



肿瘤防治研究

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盐酸托烷司琼、氟哌利多与PCA伍用预防术中顺铂腹腔化疗后恶心呕吐的效果观察

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Effect Observation of Combined Tropisetron ,Droperidol and PCA to Prevent Nausea and Vomiting During Operation Caused by IPC with Cisplatin

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摘要

目的 对盐酸托烷司琼、氟哌利多与PCA伍用预防术中顺铂腹腔化疗后恶心呕吐的疗效进行观察。方法 选择44例ASA I~II级术中行顺铂腹腔化疗的患者,随机分为A组(试验组):盐酸托烷司琼5mg+氟哌利多2.5mg+芬太尼1.0mg;B组(对照组):氟哌利多5mg+芬太尼1.0mg。术毕均将顺铂100mg在缝合腹膜前注入腹腔内。A、B组分别静注盐酸托烷司琼5mg、生理盐水5ml后接PCA泵。结果 术后10小时内A组的优良率为95.5%,与B组68.2%、59.1%相比有显著差异(P<0.01、P<0.05)。术后10~36小时A组优良率较前10小时略下降为90.9%与B组63.6%仍有显著差异(P<0.05)。结论 盐酸托烷司琼、氟哌利多与PCA伍用在适量浓度下能较好的预防术中顺铂腹腔化疗后恶心呕吐。

关键词: 盐酸托烷司琼 氟哌利多 顺铂 腹腔化疗

Abstract: Objective To observe the curative effect with tropisetron, droperidol and PCA to prevent nausea and vomiting caused by IPC with cisplatin. Methods 44 cases of I~II grade ASA were used cisplatin to IPC during operation, and were divided into group A: tropisetron 5mg + droperidol 2.5mg + fentanyl 1.0mg and group B (control group): droperidol 5mg + fentanyl 1.0mg randomly. Cisplatin was injected into abdominal cavity before suture. After tropisetron 5mg and saline solution were iv, PCA pump were linked to the patients in these two groups. Results The excellent rate of group A is 95.5% in 10 hours after operation, compare to the 68.2% and 59.1% of group B, there was a significant difference (P<0.01, P<0.05 respectively). During 10~36 hours after operation, the excellent rate of group A was declined to 90.9%, compare to the 63.6% of group B, there was also a significant difference (P<0.05). Conclusion In the appropriate concentration, combined hydrochloride tropisetron, droperidol with PCA can preferable prevent nausea and vomiting during operation caused by IPC with cisplatin.

Key words: Hydrochloride tropisetron Droperidol Cisplatin IPC

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