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Effects of zinc on the ultrastructure of hippocampus in developing rats

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Abstract The ultrastructure of the CA_3 region of the hippocampus was observed with electron microscopy in zinc-deficient (ZD) and zinc-excessive (ZE) rats from their breast-feeding stage and onward. The findings were as follows: (1) The number of synaptic vesicles of the pyramidal cells was decreased in ZD rats. (2) Various degrees of degeneration of the neurons, glial cells and synapses and rupture of synaptic vesicles were seen in ZE animals. These findings suggest that the changes of hippocampal ultrastructures might be one of the fundamental mechanisms of the changes of the learning and memory capacity in ZD and ZE rats.

Key words zinc-deficiency; zinc-excess; hippocampus; ultrastructure; rat

使用《军队医院医疗信息管理系统》的问题与解决办法

Problems and solutions in using the Army Hospital Medical Information and Management System

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《军队医院医疗信息管理系统》是总后卫生部于 1992年推出的全军统一的医疗信息管理软件,并要求全军各医院从 1993年开始启用。该系统直接为医院分级管理的评审和优质服务的评比检查服务。我院于 1993年 7月 1日正式使用此系统,经过近 3年的应用,系统运行良好,但对在院伤病员管理中遇到一些问题,现将解决这些问题的办法介绍如下。

(1)统计科室与非统计科室,也即在编科室与非编科室。在编科室是上级机关规定的我院必须开设的科室,而非编科室是我院根据本院情况自行开的科室。在统计上如何合理处理二者的关系使上报表准确无误是一个值得讨论的问题。我院是在同一台微机上分别对统计科室与非统计科室进行系统安装,也即进行二次系统安装。在根目录下键入 YLGL回车,即可进入统计科室系统;在根目录下键入 FTJK回车,即可进入非统计科室系统。打出的报表统计科与非统计科在一份报表上,分二次打印。统计科与非统计科之间的转科病人不按转科处理,而是出院后又重新办入院手续,避免了因非统计科病人住院时间长等情况而影响统计科及全院的医疗指标。

(2)生成了不正确的次日日报表,如做完 1号日报,又生成了不正确的 2号日报。

① 2号有关日报的什么数据都未输。每天备份了当天数据,将流动报表和在院病人数据库中的数据恢复到机器内,日报日期就退回到了正确日期;每天若设备份数据,修改流动日报库、周报库的日期,修改月报库当月的日期项和占床日项,将日期项改成最近正确日报日期,占床日项在原有基础上,减去该类住院人数乘以修改天数(不正确日期 - 正确日期)。

② 已输入 2号的部份数据生成了不正确日报。每天备份了当天数据,处理同上;每天若未备份数据,就打开库来改。

(3)生成日报前发现转科有错。该转科病人只有这一次转科如 B科→ C科,可正确地撤消转科;该转科病人若往日已有一次转科如 A科→ B科→ C科,运行 116撤消出科伤病员,就会出现问题,只有在在院病人出院库中查该病人情况,保留 A科和 B科记录,删除或修改 C科记录,然后存盘退出即可。

(4)运行 113生成日报,屏幕显示"入科人员入院科室、身份、费别有错,请修改!"出现这种情况,就是输入了一个或多个空白记录的入院,有时是输完了入院卡片后,未选"2.结束"而又进入"1.下一张卡片",按 ESC键退出造成的空白记录。处理:运行 115修改入科伤病员,将光标移至空白记录处,按 F8删除该条记录。

(5)当天入出(包括入死)的病人处理在最后一个出院,次日生成日报后,屏幕会出现"现在备份病案",因机器内此条记录无出院日期,次日的出院病人不能挨着进库,机器把这二个

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中1例多肽抗体谱分子量不在7种可确定的分子量之内,不能确定为某种抗体,但据资料介绍,该情况也可提示病人有某种免疫性疾病的可能性。

从结果看,ENA多肽抗体谱与荧光核型呈正相关。因此,作者认为如临床上遇有FANA斑点型滴度较高者,可考虑增作ENA多肽抗体谱测定,能有助于对某些自身免疫性疾病特别是SLE的诊断和鉴别诊断。

ENA多肽抗体谱检测,是80年代开始的,主要是将免疫印迹技术(IBT)应用于临床,该技术根据其ENA抗原的分子量可以检测相应抗体、抗体的种类,可提高ANA检测的敏感性和特异性[4,5]。与目前自身抗体检测项目比较,如免疫荧光法检测ANA、对流免疫电泳法检测ENA等,在设备和灵敏度方面均有一定优点。该法有比较敏感、方法简单、特异性强、反应时间短、重复性好等特点。

FANA、抗dsDNA ENA抗体检查,有时与临床结果并不完全一致,因此,除在操作过程中应设阳性对照外,有条件的地方,不同方法的配合应用仍有必要。

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Determination of anti-ENA polypeptide antibodies

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Abstract Anti-extractable nuclear antigens (anti-ENA) polypeptide antibodies were examined in 48 cases of autoimmune disease including systemic lupus erythematosis (SLE) with immunoblot technique (IBT) and 15 normal subjects were examined likewise to serve as the control. Flourescent anti-nuclear antibody (FANA), double-stranded DNA (dsDNA) and lupus band test (LBT) were studied simultaneously. It was found that anti-ENA antibodies were positive in 58.3% of the 48 cases of autoimmune disease and 2~3 kinds of anti-ENA polypeptides were shown in the serum of certain patients. The positive rate was 54.2% for FANA, 18.8% for dsDNA and 50% for LBT. Anti-ENA antibodies were also positive in one subject of the control (6.7%). Anti-ENA antibodies which were mainly RNP and Sm antibodies were positive in 66.7% of 33 cases of SLE and the positivity of Sm antibodies was correlated to the spot pattern of FANA ($P < 0.01$).

Key words anti-ENA polypeptide antibody; fluorescein-labelled anti-nuclear antibody; double-stranded antibody; systemic lupus erythematosis

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阶段各备份。当天入出的病人不要处理在最后一个出院,处理在中间出院,就可避免以上问题。

(6)为了方便医疗和护理管理,我院新增加了日报表的内容。

护理方面:展开床数,展开床位使用率,重危人数,陪伴人数,特级护理人数,一级护理人数。门急诊工作量,各科手术人数,部分质控数据。相关人员情况:相关人员指本院、本校及校干休所的军人、职工及家属和外单位军人中副师以上干部。项目有:单位、姓名、工作单位及职别、入(出)院及科室、入院诊断。

为什么要增加这些内容呢?为了了解当天病房及医技科室的一些情况,便于医疗护理管理,便于医教部了解相关人员的住院情况,及时提供良好服务,如看望住本院的老干部,组织会诊,采取相应的医疗措施。

一个综合型大医院,每日伤病员流动情况比较复杂,有的出错数据恢复比较麻烦,要认真核对,正确操作微机,总结经验教训。

关键词 医院管理;医疗信息

中图法分类号 R197.324

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