

郭薇,练敏.全方向M型超声心动图评价冠状动脉疾病与扩张型心肌病心力衰竭患者左心室短轴的局部收缩功能[J].中国医学影像技术,2012,28(6):1098~1102

全方向M型超声心动图评价冠状动脉疾病与扩张型心肌病心力衰竭患者左心室短轴的局部收缩功能

Evaluation of regional myocardial function of left ventricular short-axis in patients with heart failure of coronary artery disease and dilated cardiomyopathy with omni-directional M-mode echocardiography

投稿时间: 2011-11-14 最后修改时间: 2011-12-05

DOI:

中文关键词: [超声心动描记术](#) [冠状动脉疾病](#) [心肌病,扩张型](#) [心室功能,左](#)

英文关键词: [Echocardiography](#) [Coronary disease](#) [Cardiomyopathy, dilated](#) [Ventricular function, left](#)

基金项目: 卫生部科学研究基金-福建省卫生教育联合攻关项目(WKJ2005-2-010)。

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中文摘要:

目的 应用全方向M型超声心动图(OME)评价冠心病(CAD)及扩张型心肌病(DCM)所致的心力衰竭患者左心室短轴的局部收缩功能。方法 以DCM组30例、CAD组30例患者及对照组健康志愿者作为研究对象。依据冠状动脉造影结果将CAD组分为CAD缺血节段亚组及CAD非缺血节段亚组,采集各组左心室短轴16个节段的全方向M型超声心动图曲线,分别测量收缩膜峰值运动速度(V)、加速度(A)、收缩期运动峰值相对力(F')并进行对照分析。结果 与对照组16个节段相应室壁比较,DCM组的V、A、F'均明显减低($P < 0.05$);CAD缺血节段亚组、AD非缺血节段亚组及对照组的16个节段相应室壁比较,V除在基底段的侧壁、下壁、后间隔、乳头肌段的下壁、后间隔、心尖段的后间隔比较差异无统计学意义($P > 0.05$)外,其他室壁节段低($P < 0.05$),A、F'在16个节段室壁均减低($P < 0.05$)。结论 A、F'对评价局部收缩功能异常较V更加敏感,OME可作为评价DCM和CAD所致心力衰竭患者的局部收缩功能的有效方法

英文摘要:

Objective To evaluate the regional myocardial function of left ventricular short-axis in heart failure patients with coronary artery disease (CAD) and dilated cardiomyopathy (DCM) by omni-directional M-mode echocardiography (OME). **Methods** Totally 30 patients with DCM (DCM group), 30 patients with CAD (CAD group) and 30 healthy subjects as control group were selected, and CAD group was divided into CAD non-ischemic segment subgroup and CAD ischemic segment subgroup according to the result of coronary angiography. The left ventricular short-axis 16 segment's curves of OME every group were collected, and endocardial motion velocity (V), accelerated (A) and relatively force (F') of the peak systolic period were measured and compared. **Results** The phases of V, A, F' in DCM group were significantly lower than the corresponding 16 segments in control group (all $P < 0.05$). Compared with CAD non-ischemia segment subgroup and control group, the V of 16 segments except lateral, inferior and posterior septum in basal-segment level, inferior and posterior septum in papillary muscle level and posterior septum in apical level was not statistically different (all $P > 0.05$), in the other segments decreased significantly (all $P < 0.05$), while the A, F' of 16 segments significantly decreased (all $P < 0.05$). **Conclusion** A and F' are sensitive than V in evaluating the abnormal regional systolic function. OME can evaluate regional systolic function in heart failure patients with DCM and CAD.

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