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多层螺旋CT薄层增强扫描及后处理技术诊断支气管肺隔离症

MSCT thin-slice post-contrast scan and postprocessing techniques in the diagnosis of pulmonary sequestration

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英文关键词: [Pulmonary sequestration](#) [Tomography, X-ray computed](#)

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中文摘要:

目的 探讨多层螺旋CT薄层增强扫描及后处理技术对支气管肺隔离症的诊断价值。方法 分析经手术病理证实的22例支气管肺隔离症患者的多层螺旋CT薄层增强扫描图像及后处理技术资料。结果 支气管肺隔离症分为叶内型和叶外型,叶内型21例,20例由胸主动脉分支供血,1例供血动脉为腹腔干的分支,引流静脉均进入肺静脉系统;叶外型1例,由降主动脉供血,静脉流入半奇静脉。结论 CT薄层动态增强扫描的重建后处理图像可以清楚显示病变异常供血动脉和引流静脉的全貌,是本病的重要诊断方法。

英文摘要:

Objective To explore the value of multislice CT (MSCT) thin-slice post-contrast scan and postprocessing techniques in the diagnosis of pulmonary sequestration. **Methods** Twenty-two patients with pathologically confirmed pulmonary sequestration underwent MSCT thin-slice post-contrast scan and postprocessing, and their data were analyzed. **Results** Pulmonary sequestration was consisting of two types: intralobar and extralobar sequestration. Twenty-one cases were intralobar sequestration, 20 of whom were supplied by thoracic aorta, and one was supplied by the branch of the celiac trunk. All the anomalous venous were drained to the pulmonary venous system. One was extralobar sequestration: blood supply was from thoracic aorta, and the anomalous venous drainage was to the hemiazygos. **Conclusion** MSCT thin-slice post-contrast scan and postprocessing techniques can clearly show the anomalous feeding artery and venous drainage, being benefit for the diagnosis of pulmonary sequestration.

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