

## 临床研究

### 内镜黏膜下剥离术治疗结直肠广基病变

方志恒<sup>1</sup>|汪全红<sup>2</sup>|钟平<sup>1</sup>|黄景山<sup>1</sup>|王贵和<sup>1</sup>

(安徽省铜陵市人民医院 1.胃肠外科 2.内镜中心|安徽 铜陵244000)

#### 摘要:

目的: 探讨内镜黏膜下剥离术(ESD)治疗大肠广基病变的临床价值。方法: 回顾性分析17例肠镜发现的较大结肠广基病变行ESD治疗患者的临床资料。结果: 17例患者均顺利完成ESD手术。手术时间(68±21)min, 病变直径(3.0±1.5)cm; 术中出血4例, 术后延迟性出血3例, 均在肠镜下用热活检钳电凝、APC、钛夹等方法成功止血; 术中发生穿孔2例, 1例肠镜下用钛夹缝合修补成功, 另1例行肠修补术。术后病理: 管状腺瘤3例, 绒毛状腺瘤4例, 低级别上皮内瘤变2例, 高级别上皮内瘤变3例, 增生性息肉2例, 类癌1例, 早期癌(T1N0M0)2例。患者均痊愈出院, 随访2~27个月均无复发。结论: ESD治疗结直肠广基病变是安全、可行的, 具有创伤小、恢复快、无腹壁切口疤痕等优点, 故推荐应用。

关键词: 结直肠肿瘤/外科学; 黏膜下剥离术 内窥镜; 广基病变

### Endoscopic submucosal dissection for sessile colorectal lesions

FANG Zhiheng<sup>1</sup>, WANG Quanhong<sup>2</sup>, ZHONG Ping<sup>1</sup>, HUANG Jingshan<sup>1</sup>, WANG Guihe<sup>1</sup>

(1. Department of Gastrointestinal Surgery 2. Center for Endoscopy, Tongling People's Hospital, Anhui, Tongling 244000, China)

#### Abstract:

Objective: To assess the clinical value of endoscopic submucosal dissection (ESD) for sessile colorectal lesions. Methods: The clinical data of 17 patients with large sessile colorectal lesion that was detected by enteroscopy and underwent ESD were retrospectively analyzed. Results: ESD was successfully performed in all the 17 patients. The average operative time was (68±21) min, and average diameter of the lesions was (3.0±1.5) cm. Intraoperative bleeding occurred in 4 patients and postoperative delayed bleeding occurred in 3 patients, which were all resolved by using hot biopsy forceps, APC or titanium clip under enteroscope. Bowel perforation occurred during operation in 2 patients, which in one case was sutured with titanium clip under enteroscope and the other case was treated by open bowel repair. The postoperative pathology study verified that 3 cases were tubular adenoma, 4 were villous adenoma, 2 were low-grade intraepithelial neoplasia, 3 were high-grade intraepithelial neoplasia, 2 were hyperplastic polyps, 1 was carcinoid 1, and 2 were early cancer (T1N0M0). All patients were cured and discharged from hospital, and no recurrence was noted during follow-up for 2 - 27 months. Conclusion: ESD is a safe and feasible procedure for sessile colorectal lesions; it has the advantages of minor trauma, quick recovery and no abdominal scar and its use is recommended.

Keywords: Colorectal Neoplasms/surg Submucosal Dissection, Endoscopic Sessile Lesions1

收稿日期 2012-10-19 修回日期 2013-03-23 网络版发布日期 2013-04-15

DOI: 10.7659/j.issn.1005-6947.2013.04.019

#### 基金项目:

安徽省铜陵市卫生局科研资助项目[卫科研(2007)06]。

通讯作者: 方志恒, Email: fangzhheng@126.com

作者简介: 方志恒|安徽省铜陵市人民医院副主任医师|主要从事胃肠道肿瘤外科、腹腔镜及内镜治疗方面的研究。

#### 本刊中的类似文章

扩展功能

本文信息

Supporting info

[PDF 2312KB](#)

[\[HTML全文\]](#)

[参考文献\[PDF\]](#)

[参考文献](#)

服务与反馈

[把本文推荐给朋友](#)

[加入我的书架](#)

[加入引用管理器](#)

[引用本文](#)

[Email Alert](#)

[文章反馈](#)

[浏览反馈信息](#)

本文关键词相关文章

[结直肠肿瘤/外科学; 黏膜下剥离术](#)

[内窥镜; 广基病变](#)

本文作者相关文章

[PubMed](#)