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## 超声对肾上腺偶发瘤的诊断价值

### Diagnostic value of ultrasound in adrenal incidentaloma

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作者	单位	E-mail
<a href="#">叶琴</a>	<a href="#">福建医科大学附属协和医院超声科, 福建 福州 350001</a>	<a href="mailto:yeqi n98@yahoo. com. cn">yeqi n98@yahoo. com. cn</a>
<a href="#">林礼务</a>	<a href="#">福建医科大学附属协和医院超声科, 福建 福州 350001</a>	
<a href="#">薛恩生</a>	<a href="#">福建医科大学附属协和医院超声科, 福建 福州 350001</a>	
<a href="#">林学英</a>	<a href="#">福建医科大学附属协和医院超声科, 福建 福州 350001</a>	
<a href="#">梁荣喜</a>	<a href="#">福建医科大学附属协和医院超声科, 福建 福州 350001</a>	
<a href="#">何以枚</a>	<a href="#">福建医科大学附属协和医院超声科, 福建 福州 350001</a>	
<a href="#">吴丽足</a>	<a href="#">福建医科大学附属协和医院超声科, 福建 福州 350001</a>	

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中文摘要:

**目的** 探讨超声对肾上腺偶发瘤(AI)的诊断价值。**方法** 采用彩色多普勒超声检查69例AI患者,观察病变的位置、形态、边界、内部回声及与周围组织的关系,并应用彩色多普勒血流显像(CDFI)观察其内部血流分布;将超声表现与实验室内分泌功能检查结合,并与手术病理结果对照。**结果** 在接受腹腔镜手术的69例AI患者中,超声检出67例、漏诊2例。经超声检出的67例病变边界均清晰,良性肿瘤各类型间大小差异有统计学意义( $P<0.01$ );所有肿瘤各类型间病灶内部回声均匀程度差异有统计学意义( $P<0.01$ )。CDFI显示67例AI患者仅14.93%(10/67)病灶内部见少量血流信号。实验室检查:醛固酮腺瘤患者中出现血钾降低、醛固酮升高者占79.17%(19/24);皮质醇腺瘤患者中血糖升高者占57.89%(11/19)、皮质醇升高者占78.95%(15/19);嗜铬细胞瘤患者中儿茶酚胺升高者占58.33%(7/12)。超声结合实验室检查对AI术前定位准确率为97.10%(67/69),定性准确率为72.46%(50/69)。**结论** 彩色多普勒超声结合实验室检查可明显提高AI术前定性准确率,为临床选择腹腔镜手术治疗提供参考依据。

英文摘要:

**Objective** To assess the diagnostic value of ultrasound in adrenal incidentaloma (AI). **Methods** Totally 69 patients with AI underwent color Doppler ultrasonography. The location, shape, borderline, interior echo of AI and the relation with around organize were observed. The internal blood flow distribution was observed with CDFI. The results of ultrasound combining with those of laboratory endocrine function examination was compared with those of pathology. **Results** In 69 AI patients treated with laparoscopy, 67 were detected with ultrasound, while the other two were misdiagnosed. The boundaries of the 67 lesions were all clear. Among all types of benign tumors, the size distribution was different significantly ( $P<0.01$ ). Among all lesions, the difference of echo uniformity coefficient was significant ( $P<0.01$ ). CDFI showed a little blood flow signal in 14.93% (10/67) cases. Kalium reducing and aldosterone raising appeared in 79.17% (19/24) cases of aldosterone-producing adenoma, blood sugar raising in 57.89% (11/19) and corticosteroid raising in 78.95% (15/19) cases of corticosteroid adenoma, while catecholamine raising in 58.33% (7/12) cases of pheochromocytoma. The preoperative localization and qualitation diagnosis accurate rate of ultrasound combining laboratory examination was 97.10% (67/69) and 72.46% (50/69), respectively. **Conclusion** Color Doppler ultrasonography combining laboratory endocrine functional examination can obviously raise the preoperative qualitation accurate rate of AI and provide favourable basis for clinic to chose laparoscopic operation.

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地址:北京市海淀区北四环西路21号大猷楼502室 邮政编码:100190 电话:010-82547901/2/3 传真:010-82547903

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