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Changes of cortical somatosensory evoked potentials following ischemia/reperfusion injury of the spinal cord in rabbits and their significance*

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Abstract Objective: To observe the changes in sensory conduction function of the spinal cord following ischemia/reperfusion injury. Methods: Twenty-four rabbits were divided into four groups at random. The animals in group A were normal controls and inflicted on those in groups B, C and D was ischemia/reperfusion injury of the spinal cord by selective occlusion of lumbar artery respectively for 30, 60 and 90 min. Cortical somatosensory potentials (CSEPs) were continuously recorded in all the three groups. Results: CSEPs disappeared in 13.2± 4.0 min after ischemia. During the reperfusion, the peaks of both N1 and P1 wave of CSEPs were decreased in order from group D, group C, group B to group A. Conclusion: The damage in sensory function of the spinal cord was worsened with the reperfusion injury due to time prolongation of ischemia.

Key words spinal cord injury; ischemia/reperfusion; cortical somatosensory evoked potential; rabbit

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视交叉神经鞘膜瘤 1例

A case of opticchiasm neuralemmoma

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患者,男,28岁。因头痛 5年,性功能减退 3月,伴视力下降 10d入院。查体: 左眼视力 1m数指,右眼视力 0.5,左眼鼻侧视野缺损,右眼颞侧视野缺损,双眼底视乳头水肿边界不清。头颅 MRI提示: 鞍区 3.1 cm× 3.1 cm× 4.7 cm占位性病变,境界尚清,垂体向下受压变扁,三脑室受压,注射 GD-GTPA后肿瘤有明显不均匀强化,囊性部分无增强效应,术前考虑为颅咽管瘤。手术采用右翼点入路,术中见肿瘤来源于视交叉,鞍隔完整,垂体柄正常,视神经紧靠鞍结节,视交叉被压扁,穿刺抽出约 4ml陈旧血性液,分块切除大部分肿瘤。术后病理诊断为神经鞘膜瘤。术后左眼失明,未出现其它并发症。随访半年左眼失明,右眼视力 0.7,右眼颞侧视野缺损改善。

讨论

视交叉神经鞘膜瘤极罕见,本例患者术前诊断曾考虑为颅咽管瘤。本类疾病与垂体腺瘤、颅咽管瘤均表现为内分泌功能障碍及视力视野改变,不易鉴别,颅咽管瘤在 CT上或平片上可显示呈现弧线或蛋壳状钙化,在 MR上表现为鞍上囊性或实质性肿物,边界清楚、类圆形或分叶状,多伴有梗阻性脑积水,蝶鞍往往正常,注射 GD-GTPA后实质部分明显强化,囊壁呈环状强化;垂体腺瘤在 MR上表现蝶鞍扩大,由鞍内向上突入鞍上池,向下可突入蝶窦。视交叉神经鞘膜瘤在 MR上表现为鞍区占位性病变,垂体向下受压变扁,可有囊性变,信号不均匀,注射 GD-GTPA后可有不均匀增强。视交叉神经鞘膜瘤为良性肿瘤,手术切除后,可望保留部分视力。

关键词 神经鞘膜瘤;视交叉神经肿瘤

中图法分类号 R739.41

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