

华危重症医学杂志

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情严重程度,分为一般脓毒症组(39例)和重度脓毒症组(42例)。另外,根据28 d生存情况将患者分为死亡组(13例)和存活 组(68例)进行对比分析。采用一步免疫夹心法和酶联荧光分析技术测定脓毒症患者入院时的NT-proBNP浓度并进行急性生理学与 慢性健康状况评分系统(APACHE)II 评分。 结果 重度脓毒症组患者血浆NT-proBNP浓度 [(1488.43±1178.23) pg/ml] 明 显高于一般脓毒症组[(660.18±388.17) pg/ml],差异具有统计学意义(P<0.01)。死亡组血浆NT-proBNP浓度及APACHE II评分均明显高于存活组,差异具有统计学意义(P<0.01)。脓毒症患者入院时NT-proBNP浓度与APACHE II 评分呈正相关

Objective To discuss the significance of diagnosis and prognosis in pa-tients with sepsis through N-terminal pro-brain natriuretic peptide (NT-proBNP) measurement. Methods Eighty-one patients with sepsis were enrolled and divided into general sepsis group (39 cases) and severe sepsis group (42 cases) according to the disease condition. Moreover, they were also divided into death group (13 cases) and survival group (68 cases) on the basis of survival time. NT-proBNP concentration was measured on admission by one-step sandwich immunoassay and enzyme-linked immune fluorescence assay technology. Acute physiology and chronic health evaluation (APACHE) II scores were recorded. Results The NT-proBNP concentration in the severe sepsis group was significantly higher than the general one (P<0.01). The NT-proBNP concentration and the APACHE II scores of the death group were markedly higher than the survival group, the difference was significant (P<0.01). NT-proBNP concentration was positively correlated with APACHE II scores (r=0.537, P<0.01). Conclusion NT-proBNP may be a valuable laboratory indicator of condition assessment and prognosis in patients with sepsis.

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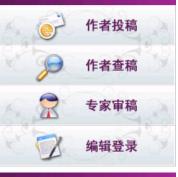
作者简介:

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编辑委员会

总编辑:郑树森

执行总编辑:杨云梅 编辑部主任: 陆远强

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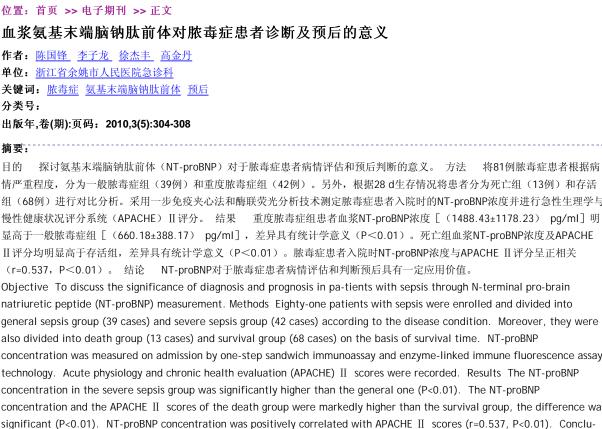
地址: 杭州市庆春路79号

邮编: 310003

电话: 0571-87236467

传真: 0571-87236469

邮箱: zhwzzyx@yahoo.cn



中华危重症医学杂志(电子版) 地址:杭州市庆春路79号 邮编: 310003

电话: 0571-87236467