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Study of the relationship between P^{53} expression and bladder cancer prognosis

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Abstract The expression of P^{53} in 34 paraffin embedded specimens of urinary bladder cancer was observed with immunohistochemical method. It was found that P^{53} was positive in 41.2% (14/34) of the specimens and there was a positive correlation of the overexpression of P^{53} with the pathological grading and clinical stage of bladder cancer. The recurrence rate of P^{53} positive bladder cancer was 85.7% while that of the negative cases was only 45%. Lymph node metastasis of P^{53} positive cases was more frequent than that of negative ones. It is believed that P^{53} positive bladder cancer has a poor prognosis.

Key words bladder neoplasms; prognosis; oncogene products

妊娠期肝内胆汁瘀积症的临床护理

Clinical fetures and nursing care of intrahepatic cholestasis of pregnancy

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妊娠期肝内胆汁瘀积症(以下简称ICP),以妊娠中、晚期先出现搔痒症,后出现黄疸,产后消退,再次妊娠又可发生为其特点。过去认为本病预后良好,对母婴无影响。现知本病对母婴有一定危害。加强护理可以减少并发症的发生。重庆地区为ICP的高发地区。发病率为产妇的0.32%[1]。现将本院近年收治ICP 22例作一分析,旨在讨论ICP的护理。

1 临床资料

22例病人年龄27～35岁(平均28岁)。第一胎一产17例,第二胎二产3例,第三胎三产2例。均无非妊娠期黄疸、口服避孕药、嗜酒及输血史。妊娠期出现黄疸时间:早期妊娠1例,中期妊娠4例,晚期妊娠17例。肝脏轻度肿大18例,在肋下2.0 cm、质软,无明显触痛。ALT正常19例,轻度升高3例。GGT轻度增高5例(<80 u/L),AIP轻度增高8例(<240 u/L)。胆红素轻度升高(50～100 nmol/L)18例,中度升高(101～170 nmol/L)4例。血清胆酸平均26.2±4.60nmol/L,健康产妇对照组15例年龄平均24岁,血清胆酸平均3.34±4.2 nmol/L[2]。A/G比例均正常。HBV标志阴性。全部病例均有瘙痒、黄疸。部分病人有轻度食欲减退、乏力、恶心、腹胀,一般不严重。分娩后一周内搔痒消失,黄疸二周内消失,2例延迟至一月消退。随访1～5年(平均2.5年),母婴均健,母亲肝功能正常。

1.1 产儿情况

ICP组22例中8例早产(36.36%),1例死胎(4.54%),其余为足月顺产。8例发生宫内窘迫(36.36%)。出生后1 min Apger评分≤7分者8例,其余均在8分以上。羊水Ⅰ度粪染8例,Ⅱ度4例,Ⅲ度1例。胎盘轻度黄染6例,明显黄染3例。脐血胆酸ICP组平均20.22±2.12 nmol/L,健康产妇对照组9.34±1.12 nmol/L[2],产后出血量:在ICP组及对照组15例,分别为27.35±24 ml和138.28±8.54 ml。差异显著($P<0.05$)。产后出血在ICP组占29.41%,对照组5.88%。

1.2 新生儿体重

ICP组及对照组分别为3118.75±118.140 g和3 336±116.03 g无显著差异。但ICP组有2例新生儿体重2 200～2 400 g。

1.3 胎儿窘迫

发生率在ICP组为22.7%,对照组11.11%。ICP组发生胎儿宫内窘迫的新生儿血胆酸平均≥15 μmol/L。脐血胆酸水平≥15 μmol/L的7例新生儿中有5例发生胎儿宫内窘迫,占71.43%。此外,ICP组有1例胎儿宫内死亡和1例新生儿青紫窒息。

2 讨论

2.1 妊娠的护理

2.1.1 心理护理:ICP患者,常常由于搔痒,黄疸带来心理上很大压力,同时对婴儿健康产生忧虑。本组1例三胎产孕妇,前二胎均因ICP早产和新生儿窘迫死亡,第三胎再发ICP,母亲及家属盼子心切,心情紧张,孕妇食欲减退,睡眠不好。经解释在产前密切监护下,妥善处理,解除了思想顾虑,在窘迫发生后

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Ultrastructural features of gentamicin-induced glomerular damages in rabbits

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Abstract In order to clarify whether gentamicin (GM) could damage the renal glomeruli, the ultrastructural changes of the renal cortex were observed in rabbits after they received a single injection of 100 mg/kg GM or 100 mg · kg^{-1} · d^{-1} GM for 3 consecutive days. The animals of the control group received equal amount of normal saline. It was found that some myelin figures appeared in the epithelial cells of the proximal tubules as early as 1 h after a single GM injection; severe swelling, degeneration, and obvious changes of the organelles were seen in the endothelial cells of the glomerular capillaries, the podocytes and the epithelial cells of the proximal tubules 24 h after an injection of GM; and fusion of the processes of podocytes, thickening of the glomerular membrane and necrosis of the epithelial cells of a part of the proximal tubules were encountered 24 h after the 3rd GM injection. These findings demonstrate that GM can injure not only the proximal tubules but also the glomeruli in rabbits.

Key words gentamicins/TO; kidney glomerulus/UL; rabbits

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行早期剖腹产，终得健康婴儿。对复发性 ICP 孕妇，在妊娠 28 周左右即嘱住院观察，便于监护，以提高胎儿存活率。本组另一例三胎三产的 ICP 孕妇，前二胎均早产新生儿死亡，第三胎于妊娠 28 周即入院观察，于第七个月早产一男婴，体重仅 2 200 g。但由于处理及时得当，精心护理，终于成活。婴儿生长发育接近正常。

2.1.2　皮肤搔痒的护理：瘙痒为 ICP 的讨厌症状，为胆酸刺激皮肤引起，多发生在妊娠 28 周～30 周左右，夜间瘙痒为甚，影响睡眠。为了减少外界对皮肤的刺激，须要保持被褥及衣物的清洁，常洗澡。此外，口服消胆胺以降低血胆汁酸的浓度，减轻胆酸对皮肤的刺激，或用中药当归 10 g，白芍 15 g、泽泻 10 g、茯苓 10 g、紫胡 10 g、黄岑 10 g、茵陈 15 g、梔子 10 g，10 剂一疗程，一剂/日，煎服。近年来，有用利福平[3]Epimodiol 的，但须注意对肝脏的损害，对皮肤的瘙痒也可用锌氧刷剂，涂布局部。若影响睡眠可酌情服用安定。

2.1.3　产后出血的护理：在分娩前应进行凝血酶原及凝血时间测定，异常者作好输血准备。ICP 孕妇由于胆酸排沁障碍，维生素 K 吸收减少，宜常规应用维生素 K 注射，产时应加强第三产程的观察和处理，准确记录出血量。胎儿娩出后应立即注射麦每新碱加强子宫收缩，促使胎盘娩出，减少出血。出血量多者，立即输血。

2.2　围产儿的护理

ICP 对胎儿可造成早产、宫内窘迫、死胎及胎儿窘迫等。因此一旦确诊 ICP 后，均应转入高危门诊，定期进行胎盘功能测定及胎儿监护。监护采用非激惹性监护仪(NST)较好。在 35 周以前，每周进行一次监护，35～37 周，每日作胎儿监护。产前、产时及时了解胎儿宫内异常情况，使之得到及时处理，以降低围产儿病死率。对早产儿及较重的新生儿窒息者，经急救后及时转入新生儿病房，进行相应的治疗及处理。

关键词　妊娠并发症；胆汁瘀积，肝内

中图法分类号　R473.71

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