

CT扫描联合肿瘤特异性标志物诊断老年肺癌的价值

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Title: The value of CT scan combined with tumor specific markers in the diagnosis of lung cancer in the elderly

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摘要: 目的: CT扫描联合肿瘤特异性标志物诊断老年肺癌的价值, 为临床诊断及治疗提供参考。方法: 回顾性分析本院于2016年2月至2018年2月收治的194例老年肺癌患者作为观察组, 另选取同期来院参加体检的健康志愿者68例作为对照组。所有老年肺癌患者均采用SIEMENS 64排CT行胸部扫描, 并同时采用电化学发光法测定血清癌胚抗原(CEA)、神经元特异烯醇化酶(NSE)、癌抗原19-9(CA19-9)、细胞角蛋白21-1(CYFRA21-1)等特异性标志物水平。对比两组患者及不同类型肺癌患者的含量变化, 并研究CT联合特异性标志物诊断的灵敏度和特异度。结果: 两组间相比, 观察组患者的血清CEA、NSE、CA19-9及CYFRA21-1含量均高于对照组, 差异有统计学意义($P<0.05$) ; 不同类型肺癌患者相比, 周围型肺癌组与中央型肺癌组血清CEA、NSE、CA19-9和CYFRA21-1含量相比差异无统计学意义($P>0.05$) ; 就诊断效能而言, 血清肿瘤特异性标志物联合CT扫描诊断的灵敏度94.6%, 特异度96.3%, 均高于单项诊断。结论: 老年肺癌患者血清CEA、NSE、CA19-9及CYFRA21-1含量均升高, 且周围型肺癌与中央型肺癌患者差异不显著, 联合诊断的灵敏度及特异度较高, 值得临床推广。

Abstract: Objective: To study the correlation between CT imaging features and tumor specific markers in elderly patients with lung cancer and the value of combined diagnosis, so as to provide references for clinical diagnosis and treatment. Methods: A retrospective analysis of 194 elderly patients with lung cancer admitted to our hospital from February 2016 to February 2018 as observation group, and 68 healthy volunteers participating in physical examination in the same period as control group. All the elderly patients with lung cancer were treated with SIEMENS dual source CT chest scan, and the electrochemical determination of serum carcinoembryonic antigen chemiluminescence (CEA), neuron specific enolase (NSE), cancer antigen 19-9 (CA19-9), cytokeratin 21-1 (CYFRA21-1). The changes in the content of two groups of patients and patients with different types of lung cancer were compared, and the sensitivity and specificity of the CT combined specific markers were studied. Results: Compared between the two groups, the observation group of patients with serum CEA, NSE, CA19-9 and CYFRA21-1 were higher than the control group, the difference was statistically significant ($P<0.05$), compared with different types of lung cancer, peripheral lung cancer group and the central lung cancer group serum CEA, NSE, CA19-9 and CYFRA21-1 were no significant difference ($P>0.05$), diagnostic efficacy, serum tumor specific markers CT scan diagnostic sensitivity 94.6%, specificity 96.3%, are higher than the single diagnosis. Conclusion: The serum levels of CEA, NSE, CA19-9 and CYFRA21-1 in elderly patients with lung cancer are all increased. The difference between peripheral lung cancer and central lung

cancer is not significant. The sensitivity and specificity of combined diagnosis is high, which is worthy of clinical promotion.

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