

# 地佐辛联合曲马多用于学龄前儿童术后镇痛的临床观察

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**【摘要】** 目的 探讨地佐辛联合曲马多用于学龄前儿童骨科手术后静脉镇痛的效果。方法 选取2012年6月至2013年10月在我院全身麻醉下行静脉自控镇痛(PCIA)的骨科手术患儿90例,根据随机数字表法随机分为曲马多组(A组)、芬太尼联合曲马多组(B组)、地佐辛联合曲马多组(C组),每组30例。记录三组患儿术后2 h (T1)、6 h (T2)、24 h (T3)、48 h (T4)的行为学(FLACC)评分、舒适度(BCS)评分和不良反应情况。结果 A组患儿在T1、T2时间点的FLACC评分分别为(3.33±0.84)分、(3.70±0.95)分,均高于B组(2.73±0.91)分、(3.04±0.98)分、C组(2.53±0.57)分、(2.50±0.63)分,差异均有统计学意义(P<0.05);A组在T1、T2、T3时间点的BCS评分分别为(0.50±0.51)分、(0.80±0.76)分、(0.97±0.49)分,均明显低于B组[(1.00±0.79)分、(1.23±0.63)分、(1.47±0.51)分]、C组水平[(1.57±0.56)分、(1.37±0.76)分、(1.90±0.67)分],C组在T1时间点的BCS评分明显高于B组,差异均有统计学意义(P<0.05);术后不良反应C组(2例)明显低于B组(8例)和A组(10例),差异均有统计学意义(P<0.05)。结论 地佐辛联合曲马多用于学龄前儿童术后静脉镇痛效果好,不良反应发生率低,术后的舒适度更满意,值得临床推广应用。

**【关键词】** 地佐辛;曲马多;术后镇痛;效果

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**Effect of dezocine combined with tramadol for analgesia after operation in preschoolers.** LU Jian-hua<sup>1</sup>, ZHAO Zhi-gang<sup>2</sup>. 1. Department of Anesthesiology, the Fourth Affiliated Hospital of Guangxi Medical University, Liuzhou 545005, Guangxi, CHINA; 2. Department of Anesthesiology, Liuzhou Traditional Chinese Medical Hospital, Liuzhou 545001, Guangxi, CHINA

**【Abstract】 Objective** To investigate the effect of using dezocine combined with tramadol for postoperative analgesia in preschoolers. **Methods** Ninety children undergoing orthopedic surgery under patient-controlled intravenous analgesia (PCIA) were selected and divided into three groups according to random number table: ramadol group (group A), fentanyl-tramadol group (group B), dezocine-tramadol group (group C), with 30 patients in each group. The face, legs, activity, cry, consolability (FLACC) score, the Bruggmann comfort scale (BCS) score and the incidence of adverse reactions were collected at 2 hs (T1), 6 hs (T2), 24 hs (T3) and 48 hs (T4) after operation. **Results** The FLACC score in group A at T1, T2 were (3.33±0.84) and (3.70±0.95) in group A, significantly higher than those in group B [(2.73±0.91), (3.04±0.98)] and C [(2.53±0.57), (2.50±0.63)], P<0.05. BCS score at T1, T2, T3 were (0.50±0.51), (0.80±0.76) and (0.97±0.49) in group A, which were significantly lower than those in group B [(1.00±0.79),

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缓解,且CVA+UACS组患儿与CVA组患儿PD20差异不大,说明CVA主导气道高反应性,在齐伟翠等的报道<sup>[9]</sup>中也有相似结论。通过比较不同慢性咳嗽病因随访前后诱导痰和FeNO的关系可知,CVA+UACS组患儿痰EOS百分比及FeNO水平均显著低于CVA组。诱导痰和FeNO标志气道炎症并与AHR有关,经过抗炎治疗后,两者的水平都有所下降,且CVA+UACS组下降程度更大。诱导痰EOS和FeNO是目前最重要的气道炎症标志物,且与AHR密切相关。FeNO与痰EOS有明显相关性,故在不能开展或不配合诱导痰操作的情况下,FeNO可在一定程度上替代诱导痰EOS计数检查。此外,在刘建华的报道<sup>[10]</sup>中也能找到类似结论。综上所述,CVA患儿治疗过程中对AHR进行动态观察,可以对CVA的转归进行一定的预测。

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