

孕早期胎儿颈项透明层厚度联合静脉导管频谱对先天性心脏畸形的预测价值

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【摘要】目的 探讨孕早期胎儿颈项透明层厚度(NT)及胎儿静脉导管血流频谱(DV)对胎儿先天性心脏畸形(CHD)的临床预测价值。**方法** 筛查对象为1 996例于2012年1月至2015年6月间就诊于我院的孕妇,在孕11~13⁺6周测量NT值及DV频谱,并对胎儿进行随访,分析NT和DV与胎儿先天性心脏畸形之间的关系。**结果** NT增厚的胎儿CHD的发生率为12.9%(18/140),显著高于NT正常胎儿的0.2%(4/1 856),差异有显著统计学意义($P<0.01$),其敏感性、特异性为81.8%、93.8%,阳性预测率、阴性预测率为12.8%、99.8%。DV异常的胎儿CHD的发生率为12.3%(19/154),显著高于DV正常胎儿的0.2%(3/1 842),差异有显著统计学意义($P<0.01$),其敏感性、特异性为86.4%、93.2%,阳性预测率、阴性预测率为12.3%、99.8%。NT和DV均异常的胎儿CHD发生率为26.4%(14/53),显著高于NT和DV均正常的胎儿的0.1%(2/1 894)($P<0.01$),其敏感性、特异性为87.5%、98.0%,阳性预测率、阴性预测率为26.4%、88.9%。**结论** NT增厚联合DV异常可以作为孕早期胎儿先天性心脏畸形的筛查指标。

【关键词】 胎儿;超声检查;先天性心脏畸形;颈项透明层;静脉导管;孕早期

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Predictive value of nuchal translucency thickness and blood flow spectrum of ductus venosus for fetal congenital cardiac malformation in early pregnancy. ZHU Yin-di¹, GU Xin-xian¹, GUO Liang², XIA Fei³. Department of Gynecology and Obstetrics¹, Department of Imaging², Reproductive Medicine Center³, the First Hospital Affiliated to Soochow University, Suzhou 215006, Jiangsu, CHINA

【Abstract】 Objective To investigate the clinical application value of increased nuchal translucency (NT) thickness and abnormal blood flow spectrum of ductus venosus (DV) in predicting congenital heart disease (CHD) in early pregnancy. **Methods** From January 2012 to June 2015, fetal regular DV and NT measurements were performed on 1 996 pregnant women within 11~13⁺6 gestational weeks. The fetuses were followed up, and the relationship between DV, NT and CHD was analyzed. **Results** The incidence of CHD in fetuses with increased NT thickness was 12.9% (18/140), which was significantly higher than 0.2% (4/1 856) of fetuses with normal NT ($P<0.01$). The diagnostic sensitivity and specificity were 81.8%, 93.8%, and the positive predictive rate and negative predictive rate were 12.8%, 99.8%. The incidence of CHD in fetuses with abnormal DV was 12.3% (19/154), which was significantly higher than 0.2% (3/1 842) of fetuses with normal DV ($P<0.01$). The diagnostic sensitivity and specificity were 86.4%, 93.2%, and the positive pre-

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内碎石机,从边缘开始破坏结石,逐步粉碎结石,从而提高取石成功率。而对照组采用的纤维胆道镜由于镜身软,操控不便、亮度不足,视野受限,加上病变胆道往往伴有炎症、狭窄,结石体积大,网篮取石难以进行,因而残石率较高^[12]。本研究中观察组的远期疗效好,结石复发率低,这可能与其操作损伤小、改善病灶局部狭窄、不改变生理解剖结构等因素有关。

综上所述,在治疗肝内胆管结石时,硬质镜联合气压腔内碎石可取得满意的临床疗效,在提高取石率的同时,可降低相关并发症的发生,并减少结石复发,是一种安全有效的治疗方式。

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