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Preliminary study of the relationship of cell cycle with micronucleus formation of human lymphocytes induced by gamma rays

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Abstract The quantitative relationship of cell cycle with the micronucleus formation of the lymphocytes of human peripheral blood induced with gamma ray irradiation were studied with the control of cell cycle, bromodeoxyuridine (BrdU) immunofluorescent staining and blockade of cytoplasm division with cytochalasin B (CB). It was found that 1. The micronucleus frequency (MNF) and micronucleated cell frequency (MNCF) of C_{10} and C_{11} phases of the irradiated lymphocytes were not significantly different from those of the control ($P>0.05$); 2. The MNCF of S and C^{12} phases of irradiated lymphocytes was significantly higher than that of the control ($P<0.01$) and 3. The MNF and MNCF of M phase of irradiated lymphocytes were 90 times and 70 times higher than the control respectively. These findings suggest that a part of micronuclei can be formed in S and C^{12} phases of human lymphocytes and M phase is the main stage of micronucleus formation in the whole cell cycle.

Key words Lymphocyte/human; cell cycle; miconuclei; gamma rays; bromodeoxyuridine labelling

个案与短篇

虹睫炎糖皮质激素治疗引起酮症酸中毒一例报告

Report of a case of diabetic ketoacidosis induced by yglucocorticoids treatment of iridocyclitis

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患者,女性,28岁,农民。左眼红痛,畏光,流泪伴视物模糊3 d,1994年4月7日来我院求治。检查:左眼视力0.04,结膜混合充血(＋＋＋),角膜后kp(＋＋),前房Tyn(＋＋＋),虹膜纹理不清,指测眼压Tn,诊断为左眼急性虹睫炎。治疗:结膜下注射地塞米松2.5 mg加混合扩瞳剂(内含肾上腺素0.1 ml)0.4 ml,口服强的松10 mg 3/d,淡炎痛25 mg 3/d。结膜下注射后当时患者无任何不适,嘱次日门诊复查未至。3 d后患者因昏迷被抬入我院,以"高血压危象"收入心内科,当日内分泌科会诊后,急查血糖为28.6 mmol/L,尿酮体(＋＋＋＋),诊断为糖尿病酮症酸中毒,转入该科抢救。患者清醒后追问病史,否认有糖尿病史及糖尿病的临床表现,诊断为隐性糖尿病,现患者已康复出院。

讨 论

虹睫炎的病因可以为感染,也可以是一种过敏性反应;可以仅为眼部病变,也可以是全身病变的并发症之一。治疗原则为散瞳,激素消炎和抗菌控制感染。该患者的虹睫炎为隐性糖尿病的眼部并发症之一,眼科治疗所用皮质激素为正常治疗量,但因患者有隐性糖尿病,而皮质激素,肾上腺素均为升糖激素,故因总量大而引发血糖急剧升高,最后发展至酮症酸中毒[1,2]。本例患者的治疗体会是:(1)使用激素前要详细询问有无禁忌病史,如高血压,糖尿病,消化道溃疡,精神病,结核等病史,特别是糖尿病易忽视年轻患者;(2)对疑有糖尿病的患者应查血糖和尿糖及隐性尿糖试验;(3)注意观察用药后的反应,及时处理。

关键词 虹睫炎;酮症酸中毒
中图法分类号 R773.1

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