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健康体检中DR胸片筛查北京地区中老年心肺疾病

Chest X-ray digital radiography in screening for heart and lung disease for middle-aged and elderly populati in Beijing area

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英文关键词:Radiography Tomography, X-ray computed Physical examination Middle-aged and elderly population Epidemiology

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作者 单位 E-mail

王煦 北京大学人民医院放射科,北京 100044

洪楠 北京大学人民医院放射科,北京 100044 hongnan@bjmu.edu.cn

孙超 北京大学人民医院放射科,北京 100044

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中文摘要:

目的 探讨健康体检中DR胸片对筛查北京地区中老年心肺疾病的价值。方法 回顾性分析我院 5508名45岁以上中老年人健康体检DR胸片及进一步接受的CT检查等资料。依据年龄检者分为3组,中年组(45~59岁)3890名,年轻老年组(60~74岁)1146名,老年组(≥75岁)472名。结果 1233名(1233/5508,22.39%)胸片显示阳性征象,不同年龄组间胸片的总阳性率、陈旧病3纹理增重待查、胸膜肥厚钙化、心影增大及肺间质病变的差异均有统计学意义(P均<0.05)。男性胸膜肥厚钙化、肺气肿、肺间质病变明显多于女性.结节性质待查略高于女性(P均<0.05)发现肺内结节待查 121例,平均年龄(56.9±9.1)岁;其中10例确诊为肺癌,男8例,女2例。结论 健康体检中摄DR胸片对于筛查中老年心肺疾病具有重要临床价值,能够检出并初步诊断心肺到可指导进一步检查方案。

英文摘要:

Objective To explore the value of chest X-ray digital radiography (DR) in physical examination of asymptomatic middle-aged and elderly population in Beijing area. Methods Totally 5508 paties aged over 45 year-old underwent chest DR and (or) CT examination, then the results and further followed-up data were analyzed retrospectively. The subjects were divided into three groups, i.e. midd group (aged 45-59, n=3890), young old group (aged 60-74, n=1146) and older age group (aged $\geqslant 75$, n=472). Results The rate of overall positive signs was 22.39% (1233/5508). The overall positive signs, obsolete lesions, lung markings increasing, pleural thickening and calcification, cardiac enlargement and interstitial lung diseases were significantly different among the groups (all P < 0.05). The rapleural thickening and calcification, emphysema, interstitial lung disease in males were higher than those of females, and the rate of pulmonary nodule in males was slightly higher than that of females (P < 0.05). The average age of 121 cases with pulmonary nodule was (56.9 ± 9.1) year-old, 10 were diagnosed as lung cancer, including 8 males and 2 females. Conclusion Chest X-ray DR has important clinical value for screening heart and lung disease in middle-aged and elderly peoples, and can be used to detect and diagnose heart and lung disease, and guide further examination.

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