

论著

原发性醛固酮增多症中低血钾对糖代谢的影响

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摘要 摘要:目的 探讨低血钾在原发性醛固酮增多症(包括肾上腺醛固酮分泌腺瘤(APA)、特发性醛固酮增多症(IHA))患者糖、胰岛素代谢中的作用。方法 根据有无低血钾将178例原发性醛固酮增多症患者(APA 103例、IHA 75例)分为低血钾组和正常血钾组,2组均行3h口服葡萄糖耐量试验和卧立位醛固酮试验,观察血糖、胰岛素变化与血钾之间的关系。结果 低血钾组血钾曲线下面积、胰岛素曲线下面积、空腹胰岛素水平均低于正常血钾组($P<0.05$, $P<0.01$);低血钾组血糖曲线下面积、卧位醛固酮水平均高于正常血钾组($P<0.05$);低血钾组糖耐量异常者为75.3%,正常血钾组为48.5%,两组比较差异具有显著性($P<0.01$)。APA和IHA中代谢综合症的患病率分别为38.8%、57.3%,两者比较差异具有显著性($P<0.05$)。结论

低血钾是导致原发性醛固酮增多症患者中胰岛素分泌下降的可能原因之一;应警惕原发性醛固酮增多症患者合并代谢综合症的情况,并及时纠正其可能存在的代谢紊乱。

关键词 [低血钾](#) [原发性醛固酮增多症](#) [口服葡萄糖耐量试验](#) [代谢综合征](#)

分类号

Effect of Hypokalemia on Glucose Metabolism in Primary Hyperaldosteronism

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Abstract ABSTRACT: Objective To investigate the effect of potassium deficiency on glucose and insulin metabolism in primary hyperaldosteronism, including aldosterone-producing adenoma (APA) and idiopathic hyperaldosteronism (IHA). Methods Totally 178 patients who were diagnosed as primary hyperaldosteronism (103 patients with APA and 75 with IHA) were divided into hypokalemia group and normal potassium group according to their serum potassium levels. All patients received 3 hours of oral glucose tolerance test and aldosterone test to observe the relationship among glucose, insulin and serum potassium. Results Area under curve of serum potassium, area under curve of plasma insulin, and fasting serum insulin were significantly lower in the hypokalemia group than in the normal potassium group ($P<0.05$, $P<0.01$); area under curve of glucose and aldosterone level were significantly higher in the hypokalemia group than in the normal potassium group ($P<0.05$). The prevalence of metabolic syndrome was significantly higher in IHA than in APA (57.3% vs 38.8%; $P<0.05$). Conclusion Hypokalemia may play an important role in inhibiting insulin secretion in primary hyperaldosteronism.

Key words [hypokalemia](#) [primary hyperaldosteronism](#) [oral glucose tolerance test](#) [metabolic syndrome](#)

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