

## 缬沙坦和乌司他丁联合用药对肝缺血再灌注 损伤的保护效应

刘义树<sup>1</sup>, 黄志勇<sup>2</sup>

1. 430079武汉, 湖北省肿瘤医院麻醉科; 2. 华中科技大学附属同济医院肝脏外科中心

### Protective Effects of Valsartan Combined with Ulinastatin on Hepatic Ischemia-reperfusion Injury

LIU Yi-shu<sup>1</sup>, HUANG Zhi-yong<sup>2</sup>

1. Department of Anesthesiology, Hubei Cancer Hospital, Wuhan 430079, China; 2. Department of Hepatic Surgery Center, Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology

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**摘要** 目的观察缬沙坦和乌司他丁联合用药对原发性肝癌合并肝硬化门静脉高压患者肝脏缺血再灌注损伤的保护作用。方法30例肝癌行肝叶切除术前患者, 随机分为对照组、乌司他丁组、缬沙坦和乌司他丁联合用药组, 每组10例。乌司他丁组按10 000 u / kg于麻醉诱导后切皮前加入5%葡萄糖盐水100 ml中静脉滴注; 联合用药组术前给予缬沙坦80 mg每天一次, 口服一周至术前, 术中用量及用法同乌司他丁组。对照组5%葡萄糖盐水100 ml静脉滴注。三组患者分别在肝门阻断前、肝门阻断末及肝门再开放60 min时抽取静脉血测TXB2和6-keto-PGF1 $\alpha$ 浓度, 术前、术后1天、术后3天、术后5天抽取静脉血, 行血浆谷丙转氨酶、谷草转氨酶、总胆红素的测定。结果30例肝癌患者均顺利完成切除术, 患者血浆TXB2、6-keto-PGF1 $\alpha$ 、谷丙转氨酶、谷草转氨酶、总胆红素均增加 ( $P < 0.05$ ), 乌司他丁组和联合用药组增加的幅度低于对照组 ( $P < 0.05$ ), 但联合用药组保护效应与单用乌司他丁组比较差异无统计学意义 ( $P > 0.05$ )。结论乌司他丁对邻近肝门的原发性肝癌合并肝硬化门静脉高压患者肝脏缺血再灌注损伤具有明显的保护作用, 联合使用缬沙坦的预期效果尚需进一步研究。

**关键词:** 关键词: 缬沙坦 乌司他丁 缺血再灌注损伤

**Abstract:** Objective To study the protective effects of valsartan combined with/without ulinastatin on primary hepatic carcinoma with liver cirrhosis and portal hypertension in patients with hepatic ischemia-reperfusion injury. Methods Thirty patients with hepatic carcinoma scheduled for hepatectomy were divided into three groups randomly: control group, ulinastatin group, valsartan and ulinastatin combined group. Ulinastatin group by 10 000 u / kg after induction of anesthesia before skin incision add 5% glucose intravenous drip of saline 100 ml. Combined group was given valsartan orally 80 mg once daily for a week, intraoperative with ulinastatin group. Control group, 5% glucose intravenous infusion of saline 100ml. Venous blood samples were used to measure the concentration of TXB2 and 6-keto-PGF1 $\alpha$ , before, end and opening 60 min of the hilar blocking separately in three groups. Preoperative, postoperative 1 day, 3 days and 5 days venous blood samples for alanine aminotransferase, aspartate aminotransferase and total bilirubin measurement. Results All 30 cases had been resected successfully, three groups of patients with TXB2, 6-keto-PGF1 $\alpha$ , alanine aminotransferase, aspartate aminotransferase and total bilirubin in plasma increased ( $P < 0.05$ ), ulinastatin group and combined group rate of increase were lower than the control group ( $P < 0.05$ ), but the protective effect of combined group and alone ulinastatin group had no significant difference ( $P > 0.05$ ). Conclusion Ulinastatin group had obvious protective effect on the patients of hilar primary hepatic carcinoma with liver cirrhosis and portal hypertension, but the effect of Ulinastatin combining with valsartan, needs to be explored further.

**Key words:** Key words: Alsartan Ulinastatin Ischemia-reperfusion injury

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- [1] 刘红光;李汉贤;康颖;赵晓春;徐刚;王章强. 尿胰蛋白酶抑制剂 **Ulinastatin** 对 **lewis** 肺癌小鼠肿瘤生长和转移的抑制作用[J]. 肿瘤防治研究, 2005, 32(1): 24-26.