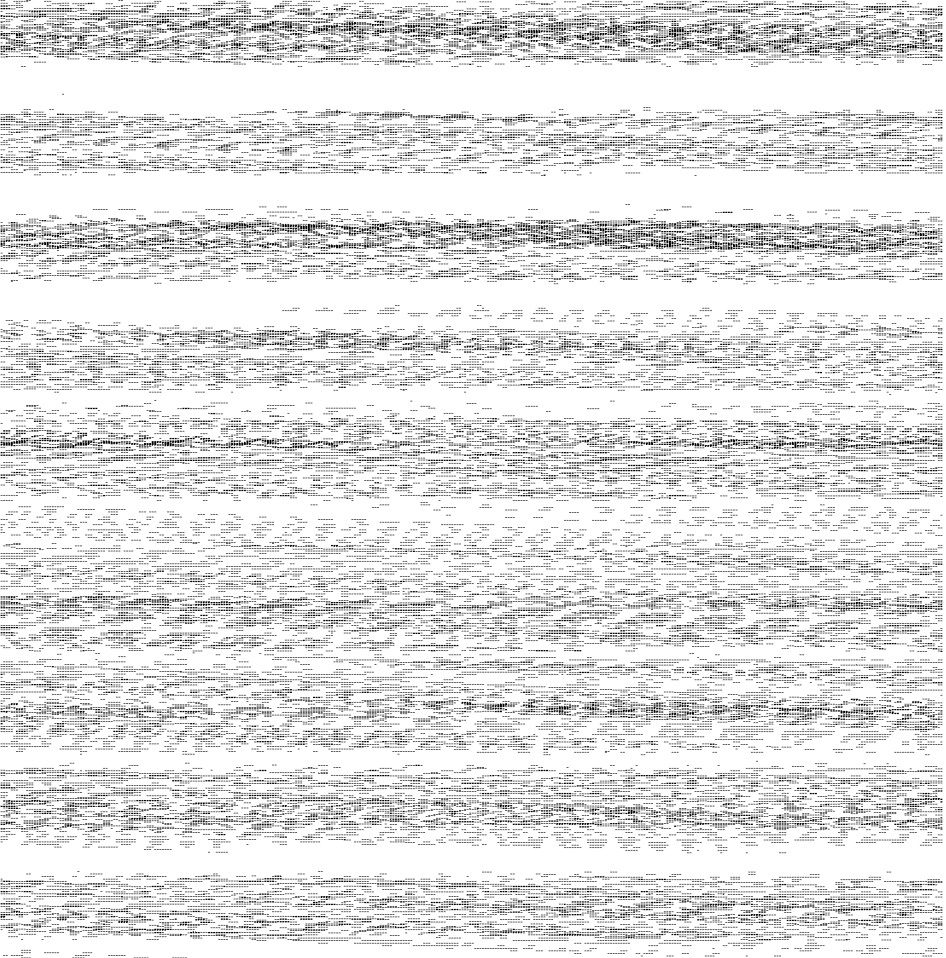
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Typing of genes of human papiloomavirus from recurrent condyloma acuminata with *in situ* hybridization

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Abstract Typing of the genes of human papillomavirus (HPV) in the biopsy specimens of 24 cases of recurrent condyloma acuminata was performed with situ hybridization using non-radioactive digoxigenin-labelled HPV probes (Types 6b, 11, 16 and 18). It was found that HPV positive rate of the 24 specimens was 83.3% and the positive rate for types 6b, 11, 16 and 18 was 58.3%, 25.0%, 29.2% and 4.2% respectively. After hybridization, most of the positive particles were seen distributing in the upper and middle lyers of the epithelium and a few of them in all the layers of the epithelium. In addition, they were also found in most koilocyte.

Key words human papillomavirus; condyloma acuminata; recurrence; *in situ* hybridization

特发性乳糜心包一例报告

Idiopathic chylopericardium: A case report

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乳糜心包(chylopericardium)少见。其中特发性乳糜心包更罕见,病因未明。本文报告1例,并作简要回顾。

女,39岁。入院前2周,出现不明原因的头晕、恶心、胸闷和呼吸稍不畅。T.P.R 及 BP 正常。颈静脉不怒张,奇脉征(-)。肺(-)。心尖搏动未触及,心界向左扩大,心音遥远,无杂音及额外心音。肝脾未扪及。化验:血、尿常规正常,血沉17 mm/h,抗"O"<500 U,血清胆固醇4.02 mmol/L、甘油三酯1.56 mmol/L,肝、肾功能及心肌酶谱正常。心电图正常。胸片心影普大型(C/T 0.60),肺血改变不明显。UCG 示心包中等量积液,心腔及瓣膜正常。入院后心包穿刺抽出乳白色液体共660 ml,实验室检查见附表。心包组织活检报告为少量纤维组织,呈慢性炎症改变。

附表 心包穿刺液的实验室检查

检查指标	结 果	检查指标	结 果
比重	1.041	蛋白质	63.41 g/L
WBC	0.97×10^9/L、单核35%、多形核60%	葡萄糖	6.46 mmol/L
胆固醇	2.44 mmol/L	镜 检	无细菌、无微丝蚴及癌细胞
甘油三酯	15.45 mmol/L	细菌培养	(-)

讨 论

本例"特发性乳糜心包"的诊断成立。本病罕见,文献上仅报告25例[1]。本病发生年龄可由新生儿至40岁,无症状者不少见(9/26例),仅1例有严重呼吸困难和心脏填塞。体征可有心界增大、颈静脉怒张、心音减弱、肝大和奇脉。心包乳糜液是诊断的唯一依据,性状为乳白色、镜下有脂肪小滴。其特点是甘油三酯显著增高(6.47~56.88 mmol/L),胆固醇1.74~4.58 mmol/L,蛋白质35~96 g/L,WBC 计数少许至7.3×10^9/L,主要是淋巴细胞。细菌培养(-)。有时胸片可见心缘在心包腔外缘内侧,是其特征,可能是乳糜含高脂和较心影相对透光之故。

淋巴血管造影可发现胸导管与心包腔的交通。12/26例进行了淋巴血管造影,结果5例正常,4例的延迟照片有碘油在心包腔内贮集,有时显示胸导管阻塞、畸形和淋巴引流异常。最近,有采用淋巴 CT 扫描检查者[1]。

乳糜心包的确切病因未明。如胸导管压力增加>4.6~6.7 kPa(正常为1.5 kPa)可发生导管部份或全部阻塞,导致沿正常导管反流。但单独淋巴管阻滞不一定引起反流,可能有其它引流途径存在。有些病例表明静脉引流的机械性阻塞和/或淋巴管异常扩张如水囊瘤样变可引起乳糜心包。最近报告[1]1例本病并伴有双肺乳糜反流,认为通过胸导管和支气管纵膈干之间有吻合,如这些淋巴管瓣缺如或关闭不全,可发生乳糜反流而入肺或心包,反流是异常吻合的淋巴管关闭功能不全的结果。

乳糜心包的治疗,除对积液产生较慢者使用间歇心包穿刺抽液外,主要是采用胸导管结扎和部分心包切除术(18/26),效果良好。

关键词 乳糜心包;心包穿刺术
中图法分类号 R542.12

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(收稿:1995-03-15;修回:1995-11-22)
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