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Changes of mRNA of endothelin receptor in kidneys of rats at the early stage after severe burns*

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Abstract The changes of the quantity and distribution of mRNA of endothelin receptor A (ETA) and endothelin receptor B (ETB) in rat kidneys at different time phases during the early stage after severe burns were dynamically observed. It was found that the percentages of ETA and ETB mRNA in kidneys were significantly elevated at the 1st hour postburn (the former reached its climax on the 3rd while the latter did so on the 6th hour postburn) and ETA mainly expressed in cortex and ETB in medulla. Our findings suggest that the changes of ET receptors participate in damage of the renal function.

Key words burns; kidney; endothelin; *in situ* hybridization

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个案与短篇

恶性淋巴瘤并食道腺癌一例

Report of a case of lymphoma associated with adenocarcinoma of esophagus

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恶性肿瘤多原发癌屡见报道,但恶性淋巴瘤并食道腺癌则极少有报道,现将我院收治的一例报告如下。

患者,男,72岁。因左侧鼻塞4月,左鼻肿大1月于1992年3月住我院五官科,查体:左鼻翼鼻背明显肿大,左鼻腔见一淡红色新生物,表面不平,行鼻腔肿块活检,病理诊断:左鼻腔非何杰金氏病(病理号:921335),给予^{60}Co放疗(左鼻前野,^{60}Co总剂量为4000 Gy,共照射20次,每次200 Gy)。一月后,肿块消失,鼻塞好转出院。1996年3月,因进行性吞咽困难1年,加重3月收入我院消化科,胃镜检查见食道下段一3.0 cm×3.5 cm肿块,向下侵及贲门,触之出血,食道明显狭窄,行肿块活检,病理诊断:食道腺癌(病理号:961272)。因全身情况差,食道癌已属晚期,行姑息性治疗,于狭窄部位安置记忆合金支架,术后吞咽困难消失出院。

讨论

根据Warren等[1]提出的多原发癌诊断标准:① 每一个肿瘤组织学上必须均是恶性;② 每一个肿瘤有其独特的病理形态;③ 肿瘤发生在不同部位,两者不相连续;④ 必须排除复发或转移癌的可能性。本例符合上述标准。多原发癌的病因尚不完全清楚,苏勇等[2]对160例多原发癌进行分析发现,放疗后发生另一原发癌者明显高于非放疗组,认为放疗可致癌。本例因恶性淋巴瘤行放疗,3年后再患食道腺癌,其食道癌是否与放疗有关尚不能肯定,也可能系独立发生的肿瘤。多原发癌误诊率高,常易误诊为癌的复发或转移。因此,我们认为,凡有恶性肿瘤的病史,以往接受过放疗或化疗,近期出现不明原因的贫血、消瘦、消化道肿块、梗阻、出血等症状者,均应警惕多原发癌的可能。治疗多原发癌与初发癌一样,应争取手术切除,晚期患者则行姑息性治疗,力争提高病人的生活质量,延长生存期。

关键词 淋巴瘤;食道腺癌

中图法分类号 R733.4

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