上皮干细胞和 TA细胞的增殖特性及调控机制为研究细胞周期和诊断治疗某些与表皮增殖异常的疾病提供了重要基础.

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Study on cell cycle of epidermal transient amplifying cells in mice

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Abstract Objective: To investigate the proliferative properties of epidermal transient amplifying (TA) cells in mice. Methods: Using ICC-TdR double labeling technique, adult and neonatal mice were intraperitoneally injected with BrdU. Twelve hours later, they were injected with ^{3}H-TdR. After 12 h, they were killed to excise the skin. The skin was fixed and observed under microscope. Results: ICC-TdR double-labeled cells were rarely detected in the epidermis in adult mice while they were seen in large number in the epidermis in neonatal mice. Meanwhile, the double-labeled cells of hair follicles were restricted to matrix area. Conclusion: The cell cycle of the epidermal TA cells in mice is shortened to less than 24 h under proli-ferative condition.

Key words transient amplifying cell; epidermis; mouse; cell cycle

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三叉神经周围支撕脱术的改进

个案与短篇

An improved method of avulsion of peripheral branch of trigeminal nerve

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三叉神经周围支撕脱术是治疗三叉神经痛常用方法之一,传统方法术后容易复发[1]。为提高疗效,自 1985年以来,我们采用上颌神经高位撕脱和下颌神经多支撕脱术治疗 34例,获满意效果,现报告如下。

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1 临床资料

1.1 一般资料

34例患者,男 11例,女 23例。年龄 32~ 71岁,其中 40~ 50岁者 26例。右侧 19例,左侧 15例。上颌神经痛 20例,下颌神经痛 14例。病史: 8个月至 4年,均接受过药物治疗,未能根治,其中 13例行酒精注射,3例行射频热凝术,术后3~ 24个月复发。

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genes in the murine hair follicle[J]. Dev Dyn, 1996, 205(4): 379-382.

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Expression of stem cell factor in hair follicle epithelium

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Abstract **Objective**: To determine whether the hair follicle epithelial cells express the stem cell factor (SCF) *in vivo*. **Methods**: The expression of SCF in the follicular epithelium was detected with immunohistochemistry and *in situ* hybridization. **Results**: The expression of the gene encoded SCF showed strong intensity in the region of midpoint of hair follicle. However, the expression of SCF of hair follicle epithelium at protein level was identical but weaker as compared with that of the gene expression. **Conclusion**: The expression of SCF in hair follicle epithelium is different at protein and gene levels.

Key words hair follicle; stem cell factor

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1.2 手术方法

1.2.1 上颌神经高位撕脱术

麻醉: 2% 普鲁卡因眶下管内传导麻醉。

切口: 沿患侧唇颊皱襞弧形切开粘膜 4 cm。

剖开眶下管: 切开骨膜,显露眶下孔,撕脱眶下神经末稍,暂留近心端,于眶下孔下缘 0.5~0.7 cm处用电钻形成直经 1.5~2 cm半圆形骨缺损,用骨凿截除眶下管,眶下沟下壁,使其与上颌窦相通,但保存上颌窦粘膜完整。

撕脱上颌神经: 用小型骨膜剥离子从眶下管、眶下沟至眶下裂处,仔细分离上颌神经与伴行血管后,缓缓将上颌神经完全抽出撕脱,长约 3.7~4.3 cm,用明胶海绵和骨蜡填塞止血。缝合伤口,包扎。

1.2.2 下颌神经多支撕脱术

麻醉: 2% 普鲁卡因下颌传导和颊后区浸润麻醉。

切口: 患者大张口,沿翼下颌韧带外缘做 S型切开粘膜 2~2.5 cm。

显露下颌孔: 沿切口钝性分离翼内肌,进入翼下颌间隙,找到下颌小舌后,向内侧尽量拉开软组织,可直视进入下颌孔的下齿槽神经。

下颌神经多支撕脱: 拉出下齿槽神经尽可能高位切断之,其近心端结扎,再用中弯血管钳夹持神经远端,将其缓缓以下颌管内抽出 5~6 cm撕脱。然后,在下颌磨牙区舌侧找出舌神经,于下颌升支前缘下方颊侧找到颊神经,分别撕脱 2~3 cm缝合伤口。

1.3 结果

术后 29例获得随访(随访率 85.2%)其中 5年以上 14例,4~5年 10例,2~3年 2例,不足 2年 3例,均无复发。

2 讨论

2.1 适应症选择

上颌神经高位撕脱术适用于眶下神经经酒精封闭或末稍撕脱复发病例。文献[2]报道眶下孔至圆孔距离为 4.2~4.5 cm,本法撕脱神经长度为 4 cm左右,接近圆孔,达到周围枝根除。

下颌神经多支撕脱术适用于经卵圆孔酒精封闭后失败及伴有舌神经或颊神经症状的三叉神经第三支痛者。

局麻下手术,创伤小,耗时短,较安全,本组中 6例高血压,2例冠心病,1例肾移植术后患者,均顺利完成治疗。

2.2 注意事项

凿开眶下管入上颌窦过程中,操作要仔细避免损伤上颌窦粘膜。分离翼下颌间隙时,防止损伤肌肉过多而致术后张口受限。撕脱神经动作宜轻巧,缓缓抽出,勿用猛力,保证神经支完整脱出,避免再发。

2.3 优点

不需高精特殊设备,操作简单易于掌握,便于基层推广。

关键词 三叉神经;切断术

中图法分类号 R745.11 文献标识码 B

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