

[1]费润欢,廖化禹,陈磊,等.食管静脉曲张内镜下不同治疗方法对门脉高压性胃病的影响[J].第三军医大学学报,2014,36(10):1102-1104.

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食管静脉曲张内镜下不同治疗方法对门脉高压性胃病:

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Title: Effects of endoscopic injection sclerotherapy and variceal ligation on development of portal hypertensive gastropathy

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摘要: 目的 探讨食管静脉曲张的不同内镜治疗方式对门脉高压性胃病的影响程度。方法 回顾性总结2007年1月至2012年12月间在我院接受食管静脉曲张内镜下治疗的307例肝硬化患者的临床资料,根据治疗方式,将上述患者分为套扎组(210例),硬化组(97例),对其术前、术后的门脉高压性胃病的程度进行对比分析。结果 内镜下套扎组无论是短期(1周)还是远期的(3个月后)对门脉高压性胃病都有影响,造成新增门脉高压性胃病或者门脉高压性胃病程度的加重,而硬化治疗组则对门脉高压性胃病的影响不大。两组间比较仅术后1周的差异具有统计学意义($P<0.05$)。结论 内镜下套扎相对于硬化治疗对门脉高压性胃病的影响更大,可能与引起胃血流的急性改变有关。

Abstract: Objective Detect the influence of variceal eradication on portal hypertensive gastropathy (PHG). Methods A total of 307 consecutive patients with cirrhosis and portal hypertension who underwent elective endoscopic variceal ligation (EVL, $n=210$) or endoscopic sclerotherapy (ES, $n=97$) for obliteration of esophageal varices between Jan. 2007 and Dec. 2012 were enrolled for this study. Both groups were compared for clinical data and PHG formation before and after eradication. Results PHG grade after eradication of esophageal varices by EVL was significantly higher than that before eradication, either a week after

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eradication or 3 months after eradication. PHG incidence and aggravation degree were significantly higher in the EVL group than in the ES group one week after eradication. Conclusion Esophageal eradication with EVL has more impact on the incidence and the severity of PHG, which may result from acute gastric hemodynamic changes.

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