

[1]李卓莉,郝敏,赵卫红.腹腔镜手术联合促性腺激素释放激素激动剂治疗深部浸润型子宫内膜异位症的临床疗效分析[J/CD].中华妇幼临床医学杂志(电子版),2014,(02):189-198.

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腹腔镜手术联合促性腺激素释放激素激动剂治疗深部浸润型子宫内膜异位症的临床疗效分析(PDF)

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Title: Analysis of Clinical Effects of Laparoscopy Combined with Gonadotropin Releasing Hormone Agonist on Deep Infiltrating Endometriosis

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摘要: 目的 探讨腹腔镜手术联合促性腺激素释放激素激动剂(GnRH-a)治疗深部浸润型子宫内膜异位症(DIE)的临床疗效。方法 选取山西医科大学第二医院2010年8月至2012年8月收治的43例经组织病理学检查证实的DIE患者的临床病历资料为研究对象,年龄为22~47岁,其中,合并不孕不育者为15例。按照患者本人是否愿意接受GnRH-a治疗,将其分为GnRH-a组(n=28,腹腔镜手术联合GnRH-a治疗)和对照组(n=15,单纯行腹腔镜手术)。GnRH-a组患者于腹腔镜术后月经来潮第1天给予3.75 mg GnRH-a皮下注射,每28 d注射1次,共治疗3~6次;对照组患者单纯行腹腔镜手术治疗,术后未用任何药物。对两组患者的临床疗效(缓解率、改善率、无效率、复发率及总有效率)、术后疼痛缓解率及自然妊娠率进行统计学分析(本研究遵循的程序符合山西医科大学第二医院人体试验委员会制定的伦理学标准,得到该委员会批准,分组征得受试对象的知情同意,并为之签署临床研究知情同意书)。结果 GnRH-a组临床总有效率为92.9%(26/28),对照组为66.7%(10/15),两组比较,差异有统计学意义(P=0.040);GnRH-a组复发率显著低于对照组[3.6%(1/28) vs. 26.7%(4/15)],且差异有统计学意义(P=0.043);GnRH-a组痛经缓解率、慢性盆腔痛缓解率及总疼痛缓解率均显著高于对照组[95.2%(20/21) vs. 63.6%(7/11); 91.7%(26/27) vs. 57.1%(4/7), 96.4%(27/28) vs. 60.0%(9/15)],且差异均有统

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计学意义 ($P < 0.05$)。GnRH a组和对照组中合并不孕患者的术后自然妊娠率分别为80.0% (8/10) 和60.0% (3/5), 两组比较, 差异无统计学意义 ($P > 0.05$)。结论 腹腔镜手术联合GnRH a治疗DIE较单纯腹腔镜手术能提高总有效率及疼痛缓解率, 降低术后复发率。

Abstract: Objective To investigate the clinical effects of laparoscopy combined with gonadotropin releasing hormone agonist (GnRH a) in the treatment of deep infiltrating endometriosis (DIE). Methods From August 2010 to August 2012, a total of 43 patients with DIE underwent laparoscopy in the Department of Obstetrics and Gynecology, Second Hospital of Shanxi Medical University. All the patients were performed laparoscopic surgery and confirmed by pathology. They were divided into GnRH a group ($n = 15$) and control group ($n = 28$) according to patients' will. GnRH a group were treated by laparoscopy combined with GnRH a and received 3-6 courses of GnRH a, 3.75 mg per time, every 28 days. Control group received laparoscopy only. The clinical effects, recurrence rate, pain relief rate and ongoing pregnancy rate were statistically analyzed. The study protocol was approved by the Ethical Review Board of Investigation in Second Hospital of Shanxi Medical University. Informed consent was obtained from all participates. Results The total effective rates of GnRH a group and control group were 92.9% (26/28), 66.7% (10/15), respectively, with significant difference ($P < 0.05$). The recurrence rates of GnRH a group and control group were 3.6%(1/28), 26.7%(4/15), respectively, with significant difference ($P < 0.05$). The dysmenorrhea relief rates of GnRH a group and control group were 95.2%(20/21) and 63.6%(7/11), respectively, with significant difference ($P < 0.05$). The chronic pelvic pain relief rate of GnRH a group and control group were 91.7% (26/27) and 57.1%(4/7), respectively, with significant difference ($P < 0.05$). The total pain relief rate of GnRH a group and control group were 96.4%(27/28), 60.0%(9/15), respectively, with significant difference ($P < 0.05$). The number of infertility patients were 10 cases in GnRH a group, 5 cases in control group. But there was no significant difference between two groups on ongoing pregnancy rate [80.0%(8/10) vs. 60.0%(3/5)] ($P > 0.05$). Conclusions Compared with laparoscopy use only, laparoscopy combined with GnRH a could increase the rate of the total clinical effects and pain relief rates, and reduce the recurrence rate.

参考文献/REFERENCES

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