DOI:10.16016/j.1000-5404.1995.03.018

肝血流前,常规静注甲基强的松龙30～40 mg/kg,并同时降低肝表面温度至27～32℃,取得满意效果。激素对缺血硬变肝脏细胞保护的作用如同药理剂量的皮质类固醇能保护不同组织免受缺血和休克的影响一样,机制尚不完全清楚[8]。据推测地塞米松可能主要通过两方面对缺血硬变肝脏肝细胞起保护作用:①保护缺血肝细胞的细胞膜和稳定肝细胞的溶酶体;②改善肝血流和组织能量代谢。

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(收稿:1994-09-18;修回:1995-03-24)

Prospective clinical study of ischemic injury and protective effects of steroid on hepatic cirrhotic residue after hapectomy

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Abstract A prospective controlled clinical trial has been performed on 20 patients with hepatocellular carcinoma complicated with liver cirrhosis to assess the ischemic injury of the residual cirrhotic liver and the protective effects of steroids on it. Total hepatic inflow was blocked with the Pringle's maneuver in 14 cases prior to the occlusion of the portal triad and dexamethasone was given for the other 6 cases. The duration of hepatic ischemia persisted from 7 to 16 min. Liver function and ATP level of hepatic tissue were determined and ultrastructural changes of hepatocytes were observed. It was confirmed that the Pringle's maneuver can be used in hepatoctomy of cirrhotic liver and temporary arrest of hepatic blood inflow within 16 minutes might be safe for the residual liver through it is not necessary for all the cases; and dexamethasone is able to protect the residual cirrhotic liver from the warm ischemic injury.

Key words liver neoplasms/SU; liver cirrhosis; hepatocellular carcinoma; the Pringle's maneuver; dexamethasone

鱼骨致肠管壁疝一例

Richter hernia Caused by fish bone: report of one case

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患者男,65岁。因右腹股沟可复性包块5年,不能还纳、伴腹痛腹胀1 d入院。查体:右腹股沟区扪及一直径3 cm的半球形包块,触痛不能还纳,腹部听诊肠鸣音亢进,可闻高调肠鸣音和气过水声。诊断:右腹股沟嵌顿性斜疝。急诊手术所见:疝囊由内环突出,疝内容物为小肠对系膜缘肠壁,约占肠腔的2/3,肠壁已发黑坏死,并有恶臭和较多脓液,嵌顿肠腔内有一多角形鱼骨,约3 cm×1 cm大小。剪开内环,切除坏死肠段,近端肠管减压后行肠吻合,冲洗切口,行巴氏法疝修补术,术后切口感染,经换药痊愈出院。术后诊断:右腹股沟绞窄性肠管壁疝。

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3 讨论

作者观察到在人胚胎第4月(第14周)时即检出脐动、静脉(HUA/VEC)中有ANP样免疫反应阳性颗粒,以后随着胎龄增大而逐渐增多,反应逐渐增强,至第8月(第32周)达到高峰,维持到出生。作者在另一实验中证实血管EC能向细胞外释放ANP[8]。综合上述实验结果,揭示在较早时期,EC可能参与了调节脐血管的舒缩功能,而随着胎龄的增加,此功能逐渐变化,ANP在其中发挥了一定的作用,当然更确切的证据尚待进一步实验证实。在HUAEC和HUVEC中,ANP样免疫反应阳性颗粒数目和反应强度不同,这一结果提示HUAEC与HUVEC在胚胎早期即存在结构与功能的明显差异。

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(收稿:1994-07-13;修回:1995-03-28)

Immunohistochemical observation of atrial natriuretic polypeptide in the endothelial cells of human fetal umbilical vessels

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Abstract The umbilical cords of human fetus of different ages were examined with PAP immunocytochemical assay and atrial natriuretic polypeptide (ANP) was found to be localized in the endothelial cells of the umbilical vessels at optical microscpic level. ANP appeared in the endothelial cells of fetal umbilical vessels at 14th week of age and reached the highest level at 32nd week. The endothelial cells of the umbilical vein showed stronger intensity of ANP than those of the artery. It is inferred that the endothelial cells are involved in the regulation of the tension of fetal umbilical vessels and ANP plays an important role.

Key words umbilicus/AH; endothelium; atrial netriuretic polypeptide (ANP); immunocytochemistry

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讨 论

嵌顿的疝内容物仅为肠壁的一部分,肠系膜未进入疝囊者称为肠管壁疝或称Richter疝,该疝是否引起梗阻,视嵌顿肠腔的多少而定,如嵌顿仅及肠腔1/3以内,一般不会引起完全梗阻,超过2/3,容易导致完全性梗阻,肠管壁疝多发生在疝环小而坚韧时[1]。本例可复性疝病史已2年,其疝环并非很小,一般而言,不应发生肠管壁疝,本次发病显然与鱼骨有关,术后追问病史得知,1d前患者有食鱼史。由于咽下鱼骨而引起梗阻或损伤,以往屡有报道[2,3],但导致嵌顿疝却颇为少见,分析本例的发病过程可能是当部分肠管进入疝囊时,肠管内的鱼骨其长轴恰与疝环垂直,因而可通过疝环,随肠管一同进入疝囊,当疝囊内肠管回缩腹腔时,鱼骨长轴恰与疝环平行而不能通过,致使包绕鱼骨的部分肠壁不能回缩,继而嵌顿坏死。

关键词 疝

中图法分类号 R656.2

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(收稿:1994-12-19;修回:1995-03-23)

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