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## 对比CDFI和CEUS诊断肝移植术后肝动脉血栓的价值

### Comparison on CDFI and CEUS in diagnosis of early and late hepatic artery thrombosis after liver transplantation

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中文摘要:

目的 对比CDFI和CEUS对肝移植术后早期及晚期肝动脉血栓(HAT)的诊断价值。方法 收集CDFI或临床疑诊肝移植术后HAT患者64例,分为早期HAT(<30天)和晚期HAT(≥30天)。有患者均行CEUS检查,观察肝动脉有无血流显示及其走行;以CDFI测量血流峰值、收缩期加速度时间、阻力指数、有无湍流及其峰值。以DSA和(或)CTA+临床+超声随访为参考标准,计FI和CEUS诊断早期、晚期HAT的敏感度、特异度和准确率。结果 对早期HAT 18例,CDFI和CEUS诊断HAT的敏感度、特异度、准确率分别为100%(6/6)、83.33%(10/12)、88.89%(16/18)、100%(10/10)、100%(18/18);对晚期HAT 46例,CDFI和CEUS诊断HAT的敏感度、特异度、准确率分别为0、100%(36/36)、78.26%(36/46)和100%(9/9)、97.30%(36/37)、97.83%(45/46)。结论 CEUS能直观显示肝动脉走行,诊断肝移植术后HAT的准确率明显优于CDFI,尤其对早期HAT更具确诊价值。

英文摘要:

**Objective** To compare the value of CDFI and CEUS in diagnosis of early and late hepatic artery thrombosis (HAT) after liver transplantation. **Methods** Totally 64 patients with suspected HAT CDFI and clinical presentation underwent CEUS. Patients were divided into early HAT patients (<30 days) and later HAT patients (≥30 days). Presence or absence of the proper left and right hepatic arteries were observed, and the peak velocity, resistive index, acceleration time, as well as the presence or absence of turbulence and the peak velocity of turbulence were measured. Taking DSA or CT clinical follow-up + sonograms as standards, the sensitivity, specificity, accuracy of CDFI and CEUS in diagnosis of early and later HAT were calculated. **Results** There were 18 early patients and 46 late patients. The sensitivity, specificity, accuracy of CDFI and CEUS for early HAT patients was 100% (6/6), 83.33% (10/12), 88.89% (16/18) and 100% (8/8), 100% (10/10), 100% (18/18), respectively while for late HAT patients was 0, 100% (36/36), 78.26% (36/46) and 100% (9/9), 97.30% (36/37), 97.83% (45/46), respectively. **Conclusion** Compared with CDFI, CEUS can directly display hepatic artery running, being better than CDFI especially for diagnosis of early HAT after liver transplantation.

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