

老年性肺癌患者CT影像学分型与血清肿瘤特异性标志物的相关性分析

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Title: Correlation between serum tumor specific markers and CT imaging classification in elderly patients with lung cancer

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关键词: 老年; 肺癌; 肿瘤特异性标志物; CT; 影像学分型

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摘要: 目的: 探讨分析老年性肺癌患者血清肿瘤特异性标志物与CT影像学分型的相关性。方法: 选择我院收治的老年肺癌患者125例作为肺癌组, 再选择肺部良性病变老年患者50例作为对照组, 检测两组患者血清肿瘤特异性标志物糖链抗原199 (CA199)、癌抗原125 (CA125)、前列腺特异性抗原 (PSA)、癌胚抗原 (CEA)、神经元特异性烯醇化酶 (NSE) 水平, 肺癌组患者进行CT影像学检查分型, 分析不同CT影像学表现患者血清肿瘤特异性标志物水平变化。结果: 肺癌组患者血清CA199、CA125、PSA、CEA、NSE水平均显著高于对照组 ($P<0.05$); 有坏死空洞征象老年肺癌患者血清CA199、CA125、PSA、CEA、NSE水平均显著高于无坏死空洞征象老年肺癌患者 ($P<0.05$); 有深分叶征象老年肺癌患者血清CA199、CA125、PSA、CEA、NSE水平均显著高于无深分叶征象老年肺癌患者 ($P<0.05$); 有毛刺征象老年肺癌患者血清CA199、CA125、PSA、CEA、NSE水平均显著高于无毛刺征象老年肺癌患者 ($P<0.05$)。结论: 老年性肺癌患者CT影像学特征中有无坏死空洞征象、深分叶征象以及毛刺征象与患者血清肿瘤特异性标志物表达有关, 联合使用CT影像学检查与血清肿瘤特异性标志物检查, 更有利于疾病的准确诊断。

Abstract: Objective: To investigate the correlation between tumor specific markers and CT imaging classification in elderly patients with lung cancer. Methods: 125 elderly patients with lung cancer in our hospital were selected as lung cancer group, and 50 elderly patients with benign lung diseases as control group. Tumor specific markers, such as sugar chain antigen 199 (CA199), cancer antigen 125 (CA125), prostate specific antigen (PSA), carcinoembryonic antigen (CEA), nerve-specific enolase (NSE) were detected in the two groups. The classification of CT imaging in patients with lung cancer was detected. The changes of serum tumor-specific markers in patients with different CT imaging manifestations were analyzed. Results: The serum levels of CA199, CA125, PSA, CEA and NSE in lung cancer group were significantly higher than those in control group ($P<0.05$). The serum levels of CA199, CA125, PSA, CEA and NSE in elderly lung cancer patients with necrotic cavity were significantly higher than those in elderly lung cancer patients without necrotic cavity ($P<0.05$). The serum levels of CA199, CA125, PSA, CEA and NSE in elderly lung cancer patients with deep lobulation were significantly higher than those without deep lobulation ($P<0.05$). The serum levels of CA199, CA125, PSA, CEA and NSE in elderly lung cancer patients with burr sign were significantly higher than those in elderly lung cancer patients without burr sign ($P<0.05$). Conclusion: The presence or absence of necrotic cavity, deep lobulation and burr sign in the CT imaging features of elderly patients with lung cancer are associated with the expression of tumor-specific markers. Combination of CT imaging and tumor-specific markers is conducive to accurate diagnosis.

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