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论著

微通道经皮肾镜术后气囊导尿管牵拉的止血作用

马楠[1], 陈合群[1], 罗彦斌[1,2], 龙晓丹[1], 曾锋[1], 王军[1], 齐琳[1]

1. 中南大学湘雅医院泌尿外科, 长沙 410008;
2. 湖南省邵阳市中心医院泌尿外科, 邵阳 湖南 422000

摘要:

目的: 观察临床应用气囊导尿管牵拉法对微通道经皮肾镜碎石术(microchannel percutaneousnephrolithotomy, mPCNL) 术后出血的疗效。方法:自2010 年11 月至2011 年4 月, 前瞻性收集明确诊断为上尿路结石且应用mPCNL 治疗的88 例患者的临床资料, 随机将病例资料分为气囊导尿管不牵拉止血组(对照组, n=45) 与气囊导尿管牵拉止血组(实验组, n=43)。通过氰化高铁血红蛋白法测量出血量。使用Wilcoxon 秩和检验分析两组出血量的关系。结果:术后对照组平均出血量为13.830 g, 出血时间为4 d;实验组平均出血量为7.959 g, 出血时间为3 d。经 Wilcoxon 秩和检验, 两组出血量的比较具有明显统计学意义(P<0.001)。结论:对于mPCNL 术后出血, 施行气囊导尿管牵拉压迫止血能够明显减少术后出血量, 实验证实有效, 临床观察可行。

关键词: 微通道经皮肾镜碎石取石术 术后出血 气囊导尿管 牵拉

Foley catheter traction for hemorrhage after postmicrochannel percutaneous nephrolithotomy

MA Nan[1], CHEN Hequn[1], LUO Yanbin[1,2], LONG Xiaodan[1], ZENG Feng[1], WANG Jun[1], QI Lin[1]

1. Department of Urology, Xiangya Hospital, Central South University, Changsha 410008;
2. Department of Urology, Shaoyang Central Hospital, Shaoyang Hunan 422000, China

Abstract:

Objective: To evaluate the safety and effect of foley catheter traction for hemorrhage after postmicrochannel percutaneous nephrolithotomy (mPCNL).
Methods: Eighty-eight patients with upper urinary calculi were collected prospectively at the department of urology of Xiangya Hospital of Central South University from November 2010 to June 2011. The patients underwent mPCNL, and were divided into 2 groups randomly: 45 patients with 16F foley catheter but without traction served as the control group, and the other 43 patients with 16F foley catheter traction served as the experiment group. Blood loss was estimated by the mass of hemoglobin in the draining liquid and urine during postoperative duration through the HiCN. The blood loss and bleeding time were compared in the 2 groups, and analyzed by Wilcoxon rank sum test.
Results: There was statistical difference in the average blood loss between the control group (13.830 g) and the experiment group (7.959 g, P<0.001). The mean bleeding time was 4 and 3 days in the control group and the experiment group respectively.
Conclusion: Foley catheter traction for mPCNL can reduce the blood loss, suggesting that Foley catheter traction is safe, effective and feasible.

Keywords: percutaneous nephrolithotomy postoperative hemorrhage foley catheter traction

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通讯作者: 陈合群, Email: chqun101@ yahoo.com

作者简介: 马楠, 硕士, 主治医师, 主要从事微创泌尿外科疾病的诊疗工作。

作者Email: chqun101@yahoo.com

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