

论著

应用镍钛记忆合金加压吻合夹行胃肠吻合的安全性及有效性分析

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摘要:

目的: 评价应用镍钛记忆合金加压吻合夹行胃肠吻合的安全性及有效性。方法: 51例行胃肠吻合的患者随机分成钉式吻合器组(n=25)和加压吻合夹组(n=26), 分别采用金属钉机械吻合或镍钛记忆合金加压吻合夹行胃肠吻合手术。比较两者住院时间的长短, 并观察术后有无发生与吻合相关的并发症、肠道排气、排便时间以及吻合夹的排出时间。结果: 2组术后均未出现与吻合术相关的胃肠吻合口瘘、吻合口狭窄及肠梗阻等并发症。术后肠道排气、排便时间2组差异均无统计学意义(均P>0.05)。加压吻合夹均于术后9~15 d排出体外。结论: 应用镍钛记忆合金加压吻合夹行胃肠吻合是一种简便且安全有效的方法。

关键词: 胃肠吻合 镍钛加压吻合夹 安全性 有效性

Safety and efficacy of gastrointestinal anastomosis with Nickel Titanium compression anastomosis clip

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Abstract:

Objective To assess the safety and efficacy of gastrointestinal anastomosis with nickel titanium shape memory alloy compression anastomosis clip. Methods We randomized 51 patients to undergo gastrointestinal anastomosis with stapler (n=25) and nickel titanium compression anastomosis clip (n=26) respectively. The following parameters were recorded to evaluate the safety and efficacy: mean hospitalization time, anastomotic complication, first post-operation flatus and bowel movement, and extrusion of the clip. Results Anastomotic complications such as leakage, stenosis and obstruction were not observed in both groups. There were no significant differences in the first post-operation flatus time and bowel movement time between the 2 groups (P>0.05). The clip was expelled with stool within 9-15 d. Conclusion Compression anastomosis clip is safe and effective.

Keywords: gastrointestinal anastomosis nickel titanium compression anastomosis clip; safety; efficacy

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参考文献:

[1] 江志伟, 李宁, 黎介寿, 等. 应用镍钛记忆合金加压吻合夹进行结肠吻合的临床研究 [J]. 中国实用外科杂志, 2006, 26(5): 364-365.

JIANG Zhiwei, LI Ning, LI Jiesshou, et al. Colonic anastomosis performed by the nickel-titanium temperature-dependent memory-shape device [J]. Chinese Journal of Practical Surgery, 2006, 26(5): 364-365.

[2] Kaidar-Person O, Rosenthal R J, Wexner S D, et al. Compression anastomosis: history and clinical considerations [J]. Am J

Surg, 2008, 195(6): 818-826.

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- [3] Sou S, Matsui T, Yao T, et al. Differentiating enterocutaneous fistulae from suture abscesses complicating Crohn's disease using oral administration of indocyanine green [J]. *J Gastroenterol Hepatol*, 2006,21(12):1850-1853.
- [4] Scott A D, Uff C, Phillips R K. Suppression of macrophage function by suture materials and anastomotic recurrence of Crohn's disease [J]. *Br J Surg*, 1993, 80(3):387-391.
- [5] Nudelman I, Fuko V, Wasserberg N, et al. Colonic anastomosis performed with a memory-shaped device [J]. *Am J Surg*, 2005,190(3):434-438.
- [6] Song C, Frank T, Cuschieri A. Shape memory alloy clip for compression colonic anastomosis [J]. *J Biomech Eng*, 2005,127(2):351-354.
- [7] Aggarwal R, Darzi A. Compression anastomoses revisited [J]. *J Am Coll Surg*,2005,201(6):965-971.
- [8] Scarpa M, Angriman I, Barollo M, et al. Role of stapled and hand-sewn anastomoses in recurrence of Crohn's disease [J]. *Hepatogastroenterology*, 2004,51(58):1053-1057.
- [9] Liu P C, Jiang Z W, Zhu X L, et al. Compression anastomosis clip for gastrointestinal anastomosis [J]. *World J Gastroenterol*, 2008,14(31):4938-4942.

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