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广场舞对绝经后女性骨密度及髋膝关节炎的影响研究

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【摘要】目的 探讨广场舞对绝经后女性骨密度及髋膝关节炎的影响。方法 以2014年1月至2015年1月跳广场舞的绝经后女性为研究对象，按年龄分组，每组人群予腰椎1~3椎体的骨密度检测，分析每个椎体的骨密度值与其对应年龄的差异；分析年龄与骨密度的关系。1年后测量该组女性腰椎的骨密度及观察髋膝关节炎发生情况，观察广场舞对绝经后女性骨密度的影响及髋膝关节炎发生的影响。结果 各年龄组腰椎骨密度值差异有统计学意义(F=74.213,P<0.01)，其中45~60岁年龄段腰1~3椎体的骨密度值均呈递减趋势，与年龄呈中度负相关(r=0.978)。广场舞锻炼1年后，45~50岁组、>50~55岁组、>55~60岁组、>60~65岁组、>65~70岁组、>70岁组腰1~3椎体骨密度值分别为(149.51±31.65)mg/cm³、(118.98±34.55)mg/cm³、(103.56±23.44)mg/cm³、(86.88±34.21)mg/cm³、(69.89±29.72)mg/cm³、(61.22±34.21)mg/cm³，腰1~3椎体的骨密度值均有所提高，45~50岁组、>50~55岁组、>55~60岁组骨密度值提高显著(F=8.012,3.567,4.774，均P<0.05)，跳广场舞对于绝经后女性髋膝关节炎的发生情况无明显影响。结论 广场舞运动能有效改善该年龄段女性的骨密度，而对其他年龄段女性的骨密度改善不明显，跳广场舞对绝经后女性髋膝关节炎的发生率无影响。

【关键词】舞蹈；舞蹈疗法；身体锻炼；自体锻炼；女性；绝经后期；骨密度；关节炎

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Influence of square dance on the bone mineral density and osphyarthrosis and gonitis of postmenopausal women

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【Abstract】Objective To investigate the effect of square dance on bone mineral density and osphyarthrosis and gonitis in postmenopausal women. Methods The postmenopausal women who danced on a square in the Second Hospital of Wuxi Affiliated to Nanjing Medical University from January 2014 to January 2015 were selected and divided into different groups by age. Each group of subjects received the bone mineral density test of their lumbar vertebral body 1~3, so as to analyze the difference between the bone mineral density of each vertebral body and the corresponding age, as well as the relationship between the age and the bone mineral density. The bone mineral density of their lumbar vertebrae was measured one year later, and the incidence rates of osphyarthrosis and gonitis were observed, thus the influence of square dancing on bone mineral density and the incidence of osphyarthrosis and gonitis of postmenopausal women was studied. Results There was statistically significant difference in the bone mineral density
for lumbar vertebrae of different age groups ($F = 74.213, P < 0.01$), among which the bone mineral density of lumbar vertebrae 1 ~ 3 in the age group of 45 ~ 60 showed a decreasing trend, with a medium negative correlation with age ($r = 0.978$). After dancing on a square for 1 year, the bone mineral density of lumbar vertebral body 1 ~ 3 of subjects in the age group of 45 ~ 50, the age group of > 50 ~ 55, the age group of > 55 ~ 60, the age group of > 60 ~ 65, the age group of > 65 ~ 70 and the age group of over 70 were (149.51 ± 31.65) mg/cm$^3$, (118.98 ± 34.55) mg/cm$^3$, (103.56 ± 23.44) mg/cm$^3$, (86.88 ± 34.21) mg/cm$^3$, (69.89 ± 29.72) mg/cm$^3$, (61.22 ± 34.21) mg/cm$^3$, respectively, which increased slightly; the bone mineral density of the age group of 45 ~ 50, the age group of > 50 ~ 55 and the age group of > 55 ~ 60 increased significantly ($F = 8.012, 3.567, 4.774$, all $P < 0.05$). Square dancing had no significant effect on the incidence of ospharyngitis and gonitis of postmenopausal women. **Conclusion** The age group of 45 ~ 60 is the most obvious period of bone mineral density decline for women. Square dancing can effectively improve the bone mineral density of postmenopausal women in this age group, but has no obvious effect on the improvement of the bone mineral density of women in other age groups. Square dancing has no effect on the incidence of ospharyngitis and gonitis of postmenopausal women.

**[Key words]** Dancing; Dance therapy; Exercise movement techniques; Autogenic training; Female; Postmenopause; Bone density; Arthritis

**Fund program**: National Natural Science Foundation (81602864); Youth Medical Talents Funding Project of Jiangsu Province (QNRC2016149)

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牛磺酸对力竭运动大鼠骨骼肌抗氧化能力和三磷酸腺苷活性的影响

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【摘要】目的 探索牛磺酸对力竭运动后大鼠骨骼肌超氧化物歧化酶(SOD)、丙二醛(MDA)、钠钾泵(Na\(^+\)-K\(^-\)-ATP酶)活性和BCL2-Associated X的蛋白质/B淋巴细胞瘤-2(Bax/Bcl-2)的影响。方法 选择30只6个月大龄SD雄性大鼠为研究对象,采用随机数字表法分为正常组、对照组、牛磺酸组,各10只。正常组:正常适应性喂养1周,适应性训练3 d,不施加其他措施,正常饮食;对照组:正常适应性喂养1周,适应性训练3 d后进行力竭运动2 d;牛磺酸组:在对照组基础上每天予以牛磺酸200 mg/kg灌胃。测定力竭运动后2 d大鼠骨骼肌中SOD、MDA、Na\(^+\)-K\(^-\)-ATP酶活性和Bax/Bcl-2的值。结果 力竭运动2 d后,对照组骨骼肌SOD浓度为(146.58±13.42) U/mg prot,低于牛磺酸组的(143.81±15.93) U/mg prot,差异有统计学意义(t=2.356, P<0.05);对照组骨骼肌MDA浓度为(1.97±0.20) nmol/mg prot,高于牛磺酸组的(1.22±0.19) nmol/mg prot,差异有统计学意义(t=3.905, P<0.05);对照组骨骼肌Na\(^+\)-K\(^-\)-ATP酶活性为(2.42±0.67) U/mg prot,低于牛磺酸组的(5.74±1.15) U/mg prot,差异有统计学意义(t=3.419, P<0.05)。结论 力竭运动前服用牛磺酸可增加大鼠清除自由基能力,减少氧化应激产物的生成,保护Na\(^+\)-K\(^-\)-ATP酶活性,有利于维持细胞内外环境的稳定,从而预防骨骼肌的损伤。

【关键词】牛磺酸; 运动试验; 肌肉纤维,骨骼; 氧化耦合; 腺苷三磷酸; 大鼠

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Effect of taurine on the antioxidiant capacity and ATP activity of skeletal muscle in rats with exhaustive exercise
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【Abstract】Objective To explore the effect of taurine on the activity of SOD, MDA, Na\(^+\)-K\(^-\)-ATP enzyme and Bax/Bcl-2 in skeletal muscle of rats after exhaustive exercise. Methods Thirty male SD rats (6 months old) were randomly divided into normal group, control group and taurine group, with 10 rats in each group. The normal group was given routine feeding for 1 week, adaptive training for 3 days, without applying other measures. The control group was given routine feeding for 1 week, after adaptive training for 3 days underwent exhaustive exercise for 2 days. The taurine group was given 200 mg/kg taurine gavage daily on the basis of the control group. The activity of SOD, MDA, Na\(^+\)-K\(^-\)-ATP and Bax/Bcl-2 were measured in the skeletal muscle after 2 days exhaustive exercise. Results After 2 days exhaustive exercise, the SOD concentration in skeletal muscle of the control group was (146.58±13.42) U/mg prot, which was lower than that in the taurine group [(143.81±15.93) U/mg prot] (t=2.519, P<0.05). The MDA concentration in the skeletal muscle of the control group was (1.97±0.20) nmol/mg prot, which was higher than that in the taurine group [(1.22±0.19) nmol/mg prot] (t=3.905, P<0.05). The ratio of SOD/MDA in the control group was (60.86±20.38), which was lower than that in the taurine group [(120.87±23.51)] (t=4.071, P<0.05). The activity of Na\(^+\)-K\(^-\)-ATP in the control group was (2.42±0.67) U/mg prot, which was lower than that in the taurine group [(5.74±1.15) U/mg prot] (t=3.905, P<0.05). The ratio of...
Bax/Bcl-2 in the control group was (1.62 ± 0.17), which was higher than that in the taurine group [(0.96 ± 0.14)] (t = 3.419, P < 0.05). Conclusion Taking taurine before exhaustive exercise can increase the ability of scavenging free radicals, reduce the production of oxidative stress products and protect the activity of Na⁺−K⁺−ATP enzyme. It is benefit for maintain the stability of cell environment and prevent skeletal muscle injury.

【Key words】 Taurine; Exercise test; Muscle fibers, skeletal; Oxidative coupling; Adenosine triphosphate; Rats

Fund program: General Project of Zhejiang Health Department (2014KYB227)
骨水泥强化椎弓根螺钉固定治疗骨质疏松性胸腰椎骨折的效果及对患者生存质量的影响

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【摘要】目的 探讨骨水泥强化椎弓根螺钉固定治疗骨质疏松性胸腰椎骨折的疗效及对患者生存质量的影响。方法 选取2015年4月至2017年6月山西省煤炭中心医院收治的骨质疏松性胸腰椎骨折患者60例为研究对象,依据治疗方式不同予以分组,每组30例。对照组予经皮穿刺椎体成形术,观察组予骨水泥强化椎弓根螺钉固定治疗。统计并比较两组患者术前和术后6个月健康和功能评分、生活满意度评分、社会经济因素评分、自我概念评分、视觉模拟评分法(VAS)评分、Cobb角。结果 观察组患者术后6个月健康和功能评分、生活满意度评分、社会经济因素评分、自我概念评分[(60.2±6.0)分, (39.8±4.0)分, (32.0±3.5)分, (47.7±4.0)分]均高于对照组[(48.0±5.5)分, (32.4±3.0)分, (29.3±2.0)分, (44.0±3.3)分],差异均有统计学意义(t=8.989, 8.106, 3.668, 3.908,均P<0.05);观察组患者术后6个月VAS评分[(1.5±0.4)分]低于对照组[(2.3±0.8)分],差异有统计学意义(t=4.898, P<0.05);观察组患者术后6个月Cobb角[(5.3±1.0)°]低于对照组[(14.0±2.2)°],差异有统计学意义(t=19.718, P<0.05)。结论 对骨质疏松性胸腰椎骨折患者实施骨水泥强化椎弓根螺钉固定治疗临床效果显著,并可明显改善患者生存质量。

【关键词】骨质疏松性骨折;脊柱骨折;骨钉;骨水泥;椎弓根螺钉;治疗结果;生活质量

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Effect of cement reinforced pedicle screw fixation in the treatment of osteoporotic thoracolumbar vertebrae fracture and its effect on quality of life

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【Abstract】Objective To observe and evaluate the clinical effect of cement reinforced pedicle screw fixation in the treatment of osteoporotic thoracolumbar fractures and its effect on the quality of life. Methods From April 2015 to June 2017, 60 patients with osteoporotic thoracolumbar fractures were selected from Shanxi Coal Central Hospital. The patients were divided into two groups according to different treatment method, with 30 cases in each group. Routine percutaneous vertebroplasty was performed in the control group, and bone cement reinforced pedicle screw fixation was performed in the observation group. The scores of health and function, life satisfaction score, the scores of social and economic factors, self – concept score, visual analogue scale (VAS) and Cobb’s angle were calculated and evaluated before operation and 6 months after operation in the two groups. Results The scores of health and function, life satisfaction, social and economic factors, self – concept in the observation group at 6 months after operation were [(60.2±6.0) points, (39.8±4.0) points, (32.0±3.5) points, (47.7±4.0) points], respectively, which were significantly higher than those in the control group[(48.0±5.5) points, (32.4±3.0) points, (29.3±2.0) points, (44.0±3.3) points], the differences were statistically significant (t=8.988, 10.6, 3.668, 3.908, all P < 0.05). The VAS score in the observation group was significantly lower than that in the control group at 6 months after operation[(1.5±0.4) points vs. (2.3±0.8) points] (t=4.898, P < 0.05). The Cobb angle of the observation group[(5.3±1.0)°] was significantly lower than that of the control group[(14.0±2.2)°] at 6 months after operation (t=19.718, P < 0.05). Conclusion Treatment of osteoporotic thoracolumbar vertebrae fracture with bone cement reinforced pedicle screw fixation has better clinical effect and can obviously improve the quality of life.

【Key words】Osteoporotic fractures; Spinal fractures; Bone nails; Bone cement; Pedicle screw; Treatment outcome; Quality of life

【Fund program】Research Project of Shanxi Health and Family Planning Commission (2015025)
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【摘要】 目的 探讨枪式复位钳辅助复位和股骨近端防旋髓内钉(PFNA)内固定治疗内外向难复性股骨转子间骨折的初步疗效,评估该技术的复位效果和对骨折愈合的影响。方法 选择浙江大学丽水医院(丽水市中心医院)2012年1月至2016年12月收治的内外向不稳、难复性股骨转子间骨折患者21例为研究对象,其中男12例,女9例;年龄范围51~91岁,平均76.7岁;均为新鲜闭合性不稳定骨折;根据国际内固定研究协会(AO/ASIF)分型:3.1-A1型6例,3.1-A2型11例,3.1-A3型4例。采用枪式复位钳辅助复位和股骨近端防旋髓内钉内固定治疗,对其围手术期及短期随访的疗效、功能恢复情况等进行分析。结果 手术平均时间为61.7min(40~110min),出血量平均为131.7mL(45~450mL),住院平均时间为13.6d(7~29d)。围术期无严重并发症或原有合并症加重。获得随访时间10~18个月,平均13.3个月,末次随访时所有股骨转子间骨折愈合,愈合时间平均为13.2周(10~17周)。无内固定物失效、螺旋刀片切割股骨头、髋内翻畸形及再发骨折等发生。末次随访时按Harris髋关节功能评分,优6例,良13例,可2例,优良率90.5%。结论 对内外向难复性股骨转子间骨折,采用枪式复位钳辅助复位和PFNA内固定治疗,可获得满意的复位和较好的功能,手术损伤小,康复快。

【关键词】 骨折固定术,髓内;髋骨折;外科手术,微创性

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Effect of Collinear clamp assisted reduction and proximal femoral nail antirotation in the treatment of medial – lateral irreducible intertrochanteric fractures of femur

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【Abstract】 Objective To investigate the primary clinical efficacy of Collinear clamp assisted reduction and proximal femoral nail antirotation(PFNA) in the treatment of medial – lateral irreducible intertrochanteric fractures. Methods From January 2012 to December 2016, a total of 21 cases of medial – lateral irreducible intertrochanteric fractures of femur who were treated with Collinear clamp assisted reduction and PFNA in Lishui Hospital of Zhejiang University were selected. There were 12 males and 9 females, with a mean age of 76.7 years (ranged 51 to 91). According to Arbeitsge – meinschaft für Osteosynthesefragen/The Association for the Study of Internal Fixation(AO/ASIF) classification, there were 6 cases of type 31 – A1 fractures, 11 cases of type 31 – A2 fractures, 4 cases of type 31 – A3 fractures. All patients were followed and the clinical results and functional rehabilitation were evaluated during perioperative period and after short term followed – up. Results The mean operation time was 61.7min (ranged 40 – 110min). The mean intraoperative blood loss was 131.7mL (ranged 45 – 450mL). The average hospitalization days was 13.6d(ranged 7 – 29d). There were no severe complications and exacerbation of coexisting medical disease. All patients were followed up for 10 to 18 months (average 13.3 months) after treatment. The fracture union was obtained in all patients at the final follow – up. No poor healing, failure of internal fixation, cut – out of proximal screws, varus deformity, re – fractures occurred after operation. The clinical results were evaluated according to Harris hip score, 6 cases achieved excellent results, 13 cases were good, 2 cases were fair at last follow – up. The excellent and good rate of the hip joint function was 90.5%. Conclusion Surgical treatment of medial – lateral irreducible intertrochanteric fractures with Collinear clamp assisted reduction and PFNA can result in excellent
reduction and function. This technique has less injury and faster recovery. However, the long-term effect needs to evaluate by follow-up.

【Key words】 Fracture fixation, intramedullary; Hip fractures; Surgical procedures, minimally invasive

Fund program: Medical and Health Science and Technology Program of Zhejiang Province (2015KYB450); High-level Personnel Training Funded Projects of Lishui Science and Technology Bureau (2016RC19)

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封闭式负压引流技术在手外伤感染创面修复治疗中的应用

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【摘要】目的 探讨手外伤感染创面修复治疗中封闭式负压引流技术的应用价值。方法 选取2013年8月至2017年10月慈溪市中医医院收治的手外伤患者80例为研究对象,采用随机数字表法分为两组各40例。对照组采取常规创面修复治疗,观察组采取封闭式负压引流技术。观察两组修复效果、愈合时间、二次手术、抗菌药物使用、住院情况、组织病理学评分及患者满意度。结果 观察组总有效率(97.50%)显著高于对照组(80.00%)，差异有统计学意义(χ²=6.13, P<0.05)；观察组愈合时间、住院时间及抗菌药物使用时间分别为(15.11±2.43) d,(16.27±1.79) d,(6.06±0.65) d，均短于对照组，差异均有统计学意义(t=14.43, 13.31, 23.29, P<0.05)；观察组二次手术率(5.00%)低于对照组，观察组病理学评分为(7.11±0.53)分，高于对照组，差异均有统计学意义(χ²=6.49, P<0.05)；观察组患者满意度(100.00%)显著高于对照组，差异有统计学意义(χ²=6.49, P<0.05)。结论 手外伤感染创面修复治疗中，封闭式负压引流技术应用效果较佳，可有效控制病情，值得推广使用。

【关键词】感染;手;创面修复;负压伤口疗法;住院时间;有效性研究;病人满意度

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Application of closed negative pressure drainage technique in repair of wound of hand trauma infection

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【Abstract】Objective To explore the application value of closed negative pressure drainage technique in wound healing of hand trauma. Methods From August 2013 to October 2017, 80 patients with hand trauma in the Traditional Chinese Medicine Hospital of Cixi were divided into two groups according to the random principle, with 40 cases in each group. The control group was treated with conventional wound repair, and the observation group was treated with closed negative pressure drainage. The repair effect, healing, secondary operation, antibiotic use, hospitalization, histopathological score and patients’ satisfaction were observed. Results The total effective rate of the observation group (97.50%) was obviously higher than that of the control group (80.00%) (χ²=6.13, P<0.05). The time of healing, length of hospital stay and the use time of antimicrobial agents in the observation group were (15.11 ± 2.43) d, (16.27 ± 1.79) d and (6.06 ± 0.65) d, respectively, which were all lower than those in the control group (t=14.43, 13.31, 23.29, P<0.05). The second operation rate of the observation group (5.00%) was lower than that of the control group (P<0.05), and the histopathological score in the observation group (7.11 ± 0.53) was higher than that in the control group (P<0.05). The satisfaction rate of the observation group (100.00%) was obviously higher than that of the control group (χ²=6.49, P<0.05). Conclusion In the treatment of wound healing of hand trauma, the application of closed negative pressure drainage technology is better, which can effectively control the disease and is worthy of further promotion and use.

【Key words】Infection; Hand; Wound repair; Negative pressure wound therapy; Length of stay; Validation studies as topic; Patient satisfaction

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超声引导下股神经、腘窝坐骨神经阻滞术用于足踝骨折手术中的效果观察

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【摘要】目 的 观察超声引导下股神经、腘窝坐骨神经阻滞用于足踝骨折手术的效果和并发症。方法 选择2015年8月至2017年8月焉耆县人民医院喉罩全麻下行足踝骨折手术患者60例，采用随机数字表法分为A、B、C三组，每组20例。患者由平车转至手术床前，A组静注地佐辛5 mg，B组行超声引导股神经阻滞 + 坐骨神经分叉近端腘窝坐骨神经阻滞，C组行超声引导股神经阻滞 + 坐骨神经分叉远端腘窝坐骨神经阻滞，B、C组阻滞用药为0.375%罗哌卡因40 mL(150 mg)。阻滞实施后，观察并记录股神经、坐骨神经支配区域感觉阻滞(针刺法)完善时间、全麻苏醒时间，瑞芬太尼、丙泊酚的使用量，阻滞前(T0)、阻滞后20 min (T1)、平车转移至手术床(T2)、清醒(T3)时视觉模拟评分(visual analog scale，VAS)及不良反应发生情况。结果 感觉阻滞完善时间、全身麻醉苏醒时间，瑞芬太尼、丙泊酚的使用量分别为：A组(未测定)，(21.6±1.6) min、(1 183±17)μg、(665.0±6.7) mg；B组(25.5±2.5) min、(15.3±1.4) min、(635±16) μg、(455.0±6.5) mg；C组(19.6±2.3) min、(14.9±1.5) min、(598±14) μg、(438.0±9.9) mg。苏醒时间，瑞芬太尼、丙泊酚的使用量A、B、C组相比，差异均有统计学意义(T=44.07，P<0.05)。阻滞完善时间C组与B相比，差异有统计学意义(T=10.89，P<0.05)。结论 足踝骨折手术患者术前行超声引导股神经、坐骨神经分叉近端腘窝坐骨神经阻滞，起效迅速，全麻用药减少，转床时及苏醒期镇痛完善。

【关键词】超声检查；股神经阻滞；腘窝坐骨神经阻滞；足踝骨折

Clinical application of ultrasound – guided femoral nerve and popliteal sciatic nerve block in patients undergoing foot and ankle surgery

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【Abstract】Objective To observe the application of ultrasound – guided femoral nerve block (FNB) and popliteal sciatic nerve block (PSNB) in patients undergoing foot and ankle surgery. Methods From August 2015 to August 2017, 60 patients scheduled for foot and ankle surgery undergoing laryngeal mask airway (LMA) general anesthesia in the People’s Hospital of Langfang were randomly divided into 3 groups by the random number table, with 20 cases in each group. Before transfer patients from bed to operating table, A group received dezocine 5 mg iv, B group received FNB combined with PSNB (distal to the sciatic nerve bifurcation), C group received FNB combined with PSNB (proximal to the sciatic nerve bifurcation). A total of 40 mL of 0.375% rocuronium were injected guided by ultrasound in B group and C group. The time of sufficient sensory block and awake, the dosage of remifentanil and propofol were recorded. Pain was assessed using visual analogue scale (VAS) pre – and post block. The incidence of sleepiness, postoperative nausea and vomiting (PONV), agitation, pain and adverse reaction were also recorded.
Results  The time of sufficient sensory block and awake, the dosage of remifentanil and propofol in A, B and C group; A group (not measured), (21.6 ± 1.6) min, (1183 ± 17) μg, (665.0 ± 6.7) mg; B group (25.5 ± 2.5) min, (15.3 ± 1.4) min, (635 ± 16) μg, (455.0 ± 6.5) mg; C group (19.6 ± 2.3) min, (14.9 ± 1.5) min, (598 ± 14) μg, (438.0 ± 9.9) mg. The time of awake, the dosage of remifentanil and propofol in B group and C group were significantly lower than those in A group ($F = 44.07, 52.41, 62.45$, all $P < 0.05$). The time of sufficient sensory block in C group was lower than that in B group ($t = 15.69, P < 0.05$). The VAS scores at T2, T3 and T4 in A, B and C group; A group (4.5 ± 0.6) point, (8.4 ± 0.5) point, (6.1 ± 0.9) point; B group (2.6 ± 0.5) point, (3.9 ± 0.3) point, (2.4 ± 0.6) point; C group (2.5 ± 0.4 point, (2.3 ± 0.5 point, (1.1 ± 0.5) point. The VAS scores in B group or C group were significantly lower than those in A group ($F = 52.36, 72.82, 75.41$, all $P < 0.05$). The VAS scores at T3 and T4 in C group were significantly lower than those in B group ($t = 18.42, q = 14.55$, all $P < 0.05$). The incidence rates of sleepiness, PONV, agitation and incision pain in A, B and C group; A group (25%, 25%, 15%, 15%, 50%); B group (0%, 5%, 0%, 10%); C group (0%, 5%, 0%, 0%, 0%). The number of patients who had adverse reactions in B or C group were significantly lower than those in A group ($\chi^2 = 8.51, 8.73, 10.11, 10.11, 9.69$, all $P < 0.05$). The incidence rate of incision pain at sober in C group was lower than that in B group ($\chi^2 = 10.89, P < 0.05$). Conclusion  The ultrasound – guided FNB and PSNB (proximal to the sciatic nerve bifurcation) can obviously shorten the onset time, reduce the dosage of general anaesthetic. It has effective analgesia during transfer of patients from bed to operating table and sober.

Key words  Ultrasound; Femoral nerve block (FNB); Popliteal sciatic nerve block (PSNB); Foot and ankle surgery; Laryngeal mask airway (LMA); Distal popliteal sciatic nerve block; Proximal popliteal sciatic nerve block; Ropivacaine

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计算机断层扫描三维重建在胫骨平台骨折诊治中的应用
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【摘要】目的探讨16排螺旋计算机断层扫描(CT)三维重建在胫骨平台骨折患者诊治中的应用价值。方法回顾性分析宁波市鄞州人民医院2014年1月至2016年10月收治的胫骨平台骨折患者58例的临床资料，患者均行锁定钢板内固定治疗，手术前后患者均行胫骨平台X线摄片和16排螺旋CT三维重建、多平面重建技术检查。比较两种检查方法对胫骨平台骨折检出率、术后7d骨折塌陷面数值的差异，同时评价手术前后患者膝关节功能情况。结果CT三维重建检查对胫骨平台骨折检出率为100.0%，高于X线片检查的89.7%（χ²=4.39，P<0.05）；CT三维重建检查测量术后7d骨折塌陷面数值（3.42±0.86），显著高于X线片检查的（1.27±0.53）（t=16.21，P<0.05）；手术后患者膝关节功能评分（56.4±4.8）分，显著高于手术前的（83.1±7.5）分（t=22.84，P<0.05）。结论16排螺旋CT三维重建、多平面重建技术较X线片对胫骨平台骨折检出率高，尤其对胫骨平台隐匿性骨折，同时尚可更全面、直观、多方位显示骨折的类型及局部结构关系，值得临床选择。

【关键词】胫骨骨折；体层摄影术，螺旋计算机；成像，三维；X线摄影术；骨折塌陷面数值；膝关节功能
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Application of three – dimensional reconstruction of computed tomography in the diagnosis and treatment of tibial plateau fractures
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【Abstract】Objective To investigate the application of 16 – slice spiral computed tomography (CT) three – dimensional reconstruction in the diagnosis and treatment of tibial plateau fractures. Methods A retrospective analysis was performed on the clinical data of 58 patients with tibial plateau fractures from January 2014 to October 2016 in Ningbo Yinzhou People’s Hospital. All patients underwent locking plate internal fixation. All patients underwent radiographs of the tibial plateau before and after surgery with 16 – slice spiral CT three – dimensional reconstruction , multiplanar reconstruction technology inspection. The detection rates of tibial plateau fractures and the 7 – day fracture collapse surface between the two examination methods were compared, and the knee joint function before and after surgery was evaluated. Results The detection rate of tibial plateau fractures by CT three – dimensional reconstruction examination was 100.0%, which was higher than that by the X – ray examination (89.7%) , the difference was statistically significant (χ² = 4.39, P<0.05). The fracture collapse value of CT three – dimensional reconstruction examination after 7 days of operation was (3.42 ± 0.86), which was significantly higher than that of X – ray examination (1.27 ± 0.53) (t = 16.21, P<0.05). The postoperative knee function score after surgery [(56.4 ± 4.8) points] was significantly higher than that before surgery [(83.1 ± 7.5) points] (t = 22.84, P<0.05). Conclusion The detection rate of 16 – slice spiral CT three – dimensional reconstruction and multi – planar reconstruction is higher than X – ray film in tibial plateau fractures, especially for invisible fractures of the tibial plateau. It is more comprehensive and intuitive, multi – faceted display of fracture types and local structural relationships, which is worthy of clinical application.

【Key words】Tibial fractures; Tomography, spiral computed; Imaging, three-Dimensional; Xeroradiography; Fracture collapse surface value; Knee joint function
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微型钢板内固定联合中药药浴治疗近节指骨骨折的效果分析

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【摘要】目的：探讨微型钢板内固定联合中药药浴治疗近节指骨骨折的效果。方法：选择2012年1月至2017年12月宁波明州医院收治的近节指骨骨折患者100例，采用随机数字表法将患者分为对照组和观察组，每组50例。对照组患者采用单纯微型钢板内固定进行治疗，观察组患者采用微型钢板内固定联合中药药浴进行治疗，比较两组患者的临床治疗效果。结果：观察组住院时间（8.35 ± 1.62）d、骨折愈合时间（49.35 ± 3.85）d，短于对照组的（8.95 ± 1.48）d、（57.82 ± 6.12）d，两组差异均有统计学意义（t = 5.032，6.114，均P < 0.05）；观察组术后总主动屈曲度和不良反应发生率（16.00%）低于对照组（34.00%），两组差异有统计学意义（χ² = 18.485，P < 0.05）。结论：微型钢板内固定联合中药药浴治疗近节指骨骨折效果好，治疗所需时间短，并发症发生率低。

【关键词】骨折固定术，内；指骨；中草药
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Effect of microplate internal fixation combined with upper limb washing in the treatment of proximal phalanx fractures
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【Abstract】Objective To investigate the effect of micro steel plate internal fixation combined with traditional Chinese medicine medicated bath in the treatment of proximal phalanx fractures. Methods From January 2012 to December 2012, 100 patients with proximal phalanx fracture in Ningbo Mingzhou Hospital were selected and randomly divided into control group and observation group, according to the digital table, with 50 cases in each group. The control group was treated by simple miniature steel plate internal fixation, the observation group was treated by microplate internal fixation combined with traditional Chinese medicine medicated bath. The clinical treatment effect was compared between the two groups. Results The hospitalization time and fracture healing time in the observation group were (8.35 ± 1.62) d and (49.35 ± 3.85) d, respectively, which were significantly shorter than those in the control group [(8.95 ± 1.48) d, (57.82 ± 6.12) d], the differences were statistically significant (t = 5.032, 6.114, all P < 0.05). The postoperative total active flexion degree and incidence rate of adverse reactions of the observation group (16.00%) was lower than that in control group (34.00%), the difference was statistically significant (χ² = 18.485, P < 0.05). Conclusion Microplate internal fixation combined with traditional Chinese medicine medicated bath in the treatment of proximal phalanx fractures has better treatment effect, and it has shorter treatment time and less complications.

【Key words】Fracture fixation, internal; Finger phalanges; Drugs, Chinese herbal
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【摘要】目的 观察股骨近端髓内钉固定治疗高龄股骨粗隆间骨折的临床效果及对患者疼痛程度(VAS)评分的影响。方法 选取2017年1-12月杭州市大江东医院收治的高龄股骨粗隆间骨折患者49例作为研究对象,按内固定方式分为两组,股骨近端解剖锁定钢板(PFLP)组25例给予股骨近端锁定钢板,股骨近端防旋髓内钉(PFNA)组24例给予股骨近端髓内钉微创治疗,对比两组治疗效果,并观察患者VAS评分变化情况。结果 PFNA组手术时间(101.33±39.41)min,术中出血量(261.08±184.98)mL,切口长度(7.66±1.47)cm,骨折愈合时间(16.66±2.03)周,均显著优于PFLP组的(137.36±43.65)min,(456.40±148.18)mL,(14.76±1.76)cm,(11.4±1.44)周,(19.36±3.49)周(t=3.184,4.085,10.024,13.963,2.747,均P<0.05)。而PFNA组术后1个月VAS评分(6.56±2.87)分,3个月VAS评分(5.87±2.15)分,6个月VAS评分(2.62±0.98)分,均优于PFLP组(t=4.855,5.745,8.541,均P<0.05);治疗后,PFNA组肿瘤坏死因子α、C反应蛋白水平分别为(22.39±1.85)ng/L,(120.54±5.24)ng/L,(7.79±2.25)mg/L,明显优于PFLP组的(33.69±2.25)ng/L,(154.25±5.52)ng/L,(13.96±3.25)mg/L(t=5.287,4.987,5.124,均P<0.05)。结论 在治疗股骨粗隆间骨折时,选择PFNA内固定时可缩短手术时间,减少术中出血量,具有小切口微创固定的效果,术后可早期下床功能锻炼促进骨折愈合,并发症少。

【关键词】股骨骨折;骨质疏松;髓内;疼痛测定;Harris评分;老年人
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Clinical effect of proximal femoral intramedullary nailing in the treatment of intertrochanteric fractures in the elderly and its influence on patients' VAS score
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【Abstract】Objective To explore the clinical effect of proximal femoral nailing in the treatment of intertrochanteric fracture of the femur and its effect on patients' VAS score. Methods From January 2017 to December 2017, 49 elderly patients with intertrochanteric fracture in Hangzhou Dajiangdong Hospital were selected in the research. According to internal fixation methods, the patients were divided into two groups. The PFLP group (25 cases) received proximal femoral locking plate, the PFNA group (24 cases) received proximal femoral intramedullary nail by minimally invasive treatment. The therapeutic effect was compared between the two groups. Results The operating time, intraoperative blood loss, incision length, the weight bearing time, fracture healing time in the PFNA group were (101.33±39.41)min,(261.08±184.98)mL,(7.66±3.04)cm,(5.58±1.47)weeks,(16.66±2.03) weeks, respectively, which were significantly better than those in the PFLP group [(137.36±43.65)min,(456.40±148.18)mL,(14.76±1.76)cm,(11.4±1.44)weeks,(19.36±3.49)weeks] (t=3.184,4.085,10.024,4.085,10.024, all P<0.05). At 1, 3, 6 months after operation, the VAS scores of the PFNA group were (6.56±2.87)points,(5.87±1.25)points and (2.62±0.98) points, which were better than those of the PFLP group [t=4.855,5.745,8.541, all P<0.05]. After treatment, the INF-α, IL-6, CRP levels in the PFNA group were (22.39±1.85)ng/L,(120.54±5.24)ng/L,(7.79±2.25)mg/L, respectively, which were significantly lower than those in the PFLP group [(33.69±2.25)ng/L,(154.25±5.52)ng/L,(13.96±3.25)mg/L] (t=5.287,4.987,5.124, all P<0.05). Conclusion In the treatment of intertrochanteric fracture, PFNA internal fixation has shorter operation time, less intraoperative blood loss, small incision and minimally invasive fixation, and can get out of bed early after operation, functional exercise can promote fracture healing. It has fewer complications and high clinical value.

【Key words】Femoral fractures; Fracture fixation, intramedullary; Pain measurement; Harris score; Aged
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闭合性骨折术后切口感染 20 例
病原学特征分析

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【摘要】目的 探讨闭合性骨折术后切口感染病原学特征。方法选择兰溪瑞康医院 2012 年 1 月至 2017 年 12 月收治的闭合性骨折术后切口感染患者 20 例为研究对象,采集闭合性骨折术后切口分泌物标本,进行病原菌分离鉴定及药敏试验。结果闭合性骨折术后切口感染患者 20 例分离病原菌 33 株,其中革兰阴性菌 21 株、革兰阳性菌 11 株、真菌 1 株。革兰阴性菌中,铜绿假单胞菌 8 株,大肠埃希菌 6 株;革兰阳性菌中,金黄色葡萄球菌 6 株。铜绿假单胞菌对头孢曲松、头孢他啶和头孢哌酮耐药率较高,分别为 87.50%、87.50% 和 75.00%;大肠埃希菌对头孢他啶和头孢哌酮耐药率较高,分别为 100.00% 和 83.33%。金黄色葡萄球菌对青霉素 G 和红霉素耐药率较高,分别为 100.00% 和 83.33%。结论闭合性骨折术后切口感染病原菌前三位病原菌分别为金黄色葡萄球菌、铜绿假单胞菌和大肠埃希菌,以革兰阴性菌为主,主要革兰阴性菌对头孢类药物耐药率高,主要革兰阳性菌对青霉素 G 和红霉素耐药率高。

【关键词】骨折,闭合性;外科伤口感染;革兰氏阴性菌;革兰氏阳性菌;真菌;铜绿假单胞菌;大肠埃希菌;金黄色葡萄球菌
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Analysis of pathogenic characteristics of incision infection after closed fracture
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【Abstract】Objective To investigate the etiological characteristics of incision infection after closed fracture surgery. Methods From January 2012 to December 2017, 20 closed fracture patients with postoperative incision infection in Lanxi Ruikang Hospital were selected in the research. The wound infection and secretion samples after closed fracture surgery were collected for isolation and identification of pathogenic bacteria and drug sensitivity test. Results A total of 33 strains of pathogenic bacteria were isolated and cultured in 20 cases of wound infection after closed fracture operation, including 21 Gram - negative bacteria, 11 Gram - positive bacteria and 1 fungi. Among Gram - negative bacteria, 8 strains of Pseudomonas aeruginosa and 6 strains of Escherichia coli were found. Among Gram - positive bacteria, 6 strains of Staphylococcus aureus were found. The resistance rates of Pseudomonas aeruginosa to ceftriaxone, ceftazidime and cefoperazone were 87.50%, 87.50% and 75.00%, respectively, and the resistance rates of Escherichia coli to ceftriaxone and ceftazidime were 100.00% and 83.33%, respectively. The resistance rates of Staphylococcus aureus to penicillin G and erythromycin were 100.00% and 83.33%, respectively. Conclusion The pathogenic bacteria of closed fracture postoperative incision infection are Gram - negative bacteria, three pathogenic bacteria were Staphylococcus aureus, Pseudomonas aeruginosa and Escherichia coli, the drug resistance rate of Gram negative bacteria to cephalosporin is high, the resistance rate of main Gram positive bacteria to penicillin and erythromycin G is high.

【Key words】Fractures, closed; Surgical wound infection; Gram-negative bacteria; Gram-positive bacteria; Fungi; Pseudomonas aeruginosa; Escherichia coli; Staphylococcus aureus
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新型快速病理诊断技术在基层医院宫颈病变检查中的应用

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【摘要】目的 探讨新型快速病理诊断技术在基层医院宫颈病变检查中的应用价值。方法 选择25例宫颈刮片和22例宫颈活检受检者，25例宫颈刮片受检者于操作时刮涂两张，分别运用常规病理技术与新型快速病理诊断技术诊断后比较两者结果；22例宫颈活检受检者在活检操作中运用新型快速病理诊断技术对活检组织滚片进行细胞学初诊，依据快速病理诊断结果调整活检操作方案，分析新型快速病理诊断技术在基层宫颈病变检查中的临床应用价值。结果 新型快速病理诊断技术开展所需空间小，无污染，诊断耗时约2~3 min，不影响正常检查操作。25例宫颈刮片经新型快速病理诊断技术处理与常规病理技术处理的宫颈刮片质量一致，能够满足病理细胞学诊断的需求；22例经扩阴器下宫颈活检在该技术的协助下均达到活检要求，提高了首次活检阳性检出率。结论 新型快速病理诊断技术可对宫颈刮片实时病理诊断，提高宫颈活检的首次活检阳性检出率，且成本低，适宜在基层医院推广。

【关键词】宫颈疾病；病理学，临床；活组织检查，针吸；病理染色方法；实时；基层；阳性率

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Clinical value of new rapid pathological diagnosis technique in the examination of cervical lesions in primary medical institution

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【Abstract】Objective To explore the clinical value of new rapid pathological diagnosis technology in the examination of cervical lesions in primary medical institution. Methods In the Affiliated Hospital of Yangzhou University, 25 cases of cervical scraping and 22 cases of cervical biopsy were selected. Twenty – five cases of cervical scraping scraped two wipers during operation, the results were compared with conventional pathological techniques and new rapid pathological diagnosis techniques. Twenty – two cases of cervical biopsy used a new rapid pathological diagnosis technique to perform cytological diagnosis of biopsy tissue rolls in biopsy operation. According to the results of rapid pathological diagnosis, the biopsy operation plan was adjusted to analyze the clinical value of the new rapid pathological diagnosis technique in cervical lesions in primary medical institution. Results The new rapid pathological diagnosis technology required less space and no pollution, and the diagnosis took about 2 ~ 3 min, which did not affect the normal inspection operation. Twenty – five cases of cervical scraping were produced with new rapid pathological diagnosis technique, and the quality of cervical scraping produced with conventional pathological technique was consistent, which could satisfy the needs of pathological cytological diagnosis; twenty – two cases of cervical biopsy under the vaginal device were assisted by this technology and it could increase the positive rate of the first biopsy. Conclusion Cervical scraping and cervical biopsy are still the main methods for cervical lesions examination in primary hospitals. The new rapid pathological diagnosis technology can provide the real – time pathological diagnosis of...
cervical scraping, improve the positive detection rate of the first biopsy of cervical biopsy, and the cost is low, suitable for promotion in primary medical institution.

【Key words】 Uterine cervical diseases; Pathology, clinical; Biopsy, needle; Cervical biopsy; Real-time; Base layer; Positive rate

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重组人脑利钠肽治疗高龄心力衰竭患者的疗效观察及其对血清 N 端 B 型钠尿肽原水平的影响

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【摘要】 目的 分析重组人脑利钠肽 (rhBNP) 对高龄心力衰竭患者疗效, 心功能及血清 N 端 B 型钠尿肽原 (NT-proBNP) 水平的影响。方法 将解放军第一一七医院 2015 年 1 月至 2017 年 12 月收治的高龄 (年龄 ≥ 80 岁) 心力衰竭患者 150 例作为研究对象, 采用随机数字表法分为两组, 对照组给予硝酸甘油治疗, 观察组给予 rhBNP 治疗, 两组各 75 例。比较两组患者血清 NT-proBNP 水平、左心室射血分数 (LVEF)、临床疗效及并发症发生情况。结果 两组患者治疗后血清 NT-proBNP 水平较治疗前均显著降低, 且观察组血清 NT-proBNP 水平 [ (2964.42 ± 607.25) pg/mL] 较对照组的 [ (4213.57 ± 524.07) pg/mL] 显著降低 (t = 13.49, P < 0.01)。两组患者治疗后 LVEF 的水平较治疗前均显著升高, 且观察组 LVEF 水平 [ (51.26 ± 4.77) %] 较对照组的 [ (46.03 ± 5.22) %] 显著升高 (t = 6.41, P < 0.01)。观察组治疗总有效率为 94.67% (71/75), 较对照组的 70.67% (53/75) 显著升高 (χ² = 13.45, P < 0.01)。两组患者头痛、血压下降、肾功能恶化及心动过速等并发症发生率差异无统计学意义 (P > 0.05)。结论 rhBNP 对高龄心力衰竭患者的治疗可有效改善其呼吸困难及全身症状, 有效降低血清 NT-proBNP 水平, 改善心功能, 且不会引起严重并发症, 具有良好的安全性。

【关键词】 心力衰竭; 利钠肽, 脑; 心脏功能试验; 老年人; 疗效比较研究

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function, and will not cause serious complications, with good safety, so it is worthy of clinical promotion and application.

【Key words】 Heart failure; Natriuretic peptide, brain; Heart function tests; Aged; Comparative effectiveness research

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论著

米力农对风湿性心脏病瓣膜置换术后患者肝、肾功能及血清炎性因子的影响

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【摘要】目的探讨乳酸米力农对风湿性心脏病体外循环瓣膜置换术后患者炎性因子及肝肾功能的影响和意义。方法收集2014年1月至2016年1月在重庆三峡中心医院因风湿性心脏瓣膜行瓣膜置换术的患者80例,采用区组随机分组方法将其分为观察组和对照组,各40例。观察组为体外循环术后以0.5 μg·kg⁻¹·min⁻¹持续静脉泵入米力农（TFN-α）、丙氨酸氨基转移酶（ALT）、天冬氨酸氨基转移酶（AST）、血清肌酐（Scr）水平及手术时间、转流时间、阻断时间、机械通气时间、入住ICU时间、住院时间。结果两组TNF-α, IL-6, IL-8及IL-10术后即刻均升高(对照组：(34.47±5.14)pg/mL, (62.27±8.45)pg/mL, (33.80±7.69)pg/mL, (31.48±5.94)pg/mL, t=-0.628, -0.640, 0.116, 0.342)，术后第1天峰值(对照组：(52.07±10.18)pg/mL, (96.04±26.45)pg/mL, (91.14±18.28)pg/mL, (48.10±9.78)pg/mL)，观察组：(50.37±12.98)pg/mL, (93.66±24.10)pg/mL, (83.16±16.28)pg/mL, (46.68±9.25)pg/mL, t=-0.559, 0.295, 1.458及0.473), 第2天术后第3天天达峰值(t=-3.577),均在术后第3天时差异有统计学意义(对照组：(36.03±9.39)pg/mL, (59.56±14.38)pg/mL, (53.91±13.16)pg/mL, (85.55±16.49)pg/mL), 观察组：(36.70±4.33)pg/mL, (36.20±3.85)pg/mL, (42.91±7.30)pg/mL, (101.33±10.81)pg/mL, t=-2.089, 3.017, 3.267, -3.577), 两组ALT, AST及Scr术后即刻均升高(对照组：(38.51±12.12)μL/L, (40.23±5.03)μL/L, (62.27±5.02)μmol/L, 观察组：(39.20±6.47)μL/L, (39.6±4.94)μL/L, (73.61±4.04)μmol/L, t=0.114, 0.243, 0.630), 两组比较术后第5天时差异有统计学意义(对照组：(61.45±5.27)μL/L, (54.20±7.0)μL/L, (86.45±9.01)μmol/L, 观察组：(36.20±3.85)μL/L, (34.85±7.12)μL/L, (83.7±11.07)μmol/L, t=11.231, 9.224, 5.647), 观察组第5天时均降至正常, 而对照组仅Scr降至正常。两组手术时间, 转流时间, 阻断时间, 机械通气时间差异均无统计学意义(t=0.267, 0.151, 0.187, 0.773,均P>0.05), 两组入住ICU时间及住院时间差异均有统计学意义(对照组：(54.90±16.84)h, (14.35±3.01)d, 观察组：(44.05±7.06)h, (10±1.86)d, t=8.149, 13.042, 均P<0.05)。

结论米力农可对风湿性心脏病体外循环瓣膜置换术后患者抑制全身炎性反应、保护肝、肾功能,减少术后并发症及住院时间。

【关键词】风湿性心脏病; 心脏瓣膜, 人工; 白细胞介素6; 白细胞介素8; 白细胞介素10; 肿瘤坏死因子α; 米力农

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Effects of milrinone on levels of inflammatory factors and liver and renal function after CPB in rheumatic heart disease patients for valve replacement

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【Abstract】 Objective To investigate the effects of milrinone on levels of inflammatory factors and liver and renal function after CPB in rheumatic heart disease patients for valve replacement. Methods From January 2014 to January 2016, 80 patients received valve replacement in the Central Hospital of Chongqing Three Gorges were randomly divided into observation group and control group by block randomization grouping method, with 40 patients in each group. The patients in the observation group were pumped intravenously with milrinone 0.5 μg·kg⁻¹·min⁻¹ for 72h after surgery, while the patients in the control group were not pumped. The serum levels of IL-6, IL-8, IL-10, TNF-α were detected by ELISA before operation and on 0d, 1d, 3d, 5d after operation, respectively. The levels of ALT, AST, Scr were also detected at the same time. Moreover, the time for operation, extracorporeal circulation, interruption, mechanical ventilation, ICU and hospital were also compared between the two groups. Results The levels of TNF-α, IL-6, IL-8 and IL-10 increased immediately after operation in both groups [control group: (14.97 ± 5.14) pg/mL, (52.45 ± 10.37) μmol/L, (34.10 ± 8.38) pg/mL, (32.27 ± 8.45) pg/mL; observation group: (16.05 ± 5.71) pg/mL, (54.39 ± 8.56) μmol/L, (33.80 ± 7.69) pg/mL, (31.48 ± 5.94) pg/mL], t = -0.628, 0.644, 0.116, 0.342, and the peak values of TNF-α, IL-6 and IL-8 reached on the first day after operation in both two groups [control group: (52.07 ± 10.18) pg/mL, (96.04 ± 26.45) pg/mL, (91.14 ± 18.28) pg/mL, (48.10 ± 9.78) pg/mL; observation group: (50.37 ± 12.98) pg/mL, (93.66 ± 24.10) pg/mL, (83.16 ± 16.28) pg/mL, (46.68 ± 9.25) pg/mL], t = 0.559, 0.295, 1.458, 0.473], and the peak value of IL-10 reached on the 3rd day after operation (t = -3.577), the differences were statistically significant on the 3rd day after operation [control group: (36.03 ± 9.39) pg/mL, (59.56 ± 14.38) pg/mL, (53.91 ± 13.16) pg/mL, (85.55 ± 16.49) pg/mL; observation group: (36.70 ± 4.33) pg/mL, (36.20 ± 3.85) pg/mL, (42.91 ± 7.30) pg/mL, (101.33 ± 10.81) pg/mL], t = -0.289, 7.017, 3.267, -3.577. The levels of ALT, AST and Scr increased immediately after operation in both groups [control group: (38.51 ± 5.12) μmol/L; (40.23 ± 5.03) μmol/L; (62.27 ± 5.02) μmol/L; observation group: (39.20 ± 4.67) μmol/L; (39.6 ± 4.94) μmol/L; (73.61 ± 4.04) μmol/L], t = 0.114, 0.243, 0.630, there were statistically significant differences between the two groups on the 5th day after operation [control group: (61.45 ± 5.27) μmol/L, (54.20 ± 7.0) μmol/L, (86.45 ± 9.01) μmol/L; observation group: (36.20 ± 3.85) μmol/L, (34.85 ± 7.12) μmol/L, (83.7 ± 11.07) μmol/L], t = 11.231, 9.224, 5.647, and on the fifth day, the levels of ALT, AST and Scr in the observation group dropped to normal, while only the level of Scr in the control group dropped to normal. There were no statistically significant differences in the time of operation, extracorporeal circulation, interruption, mechanical ventilation between two groups (t = 0.267, 0.151, 0.187, 0.773, all P > 0.05). However, there were statistically significant differences in the time of ICU and hospital [control group: (54.90 ± 16.84) h, (14.35 ± 3.01) d, observation group: (44.05 ± 7.06) h, (10 ± 1.86) d], t = 8.149, 13.042, all P < 0.05]. Conclusion Milrinone can obviously improve the inflammatory reaction in surgical trauma tissues caused by IL-6, IL-8, IL-10, TNF-α, and can protect liver, renal tissue from injury, moreover, it can decrease the incidence of postoperative complications and the length of hospital stay.

【Key words】 Rheumatic heart disease; Heart valve prosthesis; Interleukin-6; Interleukin-8; Interleukin-10; Tumor necrosis factor-alpha; Milrinone

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山莨菪碱联合加巴喷丁治疗糖尿病痛性神经病变的疗效观察

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【摘要】目的探讨山莨菪碱联合加巴喷丁治疗糖尿病痛性神经病变(PDN)的临床疗效。方法选取大同市第五人民医院2013年6月至2017年2月30例为研究对象,采用随机数字表法分为山莨菪碱组、加巴喷丁组和山莨菪碱+加巴喷丁联合组,每组10例,比较各组足部压力觉异常点数,治疗前后正中神经、腓总神经运动神经传导速度(MCV)与感觉神经传导速度(SCV)并进行视觉模拟评分(VAS)进行疼痛分析以及三组总有效率。结果治疗后,山莨菪碱-加巴喷丁联合组、山莨菪碱组、加巴喷丁组足部压力点异常点数[6.10±1.66个,(10.80±2.64个),(6.37±1.44个)],差异有统计学意义(F=14.602,P<0.05);治疗总有效率分别为92.5%,62.2%,75.0%,差异有统计学意义(χ²=10.155,P=0.006);治疗后三组正中神经MCV分别为(50.33±5.54)m/s,(41.12±4.47)m/s,(42.32±4.40)m/s,差异有统计学意义(F=9.404,P=0.001);SCV分别为(48.51±6.19)m/s,(41.81±5.72)m/s,(41.76±7.17),差异有统计学意义(F=3.728,P=0.037);腓总神经MCV分别为(40.60±5.69)m/s,(32.04±4.47)m/s,(33.52±7.76)m/s,差异有统计学意义(F=5.614,P=0.009);SCV分别为(42.72±4.97)m/s和(36.21±6.16)m/s,差异有统计学意义(F=4.265,P=0.025),治疗后三组VAS评分均下降,分别为(4.49±1.61分),(6.37±1.44分),差异有统计学意义(F=14.602,P=0.000),但联合组下降更显著。结论与山莨菪碱和加巴喷丁单药相比,山莨菪碱联合加巴喷丁治疗PDN效果更显著,值得推广。

【关键词】糖尿病;糖尿病神经病变;疼痛;山莨菪碱;加巴喷丁;疗效比较研究

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Clinical effect of anisodamine combined with gabapentin on painful diabetic neuropathy

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【Abstract】Objective To assess the clinical effect of anisodamine combined with gabapentin on painful diabetic neuropathy (PDN). Methods From June 2013 to February 2017, 120 patients with PDN in the Fifth People's Hospital of Datong were assigned into anisodamine group, gabapentin group and combined group according to the digital table, with 40 cases in each group, the patients were treated with anisodamine, gabapentin and combination therapy respectively. The abnormal foot plantar pressure, MCV and SCV of median nerve and common peroneus nerve, VAS and total effective rate of three groups were compared. Results After treatment, the indicators of the combined group were improved more significantly than those of the anisodamine group and gabapentin group in abnormal foot plantar pressure[(6.10±1.66) vs. (10.80±2.64) vs. (6.37±1.44), F=14.602, P<0.01], total effective rate (92.5% vs. 62.2% vs. 75.0%, χ²=10.155, P=0.006), MCV[(50.33±5.54)m/s vs. (41.12±4.47)m/s vs. (42.32±4.40)m/s, F=9.404, P=0.001] and SCV of median nerve[(48.51±6.19)m/s vs. (41.81±5.72)m/s, F=3.728, P=0.037], MCV of common peroneus nerve[(40.60±5.69)m/s vs. (32.04±4.47)m/s vs. (33.52±7.76)m/s, F=5.614, P=0.009] and SCV of common peroneus nerve[(42.72±4.97)m/s vs. (36.21±6.16)m/s vs. (35.45±5.54)m/s, F=4.265, P=0.025]. After treatment, the VAS scores of the three groups decreased, which were (4.49±1.61) points, (5.82±1.58) points, (6.37±1.44) points, respectively, the difference was statistically significant (F=14.602, P=0.000) and the decrease was more significant in the combined group. Conclusion Compared with the anisodamine group and gabapentin group, the combined treatment is more effective on PDN.
【Key words】 Diabetes mellitus; Diabetic neuropathies; Pain; Anisodamine; Gabapentin; Comparative effectiveness research

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【摘要】目的 探讨回旋支(circumflex artery, LCX)不同节段闭塞的体表心电图特点。方法2015年2月至2018年2月如皋市人民医院心脏内科收治的LCX闭塞性急性心肌梗死患者85例的体表心电图特征,以冠脉造影检查结果为准,受试者工作特征曲线(ROC)分析体表心电图诊断LCX闭塞性急性心肌梗死的效能。结果右优势型LCX闭塞性心电图改变以ST_{Ⅰ,Ⅱ,Ⅲ}抬高为主(76.47%),均衡型以ST_{V1-v3}下移为主(68.00%),左优势型以ST_{Ⅰ,Ⅱ,Ⅲ}抬高(88.89%),ST_{V7-V9}抬高为主(66.67%),ST_{V3-v5}下移,ST_{Ⅰ,Ⅱ,Ⅲ}抬高、ST_{V7-V9}抬高在不同冠脉分型中差异均有统计学意义(χ²=4.028, 4.061, 均 P<0.05)。远段、中段LCX闭塞性心电图改变以ST_{Ⅰ,Ⅱ,Ⅲ}抬高为主(100.00%, 78.95%),近段、钝缘支以ST_{V1-v3}下移为主(88.24%),ST_{V3-v5}下移、ST_{Ⅰ,Ⅱ,Ⅲ}抬高、ST_{V7-V9}抬高在不同节段LCX闭塞性心电图变化差异均有统计学意义(χ²=6.024, 5.318, 4.971, 均 P<0.05)。ST_{V1-v3}下移、ST_{Ⅰ,Ⅱ,Ⅲ}抬高诊断LCX闭塞性急性心肌梗死敏感度、特异度、阳性预测值、阴性预测值、准确度、曲线下面积(AUC)分别为82.06%, 92.63%, 89.91%, 86.34%, 88.06%, 0.830(95% CI: 0.853 – 0.991); 86.83% , 95.37%, 92.38%, 88.61%, 0.9064%, 0.922(95% CI: 0.729 – 0.931), 效能优于ST_{Ⅰ,Ⅱ,Ⅲ}抬高、ST_{V7-V9}抬高。结论LCX闭塞性急性心肌梗死体表心电图受多种因素影响表现多样化,ST_{V1-v3}下移、ST_{Ⅰ,Ⅱ,Ⅲ}抬高对LCX闭塞性急性心肌梗死具有较高诊断价值,临床应结合病史和其他检查手段进行准确判断。

【关键词】心肌梗塞; 冠状动脉闭塞; 心电描记术; 回旋支

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Diagnostic value of electrocardiogram in acute myocardial infarction associated with different circumflex branches

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【Abstract】Objective To investigate the characteristics of body surface electrocardiogram (ECG) of different segments of circumflex artery (LCX) occlusion. Methods The ECG characteristics of 85 patients with acute myocardial infarction caused by LCX occlusion in the People's Hospital of Rugao, Jiangsu, from February 2015 to February 2018 were analyzed. The results of coronary angiography were taken as the criteria. The efficacy of the body surface ECG for the diagnosis of LCX occlusion of acute myocardial infarction was analyzed by receiver operating characteristic curve (ROC). Results The ECG of right dominant LCX occlusion was dominated by ST_{Ⅰ,Ⅱ,Ⅲ} elevation (76.47%), and the balance type was dominated by ST_{V1-v3} (68%), and the dominant left dominant type was ST_{Ⅰ,Ⅱ,Ⅲ} elevation (88.89%) and ST_{V7-V9} elevation (66.67%). ST_{V1-v3} moved down, ST_{Ⅰ,Ⅱ,Ⅲ} elevation, ST_{V7-V9} elevation in different coronary points. The differences between the two groups was statistically significant (χ²=4.028, 4.061, all P<0.05). The ECG changes of LCX occluded in the distal and middle segments were dominated by ST_{Ⅰ,Ⅱ,Ⅲ} elevation (100%, 78.95%), and the proximal and blunt branches were dominated by ST_{V1-v3} (88.24%). ST_{V3-v5} moved down, ST_{Ⅰ,Ⅱ,Ⅲ} elevation, ST_{V1-v3} elevation and ST_{V7-V9} elevation had statistically significant differences (χ²=6.024, 5.318, 4.971, all P<0.05). The sensitivity, specificity, positive predictive value, negative predictive value, accuracy, and area under the curve of ST_{V1-v3}, ST_{Ⅰ,Ⅱ,Ⅲ} elevation were 82.06%, 92.63%, 89.91%, 86.34%, 88.06%, 0.830 (95% CI: 0.853 – 0.991), respectively, and 86.83% , 95.37%, 92.38%, 88.61%, 0.9064%, 0.922 (95% CI: 0.729 – 0.931), respectively, the efficiency is better than ST_{Ⅰ,Ⅱ,Ⅲ} and ST_{V7-V9}. Conclusion The body surface ECG of LCX occlusive acute myocardial infarction is varied with various factors. ST_{V1-v3} shift, ST_{Ⅰ,Ⅱ,Ⅲ} elevation are of high diagnostic value for LCX occlusion of acute myocardial infarction, and the clinical history and other methods should be used for accurate diagnosis.

【Key words】Myocardial infarction; Coronary occlusion; Electrocardiography; Circumflex artery

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临床观察仰卧位通气联合肺复张治疗重度急性呼吸窘迫综合征的疗效

【目的】探究仰卧位机械通气联合肺复张治疗重度急性呼吸窘迫综合征（ARDS）的疗效。

【方法】选择2015年2月至2017年2月山西医科大学第二医院重症监护病房（ICU）收治的ARDS患者82例，采用随机数字表法分为两组，研究组（41例）采用俯卧位机械通气联合肺复张治疗，对照组（41例）采用仰卧位机械通气联合肺复张治疗。对比两组治疗前（T0）、治疗1 h（T1）、治疗2 h（T2）、治疗6 h（T3）心率（HR）、中心静脉压（CVP）、平均动脉压（MAP）、氧分压（PaO2）、氧合指数（PaO2/FiO2）、气道平台压（Pplat）、静态肺顺应性（Cst）指标的差异。

【结果】两组治疗后PaO2、PaO2/FiO2均显著上升，且研究组治疗后各时间点PaO2分别为（69.17±7.51）mmHg、（74.64±6.78）mmHg、（82.52±10.37）mmHg，PaO2/FiO2分别为（116.91±15.57）mmHg、（123.06±16.34）mmHg、（135.23±18.41）mmHg，高于对照组（64.23±7.72）mmHg、（68.51±8.05）mmHg、（106.50±12.97）mmHg、（115.42±13.19）mmHg，差异均有统计学意义（t=3.225, 3.254, 4.215, 4.245, 3.954, 4.135, 均P<0.05）。两组HR、CVP均于T2-T3上升，T3下降，MAP于T2-T3下降，T3上升，研究组T1-T3 HR分别为（123.17±13.41）次/min，（114.64±10.08）次/min，（102.52±6.57）次/min，对照组为（129.23±12.75）次/min，（117.51±10.35）次/min，（108.43±9.77）次/min，两组比较，差异均有统计学意义（t=3.225, 3.254, 4.245, 4.384, 4.215, 4.667，均P<0.05）。结论：俯卧位机械通气联合肺复张可有效改善重度ARDS氧合状态，对血流动力学影响较小，效果优于仰卧位机械通气联合肺复张治疗。

【关键词】呼吸窘迫综合征，成人；呼吸，人工；俯卧位通气；肺复张；治疗
T2 – T3, and T3 increased in both two groups. HR at T1 – T3 in the study group were (123.17 ± 13.41) times/min, (114.64 ± 10.08) times/min, (102.52 ± 6.57) times/min, which were lower than those in the control group [ (129.23 ± 12.75) times/min, (117.51 ± 10.35) times/min, (108.43 ± 9.77) times/min ], the differences between the two groups were statistically significant (t = 3.884, 4.215, 4.667, all P < 0.05).

Conclusion Prone position mechanical ventilation combined with lung recruitment can effectively improve the oxygenation status of severe ARDS, and has less effect on hemodynamics, and the effect is better than supine position mechanical ventilation combined with lung recruitment.

【Key words】 Respiratory distress syndrome, adult; Respiration, artificial; Prone position ventilation; Lung recruitment; Treatment

Panobinostat改善SD大鼠蛛网膜下腔出血后早期脑损伤的观察

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【摘要】目的 观察在SD大鼠蛛网膜下腔出血动物模型中,Panobinostat抑制HDAC(LBH589)对早期脑损伤的保护作用。方法SD大鼠按随机数字表法分为假手术组(10只)、出血组(10只)、出血+Panobinostat注射组和药物注射组(20只),于SAH造模前24h分别行侧脑室立体定位注射给药,在术前12h、术后12h和24h分别进行神经功能损伤评分,然后取半球脑组织测脑水含量,或者进行灌注、取出脑组织的额叶和颞叶皮层,利用免疫印迹(Western Blot)检测H3及Ac-H3K27的乙酰化水平。结果假手术组和出血组的神经功能损伤评分均高于对照组,差异有统计学意义(F=13.000, P=0.007);出血组脑水含量显著高于假手术组,差异有统计学意义(F=8.229, P=0.019)。在成功SAH造模的SD大鼠进行分组,分别给予额叶及颞叶皮层组织中的Ac-H3K27水平较Vehicle组增高,差异有统计学意义(F=41.250, P=0.000);给药组脑水含量较Vehicle组下降,差异有统计学意义(F=8.211, P=0.020);给药组较Vehicle组的神经损伤评分下降,差异有统计学意义(F=9.560, P=0.011)。相关性分析表明H3组蛋白的乙酰化水平与Ac-H3K27与其神经损伤评分呈负相关(r=-0.585, P=0.046)。结论在SD大鼠蛛网膜下腔出血的早期脑损伤动物模型中,Panobinostat抑制HDAC可显著改善神经行为,缓解脑损伤。【关键词】蛛网膜下腔出血; 脑损伤; Panobinostat(LBH589); 组蛋白去乙酰化酶(HDAC)/酶抑制剂; 神经元; 细胞凋亡; 乙酰化作用; 动物

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Observation of panobinostat alleviates early brain injury in subarachnoid hemorrhage model

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【Abstract】Objective To observe the effect of panobinostat (LBH589) on the early brain injury (EBI) in the model of subarachnoid hemorrhage (SAH) in SD rats. Methods SD rats were randomly divided into 4 groups: sham (10 rats) and SAH (10 rats), SAH + vehicle (20 rats) and SAH + Panobinostat (20 rats). Drug or vehicle was given by lateral – ventricular stereotaxic injection 24h before the SAH model was introduced. Water contents and the neurological scores were determined at 24h post – SAH. The levels of Ac – H3K27 in frontal and lateral lobe were detected by Western blot. Results The mean neurological score of the SAH group was higher than that of the sham group(F=13.000, P=0.007). The water content of the SAH group was higher than that of the sham group (F=8.229, P=0.019). The level of Ac – H3K27 was higher in the SAH + Panobinostat group than that in the SAH + vehicle group (F=41.250, P=0.000). The mean neurological score of the SAH + Panobinostat group was lower than that of the SAH + vehicle group (F=9.560, P=0.011). The water content of the SAH + Panobinostat group was lower than that of the SAH + vehicle group (F=8.211, P=0.020). The correlation analysis indicated that the level of acetylation of H3 was negatively correlated with the neurological score (r = -0.585, P = 0.046). Conclusion Panobinostat can improve the neurological behavior and alleviate early brain injury in the SAH model.【Key words】 Subarachnoid hemorrhage; Brain injury; Panobinostat (LBH589); Histone deacetylase (HDAC)/Enzyme Inhibitor; Neurons; Apoptosis; Acetylation; Animals

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Expression of three common serum enzymes in patients with hepatitis B related hepatocellular carcinoma

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【Abstract】Objective To explore the clinical value of alanine aminotransferase (ALT), aspartate aminotransferase (AST) and gamma-glutamyl transpeptidase (GGT) in the diagnosis of hepatitis B – related hepatocellular carcinoma, and to provide reference for clinical diagnosis. Methods From November 2015 to November 2017, 118 patients with hepatitis B related primary liver cancer (hepatitis B – related primary liver cancer group) admitted to Tongji Huangzhou Hospital of Huazhong University of Science and Technology were selected. And 116 patients with cirrhosis (hepatocirrhosis group) and 114 healthy people were selected as control group. The levels of ALT, AST and GGT and the specificity and sensitivity of each index were compared among the three groups, and the ROC curve was analyzed. Results The levels of serum ALT, AST and GGT in the hepatitis B – related primary hepatocellular carcinoma group were higher than those in the cirrhosis group and the control group, and the above serum indicators in the cirrhosis group were higher than those in the control group[(267.1 ± 131.5) U/L vs. (31.2 ± 11.3) U/L, (76.6 ± 23.2) U/L vs. (45.2 ± 13.1) U/L, (125.3 ± 42.6) U/L vs. (53.1 ± 17.6) U/L, all \( P < 0.05 \)]. ROC curve showed that the area under GGT curve was 0.85, under ALT curve was 0.78, and under AST curve was 0.73, the area under the combined diagnostic curve of the three indicators was 0.95. The sensitivity and specificity of three combined diagnosis were higher than those of ALT, AST and GGT. Conclusion The levels of serum ALT, AST and GGT in patients with hepatitis B – related primary liver cancer are elevated, and the combined diagnosis of the three indicators has high sensitivity and specificity, which is worthy of clinical reference.

【Key words】Liver neoplasms; Hepatitis B virus; Alanine transaminase; Aspartate kinase; γ-Glutamyltransferase; Serological indicators; ROC curve; Sensitivity; Specificity

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不同压力水平无创面罩 BiPAP 通气治疗慢性阻塞性肺疾病急性加重期伴 II 型呼吸衰竭的疗效

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【摘要】目的 分析不同压力水平无创面罩 BiPAP 通气治疗慢性阻塞性肺疾病急性加重期(AECOPD)伴 II 型呼吸衰竭的疗效。方法 选择 2015 年 1 月至 2017 年 6 月晋城市人民医院收治的 AECOPD 伴 II 型呼吸衰竭的患者 120 例为研究对象,采用随机数字表法分为三组,每组 40 例。三组均给予无创面罩 BiPAP 通气治疗,其中 A 组吸气压力设置为 10～14 cmH₂O, B 组吸气压力设置为 15～19 cmH₂O, C 组吸气压力设置为 20～25 cmH₂O。对比三组临床治疗疗效及血气指标变化。结果 采用重复测量方差分析比较不同组间三个时间点 PaO₂ 水平,结果显示,治疗后 24 h A 组、B 组、C 组分别为(57.15±5.03) mmHg、(60.28±5.21) mmHg、(58.38±6.06) mmHg;治疗后 72 h A 组、B 组、C 组分别为(63.02±6.08) mmHg、(80.16±5.28) mmHg、(70.07±5.23) mmHg;治疗后 168 h A 组、B 组、C 组分别为(70.11±6.07) mmHg、(86.35±5.01) mmHg、(79.26±5.16) mmHg。不同组别 PaO₂ 差异有统计学意义(F=8.514, P<0.001),不同时间点 PaO₂ 差异有统计学意义(F=13.681, P<0.001),组别(不同处理方式)和时间点之间存在交互作用(F=9.872, P<0.001)。PaCO₂、PaO₂/FiO₂ 在组别和时间点之间均存在交互作用(均 P<0.001)。采用秩和检验对三组疗效比较,Z 值为 17.512(P<0.001),采用切分概率法进行两两比较得出:B 组治疗显效率(92.50%)明显高于 A 组(80.00%)和 C 组(80.00%)(P<0.012)。结论 15～19 cmH₂O 为吸气压可显著提高 AECOPD 伴 II 型呼吸衰竭接受无创面罩 BiPAP 治疗的效果,且随时间延长,对血气指标改善效果更佳。

【关键词】肺疾病,慢性阻塞性; 呼吸功能不全; 呼吸,人工; 无创面罩; 双水平气道正压通气; 血气分析

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Effect of different stress levels noninvasive mask BiPAP ventilation in the treatment of AECOPD with type II respiratory failure
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【Abstract】Objective To analyze the effect of different stress levels noninvasive mask BiPAP ventilation in the treatment of acute exacerbation of chronic obstructive pulmonary disease (AECOPD) with type II respiratory failure. Methods From January 2015 to June 2017, 120 patients of AECOPD with type II respiratory failure in Jincheng People’s Hospital were randomly divided into three groups by the random number table, with 40 cases in each group. The suction pressure of A group was set to 10~14 cmH₂O. The suction pressure of B group was set to 15~19 cmH₂O, while the suction pressure of C group was set to 20~25 cmH₂O. The clinical curative effect of three groups was compared. Results The PaO₂ level of three time points among the three groups were compared by repeated measurements of variance. The results showed that after treatment for 24h, the PaO₂ levels of A group, B group and C group were (57.15±5.03) mmHg, (60.28±5.21) mmHg and (58.38±6.06) mmHg, respectively. After treatment for 72h, the PaO₂ levels of A group, B group and C group were (63.02±6.08) mmHg, (80.16±5.28) mmHg and (70.07±5.23) mmHg, respectively. After treatment for 168h, the PaO₂ levels of A group, B group and C group were (70.11±6.07) mmHg, (86.35±5.01) mmHg, (79.26±5.16) mmHg, respectively. The results showed that the difference in PaO₂ of different groups was statistically significant (F=8.514, P<0.001), and there was significant difference in PaO₂ at different time points (F=13.681, P<0.001), and there was interaction between groups (different processing formulas) and time points (F=9.872, P<0.001). There was an interaction between PaCO₂
and PaO₂/FiO₂ in the groups and time points ( \( P < 0.001 \)). The rank sum test was used to compare the curative effect among the three groups. The \( Z \) value was 17.512 (\( P < 0.001 \)), and the comparison with the cutting probability method showed that the effective rate of B group was significantly higher than that of A group and C group (\( P < 0.012 \)).

**Conclusion** 15 – 19cmH₂O inhalation pressure can significantly improve the effect of non invasive mask BiPAP treatment for AECOPD with type II respiratory failure, and the improvement of blood gas index is better with time.

**Key words** Pulmonary disease, chronic obstructive; Respiratory insufficiency; Respiration, artificial; Noninvasive mask; Double level positive airway pressure; Blood gas analysis

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精细化被膜解剖用于双侧甲状腺切除术中对甲状旁腺的保护效果观察

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【摘要】 目的 探讨在双侧甲状腺癌手术中应用精细化被膜解剖法对甲状旁腺的保护效果。方法 选择 2012 年 1 月至 2017 年 12 月兰溪市人民医院行双侧甲状腺全切 + 双侧中央区淋巴结清扫治疗的双侧甲状腺癌患者 31 例作为研究对象,根据入院时间的不同,分为对照组 14 例(行传统甲状腺切除)和观察组 17 例(行精细化被膜解剖),比较两组手术时长、术中出血量、甲状腺功能下降情况、血钙和甲状旁腺素水平变化情况,甲状旁腺功能下降情况。结果 观察组的术中出血量和术后 1 d 引流量少于对照组[(51.25 ± 23.13) mL vs. (74.62 ± 24.58) mL, (52.71 ± 12.47) mL vs. (63.48 ± 15.69) mL, t = 2.722, 2.131, P < 0.05];术后 7 d,观察组的甲状旁腺素和血钙水平明显高于对照组[(24.21 ± 10.46) mg/L vs. (16.18 ± 10.57) mg/L, (2.01 ± 0.12) nmol/L vs. (1.89 ± 0.11) nmol/L, t = 2.117, 2.876, P < 0.05];术中,对照组检出甲状旁腺 31 枚,平均(2.6 ± 0.3) 枚,观察组检出 47 枚,平均(3.1 ± 0.4) 枚,两组差异有统计学意义(t = 3.863, P < 0.05);对照组一过性和永久性甲状旁腺功能下降率分别为 71.4% (10/14) 和 7.1% (1/14),观察组的一过性和永久性甲状旁腺功能下降率分别为 52.9% (9/17) 和 0.0% (0/17)。结论 在双侧甲状腺癌手术中,应用精细化被膜解剖法能够有效避免误切甲状旁腺,保护甲状旁腺功能,值得临床推广。

【关键词】 甲状腺肿瘤; 显微解剖; 精细化被膜解剖; 甲状旁腺功能减退症; 甲状旁腺功能减退症; 手术后出血


fect of refined anatomy on the protection of parathyroid glands in double thyroid cancer surgery

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【Abstract】Objective To explore the protective effect of refined anatomy on parathyroid glands in double thyroid cancer surgery. Methods From January 2012 to December 2017, 31 patients with bilateral thyroid cancer who underwent bilateral total thyroidectomy plus bilateral central lymph node dissection in Lanxi People’s Hospital were selected in the study. According to the different admission time, they were divided into 14 cases in the control group (traditional thyroidectomy) and 17 cases in the observation group (fine capsular dissection). The duration of operation, the amount of intraoperative blood loss, the drainage volume at 1 day after surgery, the retention of parathyroid glands, the changes of serum calcium and parathyroid hormone levels, and the decline of thyroid function were compared between the two groups. Results The intraoperative blood loss and the 1 d drainage volume in the observation group were less than those in the control group [(51.25 ± 23.13) mL vs. (74.62 ± 24.58) mL, (52.71 ± 12.47) mL vs. (63.48 ± 15.69) mL, t = 2.722, 2.131, all P < 0.05]. At 7 days after operation, the parathyroid hormone and serum calcium levels in the observation group were significantly higher than those in the control group [(24.21 ± 10.46) mg/L vs. (16.18 ± 10.57) mg/L, (2.01 ± 0.12) nmol/L vs. (1.89 ± 0.11) nmol/L, t = 2.117, 2.876, all P < 0.05]. During operation, 31 parathyroid glands were detected in the control group, average (2.6 ± 0.3), 47 parathyroid glands were detected in the observation group, average (3.1 ± 0.4), the difference between the two groups was statistically significant (t = 3.863, P < 0.05). The transient and permanent parathyroid function decline rates of the control group were 71.4% (10/14) and 7.1% (1/14), which of the observation group were 52.9% (9/17) and 0.0% (0/17). Conclusion In bilateral thyroid cancer surgery, the application of refined anatomy can effectively avoid miscutting the parathyroid glands and protect the parathyroid function, which is worthy of clinical promotion.

【Key words】Thyroid neoplasms; Microdissection; Refined anatomy of the capsule; Hypothyroidism; Hypoparathyroidism; Postoperative hemorrhage

不同治疗方法对Ⅳ期分化型甲状腺癌的疗效比较

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【摘要】目的 比较不同治疗方法对Ⅳ期分化型甲状腺癌（differentiated thyroid cancer，DTC）患者的疗效。方法 选择2013年1月至2015年6月山西医科大学第二医院收治的Ⅳ期DTC患者90例按照随机数字表分为A、B、C三组，每组30例。A组患者采用手术联合碘131（I 131）进行治疗，B组患者采用手术联合促甲状腺素（TSH）抑制治疗，C组患者采用手术方案联合131I+TSH抑制方案治疗，评价三组患者治疗效果、术后生活质量评分及近远期生存率。结果 治疗后，A组甲状腺球蛋白(Tg)(25.06±3.41)mU/L、C组(24.89±3.27)mU/L水平明显低于B组(45.46±3.58)mU/L，B组(0.36±0.26)mU/L，C组(0.36±0.18)mU/L，患者TSH水平均明显低于A组(0.67±0.31)mU/L(t=3.624, P<0.05)，C组患者清甲成功率50.00%（15/30）,56.67%（17/30）,均明显高于B组患者的33.33%（10/30）(χ²=3.475, P<0.05)。三组患者术后生活质量（QOLI-74）各维度评分差异有统计学意义（F=4.354, 5.216, 4.672, 5.197, P<0.05）。C组患者1年生存率(80.00%)，2年(53.33%)，3年(33.33%)，均明显高于A组(33.33%, 36.67%, 20.00%)和B组(40.00%, 33.33%, 16.67%) (χ²=5.467, 3.661, 3.287, P<0.05)。结论 对于Ⅳ期分化型甲状腺癌患者，采用手术方案联合131I+TSH抑制方案治疗能够显著提升治疗效果，改善患者术后生存质量，延长生存时间。

【关键词】甲状腺肿瘤；促甲状腺素；甲状腺球蛋白；碘放射性同位素
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Comparison of therapeutic effects of different methods on stage IV differentiated thyroid cancer

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【Abstract】Objective To investigate the effect of different treatment methods on the survival of patients with stage IV differentiated thyroid cancer (DTC). Methods From January 2013 to June 2015, 90 patients with stage IV DTC in the Second Hospital of Shanxi Medical University were randomly divided into three groups according to the digital table, A, B, and C group, with 30 cases in each group. The patients in A group were treated with surgery combined with 131I, and the patients in B group were treated with surgery combined with TSH inhibition, and the patients in C group were treated with operation combined with 131I + TSH inhibition. The therapeutic effect, postoperative quality of life score and short-term and long-term survival rate were evaluated. Results After treatment, the levels of Tg in A group [(25.06±3.41)mU/L] and C group [(24.89±3.27)mU/L] were significantly lower than that in B group [(45.46±3.58)mU/L], and the levels of TSH in B group [(0.36±0.26)mU/L] and C group [(0.36±0.18)mU/L] were significantly lower than that in A group [(0.67±0.31)mU/L] (t = 3.624, P<0.05). The success rates of nail clearance in A group and C group were 50.00% (15/30) and 56.67% (17/30), respectively, which were significantly higher than that in A group (33.33%, 36.67%, 20.00%) and B group (40.00%, 33.33%, 16.67%) (χ²=5.467, 3.661, 3.287, P<0.05). The success rates of nail clearance in A group and C group were 50.00% (15/30) and 56.67% (17/30), respectively, which were significantly higher than that in A group (33.33%, 36.67%, 20.00%) and B group (40.00%, 33.33%, 16.67%) (χ²=5.467, 3.661, 3.287, P<0.05). The postoperative quality of life (QOLI~74) scores among the three groups had statistically significant differences (F = 4.354, 5.216, 4.672, 5.197, P<0.05). The 1-year survival rate (80.00%), 2-year (53.33%) and 3-year (33.33%) survival rates in C group were significantly higher than those in A group (43.33%, 36.67%, 20.00%) and B group (40.00%, 33.33%, 16.67%) (χ²=5.467, 3.661, 3.287, P<0.05). Conclusion For patients with stage IV DTC, the combination of 131I + TSH inhibitory regimen and operation regimen can significantly improve the therapeutic effect, improve the quality of life and prolong the survival time.

【Key words】Thyroid neoplasms; Thyrotropin; Thyroglobulin; Iodine radioisotopes
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丁苯酞联合依达拉奉对老年急性脑梗死患者脑血流动力学、血管内皮功能和细胞炎性因子的影响

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【摘要】目的探讨丁苯酞联合依达拉奉对老年急性脑梗死患者脑血流动力学、血管内皮功能和细胞炎性因子的影响。方法选择2017年5月至2018年5月温岭市第一人民医院收治的老年急性脑梗死患者82例作为观察对象,按照随机数字法分为治疗组41例与对照组41例。对照组患者给予依达拉奉治疗,治疗组患者在对照组基础上结合丁苯酞治疗。两组疗程均为2周。观察两组治疗前和治疗2周NIHSS评分变化、脑血流动力学指标变化,包括平均流速、血管阻力指数和最大峰值流速;观察两组治疗前和治疗2周血管内皮功能指标变化,包括一氧化氮(NO)和内皮型NO合成酶(eNOS),细胞炎症因子指标变化,包括白介素-6(IL-6)、C反应蛋白(CRP)和肿瘤坏死因子-α(TNF-α)。结果治疗组治疗2周NIHSS评分(18.49±1.87)分,低于对照组的(22.17±1.32)分(t=10.294,P<0.05)。治疗组治疗2周平均流速(31.70±3.25)cm/s,血管阻力指数(0.79±0.12)和最大峰值流速(54.21±2.65)cm/s,高于对照组的(26.91±4.39)cm/s、(0.61±0.05)和(43.76±3.10)cm/s(t=5.615,P<0.05)。治疗组治疗2周NO(71.27±6.58)μmol/L和eNOS(66.37±3.65)U/mL,高于对照组的(62.30±2.71)μmol/L和(57.89±4.08)U/mL(t=8.071,9.919,9.919,P<0.05)。治疗组治疗2周IL-6(27.36±2.71)pg/mL,CRP(2.87±0.76)mg/L和TNF-α(98.24±10.48)ng/mL,低于对照组的(43.25±4.0)pg/mL、(4.59±0.91)mg/L和(160.27±15.42)ng/mL(t=20.702,9.289,22.171,P<0.05)。结论丁苯酞联合依达拉奉可改善老年急性脑梗死患者脑血流动力学、血管内皮功能,减轻细胞炎症反应,且疗效显著,值得临床研究。【关键词】梗塞,大脑中动脉;血管阻力;血流速度;一氧化氮;一氧化氮合酶;白细胞介素6;肿瘤坏死因子α;丁苯酞;依达拉奉;老年人
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Effect of butylphthalide combined with edaravone on cerebral hemodynamics, vascular endothelial function and cytokines in elderly patients with acute cerebral infarction
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【Abstract】ObjectiveTo investigate the effects of butylphthalide combined with edaravone on cerebral hemodynamics, vascular endothelial function and cytokines in elderly patients with acute cerebral infarction. Methods From May 2017 to May 2018, 82 elderly patients with acute cerebral infarction admitted to the First People’s Hospital of Wenling were selected and randomly divided into two groups according to the digital table, with 41 cases in each group. The patients in the control group were treated with edaravone, while the patients in the treatment group were treated with butylphthalide on the basis of the control group. The two groups were treated for 2 weeks. The neurological deficit scale (NIHSS), cerebral hemodynamics, vascular endothelial function and cytokines were compared between the two groups before and after treatment. Results The NIHSS score of the treatment group was (18.49 ± 1.87) points, which was lower than (22.17 ± 1.32) points of the control group at 2 weeks after treatment (t = 10.294, P < 0.05). The mean flow velocity [(31.70 ± 3.25) cm/s], vascular resistance index (0.79 ± 0.12) and maximum peak flow velocity [(54.21 ± 2.65) cm/s] in the treatment group were higher than those in the control group [(26.91 ± 4.39) cm/s, (0.61 ± 0.05) and (43.76 ± 3.10) cm/s] (t = 5.615, 8.866, 16.407, all P < 0.05). The contents of NO [(71.27 ± 6.58) μmol/L] and eNOS [(66.37 ± 3.65) U/mL] in the treatment group were higher than those in the control group [(62.30 ± 2.71) μmol/L and (57.89 ± 4.08) U/mL], all P < 0.05. The contents of IL-6, TNF-α, CRP and eNOS in the treatment group were lower than those in the control group (t = 20.702, 9.289, 22.171, 9.919, all P < 0.05). Conclusion Butylphthalide combined with edaravone can improve cerebral hemodynamics, vascular endothelial function and cytokines in elderly patients with acute cerebral infarction, and show better therapeutic effect, which is worth clinical study.
were higher than those in the control group \((62.30 \pm 2.71) \mu\text{mol/L and (57.89 \pm 4.08) U/mL}\) \((t = 8.071, 9.919, \text{all } P < 0.05)\). After 2 weeks of treatment, the contents of IL-6 \([(27.36 \pm 2.71) \mu\text{g/mL}], \text{CRP } [(2.87 \pm 0.76) \mu\text{g/mL}] \text{ and TNF-} \alpha [ (98.24 \pm 10.48) \mu\text{g/mL}] \text{ in the treatment group were lower than those in the control group } [(43.25 \pm 4.10) \mu\text{g/mL}, (4.59 \pm 0.91) \mu\text{g/mL} \text{ and (160.27 \pm 15.42) ng/mL}] \((t = 20.702, 9.289, 21.303, \text{all } P < 0.05)\). The total effective rate of treatment group (90.24%) was higher than that of control group (68.29%) \((\chi^2 = 6.011, P < 0.05)\). **Conclusion** Butylphthalide combined with edaravone can improve cerebral hemodynamics, vascular endothelial function and alleviate cellular inflammatory reaction in elderly patients with acute cerebral infarction, and the curative effect is significant, which is worthy of clinical study.

**Keywords** Infarction, middle cerebral artery; Vascular resistance; Blood flow velocity; Nitric oxide; Nitric oxide synthase; Interleukin-6; Tumor necrosis factor-alpha; Butylphthalide; Edaravone; Aged

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【摘要】目的 分析患者自控静脉镇痛（PCA）纳布啡 + 舒芬太尼对全髋关节置换术（THA）患者的镇痛和镇静评分及镇痛效果的影响。方法 选取2017年1~12月临汾市人民医院收治的72例行THA治疗的患者,均行PCA,按照麻醉方式不同分为A组给予纳布啡+B组给予舒芬太尼,C组给予纳布啡 + 舒芬太尼,三组各24例。比较三组手术前后患者Ramsay镇静评分、VAS评分及镇痛效果。结果 A组患者术后3~12,24时Ramsay镇静评分为(2.78±0.32)分,(2.59±0.40)分,(2.45±0.26)分,C组患者术后3~12,24时Ramsay镇静评分为(2.37±0.24)分,(2.01±0.15)分,(1.89±0.22)分,较B组同时间点的(3.07±0.58)分,(3.01±0.62)分,(2.73±0.47)分明显下降(F组间=6.83,F组间=0.01;F组间=7.24,F组间<0.01;F组间=0.69,F组间=0.40)。B组患者术后3~12,24时VAS评分为(3.01±0.72)分,(1.98±0.57)分,(1.24±0.38)分,C组患者术后3~12,24时VAS评分为(2.35±0.75)分,(1.74±0.46)分,(1.18±0.26)分,较A组同时间点的(3.35±0.59)分,(3.18±0.46)分,(3.01±0.33)分明显下降(F组间=7.02,P组间<0.01;F组间=5.42,P组间=0.02;F组间=3.35,P组间=0.09,P组间=0.68)。三组患者镇痛满意度的比较,差异有统计学意义(χ²=7.66,P<0.05);其中,C组患者镇痛满意度(91.67%)较A组(58.33%),B组(62.50%)明显升高(χ²=5.44,4.25,均P<0.05)。结论PCA纳布啡 + 舒芬太尼用于行THA治疗的患者镇静和镇痛效果确切,舒适性高,可有效减轻患者痛苦,故此具有确切的临床应用价值。

【关键词】关节成形术;置换;髋;纳布啡; 舒芬太尼; 疼痛视觉模拟评分法;Ramsay评分;病人满意度

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Effect of nabprofen and sufentanil on analgesia score and sedation score in patients with total hip arthroplasty
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【Abstract】Objective To analyze the effects of nabprofen combined with sufentanil on Ramsay sedation score, visual analogue scale (VAS) and analgesic effect in patients undergoing total hip arthroplasty (THA) for patient-controlled intravenous analgesia (PCA). Methods From January 2017 to December 2017, 72 patients with THA in the Department of Orthopedics from the People’s Hospital of Linfen were divided into three groups; A group was given nabprofen, B group was given sufentanil, C group was given nabprofen + sufentanil, with 24 cases in each group. Ramsay sedation score, VAS score and analgesic effect were compared among the three groups before and after operation. Results The Ramsay sedation scores of A group at 3, 12 and 24 hours after operation were (2.78 ± 0.32) points, (2.59 ± 0.40) points and (2.4 ± 0.26) points, respectively, and the Ramsay sedation scores of C group at 3, 12 and 24 hours after operation were (2.37 ± 0.24) points, (2.0 ± 0.15) points, (1.89 ± 0.22) points, respectively, which were decreased significantly compared with those of B group at the same time point [(3.07 ± 0.58) points, (3.01 ± 0.62) points and (2.73 ± 0.47) points] (F between group = 6.83, P between group = 0.01; F time point = 7.24, P time point < 0.01; F between group × time point = 0.69, P between group × time point = 0.40). The VAS scores of group B at 3, 12 and 24 hours after operation were (2.40 ± 0.72) points, (1.98 ± 0.57) points and (1.24 ± 0.38) points, respectively, and the VAS scores of C group at 3, 12 and 24 hours after operation were (2.35 ± 0.75) points, (1.74 ± 0.46) points and (1.18 ± 0.26) points, respectively, which were decreased significantly compared with those of A group at the same time point [(3.35 ± 0.59) points, (3.18 ± 0.46) points and (3.01 ± 0.33) points] (F between group = 7.02, P between group < 0.01; F time point = 5.42, P time point = 0.02; F between group × time point = 0.39, P between group × time point = 0.68). There was statistically signifi-
cantdifference among the three groups ($\chi^2 = 7.66, P < 0.05$). The analgesic satisfaction of C group (91.67%) was significantly higher than that of A group (58.33%) and B group (62.50%) ($\chi^2 = 5.44, 4.25$, all $P < 0.05$).

**Conclusion** The sedative and analgesic effects of PCIA nabuprofen combined with sufentanil for patients with THA are definite and comfortable, which can effectively alleviate pain, so it has a definite clinical application value.

**Key words** Arthroplasty, replacement, hip; Analgesia; Analgesia; Nabuprofen; Sufentanil; Pain visual analogue scale; Ramsay score; Patient satisfaction

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中药外敷对跟骨骨折术前软组织肿胀治疗效果评价

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【摘要】目的 评价中药外敷对跟骨骨折术前软组织肿胀治疗效果。方法 选取2012年6月至2017年5月泸州市中医医院经治的182例(215足)跟骨骨折患者。采用随机数字表法将患者分为治疗组91例(108足)对照组91例(107足)。两组均采用静脉滴注20%甘露醇注射液125mL/次,2次/d;治疗组另加跟骨骨折处外敷泸州市中医医院自制药消肿活血散,每天1次。并记录全部患者性别,年龄,骨折类型,受伤到就诊时间,肿胀消退情况,视觉模拟评分法(VAS)评分。结果 患者就诊后3d,5d,7d消肿率治疗组较对照组明显增高,差异均有统计学意义[3d(χ²=3.856,P=0.049)],5d(χ²=10.611,P=0.004),7d(χ²=6.266,P=0.012)]。患者就诊后5d,7dVAS评分情况治疗组较对照组明显降低,差异均有统计学意义[5d(t=2.158,P=0.034),7d(t=2.878,P=0.005)]。分析提示,在促进肿胀消退及减轻疼痛方面,治疗组比对照组效果明显,差异有统计学意义(P<0.05)。结论 中药外敷对跟骨骨折术前软组织肿胀治疗效果显著,值得临床推广。

【关键词】骨折;跟骨;中药外敷;软组织肿胀

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Effect of traditional Chinese medicine on the preoperative swelling of calcaneal fracture

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眩晕/头晕患者的临床研究分析

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【摘要】目的 分析就诊眩晕/头晕患者的临床特征, 为临床诊断治疗提供参考。方法 收集 2015 年 1月至 2017 年 12 月于胶州市人民医院就诊的眩晕/头晕患者 256 例的资料, 分析总结各种病因的分布情况。结果 共纳入 256 例患者, 年龄 (56.4 ± 10.7) 岁, 其中男 97 例, 女 159 例, 男女比例约为 1:1.64, 45~59 岁年龄段占总人数的比例最高 (χ² = 37.09, P < 0.05)。常见原因依次为良性阵发性位置性眩晕 (BPPV) (34.38%), 持续性姿势性头晕 (PPPD) (21.09%), 脑血管因素 (15.63%), 前庭神经炎 (VN) (8.20%), 前庭性偏头痛 (VM) (5.86%), 前庭阵发症 (VP) (3.91%), 梅尼埃病 (MD) (2.73%), 伴有眩晕的突发性耳聋 (1.56%), 病因不明 (6.64%)。各病因患者年龄差异有统计学意义 (F = 83.74, P < 0.05)。BPPV 为 < 44 岁、45~59 岁年龄段眩晕/头晕患者的首位病因 (χ² = 19.74, 24.35, 均 P < 0.05), PPPD 为第 2 位病因 (χ² = 16.83, 18.45, 均 P < 0.05), 然而在 60~74 岁、≥75 岁患者中, 脑血管因素导致的头晕与 BPPV 的所占比例相近, 为患者最重要的两个病因 (χ² = 37.09, P < 0.05)。结论 头晕/眩晕临床发生率较高, 病因多而复杂, 常见病因 BPPV 及 PPPD, 随着患者年龄增加脑血管因素导致的头晕患者比例增加。

【关键词】眩晕; 头晕; 阵发性偏头痛; 梅尼埃病; 前庭神经炎; 听觉丧失, 感音神经性

Clinical analysis of patients with vertigo or dizziness
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研究与实践

一期侧卧位单通道微创经皮肾镜钬激光治疗复杂性肾结石中联合软性膀胱镜处理平行盏结石的疗效观察

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【摘要】目的 探讨软性膀胱镜在一期侧卧位单通道微创经皮肾镜钬激光治疗复杂性肾结石中处理平行盏结石的临床应用效果。方法 选取北京大学首钢医院、北京市门头沟区医院、北京市门头沟区中医院 2016 年 1 月至 2018 年 8 月收治的复杂性肾结石患者 67 例,采取侧卧位单通道微创经皮肾镜钬激光碎石方法治疗复杂性肾结石,术中应用软性膀胱镜处理穿刺道平行盏结石。术后均保留 F14 肾造瘘管 7 d,尿管 2 3 d,输尿管支架管 4 周。结果 手术时间 (93 ± 21) min,出血量 (87 ± 23) mL,术后住院时间 (7 ± 2) d,均无严重并发症发生。碎石成功率 100.00%,一期净石率 98.50%。结论 软性膀胱镜在一期侧卧位单通道微创经皮肾镜钬激光治疗复杂性肾结石中处理平行盏结石的方法安全、有效、可行;净石率高;易于为医患双方接受。

【关键词】肾结石; 膀胱镜检查; 肾造口术,经皮; 钬激光碎石; 单通道; 微通道; 微创

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Clinicaleffectofone-stageflexiblecystoscoptotreatcalculisincaleyparallelledtopuncturepassageduring
single-channelminimallyinvasivepercutaneousnephrolithotomycombinedwithholmiumlaserforcomplex
renalcalsicofpatientswithlateraldecubitusposition

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【摘要】目的研究健康教育管理模式在行动态心电图检查的冠心病患者中的作用。方法选取山西省人民医院2017年4－10月行动态心电图检查的冠心病患者200例，采用随机数字表法分为对照组和观察组，每组100例。两组均行动态心电图检查，观察组在完成动态心电图检查后行健康管理干预，所有患者随访6个月，比较两组患者健康管理前后对医务人员的满意度、预防冠心病知识掌握情况、生存质量评分和依从冠心病预防措施的比例。结果观察组健康管理后对医务人员的满意度[99.0%(99/100)]较管理前[90.0%(90/100)]显著提高(χ² = 6.157, P = 0.013)，预防冠心病知识掌握情况[94.0%(94/100)]较管理前[82.0%(82/100)]显著提高(χ² = 5.038, P = 0.025)，生存质量评分[65.27±8.39分]较管理前[(51.46±6.33分)]显著提高(t = 13.140, P < 0.05)，依从冠心病预防措施比例[95.0%(95/100)]较管理前[83.0%(83/100)]显著提高(χ² = 6.180, P = 0.013)。观察组健康管理后对医务人员满意度高于对照组[87.0%(87/100)](χ² = 9.293, P = 0.002)，预防冠心病知识掌握情况高于对照组[84.0%(84/100)](χ² = 4.085, P = 0.043)，生存质量评分高于对照组[(52.07±6.73分)](t = 12.273, P < 0.05)，依从冠心病预防措施比例高于对照组[84.0%(84/100)](χ² = 5.321, P = 0.021)。结论健康管理模式能有效提高冠心病患者对疾病的预防意识和对医疗服务的满意程度，提高患者的生存质量评分。

【关键词】冠状动脉疾病; 心电描记术; 心电描记术，便携式; 健康教育; 管理; 病人满意度; 病人依从

Application of health education management mode in patients undergoing dynamic electrocardiogram examination
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自身免疫性肝炎患者的健康教育效果观察

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【摘要】目的探讨自身免疫性肝炎患者积极有效的健康教育措施及效果。方法选取2016年7月至2017年7月在绍兴市立医院接受治疗的自身免疫性肝炎患者72例为研究对象,采用随机数字表法将患者随机分成观察组和对照组,其中的36例作为观察组(开展健康教育),其余的36例作为对照组(开展常规护理),对两组干预结果进行对比和观察。结果通过对观察组开展健康教育,半年后发现健康教育前观察组[(11.02±2.03)分、(13.24±2.41)分、(10.94±2.15)分、(13.40±2.35)分、(18.02±3.34)分]和对照组[(10.89±1.96)分、(13.12±2.11)分、(10.88±2.34)分、(13.12±2.45)分、(17.98±3.32)分]患者健康行为差异均无统计学意义(t=0.235,0.125,0.142,0.632,1.223,均 P>0.05);但健康教育后观察组[(17.54±3.95)分、(17.35±2.67)分、(17.20±3.37)分、(19.67±3.81)分、(24.16±4.27)分]健康行为相比于对照组[(13.23±2.13)分、(14.22±2.24)分、(13.45±3.22)分、(16.44±3.22)分、(20.43±3.22)分]明显要优(t=6.035,5.241,6.852,7.054,8.065,均 P<0.05)。结论在自身免疫性肝炎患者住院过程中加强健康教育,有利于帮助其养成良好的饮食生活习惯,加强用药依从性,做出有利于疾病康复的健康行为。

【关键词】肝炎,自身免疫性;健康教育;护理;健康行为

Analysis of health education measures for autoimmune hepatitis

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临床精细化护理在老年反流性食管炎患者护理中的应用分析

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【摘要】 目的 探究老年反流性食管炎患者护理中临床精细化护理的效果,为临床提供指导。方法 选取 2014 年 6 月至 2017 年 4 月舟山医院 80 例老年反流性食管炎患者作为观察对象,采用随机数字表法将患者分为观察组 (40 例,应用临床精细化护理干预)、对照组 (40 例,应用常规护理干预)。研究比较观察组和对照组患者的依从性、生活质量评分、睡眠质量评分、心理状况评分。结果 观察组患者依从性 (97.50%) 显著高于对照组 (80.00%) (χ² = 6.134, P < 0.05);观察组患者护理后生活质量评分 [(102.64 ± 5.46) 分] 显著高于对照组,睡眠质量评分 [(9.02 ± 0.65) 分] 显著低于对照组,心理状况评分 [(2.86 ± 0.50) 分] 显著低于对照组 (t = 2.054, 14.743, 均 P < 0.05)。结论 对老年反流性食管炎患者采取临床精细化护理切实可行,效果明显。

【关键词】 食管炎,消化性; 护理; 药物治疗依从性; 生活质量; 老年人
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Application of clinical fine nursing in elderly patients with reflux esophagitis

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行为护理联合营养支持对胃癌化疗患者营养状态及生活质量的影响

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【摘要】目的 探讨行为护理联合营养支持应用在胃癌化疗患者中的效果及临床价值。方法 选取2015年10月至2018年6月浙江省台州医院接受化疗的胃癌患者150例，按照护理方式不同分为观察组和对照组，每组75例。对照组采取常规护理，观察组联合行为护理和营养支持方法。对比两种患者护理效果。结果 观察组干预后总蛋白、白蛋白分别为（63.88±5.01）g/L，（36.97±3.93）g/L，均高于对照组的（55.02±2.82）g/L，（26.32±2.11）g/L（t=14.029，11.873，均 P＜0.05）。观察组躯体功能评分、生理职能评分、躯体疼痛评分、总体健康评分、活力评分、社会功能评分、情感职能评分、精神健康评分分别为（77.63±3.25）分，（82.74±3.11）分，（77.95±3.26）分，（82.91±3.85）分，（85.87±3.66）分，（83.97±4.03）分，（87.35±4.13）分，（88.74±4.35）分，均高于对照组的（70.54±1.82）分，（72.55±1.59）分，（68.54±1.37）分，（70.03±1.97）分，（73.05±1.44）分，（73.54±1.61）分，（78.61±2.13）分，（76.23±2.03）分（t=8.327，9.018，8.011，10.329，9.311，9.548，9.016，8.237，均 P＜0.05）。结论 行为护理联合营养支持应用在胃癌化疗患者中可以改善化疗期间患者营养状况，提升生活质量，值得在临床进一步推广。

【关键词】 胃肿瘤；护理；行为；营养支持；抗肿瘤联合化疗；营养状况；生活质量

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Influence of behavioral nursing combined with nutritional support on nutritional status and quality of life of gastric cancer patients undergoing chemotherapy

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临床各期实施心理护理对流行性出血热患者住院满意度的影响
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【摘要】目的 通过分析流行性出血热患者临床各期出现的心理特点,采取针对性心理护理措施,以提高患者住院满意度。方法 前瞻性收集2016年1月1日至2018年8月31日广东省第二人民医院感染科收治的流行性出血热患者50例为研究对象,采用随机数字表法分为干预组和对照组各25例,对照组实施常规护理,干预组在对照组基础上针对疾病临床各期的特点实施个性化心理护理,比较两组患者住院满意度。结果 对照组住院满意度为84.0%,干预组住院满意度为100.0%,采用心理护理后,患者住院满意度上升16.0%,差异有统计学意义(χ²=4.35, P<0.05)。结论 通过对流行性出血热患者临床各期实施个性化心理护理,可减缓患者焦虑、恐惧心理,取得患者的配合,提高患者住院满意度。

【关键词】肾综合征出血热; 心理疗法; 护理; 病人满意度
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Effect of psychological nursing on the satisfaction of patients with epidemic hemorrhagic fever in hospital
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Advances in the application of damage control orthopaedics in the fractures with severe multiple injuries

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Abstract: With the traffic accident, sudden disaster and safety accidents occur year after year, the injured patients often complicated with multiple injuries, how to maximize the treatment of the injury to improve the survival rate, is an important problem faced by orthopedic surgeons. In recent years, damage control orthopaedics (DCO) technology has been gradually developed, DCO aims to control the patients’ primary injury, to prevent further deterioration of the disease, compared with the traditional treatment, it can effectively reduce the second strike and complications, is conducive to the recovery of patients. In this paper, the development of DCO concept, the theoretical basis of DCO, the adaptation of DCO, the implementation steps of DCO and the best time, the application of DCO in the treatment of severe multiple injuries and the prospect of DCO application are reviewed.

Keywords: Hospitals, osteopathic; Fracture; Severe multiple trauma; Research progress; Review

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