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论著

## 332例肺癌临床病理因素及放射性肺炎与糖尿病的相关性分析

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**摘要:** 目的:探讨糖尿病与非小细胞肺癌(non small cell lung cancer, NSCLC)临床病理因素的关系及对放射性肺炎发生率的影响。方法:回顾性分析2007年1月至2009年8月入住中南大学湘雅三医院肿瘤科的332例NSCLC患者的临床资料,将其分为糖尿病(diabetes mellitus, DM)组( $n=45$ )和非糖尿病(non-diabetes mellitus, NDM)组( $n=287$ ),比较两组间临床病理因素的差异;并将其接受放射治疗的216例患者分为糖尿病放射组(DM<sub>R</sub>组, $n=33$ )和非糖尿病放射组(NDM<sub>R</sub>组, $n=183$ ),比较两组放射性肺炎发生率的差异。结果:DM组与NDM组患者在体质量指数(bodymass index, BMI)、年龄、是否合并高血压方面差异均有统计学意义( $P<0.05$ );两组在肿瘤病理类型、分化程度、TNM分期方面差异均无统计学意义( $P>0.05$ )。接受放射治疗的DM<sub>R</sub>组和NDM<sub>R</sub>组患者照射面积差异无统计学意义( $P>0.05$ ),但放射性肺炎的发生率分别为42.42%和21.31%,差异有统计学意义( $P<0.05$ );伴有糖尿病的NSCLC患者放射性肺炎的发病危险是非糖尿病组的2.721倍(95%CI为1.253~5.910)。结论:糖尿病为NSCLC患者发生放射性肺炎的易感因素。

**关键词:** 肺肿瘤 糖尿病 临床病理 放射性肺炎

## Impact of diabetes mellitus on clinicopathological factors and relation with radiation pneumonitis in 332 patients with lung cancer

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**Abstract:** Objective: To explore the relation between diabetes mellitus and clinicopathological factors and the incidence of radiation pneumonitis in patients with non-small cell lung cancer.

Methods: The data of 332 patients with non-small cell lung cancer, who were admitted to the Department of Oncology of Third Xiangya Hospital of Central South University between January 2007 and August 2009, were collected retrospectively. The patients were divided into a diabetes mellitus (DM) group ( $n=45$ ) and a non-diabetes mellitus (NDM) group ( $n=287$ ). The clinicopathological factors were compared between the two groups. The patients who received radiotherapy were further divided into a diabetes mellitus (DM<sub>R</sub>) group ( $n=33$ ) and a non-diabetes mellitus group (NDM<sub>R</sub>) group( $n=287$ ), and the incidence of radiation pneumonitis was compared.

Results: A total of 45 patients (13.55%) developed diabetes mellitus. There was significant difference in the body-weight, age and hypertension ( $P<0.05$ ), while no significant difference in the pathologic factors, such as tumor pathological type, degree of differentiation, and classification of malignant tumors (TNM) stage between the two groups( $P>0.05$ ). No significant difference in the irradiation area was found between the DM group and the NDM group( $P>0.05$ ). The incidence of radiation pneumonitis in the DM<sub>R</sub> group was 42.42%(14 out of 33), while 21.31%(39 out of 183) in the NDM<sub>R</sub> group, with significant difference in the incidence of radiation pneumonitis between the DM<sub>R</sub> group and the NDM<sub>R</sub> group( $P<0.05$ ). The risk value in the DM<sub>R</sub> group was 2.721 folds (95%CI, 1.253 - 5.910) that in the NDM<sub>R</sub> group in patients with non-small cell lung cancer accompanied with diabetes mellitus.

Conclusion: Diabetes mellitus is the risk factor of radiation pneumonitis for patients with nonsmall cell lung cancer who receive radiotherapy.

**Keywords:** lung neoplasm diabetes mellitus clinicopathological factor radiation pneumonitis

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