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复发-缓解型多发性硬化与复发型视神经脊髓炎脑深部灰质核团铁沉积的ESWAN对比定量分析

Quantitative analysis of iron deposition in the deep nucleus of relapsing-remitting multiple sclerosis and relapsing neuromyelitis optica with ESWAN

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英文关键词: [Multiple sclerosis](#), [relapsing-remitting](#) [Relapsing neuromyelitis optica](#) [Iron](#) [Magnetic resonance imaging](#)

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作者	单位	E-mail
陈璇	重庆医科大学附属第一医院放射科, 重庆 400016	
李咏梅	重庆医科大学附属第一医院放射科, 重庆 400016	lymzhang70@yahoo.com.cn
罗天友	重庆医科大学附属第一医院放射科, 重庆 400016	
欧阳羽	重庆医科大学附属第一医院放射科, 重庆 400016	
吕发金	重庆医科大学附属第一医院放射科, 重庆 400016	
曾春	重庆医科大学附属第一医院放射科, 重庆 400016	
王忠平	重庆医科大学附属第一医院放射科, 重庆 400016	

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中文摘要:

目的 用3.0T MR 3D增强型T2*加权血管成像(ESWAN)相位图测量复发-缓解型多发性硬化(RRMS)与复发型视神经脊髓炎(RNMO)患者脑深部灰质核团的铁含量。方法 选取RRMS 0例(RRMS组)、RNMO患者50例(RNMO组)和年龄、性别相匹配的50名健康志愿者(对照组)行常规MR ESWAN扫描。以上3组分别分为20~39岁和40~59岁两个亚组,测量双侧苍白球(GP核(PUT)、尾状核头(HCN)、丘脑(THA)、黑质(SN)、红核(RN)及齿状核(DN)的平均相位值(MPVs),比较3个研究组间上述核团MPV在同年组亚组间的差异。结果 RRMS患者20~39岁组SN与同年组对照组(左: $t=-5.04, P<0.01$;右: $t=-2.82, P=0.02$)和RNMO组(左: $t=-4.79, P<0.01$;右: $t=-3.27, P=0.01$)差异有统计学意义($P<0.05$);同年组RNMO患者脑深部核团MPVs均低于对照组但差异均无统计学意义($P>0.05$)。RRMS患者双侧HCN(左: $r=-0.42, P=0.01$;右: $r=-0.43, P=0.01$)和双侧DN(左: $r=-0.42, P=0.02$;右: $r=-0.36, P=0.04$)的MPV与病程呈负相关,但其扩展残疾量表评分与脑深部核团MPV未见明显相关性($P>0.05$);RNMO患者脑深部各核团MPV与病程之间亦未见明显相关性($P>0.05$)。结论 ESWAN相位图可量化评价脑铁含量;探讨上述两种病部灰质核团铁沉积的变化有助于理解脑深部灰质核团的病理改变。

英文摘要:

Objective To quantitatively assess brain iron deposition in the deep nucleus of relapsing-remitting multiple sclerosis (RRMS) and relapsing neuromyelitis optica (RNMO) on phase images using MR 3D enhanced T2* weighted angiography (ESWAN). **Methods** Conventional MRI and ESWAN were performed in 50 RRMS patients (RRMS group), 50 RNMO patients (RNMO group) and 50 and gender- matched normal subjects (control group). Each of the above three groups was respectively divided into two age subgroups, i.e. 20—39 years old subgroup and 40—59 years old subgroup. Bilateral mean phase values (MPVs) of globus pallidus (GP), putamen (PUT), head of caudate nucleus (HCN), thalamus (THA), substantia nigra (SN), red nucleus (RN) and dentate nucleus (DN) were measured and compared with same aged subgroups. **Results** Bilateral SN of the controls (left: $t=-5.04, P<0.01$; right: $t=-2.82, P=0.02$) and of RNMO (left: $t=-4.79, P<0.01$; right: $t=-3.27, P=0.01$) 20—39 subgroups were significantly lower ($P<0.05$). All MPVs of deep nucleus in RNMO patients were lower than those of control group, but no significant variation of MPVs was not found ($P>0.05$). In RRMS group, the iron concentration in bilateral HCN (left: $r=-0.42, P=0.01$; right: $r=-0.43, P=0.01$) and DN (left: $r=-0.42, P=0.02$; right: $r=-0.36, P=0.04$) were correlated with disease duration. The expanded disability status scale (EDSS), which was contributed to measure the severity of physical disability in RRMS, was not correlated with MPV ($P>0.05$). In RNMO group, no correlation between MPV and disease duration was found ($P>0.05$). **Conclusion** ESWAN can be used to evaluate iron accumulation in RRMS and RNMO. Observation of brain iron deposition in the deep nucleus of RRMS and RNMO is helpful to understand of the pathological changes of both diseases.

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