

研究报告

## 肺灌注显像与肺动脉造影诊断周围型肺栓塞的实验研究

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**摘要** 摘要: 采用家兔自体血凝块, 在数字减影血管造影仪下建立急性周围型肺栓塞模型, 栓塞前、后分别行肺灌注显像和数字减影肺动脉造影检查, 以病理解剖发现栓子为诊断标准, 比较二者诊断周围型肺栓塞的敏感性和特异性。结果显示, 肺灌注显像诊断周围型肺栓塞的灵敏度为93.94%, 特异度97.91%, 阳性预测值为89.86%, 阴性预测值为98.8%; 数字减影肺动脉造影诊断周围型PE的灵敏度为90.91%, 特异度95.52%, 阳性预测值为80%, 阴性预测值为98.16%, 两种检查相比差异无显著性( $P>0.05$ )。因此, 肺灌注显像诊断急性周围型肺栓塞有较高的敏感性和特异性, 与数字减影肺动脉造影有良好的诊断符合率, 但由于肺灌注显像操作简便、安全、无创伤, 可以作为筛选检查。

关键词

分类号

## Experimental study of pulmonary perfusion and digital subtraction pulmonary angiography in diagnosing acute peripheral pulmonary embolism

**Abstract** To establish the rabbit models of acute peripheral pulmonary embolism with transcatheter autologous blood clots injection via left jugular vein. The digital subtraction pulmonary angiography and radionuclide pulmonary perfusion imaging were performed respectively before and after pulmonary embolism of each rabbit. The sensitivity and specificity of the two kinds of imaging methods were compared with the pathological studyings. The results show that the sensitivity, specificity, positive and negative predictive rates of radionuclide pulmonary perfusion imaging were 93.94%, 97.91%, 89.86% and 98.8% respectively; the sensitivity, specificity, positive and negative predictive rates of digital subtraction pulmonary angiography were 90.91%, 95.52%, 80% and 98.16% respectively; but there was no significant difference between radionuclide pulmonary perfusion and digital subtraction pulmonary angiography ( $P>0.05$ ). Therefore, the sensitivity and specificity of radionuclide pulmonary perfusion were high in diagnosing acute peripheral pulmonary embolism, and highly accorded with digital subtraction pulmonary angiography. The radionuclide pulmonary perfusion can be used as a conveniently, safely and non-invasive screening method for the patients with suspected pulmonary.

### Key words

DOI

### 扩展功能

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