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B型超声指标组合预测代偿性乙肝肝硬化

Predicting compensated hepatitis B cirrhosis with index combination of B-mode ultrasonography

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中文摘要:

目的 探讨肝、胆、脾超声检查指标与肝脏纤维化分期的相关性,构建代偿性乙型肝炎肝硬化(CHBC)B型超声诊断模型。 方法 回顾性分析398例慢性乙型肝炎肝活检患者的B型超声检查资料,以Logistic回归分析构建诊断模型。 结果 肝左叶厚径、右叶斜径、胆囊长径、横径及胆囊指数、门静脉内径、脾脏厚度与肝组织纤维化分期存在相关性,肝硬化患者肝实质回声、血管走行、胆囊壁状态、脾大程度等半定量指标平均秩次及年龄、胆囊指数等计量指标均数均高于非肝硬化患者;超声半定量指标评分、胆囊指数及年龄影响对肝硬化的诊断,诊断ROC曲线下面积0.846;超声模型指数—2.143诊断灵敏度90.30%,阴性预测值94.60%;指数0诊断特异度95.70%,阳性预测值75.00%。 结论 B型超声肝实质回声、血管走行、胆囊壁、脾大等半定量指标联合胆囊指数、患者年龄构成的超声指数可预测CHBC。

英文摘要:

Objective To analyze the correlation between stages of hepatic fibrosis and ultrasonographic image of liver, spleen and gallbladder, so as to construct a sensitive ultrasonographic model for screening compensated hepatitis B cirrhosis (CHBC). **Methods** A total of 398 patients with chronic hepatitis B underwent liver biopsy and ultrasonic examination. The images of liver surface, echo of parenchymal, intrahepatic vessel, gallbladder, spleen and diameter of portal vein were recorded, and the data were statistically analyzed retrospectively. **Results** Thickness of left lobe and oblique diameter of right lobe of liver, length and transverse diameter of gallbladder, diameter of main portal vein, thickness of spleen between ribs were correlated with stages of hepatic fibrosis. Mean ranks of semi-quantitative indexes for liver parenchymal echo, intrahepatic vessel, gallbladder and splenomegaly in cirrhotic patients were significantly greater in cirrhotic patients. Regression analysis showed that score of semi-quantitative ultrasonic indexes, multiplication of length and transverse diameter of gallbladder and patients age were included in ultrasonic model for detecting CHBC, with area under ROC 0.846. While ultrasonic index —2.143 screened CHBC with sensitivity of 90.30% and negative predictive value of 94.60%, index 0 determined cirrhosis with specificity of 95.70% and positive predictive value of 75.00%. **Conclusion** Ultrasonic model consisted of score of ultrasonic images of liver parenchymal echo, intrahepatic vessel, gallbladder, splenomegaly and multiplication of length and transverse diameter of gallbladder and patients age can predict cirrhosis accurately in patients with CHBC.

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