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[1]吴翔,李英莎,赵志钢,等.血液灌流对代谢综合征患者血脂、血压的影响及其机制研究[J].第三军医大学学报,2014,36(16):1709-1712.

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## 血液灌流对代谢综合征患者血脂、血压的影响及其

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Title: Effects of hemoperfusion on lipid profiles and blood pressure in

patients with metabolic syndrome

作者: 吴翔; 李英莎; 赵志钢; 何洪波; 杨丽琴; 倪银星; 钟健; 闫振成; 祝之明

第三军医大学大坪医院野战外科研究所高血压内分泌科,全军高血压代谢病中心,重庆

市高血压研究所

Author(s): Wu Xiang; Li Yingsha; Zhao Zhigang; He Hongbo; Yang Liqin; Ni Yinxing;

Zhong Jian; Yan Zhencheng; Zhu Zhiming

Department of Hypertension and Endocrinology, Center for Hypertension and Metabolic Diseases, Chongqing Institute of Hypertension, Institute of Surgery Research, Daping Hospital, Third Military Medical University, Chongqing, 400042,

China

关键词: 血液灌流; 代谢综合征; 血脂; 血压

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摘要: 目的 探索代谢综合征 (metabolic syndrome, MS) 患者行血液灌流 (hemoperfusion, HP) 后血脂、血压的变化特征,阐明HP改善血压的可能机制。

方法 收集符合中华医学会糖尿病分会(CDS)MS诊断标准的患者,术前行血常规、尿常规、血电解质、血糖、血脂、肾功、肝功、输血前4项传染病指标等检查合格后行HP,灌流前检测血管紧张素 I(angiotensin I,A I)、血管紧张素 II(angiotensin II,A II)、整固酮(Aldosterone,Ald)、高敏C-反应蛋白(high-sensitivityC-reactive protein,hs-CRP)、单核细胞趋化蛋白-1(monocyte chemotactic protein 1,MCP-1)、血清抵抗素。术后第1天及第4、8、12周随访患者血压、血脂变化,并检测A I、A II、Ald、hs-CRP、MCP-1、血清抵抗素。采用SPSS 19.0统计软件,对结果进行单样本 t 检验、Pearson相关分析等。 结果 患者术后8周内总胆固醇(total cholesterol,TC)、甘油三酯(triglyceride,TG)均较术前明显下降,差异有统计学意义(P<0.05)。术后12周内收缩压(SBP)及血清抵抗素水平较术前下降,差异有统计学意义(SBP: (143±15) mmHg vs (137±17) mmHg,P<0.05;抵抗素: (2.06±

2.02) ng/mL vs (0.65±0.42) ng/mL, P<0.05]。双变量相关分析显示SBP分别与

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TC、抵抗素呈正相关(r=0.40,P<0.01;r=0.29,P=0.003)。 结论 HP可有效 改善代谢综合征患者血脂水平,可并降低血压,这可能与HP清除血清抵抗素、血脂有关。

Abstract:

Objective To study the effects of hemoperfusion (HP) on lipid profiles and blood pressure in patients with metabolic syndrome and investigate the underlying mechanisms. Methods Blood routine test, blood biochemical indexes, urine routine test, renal function, liver function and 4 contagious indexes before blood transfusion were examined before HP. A total of 26 patients with metabolic syndrome were qualified for HP. All patients were followed-up, with blood pressure monitored. The levels of blood lipids, angiotensin I (AI), angiotensin II (A II), aldosterone (Ald), hypersensitive C-reactive protein (hs-CRP), monocyte chemotactic protein 1 (MCP-1) and resistin were measured at 4, 8 and 12 weeks after HP. SPSS19 statistical software, including the single sample t test, Pearson correlation analysis and other methods, was used to compare the results. Results The total cholesterol (TC) and triglyceride (TG) levels were significantly reduced after HP within 8 weeks as compared to the baseline values (P<0.05). The systolic pressure (SBP) and serum resistin levels were decreased significantly within 12 weeks as compared to those before the treatment (SBP: 143+15 vs 137+17 mmHg, P<0.05; resistin: 2.06+2.02 vs 0.65+ 0.42 ng/mL, P<0.05). The bivariate correlation analysis showed that the SBP was positively correlated with TC and resistin levels (r=0.40, P=0.00; r=0.29, P=0.003). Conclusion HP can effectively reduce blood lipid levels and lower blood pressure of patients with metabolic syndrome, which may be related to removal of serum resistin and blood lipids by HP.

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