

加速康复外科理念在胃癌根治术中应用效果的Meta分析

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Title: Influence of enhanced recovery after surgery programs in gastrectomy for gastric cancer:a Meta-analysis

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摘要: 目的: 评价加速康复外科理念在胃癌根治术围手术期应用的有效性与安全性。方法: 检索Pubmed、Embase、Cochrane Library、中国生物医学文献数据库(SinoMed)、中国知网(CNKI)、维普、万方等数据库中关于加速康复外科在胃癌根治术中应用的随机对照试验, 检索时间为1995年1月至2018年2月。两位研究人员独立进行质量评价与资料提取, 采用RevMan5.2软件进行Meta分析。结果: 纳入14篇文献, 共1340例患者, 包括加速康复外科组669例, 对照组671例。相较于对照组, 加速康复外科术后首次排气时间[SMD=-1.38, 95%CI(-1.89, -0.87), P<0.00001]、首次排便时间[SMD=-1.62, 95%CI(-2.62, -0.63), P=0.001]缩短; 住院时间[WMD=-2.26, 95%CI(-2.67, -1.84), P<0.00001]、住院费用[SMD=-0.65, 95%CI(-1.04, -0.26), P=0.001]减少; 总并发症发生率降低[OR=0.65, 95%CI(0.46, 0.93), P=0.02]。但再入院[RR=1.01, 95%CI(0.24~4.36), P=0.99]并没有明显差异。结论: 加速康复外科在胃癌根治术围手术期中应用是安全有效的, 有利于促进患者的康复, 具有临床应用价值, 但需要更多高质量的循证证据支持。

Abstract: Objective: To compare the safety and effectiveness of enhanced recovery after surgery (ERAS) with conventional care in gastrectomy for gastric cancer. Methods: We searched Pubmed, Embase, Cochrane Library, Sino Med, CNKI, VIP and Wan Fang for randomized controlled trials (RCTs) on the comparison of enhanced recovery after surgery used in gastrectomy for gastric cancer from January, 1995 to February, 2017. After screening for inclusion, two researchers independently performed quality assessment and data extraction. Meta-analysis was conducted by the Review Manager 5.2 software. Results: Fourteen randomized control trials including 1340 patients were eligible for analysis. There were 669 cases in the ERAS and 671 cases in the conventional care groups. Meta-analysis showed that time to first passage of flatus [SMD=-1.38, 95%CI(-1.89, -0.87), P<0.00001], postoperative hospital stay [WMD=-2.26, 95%CI(-2.67, -1.84), P<0.00001], hospital charge [SMD=-0.65, 95%CI(-1.04, -0.26), P=0.001], first defecation time [SMD=-1.62, 95%CI(-2.62, -0.63), P=0.001], postoperative complications [OR=0.65, 95%CI(0.46, 0.93), P=0.02] were significantly decreased for ERAS. The readmission rate of ERAS group was comparable to conventional care group [RR=1.01, 95%CI(0.24~4.36), P=0.99]. Conclusion: Enhanced recovery after surgery is safe and effective in gastrectomy for gastric cancer. ERAS program could accelerate gastrointestinal function recovery, shorten postoperative hospital stay and hospital charge, and decrease postoperative complications. Further randomized trials are needed to strengthen the conclusions.

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