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早期宫颈浸润癌术后静脉血栓形成的危险因素分析

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Title: Risk Factors Analysis of Postoperative Venous Thromboembolism in Early Stage Cervical Carcinoma

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关键词: 宫颈癌; 静脉血栓; 危险因素

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摘要: 目的 探讨早期宫颈浸润癌术后静脉血栓(VTE)形成的危险因素及其预防措施。方法 选择2010年1月至2013年6月在南京医科大学第一附属医院妇科接受手术治疗且临床和随访资料完整的243例早期宫颈浸润癌患者为研究对象(本研究遵循的程序符合南京医科大学第一附属医院人体试验委员会所制定的伦理学标准,得到该委员会批准,并征得受试对象本人的知情同意,与之签署临床研究知情同意书),对其术后VTE形成的相关因素进行单因素和多因素非条件logistic回归分析。结果 术后VTE形成发生率为7.8%(19/243)。多因素非条件logistic回归分析结果显示体质量指数(BMI) [OR=1.23, 95%CI (1.08~1.47), P=0.030]、吸烟 [OR=2.42, 95%CI (2.11~5.31), P=0.010]、既往合并其他恶性肿瘤 [OR=6.49, 95%CI (1.23~26.16), P=0.001]、既往血栓病史 [OR=4.62, 95%CI (1.01~6.95), P=0.000]、术后第3天D-二聚体水平升高 [OR=2.99, 95%CI (1.27~4.22), P=0.023]是早期宫颈浸润癌术后VTE形成的独立危险因素。结论 早期宫颈浸润癌患者需在术前对VTE形成相关危险因素进行准确评估,采用及时有效的预防措施,有效降低术后VTE形成的发生率。

Abstract: Objective To explore the high risk factors of postoperative venous thromboembolism (VTE) among patients undergoing surgery for stage I A2~II A cervical carcinoma, for distinguishing the high risk patients and establishing preventive strategy. Methods From January 2010 to July 2013, a retrospective study was carried out in the 243 patients with stage I A2~II A cervical

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carcinoma who underwent surgery. The high risk factors for postoperative VTE were investigated. Various clinic pathologic variables were tested for an association with the development of postoperative VTE using standard statistical tests. The study protocol was approved by the Ethical Review Board of Investigation in Human Being of The First Affiliated Hospital with Nanjing Medical University. Informed consent was obtained from each patients. Results The incidence rate of VTE was 7.8% (19/243) in the study. Multivariate logistic regression analysis indicated that elevated body mass index (BMI) [OR =1.23, 95% CI (1.08-1.47), P=0.030], cigarette smoking [OR =2.42, 95% CI (2.11-5.31), P=0.010], a history of VTE [OR =6.49, 95% CI (1.23-26.16), P =0.001] and cancer [OR =4.62, 95% CI (1.01*-6.95), P =0.000], and elevated levels of D dimer on the 3rd day post surgery [OR =2.99, 95% CI (1.27-4.22), P =0.023] were independent risk factors for postoperative VTE. Conclusions Each patient with early stage cervical cancer before surgery should be assessed for postoperative thromboembolic risk according to the risk factors identified in this study. Prophylaxis therefore should be used to prevent postoperative VTE events.

参考文献/REFERENCES

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