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[1]李燕 彭汉伟 关明飞 朱安娜 黄萍.菱形皮瓣和股前外侧皮瓣修复外阴癌术后缺损[J/CD].中华妇幼临床医学杂志(电子版),2014,(01):79-82. Li Yan,Peng Hanwei,Guan Mingfei,et al.Reconstruction of the Vulvar Defects After Cancer Ablative Surgery Using Rhomboid Flap and Anterolateral Thigh Flap[J/CD].Chinese Journal of Obstetrics & Gynecology and Pediatrics (Electronic Edition),2014,(01):79-82.

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菱形皮瓣和股前外侧皮瓣修复外阴癌术后缺损(PDF)

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Title: Reconstruction of the Vulvar Defects After Cancer Ablative Surgery

Using Rhomboid Flap and Anterolateral Thigh Flap

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关键词: 外阴肿瘤,股前外侧皮瓣,菱形皮瓣,血管危象

Keywords: Vulvar neoplasm; Anterolateral thigh flap; Rhomboid flap; Vessel crisis

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摘要: 目的 探讨菱形皮瓣和股前外侧皮瓣在外阴癌术后缺损修复中的临床效果。 方法 选择

2007年7月至2012年6月于汕头大学医学院附属肿瘤医院妇瘤科行外阴癌手术的9例女性患者为研究对象(本研究遵循的程序符合汕头大学医学院附属肿瘤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)。对其外阴癌术后缺损个体化选用菱形皮瓣和股前外侧皮瓣修复。观察其切口愈合、外阴形态、排尿和性生活情况。 结果 本组9例患者中,采用菱形皮瓣修复为7例(77.8%),采用股前外侧皮瓣修复为2例(22.2%),术后半年复查均示外阴丰满、有弹性,尿道口无移位,无排尿时尿线偏歪,阴道口无狭窄,可容2指通过,皮瓣均完全存活(100%)。中位随访25个月后,除1例患者(11.1%)恶性黑色素瘤局部控制不良外,其余患者未见肿瘤复发或转移(88.9%)。4例患者恢复正常性生活

(44.4%)。 结论 根据外阴缺损范围合理应用单侧/双侧菱形皮瓣或股前外侧皮瓣修复

外阴,可较好地重建患者的外阴解剖学外观,提高患者生活质量,具有临床应用价值。

Abstract: Objective To reveal the clinical outcome reconstruction of the vulvar defects

with rhomboid flap and anterolateral thigh flap in following cancer ablative surgery. Methods From July 2007 to June 2012,9 patients with vulvar cancer who

underwent surgery were retrospectively studied. The study protocol was

approved by the Ethical Review Board of Investigation in Human Being of Cancer

Hospital of Shantou University Medical College.Informed consent was obtained from each patients.Unilateral or bilateral rhomboid flaps and anterolateral thigh

flap were used in vulvar defects. The incision healing and evaluation of the vulvar

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configuration were observed, the urination and sexual life 6 months postoperatively were performed. Results Unilateral or bilateral rhomboid flaps were used in 7 patients (77 8%), anterolateral thigh flaps were used in 2 patients (22.2%) in the study. All patients had a well—shaped vulvar configuration with good elasticity, without scar contracture, urination deflection, or virginal stricture observed, and all flaps survived completely in 9 patients (100%). 4 patients restored sexual life. Conclusions Reconstruction of the vulvar defects according to their dimension with unilateral/bilateral rhomboid flaps or anterolateral thigh flaps has some clinical value which can rebuild the patients vulvar anatomic shape and improve their quality of life.

参考文献/REFERENCES

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