

论著

良性前列腺增生症合并糖尿病患者的尿动力学临床价值

丁见, 齐琳, 祖雄兵, 申鹏飞

中南大学湘雅医院泌尿外科, 长沙 410008

摘要:

目的: 通过尿动力学检查对良性前列腺增生症(BPH)合并糖尿病(DM)患者的下尿路症状评估, 分析尿动力学的表现, 对该类型患者作出合理的治疗与处理。方法: 106例行经尿道前列腺电切术(TURP)治疗的BPH患者, 年龄53~92(63.21±7.18)岁; 下尿路症状史3~12年, 均行肛门指检、前列腺特异性抗原(PSA)、B超、静脉肾盂造影(IVU)及尿动力学检查和IPSS评分。排除尿路感染及颅脑、脊髓等神经系统病史。BPH合并DM患者(47例)为研究组(A组), 单纯BPH患者(59例)为对照组(B组), 对2组的尿动力学检查情况, IPSS评分及术后疗效进行对比分析。结果: 2组比较, IPSS评分A组较B组高, 最大尿流率(Qmax)A组较B组显著降低, 疗效不满意者A组高于B组, 差异有统计学意义(P<0.05), 但是2组平均年龄及残余尿量差异无统计学意义(P>0.05)。2组的尿动力学检查比较, A组中膀胱逼尿肌不稳定、低顺应性膀胱、膀胱逼尿肌功能受损比例要高于B组, 差异有统计学意义(P<0.05)。结论: DM加重了BPH患者的膀胱功能障碍; 尿动力学检查对于BPH合并DM患者治疗方法的选择, 预测术后疗效能提供客观依据, 具有重要的临床参考价值。

关键词: 良性前列腺增生症 糖尿病 尿动力学

Urodynamic studies on benign prostatic hyperplasia combined with diabetes mellitus

DING Jian, QI Lin, ZU Xiongbing, SHEN Pengfei

Department of Urology, Xiangya Hospital, Central South University, Changsha 410008, China

Abstract:

Objective To evaluate urinary dynamics in the diagnosis, differential diagnosis, disease grades, complications, prognosis, and curative effect on benign prostatic hyperplasia (BPH) patients accompanied with diabetic mellitus (DM), and to investigate the clinical significance of urodynamic studies. Methods A total of 106 BPH patients with lower urinary tract symptoms were studied, aged 53-92(63.21±7.18) years. The mean duration of voiding symptoms was 3-12 years. These patients were divided into 2 groups: Group A consisted of 59 BPH patients while Group B consisted of 47 BPH patients combined with DM. Both groups were evaluated the international prostate symptom score(IPSS), urine flow rate, and residual urine volume. All patients underwent urodynamic examination. Correlation analysis was conducted to determine the correlation among the patients. The urodynamic results in different groups were compared. Results The IPSS in Group A was higher than Group B, while the Qmax was lower than Group B. The unsatisfactory results of Group A was higher than Group B. There was significant difference between the 2 groups (P<0.05). There was no significant difference in residual urine volume between the 2 groups (P>0.05). There was significant difference between the 2 groups in detrusor instability of the bladder, low compliance bladder, and damaged detrusor function (P<0.05). Conclusion The influence of DM on the function of the bladder in BPH patients is significant. Urodynamics can provide objective basis for the selection of therapeutic methods, and forecast the postoperative effect. It has an important reference value in BPH patients accompanied with DM.

Keywords: benign prostatic hyperplasia; diabetic mellitus; urodynamic

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通讯作者: 齐琳

作者简介:

作者Email: urologyxy@126.com

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