

胸骨后甲状腺肿经颈部低领切口切除的诊治体会（附33例）

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Title: Experience of diagnosis and treatment for the removal with substernal goiters through low cervical collar incision: A report of 33 cases

作者: 张德言¹; 卢秀波²; 王晓明²

1.许昌市建安区人民医院外四科, 河南 许昌 461000; 2.郑州大学第一附属医院甲状腺外科, 河南 郑州 450052

Author(s): Zhang Deyan¹; Lu Xiubo²; Wang Xiaoming²

1.Department of General Surgery, Jian'an District People's Hospital, Henan Xuchang 461000, China;

2.Department of Thyroid Surgery, First Affiliated Hospital of Zhengzhou University, Henan Zhengzhou 450052, China.

关键词: 胸骨后甲状腺肿; 低领切口; 甲状腺切除

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摘要: 目的: 探讨经颈部低领切口行胸骨后甲状腺肿切除的诊治体会。方法: 回顾性分析我院33例经颈部低领切口行胸骨后甲状腺肿切除的临床资料。结果: 本组病例全部经颈部低领切口入路顺利完成手术, 无围手术期死亡、呼吸道阻塞及大出血病例, 无永久性喉返神经损伤和甲状旁腺功能低下病例。并发症发生率为15.15%(5/33), 2例(6.06%)出现暂时性声音嘶哑, 术后3周恢复正常, 3例(9.09%)出现手足麻木, 给予补钙处理后, 出院时症状消失。结论: 应用一定的手术技巧, 经颈部低领切口行I型和II型胸骨后甲状腺肿切除是安全可行的。

Abstract: Objective: To explore the experience of diagnosis and treatment for the removal with substernal goiters through low cervical collar incision. Methods: The clinical data of 33 cases diagnosed as substernal goiters who were removed through low cervical collar incision in our hospital were analyzed retrospectively. Results: The removal with substernal goiters in all cases were performed through low cervical collar incision approach without perioperative mortality, respiratory tract obstruction, massive haemorrhage, permanent impairment of recurrent laryngeal nerve and hypoparathyroidism. The complication rate was 15.15% (5/33). 2 cases (6.06%) of temporary hoarseness were found after operation, which returned to normal after treatment in three weeks. 3 cases (9.09%) of numbness in the extremities were relieved through administration of calcium treatment. Conclusion: Removal of I type and II type substernal goiter through certain operation skills of low cervical collar incision approach is safe and feasible.

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