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Protective effects of platelet-activating factor antagonist BN50739 on lipopolysaccharide-induced hepatic injury in rats

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Abstract Objective: To investigate the injurious effects of endotoxin (lipopolysaccharide, LPS) and platelet-activating factor (PAF) on the liver and the protective effects of PAF antagonist BN50739 in rats. Methods: The changes of AST, ALT, LDH and tissue MDA were measured and mitochondrial SDH activity and the morphology of hepatic tissue observed *in vivo*. Meanwhile, the survival rate of hepatocytes, supernatant LDH of cultured hepatocytes and hepatocytic membrane fluidity were also detected. Results: ① The marked increase in serum AST, ALT and LDH and tissue MDA induced by LPS and PAF were significantly reduced by pretreatment with BN50739 ($P < 0.05$). ② The decrease of SDH in the liver by LPS and PAF was also significantly improved by BN50739 ($P < 0.05$). ③ BN50739 could partially attenuate such morphological changes induced by LPS and PAF in the liver as central vein hyperemia, hepatic sinusoid dilation and inflammatory infiltration. Multifocal necrosis was observed only in the case of LPS. ④ There was no marked increase of the supernatant LDH of cultured hepatocytes but the membrane fluidity was markedly decreased by LPS and PAF. Conclusion: BN50739 has some protective effects on hepatic injury induced by LPS and PAF via suppressing peroxidation and protecting hepatic energy metabolism pathway.

Key words BN50739; endotoxin; platelet-activating factor; liver injury; rat

舌腹涎腺肌上皮瘤一例报告

A case report of salivary glands myoepithelioma at the ventral surface the tongue

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涎腺肌上皮瘤是颌面部少见肿瘤,发生于舌部组织更为罕见,现将我们遇到的1例报告如下。

患者黄某,男, 59岁,因左舌胜利部无痛性包块2月入院。检查:舌腹左侧部触及一约3.5 cm×3.0 cm×3.0 cm大小突起包块,质硬,不活动,界线清楚,包块中央有一纵行糜烂,有白色分泌物覆盖,全身检查未见异常。在局麻下行左舌腹部包块切除术,术中见瘤体组织内、上、外侧有肌肉包裹,包块有包膜、质硬。

病理检查示:送检舌腹部肿块见瘤组织,瘤细胞呈梭形,圆形,卵圆形,深染,部分胞浆空,部分嗜酸性,瘤细胞呈巢团状,梁索状分布,间质纤维组织增生,较多淋巴细胞浸润,血管扩张充血。免疫组化染色:肿瘤细胞 Actin(肌动 Pr)阳性,细胞角 Pr阳性, S-100蛋白阳性。病理诊断:(舌腹)涎腺肌上皮瘤。

关于肌上皮瘤的系统报告较少,根据 Sciubba等的统计资料,肌上皮瘤约占所有涎腺肿瘤的1%,发生部位以腮腺居多,颌下腺次之,小涎腺以腭部居多[1]。肌上皮瘤在临床上表现为良性过程,但缺乏更多的临床特点,故其确切诊断依赖于病理检查。肌上皮瘤的生物学行为与多形性腺瘤基本相似,故治疗原则也相同。本例术后6月随访无复发。

关键词 舌部;涎腺;肌上皮瘤

中图法分类号 R739.86

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