

射频消融辅助肝切除术在巨大肝脏肿瘤治疗中的应用

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Title: Application of radiofrequency assisted liver resection technique in treating huge liver tumors

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关键词: 射频辅助肝切除; 嵌夹结扎法; 巨大肝脏肿瘤; 预后

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摘要: 目的: 比较射频消融辅助肝切除术与嵌夹结扎法在巨大肝脏肿瘤切除中的有效性及安全性。方法: 共31例诊断为巨大肝脏肿瘤的患者纳入回顾性研究, 其中15例采用射频消融辅助肝切除术(RF-LR组), 16例采用传统的嵌夹结扎法(CC-LR组)。比较两组间出血量、输血情况、手术时间、术后并发症发生情况及生存率。结果: 两组患者术前评估未见明显差异。CC-LR组患者中位术中出血量(1 000 ml vs 600 ml, P=0.005)及需输血患者例数(13例 vs 6例, P=0.029)较RF-LR组显著升高, 但两组间手术时间、肝门阻断、术后并发症发生情况、围手术期死亡例数并无统计学差异。RF-LR组术后1年、2年、3年总体生存率分别为80.0%、70.0%、35.0%, 与CC-LR组患者(76.9%、61.5%、38.5%)比较未见统计学差异(P>0.05)。结论: 射频消融辅助肝切除术能有效减少巨大肝脏肿瘤患者术中出血量及输血患者例数, 尤其对合并肝硬化患者适用, 且与嵌夹结扎法具有相似的长期生存率。

Abstract: Objective: The purpose of this study is to compare the efficacy and safety of RF-LR with clamp-crush liver resections(CC-LR) in treating huge liver tumors(>10 cm).Methods: Thirty-one patients with huge liver tumors underwent RF-LR(n=15) or CC-LR(n=16) in our hospital.Blood loss, transfusion, operating time, postoperative complications and survival rate were compared between two groups.Results: Preoperative assessment revealed no statistical difference between two groups.Blood loss was more in CC-LR group than RF-LR group(P=0.005) and more patients in CC-LR group required transfusion(P=0.029).There were no significant differences in terms of total operation time, hepatic portal blocking and postoperative complications.No cases had postoperative liver failure and perioperative death in both groups.In the case of primary liver cancer, The 1-, 2-, and 3-year overall survival rates of RF-LR group and CC-LR group were 80.0%, 70.0% and 35.0% and 76.9%, 61.5%, 38.5% respectively, which were not statistically different between two groups.Conclusion: RF-LR can effectively reduce blood loss and transfusion for huge liver tumors especially with severe hepatic cirrhosis.Meanwhile, application of this technique provide a comparative prognosis for patients with huge liver tumor with CC-LR but do not increase postoperative complications.

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