical

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**[Effect of Omaha system measures combined with voice training in the treatment of patients with functional vocal dyspraxia caused by glottic insufficiency]**

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**[Abstract]**  **Objective** To explore the effect of Omaha system combined with voice training in the treatment of patients with functional vocal dyspraxia caused by incomplete glottic closure.  **Methods** From January 2017 to December 2017, eighty-eight patients with vocal dystonia due to glottic insufficiency who were treated in the Second Hospital of Shaoxing were randomly divided into control group and observation group by random number table method, with 44 cases in each group. The control group was treated with voice training. The observation group was given Omaha system measures on the basis of treatment in the control group. After 8 weeks, the therapeutic effects, GRBAS index scores, VHI scores, changes in acoustic parameters, and laryngoscope scores were compared between the two groups.  **Results** After treatment, the total effective rate of the observation group (90.91%) was significantly higher than that of the control group (59.09%) (χ² = 9.317, P < 0.05). After treatment, the scores of total deafness, roughness and other indicators were significantly reduced in both two groups, and the scores of GRBAS in the observation group were significantly lower than those in the control group (t = 8.674, P < 0.001; t = 2.169, P = 0.032; t = 4.497, P < 0.001). After treatment, the index scores and total VHI scores of both two groups were significantly decreased, and the scores of the observation group were significantly lower than those of the control group (t = 2.222, P = 0.028; t = 3.144, P = 0.002; t = 2.003, P = 0.048; t = 5.763, P < 0.001).  **Conclusion** The Omaha system measures combined with voice training could obviously improve the functional vocal dyspraxia caused by incomplete glottic closure, improve the quality of patients’ voice, and improve the condition of vocal folds, contributing to the improvement of patients’ voice function.
(F0 – High) and DSI index significantly increased in both two groups, which in the observation group were significantly higher than those in the control group \((t = 4.497, P < 0.001; t = 4.794, P < 0.001)\). **Conclusion** The combination of Omaha system measures and voice training can significantly improve functional vocal disturbances caused by glottic insufficiency, significantly improve the quality of patients’ voices, improve glottic closure, and contribute to the recovery of patients’ voices. It is worthy of promotion in clinical practice.

**[Key words]** Omaha system measures; Vocal training; Glottic insufficiency; Functional vocal disturbance; Therapeutic effect; Vocal disorder severe index; Acoustics; Vocal

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鼻内皮质类固醇膏剂治疗变应性鼻结膜炎的效果观察

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【摘要】 目的 探讨鼻腔内短期应用皮质类固醇激素膏剂治疗变应性鼻结膜炎（ARC）的临床效果。方法 选择2016年12月至2017年12月在郑州大学第二附属医院眼科门诊治疗的ARC患者164例，采用随机数字表法分为观察组（83例）和对照组（81例）。观察组妥布霉素地塞米松眼膏鼻内应用联合盐酸氮卓斯汀滴眼液点眼；对照组应用盐酸氮卓斯汀滴眼液点眼。记录两组患者治疗14d后的眼部和鼻部症状和体征计分，与治疗前进行比较；比较两组患者治疗14d后的临床有效率。结果 两组治疗14d后患者眼部和鼻部症状和体征计分均较治疗前明显降低（均P<0.05）。观察组治疗14d后眼部和鼻部症状和体征计分低于对照组，两组差异均有统计学意义（t=3.048，P=0.008；t=3.098，P=0.028）。观察组和对照组治疗总有效率分别为79.51%和48.19%，两组差异有统计学意义（χ²=18.644，P<0.05）。结论 短期应用鼻内皮质类固醇类膏剂可有效缓解ARC临床症状，方法简便易行，效果显著，且安全经济。

【关键词】 鼻结膜炎；过敏性；变应性结膜炎；变应性鼻炎；皮质类固醇；H1抗组胺药；鼻内皮质类固醇；药物治疗；抗过敏剂；药膏

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Clinical observation of the effect of intranasal corticosteroid plaster in the treatment of allergic rhinoconjunctivitis

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【Abstract】Objective To investigate the therapeutic effect of short-term application of intranasal corticosteroid ointment in the treatment of allergic rhinoconjunctivitis (ARC). Methods From December 2016 to December 2017, one hundred and sixty-four patients with ARC were diagnosed in the ophthalmological clinic of the Second Affiliated Hospital of Zhengzhou University, and they were divided into observation group (83 cases) and control group (81 cases) according to the digital table. The observation group was treated with tobramycin dexamethasone ophthalmic ointment, and the control group was treated with azzolastine hydrochloride eye drops. The scores of ocular, nasal symptoms and signs were recorded and compared with before treatment, and the clinical effective rates of the two groups were compared. Results After 14 days of treatment, the scores of nasal symptoms and signs in the two groups were significantly lower than those before treatment (all P<0.05). In the observation group, the scores of nasal symptoms and signs after 14 days of treatment were lower than those in the control group, and the differences were statistically significant (t=3.048, P=0.008; t=3.098, P=0.028). The total effective rates of the observation group and control group were 79.51% and 48.19%, respectively, the difference was statistically significant (χ² = 18.644, P<0.05). Conclusion The short-term application of intranasal corticosteroid ointment can effectively relieve the clinical symptoms of ARC. The treatments are simple and effective, and it is safe and economical. It is very suitable for wide application and popularization in primary clinical hospitals.

【Key words】 Rhinoconjunctivitis; allergic; Allergic conjunctivitis; Allergic rhinitis; Corticosteroid; H1 antihistamines; Intranasal corticosteroid; Drug therapy; Anti-allergic agents; Ointment

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正畸治疗在口腔修复中的临床效果及安全性分析

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【摘要】 目的 探讨正畸治疗在口腔修复中的临床应用效果及安全性。方法 选择2014年8月至2017年9月大同煤矿集团有限责任公司燕子山矿医院口腔科收治的牙列缺损患者80例,采用随机数字表法分为两组,每组40例。对照组直接进行口腔修复治疗,观察组在口腔修复治疗前先进行正畸治疗。比较两组临床疗效、语言功能评分及恢复时间、咀嚼效率及恢复时间、龈沟出血指数、菌斑指数、X线投影测量指标,并比较两组患者的满意度,不良反应发生情况。结果 观察组总有效率97.50%(38/40),高于对照组的85.00%(32/40)(χ²=3.914,P<0.05)。观察组语言功能评分(8.49±1.56)分,咀嚼效率(83.94±12.66)%均高于对照组的(7.18±1.45)分,(70.12±13.57)%,(t=3.890,5.445,均P<0.05);观察组语言功能恢复时间(17.19±5.41)分,咀嚼效率恢复时间(20.81±4.87)分,均短于对照组的(24.37±7.02)分、(27.54±6.95)分(t=5.124,5.016,均P<0.05)。观察组菌斑指数(1.14±0.36)分、龈沟出血指数(1.96±0.64)分,均低于对照组的(1.51±0.40)分、(2.73±0.87)分(t=4.348,4.509,均P<0.05)。观察组SNA角(71.24±4.98)°,SNB角(72.85±1.07)°,均小于对照组的(76.59±5.40)°,(74.13±1.39)°(t=4.606,4.615,均P<0.05)。观察组患者总满意度95.00%,高于对照组的80.00%(χ²=4.114,P<0.05)。观察组不良反应发生率2.50%,低于对照组的17.50%(χ²=5.000,P<0.05)。结论 正畸治疗在口腔修复前先实行正畸治疗,可有效提高其口腔修复效果,有利于提高患者语言功能和咀嚼效率,改善其牙列情况和颌面畸形情况,使患者更加满意,且安全可靠,不良反应少。

【关键词】 口腔疾病; 牙缺失; 牙制备; 口腔修复; 正畸学; 矫正; 口腔机能恢复; 治疗结果; 病人满意度

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Clinical effect and safety of orthodontic treatment in prosthodontics

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【Abstract】 Objective To study the clinical application and safety of orthodontic treatment in oral repair. Methods From August 2014 to September 2017, eighty patients with dentition defect admitted in the department of stomatology of Yanzishan Mine Hospital of Datong Mining Group co., LTD were selected. By using digital random table method, eighty patients were randomly divided into two groups, with 40 cases in each group. The control group was directly treated with oral repair, and the observation group was given orthodontic treatment before oral repair treatment. The clinical efficacy, speech function score and recovery time, chewing efficiency and recovery time, gingival crevicular bleeding index, plaque index and X-ray projection measurement indicators of the two groups were compared, and the satisfaction and adverse reactions of the two groups were compared. Results The total effective rate of the observation group was 97.50%(38/40), which was higher than that of the control group [85.00%(32/40)] (χ²=3.914,P<0.05). After treatment, the scores of language function [8.49±1.56] points], masticatory efficiency [(83.94±12.66)%] in the observation group were significantly higher than those in the control group [7.18±1.45] points, (70.12±13.57)% (t=3.890,5.445, all P<0.05). The recovery time of language function [(17.19±5.41) d] , and the recovery time of masticatory efficiency [(20.81±4.87) d] in the observation group were shorter than those of the control group [24.37±7.02) d, (27.54±6.95) d] (t=5.124,5.016, all P<0.05). After treatment, the plaque index (1.14±0.36), gingival sulcus bleeding index (1.96±0.64) of the observation group were lower than those of the control group [1.51±0.40], [2.73±0.87] (t=4.348,4.509, all P<0.05). There were no adverse reactions in the observation group, and all patients were satisfied with the treatment. Conclusion Orthodontic treatment before oral repair can significantly improve the oral repair effect, and improve the language function and chewing efficiency, and improve the occlusal condition and the facial deformity, making patients more satisfied, safe, and reliable, with fewer adverse reactions.
The SNA angle \((71.24 \pm 4.98)°\), the SNB angle \((72.85 \pm 1.07)°\) in the observation group were less than those in the control group \((76.59 \pm 5.40)°, (74.13 \pm 1.39)°\) \((t = 4.606, 4.615, all P < 0.05)\). In terms of satisfaction, the overall satisfaction rate of the observation group was 95.00%, which was higher than 80.00% of the control group \((\chi^2 = 4.114, P < 0.05)\). The overall incidence rate of adverse reactions of the observation group (2.50%) was lower than that of the control group (17.50%) \((\chi^2 = 5.000, P < 0.05)\). **Conclusion** Orthodontic treatment before dental repair in patients with dentition defect can effectively improve the effect of oral repair, improve the speech function and masticatory efficiency of patients, improve the dentition and maxillofacial malformation, and make the patients more satisfied. And it is safe and reliable, can reduce adverse reactions.

**Key words** Mouth diseases; Tooth loss; Tooth preparation, prosthodontic; Orthodontics, corrective; Mouth rehabilitation; Treatment outcome; Patient satisfied

**Fund program** Shanxi Province key R & D Program (Guide) Project (201603D321054)

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颈静脉球血氧饱和度监测在重度颅脑损伤治疗中的应用研究

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【摘要】目的 探讨颈静脉球血氧饱和度 (SjvO2) 监测在重度颅脑损伤 (sTBI) 患者治疗中的应用效果。方法 选择 2016 年 8 月至 2017 年 8 月上海健康医学院附属周浦医院收治的 sTBI 患者 53 例纳入研究,通过抽签法随机分为颅内压 (ICP) 监测向导组 28 例 (ICP 组) 与 SjvO2 监测向导的治疗组 25 例 (SjvO2 组)。ICP 组按常规方案进行治疗, SjvO2 组除常规治疗方案外,动态监测 SjvO2, 通过调整治疗方案,使 SjvO2 维持在 55% ~ 75% 的目标范围。比较两组患者早期格拉斯哥昏迷评分 (GCS 评分)、伤后 3 个月格拉斯哥预后评分 (GOS 评分) 以及病死率。结果 SjvO2 组伤后 3 d 内累计共有 36% (9/25) 患者出现 SjvO2 < 55% 事件; 伤后第 4 天 SjvO2 组患者 GCS 评分较 ICP 组改善更明显 [ (7.17 ± 4.11) 分 vs. (6.91 ± 1.10) 分, t = 1.78, P = 0.03] ; 伤后第 90 d 两组患者病死率差异无统计学意义 ( P = 0.80) ; SjvO2 组与 ICP 相比有更好的 GOS 良好预后率 (24.00% vs. 10.70%, χ² = 2.31, P = 0.05)。结论 以 SjvO2 监测为向导的治疗策略可改善 sTBI 患者早期的意识水平,并能改善 sTBI 患者整体预后。

【关键词】颅脑损伤; 血氧测定法; 颈静脉球; 格拉斯哥预后评分; 预后

【基金项目】上海健康医学院种子基金项目 (HMSF-17-220041)

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【Abstract】Objective To investigate the application of jugular bulb oxygen saturation (SjvO2) in the treatment of patients with severe traumatic brain injury (sTBI). Methods From August 2016 to August 2017, fifty-three patients with sTBI admitted to intensive care unit (ICU) of Zhoupu Hospital Affiliated to Shanghai University of Medicine & Health Sciences were randomly divided into the intracranial pressure – guided treatment group (ICP group) and the SjvO2 – guided treatment group (SjvO2 group) by draw lots method. The patients in ICP group (n = 25) were treated according to the routine regimen, and the SjvO2 group (n = 28) was dynamically detected SjvO2, and the SjvO2 was maintained at the target range of 55% ~ 75% by adjusting the treatment scheme in addition to the routine treatment regimen. The early GCS score, GOS score and the mortality rate were compared between the two groups three months after injury. Results A total of 36% (9/25) patients had SjvO2 < 55% events within 3 days after injury. On the fourth day after injury, the GCS score in the SjvO2 group was better than that in the ICP group [(7.17 ± 4.11) points vs. (6.91 ± 1.10) points, t = 1.78, P = 0.03], and there was no statistically significant difference in mortality between the two groups at 90 days after injury ( P = 0.80). The SjvO2 group had a better prognosis rate compared with ICP group (24.00% vs. 10.70%, χ² = 2.31, P = 0.05). Conclusion The treatment strategy of sTBI patients guided by SjvO2 can improve early consciousness level and improve the overall prognosis of sTBI patients.

【Key words】Craniocerebral trauma; Oximetry; Glomus jugulare; Glasgow outcome scale; Prognosis

【Fund program】Shanghai University of Medicine & Health Sciences (the grant was awarded to Hong Peng Li, grant no. HMSF-17-22-041)

【Trial Registration】Chinese Clinical Trial Registry, NCT03296293
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吉非替尼联合胸部同步放疗治疗局部晚期存在敏感基因突变非小细胞肺癌的临床研究

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【摘要】目的 探讨吉非替尼联合胸部同步放疗在治疗表皮生长因子受体(EGFR)基因突变敏感型局部晚期非鳞肺癌患者中的临床获益及安全性。方法 将2015年6月至2016年12月重庆三峡中心医院收治的符合条件的患者56例随机按照1:1分入A、B两组,每组28例。A组患者口服吉非替尼联合胸部同步放疗,B组患者接受同步放化疗。按照研究方案记录毒副反应并定期随访。研究指标包括:严重毒性反应;客观反应率(ORR)和疾病控制率(DCR),无进展生存时间(PFS),中位生存时间(OS)。结果 A组有26例完成治疗,明显不良反应包括:间质性肺炎(3/26)、放射性食管炎(4/26)、骨髓抑制、皮疹及胃肠道反应;B组有28例完成治疗,明显毒副反应包括:间质性肺炎(4/26)、放射性食管炎(3/26)、骨髓抑制及胃肠道反应;两组均未出现Ⅲ级以上严重毒副反应。两组ORR和DCR差异均无统计学意义(ORR:61.5% vs. 39.3%, P=0.102; DCR:84.6% vs. 71.4%, P=0.505)。两组中位PFS分别为12.45个月、10.35个月,组间差异有统计学意义(P=0.036)。而OS尚未达到预期目标,有待后续随访研究。结论 初步研究显示,对于EGFR突变敏感型局部晚期非鳞肺癌患者,吉非替尼联合胸部同步放疗方案安全有效。

【关键词】癌,非小细胞肺; 吉非替尼; 放射疗法; 抗肿瘤联合化疗方案; 疗效比较研究

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A randomized clinical study of gefitinib combined with concurrent thoracic radiotherapy in the treatment of local-advanced non-small cell lung cancer with sensitive EGFR mutations

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【Abstract】Objective To evaluate the efficacy and safety of gefitinib combined with concurrent thoracic radiotherapy in the treatment of local-advanced non-small cell lung cancer with sensitive EGFR mutations. Methods From June 2015 to December 2016, fifty-six eligible patients in Chongqing Three Gorges Central Hospital were randomly assigned into two groups by one to one ratio, with 28 cases in each group. A group received treatment of gefitinib combined with concurrent thoracic radiotherapy, and B group adopted concurrent chemoradiotherapy. The toxic effects were recorded and all patients were followed up as defined by the study protocol. Primary study endpoints included; severe toxic effects, objective response rate and disease control rate, progression free survival and overall survival. Results Twenty-six patients in A group completed the study, and the severe toxic effects were as followed: interstitial pneumonia (3/26), radiation esophagitis (4/26), myelosuppression, skin rashes and gastrointestinal disruption. Twenty-eight patients in B group completed the study, and the severe toxicity included; interstitial pneumonia (4/26), radiation esophagitis (3/26), myelosuppression, skin rashes and gastrointestinal disruption. No toxicity higher than grade III developed in both two groups, and there were no statistically significant differences in incidence rates of interstitial pneumonia and radiation esophagitis between the two groups (all P > 0.05). Moreover, there were no statistically significant differences in ORR and DCR between the two groups (ORR: 61.5% vs. 39.3%, P = 0.102; DCR: 84.6% vs. 71.4%, P = 0.505). A group showed the benefit over B group in PFS (12.45 months vs. 10.35 months, P = 0.036). However, OS didn’t reach and needed further follow-up. Conclusion The modality of gefitinib combined with concurrent thoracic radiotherapy in the treatment of local-advanced non-small cell lung cancer with sensitive EGFR mutations was safe and effective.
cancer with sensitive EGFR mutations is safe and effective, and it yet needs further follow-up.

【Key words】 Carcinoma, non-small-cell lung; Gefitinib; Radiotherapy; Antineoplastic combined chemotherapy protocols; Comparative effectiveness research

Fund program: Research Project of Health and Family Planning Commission of Chongqing Municipality (2016MSXM116)

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冠脉内超声引导下紫杉醇药物涂层球囊治疗 冠脉支架内再狭窄 30 例近期疗效观察

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【摘要】 目的 观察紫杉醇药物涂层球囊治疗冠脉支架内再狭窄的近期疗效及安全性。方法 选择辽宁省金秋医院 2015 年 8 月至 2018 年 7 月在冠脉内超声引导下实施紫杉醇药物涂层球囊治疗的冠脉支架内再狭窄患者共 30 例,对患者的临床资料和介入治疗结果进行分析。结果 药物涂层球囊扩张时间持续[(43 ± 11)s],药物涂层球囊介入治疗的即刻成功率为100%。患者术后较术前的病变狭窄程度明显减轻,血管最小内径明显增加[(10.67 ± 5.53)% vs. (79.67 ± 9.28)% , t = -33.797, P < 0.01; (2.80 ± 0.44) mm vs. (0.64 ± 0.31) mm, t = 22.039, P < 0.01]。术后 1 例 89 岁高龄男性患者住院期间发生肺部感染,治疗无效发生呼吸衰竭死亡;另有 2 例患者术后反复出现短暂心绞痛发作,经药物治疗 1 周后好转,其余患者住院期间无心绞痛再发,无其它心血管不良事件发生。结论 紫杉醇药物涂层球囊用于治疗冠脉支架内再狭窄是安全有效的,为临床提供了一个“有介入无再植入”的全新的治疗手段。但远期疗效还需进一步随访观察。

【关键词】 冠状动脉; 超声检查,介入性; 紫杉醇; 气囊; 药物洗脱支架; 冠状动脉再狭窄; 治疗结果

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【Abstract】Objective To summarize the effect and safety of paclitaxel drug – coated balloon in the treatment of patients with coronary in – stent restenosis. Methods From August 2015 to July 2018, 30 patients with in – stent restenosis in Jinqiu Hospital of Liaoning Province were selected and they had undertook the percutaneous transluminal coronary angioplasty (PTCA) with paclitaxel drug – coated balloon under intravascular ultrasound – guided. Results Intravascular ultrasound was done after PTCA with ordinary balloon before the paclitaxel drug – coated balloon angioplasty. The drug – coated balloon expansion continued to 30s – 60s[(43 ± 11)s] in all in – stent restenosis, and the success rate of immediate intervention operation was 100%. The lesion degree of stenosis and lesions minimum diameter at postoperation and preoperation had statistically significant differences[(10.67 ± 5.53)% vs. (79.67 ± 9.28)% , t = -33.797, P < 0.01; (2.80 ± 0.44) mm vs. (0.64 ± 0.31) mm, t = 22.039, P < 0.01]. There was one 89-year-old patient died because of respiratory failure from pneumonia, and two patients with angina pectoris after operation got relieve after one week drug treatment. There were no other adverse cardiovascular events during the duration of hospital stay after the intervention operation. Conclusion Paclitaxel drug – coated balloon is effective and safe in the treatment of patients with coronary in – stent restenosis lesions. It is one new method named "the intervention without once again permanent implant" that the paclitaxel drug – coated balloon expands under intravascular ultrasound – guided, but the long – term effect is uncertain yet.

【Key words】 Coronary vessels; Ultrasonography, interventional; Paclitaxel; Air sacs; Coronary restenosis; Treatment outcome

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磁共振成像在肛周脓肿及肛瘘诊断中的应用价值

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【摘要】目的 分析磁共振成像(MRI)在肛周脓肿及肛瘘诊断和分型中的应用价值。方法 选取余姚市人民医院2016年5月至2017年12月诊治的疑诊肛门直肠周围脓肿及肛瘘患者80例为研究对象,采用随机数字表法分为一般检查组和MRI组,每组40例。一般检查组行超声检查,MRI组进行MRI检查,以手术结果为对照标准,分析MRI检查对各种类型肛周脓肿、肛瘘的检出率。结果一般检查组肛瘘主管诊断准确率、肛瘘内口诊断准确率、肛门直肠周围脓腔诊断准确率、肛瘘支管诊断准确率分别为65.0% (26/40)、70.0% (28/40)、57.5% (23/40)、52.5% (21/40),MRI组分别为92.5% (37/40)、77.5% (31/40)、87.5% (35/40)、95.0% (38/40),两组肛瘘主管诊断准确率、肛门直肠周围脓腔诊断准确率、肛瘘支管诊断准确率差异均有统计学意义(χ²=9.054,7.116,8.865,P<0.05)。MRI组手术有效率为67.5% (27/40),明显高于一般检查组的67.5% (27/40),差异有统计学意义(χ²=9.935,P<0.01)。结论采取MRI对肛周脓肿及肛瘘进行诊断,可以对脓肿与肛瘘的数目、累及范围、具体位置和周围结构关系进行准确判断,对临床制定治疗方案及预后具有重要价值。

【关键词】磁共振成像;肛门疾病;脓肿;直肠瘘;诊断;对比研究

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【Abstract】Objective To explore the clinical value of magnetic resonance imaging(MRI) in the diagnosis and classification of perianal abscess and anal fistula.Methods Eighty patients with suspected perianal abscess and anal fistula were selected in Yuyao People’s Hospital from May 2016 to December 2017. They were divided into general examination group and MRI group by random number table, with 40 cases in each group. The general examination group underwent ultrasound examination, and the MRI group underwent MRI examination. The detection rate of MRI examination for various types of perianal abscess and anal fistula was analyzed based on the results of operation.

Results In the general examination group, the diagnostic accuracy of anal fistula supervisor, anal fistula internal orifice, perianal abscess and anal fistula branch were 65.0% (26/40), 70.0% (28/40), 57.5% (23/40) and 52.5% (21/40), respectively, which in the MRI group were 92.5% (37/40), 77.5% (31/40), 87.5% (35/40) and 95.0% (38/40), respectively. There were statistically significant differences in diagnostic accuracy of anal fistula supervisor, perianal abscess and anal fistula branch between the two groups (χ² = 9.054, 7.116, 8.865, all P < 0.05). The effective rate of operation in the MRI group was 67.5% (27/40), which was significantly higher than that in the general examination group [67.5% (27/40)], the difference was statistically significant (χ² = 9.935, P < 0.01).

Conclusion Using MRI to diagnose perianal abscess and anal fistula can accurately judge the number, involvement range, specific location and surrounding structure of the abscess and anal fistula, and has important value for clinical treatment and prognosis.
【Key words】 Magnetic resonance imaging; Anus diseases; Abscess; Rectal fistula; Diagnosis;

Comparative study

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内蒙古自治区呼和浩特地区乙型肝炎患者
HBV 基因分型、耐药突变的相关性分析

【摘要】 目的 探讨内蒙古自治区呼和浩特地区慢性乙型肝炎患者病毒脱氧核糖核酸（HBV-DNA）载量与血清标志物水平间的关系，基因分型与核苷（酸）类似物耐药突变情况。方法 选取内蒙古自治区人民医院 2015 年 1 月至 2017 年 12 月确诊的慢性乙型肝炎患者 193 例为研究对象，采用实时荧光定量聚合酶链式反应（PCR）法检测 HBV-DNA 载量，分析其与血清学标志物的相关性。并从 193 例患者中选取 79 例采用 PCR 反向点杂交法检测 HBV 基因分型和耐药突变，分析不同基因型患者的耐药突变情况。结果 e 抗原阳性与阴性患者的 e 抗体水平与 HBV-DNA 载量比较差异均有统计学意义（均 P<0.001）。79 例 HBV 感染者中，B 基因型 9 例（11.4%），C 基因型 70 例（88.6%）。其中有 25 例发生不同位点变异，变异率为 31.6%（25/79），以单位点 rtS213T 突变为主，约占 24.0%（6/25）。结论 呼和浩特地区慢性乙型肝炎患者的 HBV-DNA 载量与 e 抗原、e 抗体水平相关；基因型主要为 B 和 C 型，以 C 基因型为多；慢性乙型肝炎患者主要对拉米夫定、阿德福韦酯耐药，突变以 rtS213T 为主，也有混合位点的突变。【关键词】 肝炎，乙型，慢性；肝炎病毒，乙型；基因，病毒；脱氧核糖核酸；肝炎 e 抗原，乙型；肝炎表面抗原，乙型；肝炎核心抗原，乙型；基因型；耐药突变 DOI:10.3760/cma.j.issn.1008-6706.2019.08.015

Correlation of HBV genotyping and drug resistance mutation in Hohhot, Inner Mongolia

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【Abstract】 Objective To investigate the relationship between HBV-DNA load and serum markers in chronic hepatitis B (CHB) patients in Hohhot, Inner Mongolia, and to explore the mutation of HBV genotype and nucleoside analogue. Methods From January 2015 to December 2017, one hundred and ninety – three CHB patients hospitalized in the People’s Hospital of Inner Mongolia were selected randomly. The clinical diagnostic criteria for all admitted patients were based on the "Guidelines for the Prevention and Treatment of Chronic Hepatitis B" jointly formulated by the Infectious Diseases Society of 2010. The HBV-DNA load of HBV was detected by real – time quantitative PCR, and the correlation between HBV-DNA load and serum markers was analyzed. Seventy – nine patients were selected from 193 hospitalized patients, PCR – reverse dot blot hybridization was used to analyze HBV genotyping and the drug resistance mutations of different genotypes. Results The differences of HBeAb level and HBV-DNA load between HBeAg positive patients and negative patients were statistically significant (all P<0.001). Of 79 serum specimens of HBV infected people, 9 cases (11.4%) were B genotypes, and 70 cases of C genotype (88.6%). Of them, 25 cases had different loci variation, the rate of variation was 31.6% (25/79), with the unit point rtS213T mutation dominated, accounting for about 24.0% (6/25). Conclusion In Hohhot Inner Mongolia patients with CHB, HBV-DNA load with HBeAg and HBe Ab level are correlated; genotype in patients including B type and C type, which is mainly genotype C, patients with CHB mainly had drug resistance to lamivudine and adefovir dipivoxil, mutations including rtS213T, and hybrid mutation.【Key words】 Hepatitis B, chronic; Hepatitis B virus, Genes, viral; Deoxyribonucleic acid; Hepatitis B e antigens; Hepatitis B surface antigens; Hepatitis B core antigens; Genotype; Drug resistance mutation DOI:10.3760/cma.j.issn.1008-6706.2019.08.015
双波长非剥脱点阵激光“水增强法”
治疗面部凹陷性瘢痕的疗效观察

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【摘要】目的观察双波长非剥脱点阵激光“水增强法”治疗面部凹陷性瘢痕的疗效。方法选择2017年6月至2018年2月嘉兴市中医医院收治的面部凹陷性瘢痕患者50例为研究对象,采用随机数字表法分成观察组和对照组,每组25例,观察组采用注射利多卡因联合双波长非剥脱性点阵激光进行治疗,对照组采用双波长非剥脱性点阵激光进行治疗,比较两组患者的临床治疗效果。结果观察组治愈率为60.00%(15/25),对照组治愈率为36.00%(9/25),观察组治愈率显著高于对照组,两组差异有统计学意义(\(\chi^2 = 32.524, P < 0.05\))。结论对面部痤疮后凹陷性瘢痕患者,运用水辅助1540nm点阵激光治疗,能够得到显著的治疗效果,并且安全性较好,不良反应少,是目前最适合亚洲痤疮凹陷性瘢痕患者的治疗方案。

【关键词】瘢痕;激光疗法;水增强法
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Curative effect of double wavelength non-stripping lattice array laser "water enhancement method" in the treatment of facial sunken scar

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【Abstract】Objective To evaluate the efficacy of dual-wavelength non-stripping dot array laser "water enhancement" in the treatment of facial sunken scar. Methods From June 2017 to February 2018, fifty patients with facial sunken scar were randomly divided into observation group and control group according to the digital table, with 25 cases in each group. The observation group was treated by lidocaine injection combined with dual-wavelength non-stripping lattice laser, while the control group was treated with double-wavelength non-stripping dot array laser. The clinical therapeutic effects of the two groups were compared and analyzed. Results The cure rate of the observation group was 60.00% (15/25), which was significantly higher than that of the control group[36.00% (9/25)], and the difference between the two groups was statistically significant (\(\chi^2 = 32.524, P < 0.05\)). Conclusion Water assisted 1540 nm lattice laser therapy for facial sunken scar after acne has obviously better effect, safety and less adverse reactions. And it is the most suitable treatment for patients with facial sunken scar after acne in Asia.

【Key words】Cicatrix; Laser therapy; Water enhancement method
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老年高血压患者血压节律与左心室结构和功能的相关性研究
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【摘要】目的 探讨老年高血压患者血压节律变化与左心室结构和功能的相关性。方法 选择福建医科大学附属龙岩第一医院2017年1-12月诊治的老年高血压患者147例,患者均接受24 h动态血压检查,根据血压节律分为杓型、非杓型及反杓型血压三组,患者均进行心脏超声心动图检查,分析动态血压相关参数与左心室结构和功能的相关性。结果147例老年高血压患者中,杓型血压占11.56% (17/147),非杓型血压占51.02% (75/147),反杓型血压占37.41% (55/147)。非杓型血压组室间隔厚度(IVST)、左室舒张末内径(LVEDD)、左房内径(LAD)、左室后壁厚度(LVPWT)、左心室质量指数(LVMI)分别为(10.56±1.51) mm、(50.17±4.31) mm、(34.65±5.78) mm、(9.26±0.98) mm、(102.31±23.23) g/m²,反杓型血压组分别为(10.51±1.86) mm、(50.20±3.66) mm、(36.96±4.22) mm、(9.42±0.99) mm、(110.47±31.96) g/m²,杓型血压组分别为(9.53±1.53) mm、(47.59±2.27) mm、(30.47±4.17) mm、(8.88±1.12) mm、(84.98±15.48) g/m²,三组差异均有统计学意义(F=1.172, 3.428, 1.006, 0.135,均P<0.05);非杓型血压组、反杓型血压组二尖瓣血流频谱舒张早期最大血流速度(E峰)/舒张晚期最大血流速度(A峰)(E/A)比值分别为(0.89±0.30)、(0.80±0.28),均较杓型血压组[1.35±0.63]明显降低(t=-2.890, -3.440,均P<0.05);反杓型血压组的左室射血分数(LVEF)为(65.31±6.74)%,较杓型血压组的(70.12±10.76)%明显减低(t=-2.209, P<0.05)。三组动态血压参数中24 h平均收缩压、24 h平均舒张压、白天平均舒张压差异均无统计学意义(均P>0.05)。杓型血压组白天平均收缩压(143.06±13.70) mmHg,高于非杓型血压组的(133.25±13.28) mmHg,差异均有统计学意义(t=-2.734, -3.401,均P<0.05)。反杓型血压组夜间收缩压(139.04±15.01) mmHg、夜间舒张压(80.18±10.29) mmHg,均高于杓型血压组的(123.24±14.49) mmHg,夜间舒张压(72.24±7.97) mmHg和非杓型血压组的(127.40±13.30) mmHg、(73.45±11.43) mmHg,差异均有统计学意义(t=3.822, 4.666, 2.919, 3.456,均P<0.05)。LVMI 与年龄、体质量指数(BMI)、低密度脂蛋白胆固醇(LDL-C)、白天收缩压、夜间收缩压、夜间舒张压、24 h收缩压均呈正相关(r=0.256, 0.241, 0.687, 0.251, 0.380, 0.203, 0.243,均P<0.05)。结论 老年高血压患者中,反杓型和非杓型血压对心脏功能和结构的损害显著高于杓型血压;夜间血压升高与左心结构和功能的损害密切相关。老年高血压患者血压昼夜节律异常与左心室肥厚密切相关。

【关键词】 高血压; 血压; 昼夜节律; 血压监测,便携式; 超声心动描记术; 心室功能,左; 心脏扩大; 老年人

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Correlation between blood pressure rhythm and left ventricular structure and function in elderly hypertension patients
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【Abstract】Objective To investigate the correlation between blood pressure rhythm and left ventricular structure and function in elderly hypertensive patients. Methods A total of 147 elderly patients with high blood pressure in the First Hospital of Longyan Affiliated to Fujian Medical University were selected. All the patients received 24h ambulatory blood pressure examination. According to the rhythm of blood pressure, the patients were divided into the dipper blood pressure group, the non dipper type blood pressure group and the anti-dipper type blood pressure group.
blood pressure group. All patients were examined by echocardiography. **Results** According to the results of 24h dynamic blood pressure, the type of dipper blood pressure accounted for 11.56% (17 cases) in 147 elderly patients, non – dipper type blood pressure type accounted for 51.02% (75 cases), and the anti – dipper type of blood pressure type accounted for 37.41% (55 cases). The ventricular septal thickness (IVST), left ventricular diastolic inner diameter (LVEDD), left atrium inner diameter (LAD), left ventricle posterior wall thickness (LVPWT) and left ventricle mass index (LVMI) of the non – dipper blood pressure group were (10.56 ± 1.51) mm, (50.17 ± 4.31) mm, (34.65 ± 5.78) mm, (9.26 ± 0.98) mm, (102.31 ± 23.23) g/m², respectively. The IVST, LVEDD, LAD, LVPWT and LVMI of the anti – dipper blood pressure group were (10.51 ± 1.86) mm, (50.20 ± 3.66) mm, (36.96 ± 4.22) mm, (9.42 ± 0.99) mm, (110.47 ± 31.96) g/m², respectively. The IVST, LVEDD, LAD, LVPWT and LVMI of the dipper blood pressure group were (9.53 ± 1.53) mm, (47.59 ± 2.27) mm, (30.47 ± 4.17) mm, (8.88 ± 1.12) mm, (84.98 ± 15.48) g/m², respectively. The differences of IVST, LVEDD, LAD, LVPWT and LVMI in the three groups were statistically significant (F = 1.172, 3.428, 1.006, 0.135, all P < 0.05). The maximum blood flow velocity in early diastolic period of mitral valve blood flow spectrum (E peak)/maximum blood flow velocity in late diastolic period (A peak) (E/A) of the non – dipper blood pressure group and anti – dipper blood pressure group were (0.89 ± 0.30), (0.80 ± 0.28), respectively, which was significantly lower than that of dipper blood pressure group [(1.35 ± 0.63)] (t = −2.890, −3.440, all P < 0.05). The left ventricular ejection score (LVEF) of the anti – dipper blood pressure group was (65.31 ± 6.74) %, which was significantly lower than that of the dipper blood pressure group [(70.12 ± 10.76) %], the difference was statistically significant (t = −2.209, P < 0.05). The 24 h mean systolic pressure, 24 h mean diastolic pressure and daytime mean diastolic pressure in the three groups of dynamic blood pressure parameters had no statistically significant differences (all P > 0.05). The average daytime systolic pressure in the dipper blood pressure group was (143.06 ± 13.70) mmHg, which was higher than that in the non – dipper blood pressure group [(133.25 ± 13.28) mmHg] and anti – dipper blood pressure group [(131.16 ± 12.26) mmHg], the differences were statistically significant (t = −2.734, −3.401, all P < 0.05). The mean evening systolic pressure and the average nocturnal diastolic pressure of anti – dipper blood pressure group were (139.04 ± 15.01) mmHg and (80.18 ± 10.29) mmHg, respectively, which were higher than those of the dipper and non – dipper blood pressure group [(123.24 ± 14.49) mmHg and (72.24 ± 7.97) mmHg], (127.40 ± 13.30) mmHg, (73.45 ± 11.43) mmHg], the differences were statistically significant (t = 3.822, 4.666, 2.919, 3.456, all P < 0.05). LVMI was positively correlated with age, body mass index (BMI), low density lipoprotein (LDL-C), daytime average systolic pressure, night average systolic pressure, night average diastolic pressure, and 24h average systolic pressure (r = 0.256, 0.241, 0.687, 0.251, 0.380, 0.203, 0.243, all P < 0.05). **Conclusion** Anti – dipper blood pressure and non – dipper blood pressure have more significant damage to cardiac function and structure than dipper blood pressure in elderly patients with hypertension, and the elevation of nocturnal blood pressure is closely related to left heart structure and function damage. There is a high correlation between abnormal circadian rhythm of blood pressure and left ventricular hypertrophy in elderly hypertensive patients.

**Key words** Hypertension; Blood pressure; Circadian rhythm; Blood pressure monitoring, ambulatory; Echocardiography; Ventricular function, left; Cardiomegaly; Aged

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Effect of gatifinib combined with hydroxylcamptothecin pericardial perfusion in the treatment of advanced non–small cell lung cancer with pericardial effusion

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Abstract  Objective To observe the clinical effect of gatifinib combined with hydroxylcamptothecin pericardial perfusion in the treatment of patients with advanced non–small cell lung cancer (NSCLC) with pericardial effusion.

Methods From January 2016 to September 2017, eighty-four cases of late NSCLC with pericardial effusion treated in the People’s Hospital of Jiaozhou were randomly divided into two groups according to the digital table, with 42 cases in each group. The control group was treated with gatifinib, and the observation group was treated with hydroxylcamptothecin on the basis of the control group. The curative effect was evaluated after two courses of treatment in the two groups, and the clinical efficacy and adverse reactions were observed.

Results The effective rates of the control group and the observation group were 47.6% (20/42) and 66.7% (28/42), respectively. The effective rate of the observation group was significantly higher than that of the control group ($\chi^2 = 4.525, P < 0.05$). The effective rate of pericardial effusion was 33.3% (14/42) in the control group and 69.1% (29/42) in the observation group, the difference between the two groups was statistically significant ($\chi^2 = 10.72, P < 0.05$). There was no statistically significant difference in the incidence rate of adverse reactions between the two groups during treatment ($P > 0.05$).

Conclusion Combination of gatifinib and hydroxylcamptothecin pericardial perfusion in the treatment of NSCLC with pericardial effusion has good tolerance and good safety for the patients.

Key words Gatifinib; Hydroxylcamptothecin; Drug therapy, combination; Chemotherapy, cancer, regional perfusion; Carcinoma, non-small-cell lung; Pericardial effusion; Treatment outcome; Controlled clinical trial

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替普瑞酮胶囊联合四联疗法治疗慢性萎缩性胃炎的疗效观察

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【摘要】 目的 探讨替普瑞酮胶囊联合四联疗法应用在慢性萎缩性胃炎患者中的临床疗效及应用价值。方法 回顾性分析 2013 年 6 月至 2017 年 6 月宁海县第一医院收治的慢性萎缩性胃炎患者 150 例的临床资料，根据治疗方案不同分为对照组和观察组，每组 75 例。对照组患者采用常规四联疗法，观察组联合替普瑞酮治疗，对比两组疗效。结果 观察治疗总有效率为 97.33%，高于对照组的 85.33%，差异有统计学意义（χ² = 3.197, P < 0.05）。观察组治疗后白细胞介素-8、肿瘤坏死因子-α 分别为（7.04±1.03）ng/L、（41.02±1.72）ng/L，对照组治疗后分别为（10.81±1.63）ng/L、（57.35±2.95）ng/L，组间差异均有统计学意义（t = 6.028, 7.281, 均 P < 0.05）。观察组治疗后胃黏膜评分、胃泌素浓度分别为（1.13±0.32）分、（8.97±2.33）pmol/L，对照组治疗后分别为（1.82±0.61）分、（5.36±1.52）pmol/L，组间差异均有统计学意义（t = 5.661, 6.024, 均 P < 0.05）。结论 替普瑞酮胶囊联合四联疗法应用在慢性萎缩性胃炎患者中能够提升临床疗效，减轻患者体内炎性反应程度，值得在临床推广应用。

【关键词】 胃炎，萎缩性；替普瑞酮；雷贝拉唑；替硝唑；克拉霉素；胶体果胶铋；白细胞介素 8；肿瘤坏死因子 α

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Curative effect of teprenone capsule combined with quadruple therapy in the treatment of chronic atrophic gastritis

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【Abstract】 Objective To analyze the curative effect of teprenone capsule combined with quadruple therapy in the treatment of chronic atrophic gastritis. Methods From June 2013 to June 2017, one hundred and fifty patients with chronic atrophic gastritis admitted to the First Hospital of Ninghai County were retrospectively selected. According to different treatment schemes, they were divided into control group and observation group, with 75 patients in each group. The control group was treated with routine quadruple therapy, and the observation group was treated with teprenone capsule combined with quadruple therapy. The effective rate of the two groups was compared. Results The total effective rate of the observation group was 97.33%, which was higher than 85.33% of the control group, the difference between the two groups was statistically significant (χ² = 3.197, P < 0.05). After treatment, the levels of interleukin-8 and tumor necrosis factor – alpha in the observation group were (7.04 ± 1.03) ng/L, (41.02 ± 1.72) ng/L, respectively, which in the control group were (10.81 ± 1.63) ng/L, (57.35 ± 2.95) ng/L, respectively, the differences between the two groups were statistically significant (t = 6.028, 7.281, all P < 0.05). The gastric mucosa score and the gastrin concentration in the observation group were (1.13 ± 0.32) points, (8.97 ± 2.33) pmol/L, respectively, which in the control group were (1.82 ± 0.61) points, (5.36 ± 1.52) pmol/L, respectively, the differences between the two groups were statistically significant (t = 5.661, 6.024, all P < 0.05). Conclusion Teprenone capsule combined with quadruple therapy can improve the clinical efficacy and reduce the degree of inflammation in patients with chronic atrophic gastritis, which is worthy of clinical application.

【Key words】 Gastritis, atrophic; Teprenone; Rabeprazole; Tinidazole; Claricid; Colloidal bismuth pectin; Interleukin-8; Tumor necrosis factor-alpha

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褐黄病性关节病一例并文献复习

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【摘要】目的 总结褐黄病性关节病的临床表现、诊断及治疗方法，提高基层医院医务人员对褐黄病性关节病的认识。方法 对青岛大学附属威海市立第二医院2016年9月收治的1例褐黄病性关节病的临床资料结合文献进行分析。结果 患者男性，65岁，因不慎摔伤致右侧股骨颈骨折入院，患者双侧耳软骨和对耳轮局部有蓝黑色色素沉着，术中切除的股骨头表面软骨变黑，圆韧带颜色发暗，髋关节部分关节囊呈暗黑，腰椎多节段椎间盘变窄，椎间盘硬化，实验室尿液硝酸银和氢氧化铵检查出现深褐色的变色，均证实了患者褐黄病性关节病的诊断。结论 应提高对褐黄病性关节病的认知，通过病史、临床表现、实验室及影像学检查，可明确诊断褐黄病性关节病，降低漏诊率。

【关键词】关节疾病；褐黄病；病例报告；综述文献(主题)

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Ochronotic arthritis: one case report and literature review

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【Abstract】Objective To summarize the clinical manifestation, diagnosis and treatment methods of ochronotic joint disease, thus to improve grassroots medical workers awareness of ochronotic arthritis. Methods The clinical data of 1 case of ochronotic arthritis in the Second Municipal Hospital of Weihai Affiliated to Qingdao University and literature data were analyzed. Results The male patient, 65 years old, because the right femoral neck fracture admitted to accidentally falls in patients with bilateral antihelix ear cartilage and local black pigmentation, resection of the femoral head cartilage surface, black, dark color round ligament, partial hip joint capsule was dark, multi segmental lumbar vertebral intervertebral space narrowing disc hardening, laboratory urine silver nitrate and ammonium hydroxide examination appear dark brown discoloration, confirmed the diagnosis of patients with ochronotic joint disease. Conclusion We should improve cognition of ochronotic joint disease, examination by medical history, clinical manifestations, laboratory and imaging, diagnosis of ochronotic arthritis, thus to reduce the rate of misdiagnosis.

【Key words】Joint diseases; Ochronosis; Case reports; Review literature as topic

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Effects of different anesthesia methods on cognitive function and inflammatory factors in elderly patients with lung cancer during perioperative period

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【Abstract】 Objective To explore the effects of different anesthesia methods on cognitive function and serum interleukin-6 (IL-6), interleukin-8 (IL-8) levels in elderly patients with lung cancer during perioperative period. Methods From March 2015 to March 2017, ninety elderly patients undergoing radical resection of lung cancer treated in Heji Hospital Affiliated to Changzhi Medical College were selected in the research. According to the different anesthesia methods, they were divided into inhalation anesthesia group (A group), general intravenous anesthesia group (B group) and epidural block anesthesia group (C group), with 30 cases in each group. The minimum mental state examination (MMSE) scores, cognitive dysfunction rate, serum IL-6 and IL-8 levels of the three groups before operation, one day after operation and three days after operation were compared. Results One day and three days after operation, the MMSE scores of C group were (25.62 ± 2.11) points, (27.12 ± 2.04) points, respectively, which were higher than those of group A [(22.61 ± 2.75) points, (25.78 ± 2.68) points] and B group [(22.34 ± 2.01) points, (25.81 ± 2.42) points], the differences were statistically significant \(t_{\text{A}} = 4.756, t_{\text{B}} = 6.165, t_{\text{B}} = 6.267, t_{\text{C}} = 6.204\), respectively, all \(P < 0.05\). One day and three days after operation, the cognitive dysfunction rates of C group were 26.67% (8/30), 6.67% (2/30), respectively, which were lower than those of A group [50.00% (15/30), 26.67% (8/30)] and B group [50.00% (15/30), 26.67% (8/30)], the differences were statistically significant \(\chi^2_{\text{A}} = 8.604, \chi^2_{\text{B}} = 8.329, \chi^2_{\text{C}} = 9.463\), respectively, all \(P < 0.05\). Conclusion Using epidural block anesthesia for elderly lung cancer patients undergoing coronary functional and hance the impact of cognitive function and inflammatory factors to the最小, which can suppress the cognitive function and inflammatory factors of elderly lung cancer patients undergoing surgery. Keywords: Lung cancer; Elderly; Anesthesia; IL-6; IL-8

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(42.15 ± 5.25) ng/mL were lower than those of A group [IL-6: (122.43 ± 18.41) ng/mL, (88.51 ± 10.42) ng/mL, IL-8: (64.53 ± 8.94) ng/mL, (55.62 ± 6.78) ng/mL] and B group [IL-6: (124.52 ± 20.10) ng/mL, (87.95 ± 9.34) ng/mL, IL-8: (63.27 ± 9.03) ng/mL, (54.62 ± 6.30) ng/mL], the differences were statistically significant (IL-6: \( t_{A\text{group}} = 5.030, t_{B\text{group}} = 2.163 \), \( t_{A\text{group}} = 5.222, t_{B\text{group}} = 2.060 \), all \( P < 0.05 \); IL-8: \( t_{A\text{group}} = 6.495, 8.604 \), \( t_{B\text{group}} = 5.881, 8.329 \), all \( P < 0.05 \)). **Conclusion** The influence of epidural block anesthesia on postoperative cognitive dysfunction in elderly patients with radical resection of lung cancer is minimal, which can inhibit the expression of inflammatory factors. It is better than the other two anesthesia methods, and it is worthy of radical operation for elderly patients with lung cancer.

**Key words** Lung neoplasms; Aged; Anesthesia, Inhalation; Anesthesia, General; Anesthesia, Epidural; Cognitive function; Inflammatory factors

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氨甲环酸联合鸡尾酒镇痛多点关节腔注射对初次单侧全膝关节置换患者术后康复的影响

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【摘要】  目的  评价氨甲环酸与鸡尾酒镇痛药混合后膝关节腔内多点注射对初次单侧全膝关节置换术(TKR)后康复的影响。方法  选择宁波市中医院2016年1月至2018年7月收治的因骨性关节炎(OA)行初次单侧全膝关节置换术的患者60例,采用随机数字表法分为三组,每组20例,A组:在术中缝合关节囊前分2次接受氨甲环酸与鸡尾酒镇痛药混合液关节腔多点注射;B组:在术中假体安装结束、缝合关节囊后接受氨甲环酸关节腔注射;C组:在术中假体安装结束、缝合关节囊后向关节腔注射0.9%氯化钠注射液。比较三组患者术后引流量、总失血量、输血例数,术后2周下肢深静脉血栓(DVT)及肺血栓栓塞(PE)发生情况,术后24h膝关节活动度,术后24h静息、活动时疼痛视觉模拟评分(VAS评分)。结果  A、B两组术后引流量[A组: (77.05±11.13) mL, B组: (75.15±11.42) mL],总失血量[A组: (292.80±28.36) mL, B组: (286.45±36.60) mL],输血例数(A组1例, B组1例)均少于C组[引流量: (136.85±11.78) mL, 总失血量: (315.12±48.08) mL, 输血7例](术后引流量: F = 187.876, P = 0.000; 术后总失血量: F = 38.494, P = 0.000; 输血: χ² = 9.412, P = 0.009), A、B两组之间差异无统计学意义(P > 0.05); A、B、C三组术后2周均未发现DVT形成,均无有症状PE持续出现,差异均无统计学意义(均 P > 0.05); A、B、C三组术后24 h膝关节活动度分别为(71.05±8.05)°, (67.40±8.45)°, (60.90±10.98)°,差异有统计学意义(F = 6.175, P = 0.004); A、B、C三组术后24 h静息VAS评分分别为(3.35±1.04)分, (4.45±1.19)分, (5.65±0.93)分,活动时VAS评分分别为(4.45±1.19)分, (5.35±0.93)分, (6.45±0.89)分,差异均有统计学意义(静息: F = 24.313, P = 0.000; 活动: F = 19.569, P = 0.000)。结论  氨甲环酸与鸡尾酒镇痛药混合后膝关节腔内多点注射能够有效减少围术期患者失血与输血,并不增加术后血栓形成风险,且其能够更加有效减轻患者术后早期疼痛,改善早期膝关节活动。

【关键词】  氨甲环酸; 镇痛药,非麻醉; 注射,关节内; 关节成形术,置换,膝; 疼痛,手术后; 活动范围,关节; 康复; 临床对照试验

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Effect of multi-point intra-articular injection of tranexamic acid combined with cocktail analgesics on postoperative rehabilitation of patients undergoing primary unilateral total knee arthroplasty

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氯吡格雷联合阿司匹林治疗进展性脑梗死临床观察

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【摘要】目的：探讨氯吡格雷联合阿司匹林治疗进展性脑梗死的临床疗效。方法：选取 2012 年 1 月至 2016 年 1 月在黄石市第二医院神经内科住院治疗的进展性脑梗死患者 106 例为研究对象，采用随机数字表法分为对照组（55 例）和观察组（51 例），两组在常规治疗基础上，对照组口服阿司匹林肠溶片 100 mg, 1 次/d；观察组采用氯吡格雷片 75 mg 和肠溶阿司匹林片 100 mg 口服，1 次/d，疗程 14 d。评估两组患者神经功能缺损程度、神经功能障碍康复程度。结果：治疗后 14 d，观察组美国国立卫生研究院卒中量表（NIHSS）评分（8.25±2.76）分，优于对照组的（10.14±2.17）分（P=0.021）；治疗后 28 d，观察组日常生活活动能力量表 Barthel 指数（72.31±6.77），优于对照组的（64.35±4.63）（P=0.017）。结论：氯吡格雷联合阿司匹林治疗进展性脑梗死的临床疗效优于单用阿司匹林。

【关键词】脑梗死；氯吡格雷；阿司匹林；药物疗法，联合；脑卒中；抗血小板聚集；临床对照研究；预后
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Clinical observation of clopidogrel combined with aspirin in the treatment of progressive cerebral infarction

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血管内介入栓塞术治疗脑动脉瘤患者的疗效及安全性分析

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【摘要】目的 探讨脑动脉瘤患者血管内介入栓塞术治疗的疗效及安全性。方法 选取阳泉市第一人民医院2012年1月至2017年2月收治的脑动脉瘤患者53例,均予以血管内介入栓塞术治疗,统计手术优良率、神经功能障碍发生率,比较治疗前、末次随访昏迷程度(GCS评分)、日常生活能力(BI)评分,比较治疗前、治疗后7d后血清胱抑素C(CysC)、金属基质蛋白酶-9(MMP-9)水平。结果 手术优良率为83.02%(44/53);治疗后7d后血清CysC、MMP-9水平低于治疗前,差异均有统计学意义(t=22.809、44.316,均P<0.05);末次随访GCS、BI评分高于治疗前,差异均有统计学意义(t=12.548、38.779,均P<0.05);术后神经功能障碍总发生率为3.78%(2/53)。结论 脑动脉瘤患者予以血管内介入栓塞术治疗效果显著,可显著改善其昏迷程度及日常生活能力,降低其血清CysC、MMP-9水平,且安全性较高。

【关键词】脑动脉瘤;血管内介入栓塞术;神经功能障碍;胱抑素C;金属基质蛋白酶-9

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Analysis of the efficacy and safety of intravascular interventional embolization for 53 patients with cerebral aneurysm
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超剂量应用黄芪抗肿瘤的调查分析
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【摘要】 目的  对某院临床上超剂量使用黄芪的现象进行初步调查,并分析其合理性。方法 抽取德清县人民医院2016~2017年中草药处方1770张,统计肿瘤患者的处方总数,并调查分析所调查的肿瘤患者处方中黄芪的用量情况。结果 所调查的处方中,有744张处方为各种肿瘤患者处方,在所有肿瘤患者处方中,黄芪是使用频率较高的中药,最高剂量为120 g,是药典最高剂量的4倍。所调查的所有处方中黄芪的用量为(34.54±14.91)g,所调查的肿瘤患者处方中黄芪的用量为(51.85±27.61)g。结论 目前临床上存在超剂量使用黄芪抗肿瘤的现象。

【关键词】 中草药; 黄芪; 抗肿瘤药,植物; 剂量效应关系,药物; 调查

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Investigation and analysis of anti-tumor effect of overdose application of Astragalus membranaceus
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康柏西普玻璃体腔内注射联合小梁切除术对新生血管性青光眼患者术后生活质量的影响

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【摘要】目的 探讨小梁切除术联合康柏西普玻璃体腔内注射对新生血管性青光眼患者术后生活质量的影响。方法 选取2015年2月至2017年3月运城市中心医院收治的新生血管性青光眼患者107例，均为单侧发病。采用随机数字表法分组，对照组53例予以康柏西普玻璃体腔内注射治疗，研究组54例在对照组基础上联合小梁切除术治疗，分析比较两组视力分布情况、眼压、前房渗出眼数、功能性滤过泡眼数、复发率及生活质量（SF-36）评分。结果 研究组视力分布情况优于对照组，差异有统计学意义（u=2.482，P<0.05）；研究组治疗后1周、2周、1个月、3个月眼压低于对照组，差异均有统计学意义（t=5.567, 5.264, 5.187, 5.236, 均P<0.05）；研究组治疗后1个月、3个月前房渗出眼数比例（35.19%、38.89%）低于对照组（60.38%、64.15%），研究组治疗后1个月、3个月功能性滤过泡眼数比例（77.78%、83.33%）高于对照组（54.72%、58.49%），差异均有统计学意义（χ²=6.805, 6.833, 6.371, 8.022, 均P<0.05）；研究组治疗后3个月、6个月复发率（1.85%、3.70%）低于对照组（22.64%、26.42%），差异均有统计学意义（χ²=10.831, 10.848, 均P<0.05）；研究组治疗后SF-36评分（81.26±9.29）分，高于对照组的（72.47±8.48）分，差异有统计学意义（t=4.762, P=0.000）。结论 新生血管性青光眼患者予以小梁切除术与康柏西普玻璃体腔内注射联合治疗，可显著降低眼压、前房渗出眼数及复发率，提高视力，功能性滤过泡眼数及生活质量。

【关键词】小梁切除术；康柏西普；注射；青光眼；视力

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Effect of intravitreal injection of conbercept combined with trabeculectomy on postoperative quality of life in patients with neovascular glaucoma

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血栓弹力图对剖宫产术后血栓形成的早期预测价值

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【摘要】 目的 比较剖宫产术后血栓形成产妇组与未形成血栓组凝血指标和血栓弹力图(TEG)参数的差异。方法 选取2016年1月至2017年10月寿光市人民医院产科剖宫产术后发生血栓栓塞患者共24例(病例组)，未发生血栓栓塞性疾病的孕产妇24例作为对照组，分析两组常规凝血指标和血栓弹力图检测结果的差异。结果 病例组凝血形成时间(K)、最大振幅(MA)、凝血指数(CI)分别为(1.29±0.46)min、(70.9±4.23)mm、(2.96±1.26)，与对照组相比，K值缩短，MA增宽，凝血指数高，差异均有统计学意义(t=2.002，-5.366，-2.583，均P<0.05);病例组凝血反应时间(R)、凝固角(Angle)值分别为(4.18±1.1)mim、(70.28±5.05)deg，与对照组差异均无统计学意义(均P>0.05);而传统凝血指标比较，病例组纤维蛋白原(FIB)为(4.09±0.52)g/L，低于对照组，凝血酶时间(TT)为(15.4±1.31)s，较对照组延长，差异均有统计学意义(t=2.327，-2.480，均P<0.05);两组中D-二聚体(DD)、凝血酶原时间(PT)、PT国际标准化比值(INR)、部分凝血活酶时间(APTT)、血小板(PLT)差异均无统计学意义(均P>0.05)。结论 相比于传统凝血检查，血栓弹力图在评估术后血栓形成风险中更有优势，能及时有效指导临床治疗，值得临床推荐。

【关键词】 剖宫产术; 血栓形成; 血栓前状态; 下肢深静脉血栓; 血栓弹力图; 凝血指标; 早期预防; 妊娠并发症

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The early prevention of thrombosis after cesarean section with thomboelastogram
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【摘要】目的研究并探讨健康教育在提高小儿哮喘护理质量中的应用价值。方法选择2014年1月至2017年1月长治医学院附属和济医院收治的哮喘患儿100例，采用随机数字表法分为两组各50例。对照组采取常规护理干预，观察组在对照组基础上施行健康教育，比较两组哮喘控制效果、症状缓解时间、治疗依从性、近亲属护理满意度、近亲属心理状态评分。结果观察组哮喘控制总有效率达到96%，相比于对照组更高（P<0.05）；观察组症状缓解时间短于对照组（P<0.05）；观察组的治疗依从性较对照组显著增高（P<0.05）；观察组近亲属的护理满意度为94%，高于对照组的80%（P<0.05）；两组近亲属护理后的焦虑评分、抑郁评分相比于护理前均显著降低（均P<0.05），而在护理后，观察组近亲属各项心理状态评分均低于对照组近亲属（P<0.05）。结论针对小儿哮喘患儿施行健康教育，可有效提高患儿的治疗依从性，保证其哮喘控制效果，促进其临床症状尽快缓解，还可改善患儿近亲属心理状态，提高患儿近亲属对护理服务的满意程度。

【关键词】哮喘；健康教育；护理；儿童；病人满意度

Application value of health education in improving nursing quality of children with asthma

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个性化护理对放化疗肺癌患者生活质量的影响

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【摘要】目的 探讨个性化护理对放化疗肺癌患者生活质量的影响。方法 选取 2016 年 1 月至 2018 年 6 月中国医科大学附属第一医院收治的肺癌放化疗患者 100 例，采用计算机单盲分组法随机分为两组，每组 50 例。对照组采取常规护理，观察组采取个性化护理。比较两组癌因性疲乏评分、疼痛评分、睡眠质量指数、生活质量评分、护理满意度。结果 干预后，观察组的癌因性疲乏评分(3.07±1.47)分，疼痛评分(38.41±7.52) 分，睡眠质量指数(10.76±2.92)分均低于对照组(t=5.663, 5.055, 5.148, 均 P<0.05)；观察组的功能量表评分(78.56±9.71) 分，症状量表评分(71.52±7.85) 分，总体健康状况量表评分(77.46±8.95)分均优于对照组(t=5.127, 5.430, 5.191，均 P<0.05)。观察组的护理满意度为92%，高于对照组的76%(χ² = 4.762, P<0.05)。结论 在肺癌患者放化疗过程中采取个性化护理的评价护理，可有效减轻其疲乏，疼痛，改善其睡眠质量及生活质量，还可提高患者对护理服务的满意度。

【关键词】肺肿瘤；护理；放射疗法；抗肿瘤联合化疗方案；生活质量；疲劳；病人满意度

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Influence of individualized nursing on quality of life of lung cancer patients with radiotherapy and chemotherapy

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Fund program: Natural Science Foundation of Liaoning Province(201602290)

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高血压合并脑出血患者急诊护理效果观察

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【摘要】目的探讨高血压合并脑出血患者的急诊护理方法及效果。方法选择高血压合并脑出血患者 150 例,采用随机数字表法分为两组,每组 75 例,对照组实施常规急诊护理,观察组实施系统化急诊护理,比较两组抢救成功率、分诊评估时间、转诊时间、总抢救时间,神经功能缺损评分、格拉斯哥昏迷指数,并比较两组近亲属负性情绪评分,护理满意度。结果观察组抢救成功率为 97.33%,对照组为 88.00%,组间差异有统计学意义(χ² = 4.807, P < 0.05)。观察组分诊评估时间(1.70 ± 0.62) min、转诊时间(8.97 ± 3.81) min、总抢救时间(36.52 ± 8.71) min,均短于对照组的(2.43 ± 0.89) min、(15.86 ± 6.92) min、(49.17 ± 12.64) min (t = 5.829, 15.524, 7.137, 均 P < 0.05)。护理后,观察组神经功能缺损评分(17.59 ± 2.98)分,低于对照组的(22.17 ± 4.06)分(t = 7.876, P < 0.05),格拉斯哥昏迷指数(12.49 ± 2.16)分,高于对照组的(10.32 ± 2.05)分(t = 6.311, P < 0.05)。护理后,观察组近亲属的焦虑评分(36.58 ± 6.92)分、抑郁评分(34.59 ± 5.82)分,均低于对照组的(45.69 ± 7.37)分、(43.25 ± 6.05)分(t = 7.804, 8.934, 均 P < 0.05)。观察组近亲属对护理总满意率为 96.00%,对照组为 86.67%,组间差异有统计学意义(χ² = 4.127, P < 0.05)。结论在高血压合并脑出血患者急诊抢救时实施系统化护理,可有效提高患者的抢救效率,缩短其急诊抢救时间,有利于促使患者病情尽快得到控制;同时,还可使患者近亲属情绪得到改善,提高患者近亲属对护理服务的满意率。

【关键词】 高血压; 脑出血; 急诊护理

基金项目:浙江省永康市科技局项目(201721)
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Observation on the effect of emergency nursing of hypertensive patients with cerebral hemorrhage

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Fund program: Science and Technology Planning Project of Yongkang City, Zhejiang Province (201721)
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系统护理干预对行实时动态血糖监测危重糖尿病患者的干预效果分析

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【摘要】目的 讨论系统护理干预对行实时动态血糖监测危重糖尿病患者的干预效果,为临床提供指导。方法 选择行实时动态血糖监测的危重糖尿病患者 90 例为观察对象,采用随机数字表法分为两组,对照组 42 例应用常规护理干预,观察组 48 例应用系统护理干预,比较两组患者的满意度、治疗依从性、焦虑评分。结果 观察组患者的满意度为 97.92%,高于对照组的 78.57%(χ^2=8.487,P<0.05);观察组患者的治疗依从率为 95.83%,高于对照组的 80.95%(χ^2=5.022,P<0.05);观察组护理后的焦虑评分为 (9.52±3.20)分,低于对照组的 (14.29±2.26)分(t=8.058,P<0.05)。结论 对行实时动态血糖监测危重糖尿病患者实施系统护理能显著缓解患者的焦虑状况,提高患者的满意度及治疗依从性。

【关键词】糖尿病;血糖自我监测;临床护理研究
【基金项目】山西省卫生和计划生育委员会中医科研课题(2014ZY06)

Intervention effect of systematic nursing intervention on patients with critical diabetes mellitus monitored by real time dynamic blood glucose monitoring

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Fund program: Research Project of Health and Family Planning Commission of Chinese Medicine of Shanxi Province (2014ZY06)
腹腔镜联合胆道镜治疗胆总管结石患者的围术期护理效果评价

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【摘要】目的 探讨围术期护理在行腹腔镜联合胆道镜治疗的胆总管结石患者中的应用效果。方法选取2015年2月至2017年2月温州市龙港医院收治的65例肝外胆管结石患者，采用随机数字表法分为干预组35例和对照组30例。干预组给予围术期护理，对照组给予常规护理。比较两组患者手术相关指标（手术时间、术后胃肠道恢复时间、腹腔引流时间、术后住院时间、进食时间）、术后不良反应发生情况及护理满意度。结果干预组仅手术时间显著长于对照组（t = 4.064, P < 0.05），而在术后胃肠道恢复时间、腹腔引流时间、术后住院时间、进食时间方面均显著短于对照组（t = 6.633, 5.282, 8.053, 9.217, P < 0.05）。干预组术后并发症发生率为8.4%（3/35），显著低于对照组的30.0%（9/30）（χ^2 = 4.927, P < 0.05）。干预组护理总满意率为94.2%（33/35），显著高于对照组的70.0%（21/35）（χ^2 = 6.776, P < 0.05）。结论围术期护理能显著提高行腹腔镜联合胆道镜治疗的胆总管结石患者的手术效果，促进术后胃肠道功能的恢复，且不良反应较少，护理满意度较高，值得临床推广应用。

【关键词】腹腔镜；胆道镜；胆总管结石；胆总管探查；不良反应；手术后并发症；围术期护理；病人满意度

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Effect of perioperative nursing in choledocholithiasis patients treated by laparoscopy and choledochoscopy

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综合护理干预在蓝光照射治疗新生儿黄疸中的效果分析

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【摘要】目的 探讨综合护理干预在蓝光照射治疗新生儿黄疸中的应用效果。方法 选择建德市第一人民医院新生儿科2014年5月至2017年9月收治的新生儿黄疸患儿87例,采用随机数字表法分为对照组40例,观察组47例,两组患儿均接受蓝光照射治疗。治疗期间,对照组、观察组分别给予常规护理干预、综合护理干预,比较两组患儿的治疗效果、黄疸消退时间、排便次数及不良反应,并比较两组患儿近亲属的负性情绪评分、护理满意度。结果 观察组总有效率为95.74%,高于对照组的82.50%(χ² =4.087, P<0.05);观察组黄疸消退时间(2.87±0.64)d,短于对照组的(3.69±0.75)d(t=5.503, P<0.05);观察组治疗后24 h内排便次数(1.65±0.38)次,多于对照组的(1.29±0.30)次(t=4.842, P<0.05)。观察组不良反应发生率为4.26%,对照组为17.50%,组间差异有统计学意义(χ² =4.087, P<0.05)。护理后,观察组近亲属焦虑评分(36.58±6.92)分,抑郁评分(34.59±5.82)分,均低于对照组的(45.69±7.37)分、(43.25±6.05)分(t=5.959,6.792,均 P<0.05);观察组近亲属护理总满意率为95.74%,对照组为80.00%,组间差异有统计学意义(χ² =5.266, P<0.05)。结论 在新生儿黄疸蓝光照射治疗期间,应用综合护理干预可有效保证黄疸治疗效果,促进黄疸消退和排便,还可减少不良反应,有利于消除患儿近亲属的负性情绪,提高对护理服务的评价。

【关键词】黄疸,新生儿; 蓝光照射; 护理; 病人满意度

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Effect of comprehensive nursing intervention on neonate jaundice treated by blue light

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Fund program; Science and Technology Planning Project of Jinhua City, Zhejiang Province(2015-3-101)

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【摘要】调节性 B 细胞是 B 细胞的一种亚群,主要通过分泌白细胞介素-10,转化生长因子-β 等细胞因子发挥负向调节作用而参与免疫耐受，抑制炎性反应。本文主要综述调节性 B 细胞的表型、分类、相关分子、功能等在系统性红斑狼疮、系统性硬化症、银屑病及天疱疮等自身免疫性皮肤病中的研究进展。并探讨调节性 B 细胞靶向疗法的前景及意义。

【关键词】B 淋巴细胞; 白细胞介素 10; 免疫系统疾病; 皮肤病学

Research progress of regulatory B cells in autoimmune skin diseases

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【Abstract】Regulatory B cells is a subgroup of B cells, they mainly secrete interleukin – 10, produce factors, such as transforming growth factor – β and they exert a negative regulatory role in immune tolerance to inhibit the inflammatory response. This paper mainly summarizes the research progress of regulatory B cells’ phenotypes, classifications and function of related molecules in autoimmune skin diseases, such as systemic lupus erythematosus, systemic sclerosis, psoriasis and pemphigus. Last but not least, we will discuss the prospect and significance of regulatory B cells targeted therapies.

【Key words】B – Lymphocytes; Interleukin – 10; Immune system diseases; Dermatology