DOI:10.16016/j.1000-5404.1993.06.012

Pathological study and PSA marking of 83 cases of prostatic carcinoma

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Abstract The clinical and pathological materials of 83 cases of prostatic carcinoma (PC) were reviewed retrospectively and the tissue specimens of PC were marked with prostate-specific antigen (PSA). According to the criteria of Dhom's classification of prostatic carcinoma, 66 cases out of the 83 (79.5%) were of the common variety of PC, 14 cases (10.9%) were of the rare variety and 3 cases (3.6%) could not be classified with Dhom's method. Among the 66 cases of common prostatic carcinoma, 41 cases (49.4%) exhibited a pathological structure of uniform pattern and 25 cases (30.1%) of pluriform pattern. Well-differentiated adenocarcinoma, cribriform carcinoma and carcinoid of the prostate were strongly positive to PSA marking; poorly-differentiated adenocarcinoma and almost all the prostatic carcinomas of the rare variety and with the structure of pluriform pattern were positive or weakly positive; undifferentiated solid carcinoma and small cell carcinoma were very weakly positive; and squamous cell carcinoma was negative. In addition, other methods for the pathological classification of prostatic carcinoma used currently at home and abroad were compared and discussed.

Key words prostatic neoplasms/PA; pathology, clinical; prostate-specific antigen (PSA) marking

冷沉淀滴眼剂治疗顽固性角膜上皮缺失

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严重角膜病变所致角膜上皮反复脱失缺损溃疡难以愈合，是临床治疗中的棘手问题。我们配制冷沉淀(CP)滴眼剂点眼，治愈6例。6例患者均为我院门诊病人，病史最长30年，此次发病史最短2.5个月，自采用 CP 滴眼剂点眼后，角膜上皮10～15 d 修复，最快一例点眼3 d，角膜溃疡即大部愈合。在回顾性比较中均较其它的滴眼剂疗程短、疗效快。

典型病例 陈×，男，63岁。30年前左眼诊断为病毒性角膜炎，每年冬秋季节复发，视力渐减退。此次1991年10月复发，他院用多种抗病毒滴眼剂治疗3月未愈而来我院。查左眼视力0.1，混合充血卅，角膜弥漫性瘢翳，中心部溃疡，呈粗大 Y 型，溃疡边缘上皮肥厚、上翘。右眼正常，视力1.0。诊断：左眼病毒性角膜溃疡。应用抗病毒、促进溃疡修复药物治疗3周，溃疡范围如前。患者左眼痛、怕光流泪明显，视力：数指/20cm。采用 CP 滴眼剂点眼，每日6次。8 d 后复查：左眼睫状充血＋，角膜溃疡愈合，视力0.2，继续用药2周巩固疗效，随访4月无复发。

CP 滴眼剂制备 CP 由新鲜血浆经速冻、低温融化、低温离心沉淀等一系列步骤提取[1]。400ml 全血提取25ml CP(1单位)，生理盐水稀释、加氯霉素抑菌、pH 调至7.0即为 CP 滴眼剂[2]。CP 滴眼剂中主要作用成份为 Fn(纤维结合蛋白)，Fn 终浓度为 443.1±30.7μg/ml。CP 滴眼剂于－20℃冰箱中可保存一年，用前37℃融化，每次点眼后放入家用冰箱

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(收稿: 1992-12-16; 修回: 1993-03-24)

Study on hemorrheological changes in 7 cases with portal hypertension after distal splenocaval shunt

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Abstract The hemorrheological changes were observed in 7 cases with portal hypertension after they were operated on with distal splenocaval shunt (DSCS). Similar cases with splenectomy served as controls. It was found that blood hyperviscosity was slightly decreased after DSCS and the deformability of erythrocytes was improved from 7 to 14 days after DSCS. But blood hyperviscosity was significantly increased in the cases after splenectomy. Blood hyperviscosity was lower in the cases with DSCS than in those with splenectomy. Blood hyperviscosity, expressed mainly by the aggregation rate and deformability of erythrocytes, platelet count, etc, is dependent on the spleen. Since the spleen is preserved in DSCS so blood hyperviscosity is slightly decreased and complications due to blood hyperviscosity may be less in number after DSCS.

Key words splenic diseases/SU; distal splenocaval shunt; hemorrheology

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中，以防污染。滴眼剂一旦融化使用，保存期一般不应超过48 h。

近年来的研究证明 Fn 是一种糖蛋白，每个蛋白分子上都有2～4个硫基，可以在细胞表面形成网状结构，使细胞与基质间、细胞与细胞间互相粘附固着，有利细胞生长[3]。临床裂隙灯显微镜观察显示，CP 滴眼剂点眼2～3 d 后，肥厚变性的角膜上皮细胞层变薄，前缘变锐，与角膜实质层紧贴，向前方爬行生长，无上翘欲脱现象。提示 CP 滴眼剂确有利于角膜上皮粘连固着、促进再生、防止脱失的作用。存在问题，CP 滴眼剂融化后保存期较短，致使某些患者应用受限，有待于进一步改进。

关键词 角膜溃疡/治疗；纤维结合蛋白
分类号 R772.2

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(收稿：1993-05-14；修回：1993-09-16)

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