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二维氢质子磁共振波谱分析鉴别胶质瘤术后复发和放射性脑损伤

Differentiation of postoperative recurrent glioma and radiation injury with two-dimensional proton MR spectroscopy

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中文关键词: [胶质瘤](#) [复发](#) [放射治疗](#) [磁共振波谱成像](#)

英文关键词: [Glioma](#) [Recurrence](#) [Radiation therapy](#) [Magnetic resonance spectroscopy](#)

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作者	单位	E-mail
徐俊玲	河南省人民医院放射科,河南 郑州 450003	
李永丽	河南省人民医院放射科,河南 郑州 450003	
连建敏	河南省人民医院放射科,河南 郑州 450003	
窦社伟	河南省人民医院放射科,河南 郑州 450003	
吴慧	河南省肿瘤医院放疗科,河南 郑州 450005	
冯敢生	华中科技大学同济医学院附属协和医院放射科,湖北 武汉 430022	cjr.fenggansheng@vip.163.com

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中文摘要:

目的 评价二维氢质子磁共振波谱(2D ¹H-MRS)对胶质瘤术后复发和放射性脑损伤的鉴别作用。方法 应用Siemens 3.0T MR对35例脑胶质瘤术后放疗后常规MR检查出现新强化灶患者行2D ¹H-MRS分析。观察病变强化区及水肿区主要代谢物,计算代谢物比值(NAA、Cho、Cr、Cho/Cr、Cho/NAA、NAA/Cr)比较各代谢物比值在肿瘤复发和放射性脑损伤患者间的差异。结果 35例中,肿瘤复发20例,放射性脑损伤15例,经组织学证实23例,经临床及影像随访证实12例。肿瘤复发病变强化区平均Cho/Cr和Cho/NAA比值显著高于放射性脑损伤,平均NAA/Cr比值显著低于放射性脑损伤;肿瘤复发病变水肿区平均Cho/Cr和Cho/NAA比值显著高于放射性脑损伤,平均NAA/Cr在两者间的差异无统计学意义。根据病变强化区代谢物比值ROC曲线,将Cho/Cr和Cho/NAA比值中任意一个或两个大于1.77作为肿瘤复发的判断标准,2D ¹H-MRS对胶质瘤术后复发的诊断敏感度和特异度分别为90.00%(18/20)和93.33%(14/15),准确率为91.43%(32/35)。结论 2D ¹H-MRS对胶质瘤术后复发和放射性脑损伤具有重要鉴别价值。

英文摘要:

Objective To evaluate the differentiated effectiveness of two-dimensional proton MR spectroscopy (2D ¹H-MRS) to post-operative recurrent glioma and radiation injury. **Methods** Conventional MR and 2D ¹H-MRS examinations were performed with Siemens 3.0T MR system for patients with recurrent contrast-enhancing lesions at the site of the treated glioma. The metabolite peaks were measured at the regions of enhanced nodule and edema, including N-acetylaspartate (NAA), choline-containing compounds (Cho) and creatine (Cr), while the Cho/Cr, Cho/NAA, NAA/Cr ratios were calculated. The new lesions were proved with histo-pathologic examination in 23 patients and clinical-imaging following-up in 12 patients. Recurrent gliomas were found in 20 patients, and radiation injury in 15 patients. Each mean metabolite ratio above was compared between two lesion types. **Results** At contrast-enhancing regions and edema regions, the mean Cho/Cr and Cho/NAA ratios were all significantly higher in patients with tumor recurrence compared with those with radiation injury. The mean NAA/Cr ratio was significantly lower in patients with tumor recurrence compared with that with radiation injury at contrast-enhancing regions, but no significant difference was found at edema regions. Taking Cho/Cr and (or) Cho/NAA ratios >1.77 based on ROC curves of metabolite ratios as standards, the diagnostic sensitivity, specificity and accuracy was 90.00% (18/20), 93.33% (14/15) and 91.43% (32/35), respectively. **Conclusion** 2D ¹H-MRS is a valuable method to distinguish postoperative recurrent glioma and radiation injury.

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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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