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实时超声弹性成像诊断慢性肝病肝纤维化

Real-time elastography in diagnosis of liver fibrosis in patients with chronic liver disease

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中文摘要:

目的 探讨实时超声弹性成像(RTE)评价肝纤维化的价值。方法 对88例慢性病毒性肝炎患者进行RTE扫查,测量肝组织/肋间肌肉组织的应变比。全部患者均接受经皮肝穿刺术并采集生化指标,将应变比与实验室检测结果与肝纤维化病理分期进行对照。结果 应变比与肝纤维化病理分期呈负相关($r=-0.82, P<0.01$)。以肝明显纤维化($\geq S2$ 期)作为诊断标准,应变比的ROC曲线下面积为0.92,优于天门冬氨酸氨基转移酶/血小板比例指数(0.90)和Forns指数(0.84);以应变比1.10作为诊断肝明显纤维化的最佳诊断界值,其敏感度为86.84%,特异度为82.00%,阳性预测8.57%,阴性预测值为89.13%。结论 RTE可作为无创判断肝纤维化程度的新方法。

英文摘要:

Objective To investigate the value of real-time ultrasound elastography (RTE) in diagnosing liver fibrosis in patients with chronic liver disease. **Methods** Totally 88 patients who suffered chronic hepatitis underwent RTE. The elastic strain ratio of liver tissue to intercostal muscle tissue was measured, and histological fibrosis stages and blood parameters were collected. Then elastic strain ratio laboratory test results were compared with histological fibrosis stages. **Results** Negative correlation was found between the elastic strain ratio and the histological fibrosis stages ($r=-0.82, P<0.01$). To significant liver fibrosis ($\geq S2$) as the diagnostic criteria, the area under ROC curve of elastic strain ratio was 0.92, superior to that of aspartate aminotransferase to platelet ratio index (0.90) and Forns (0.84). When 1.10 was used as the cut-off value of elastic strain ratio for the diagnosis of significant fibrosis, the sensitivity was 86.84%, and the specificity was 82.00%, the positive predictive value 8.57%, the negative predictive value was 89.13%. **Conclusion** RTE can be used as a new method for non-invasively diagnosis for the degrees of liver fibrosis.

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