

MR 增强检查对幕上星形胶质细胞瘤分级的价值

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目的:探讨磁共振增强检查对幕上星形胶质细胞瘤分级的价值及术后肿瘤复发的征象。**方法:**选择有完整资料并经手术病理证实的 27 例进行回顾性研究,观察其 MR 平扫及增强表现,并与病理进行对照。**结果:**平扫均显示病变为长 T₁ 长 T₂ 异常信号,但信号强度不均、边界不清、病灶附近水肿较多,次为病灶内坏死液化。增强扫描中,20 例有增强表现,2 例术后肿瘤复发者可见环状或环壁节状增强。MRI 分级与病理分级对比:病理诊为 ~ 级 8 例,MRI 诊 级 2 例, 级 8 例;病理诊 级 10 例,MRI 诊 级 2 例, 级 8 例;病理诊 ~ 级 4 例,MRI 诊 级 3 例, 级 1 例;病理诊 级 1 例,MRI 诊 ~ 级。**结论:**MR 增强检查对幕上星形胶质细胞瘤的分级是有价值的。**关键词:** MRI 分级; 星形胶管细胞瘤; 病理学

Value of Contrast - Enhanced MR for Classification of Supratentorial Astrocytic Glioma

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Objective: To study the value of contrast - enhanced MR for classification of supratentorial astrocytic glioma and the features of recurrent tumor in postoperation. **Material and Methods:** 27 pathologically confirmed cases were retrospectively studied by analyzing the pre - and postcontrast MR findings and comparing with the pathological stagings. **Results:** The patients displayed a prolonged T₁ and T₂ relaxation. Precontrast images showed inhomogeneous signal intensity, ill - circumscribed mass with surrounding edema and necrosis within the mass. 20 patients had contrast enhancement in postcontrast images. The ring - like or ring - like with mural nodules enhancement was seen in 2 patients with tumor recurrence. Comparing MRI stage(MRIS) with pathological stage (PS) of the tumor, we found that among 8 patients in PS - , there were 3 in MRIS and one in MRIS ; one patient in PSIV was in MRIS . **Conclusion:** This results indicated, that Tumor staging with MRI was comparable with pathological staging.

Key words: MRI; astrocytes; glioma; pathology

TPA 增强 gsp 癌基因阳性人垂体生长激素腺瘤 GHRP 促生长激素分泌的效应

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目的:探讨细胞内 PKC 信号传导系统在人垂体生长激素腺瘤 GH 分泌中的作用。**方法:**采用 PCR 和直接序列分析法评价 10 例肢端肥大症患者肿瘤组织的 gsp 癌基因的表达。肿瘤组织取自

手术切除标本,作细胞培养,进行体外生长激素释放激素(GHRH)和蛋白激酶 C 激活剂 TPA 对 GH 释放效应研究。结果:10 例病人中有 3 例(30%)为 gsp 癌基因表达阳性,GHRH 对 GH 刺激效应在本组中有 2 例表现出有统计学意义,gsp 阴性组 7 例中有 4 例表现出有统计学意义的刺激效应。TPA 可增强 GHRH 对 gsp 阳性表达腺瘤细胞分泌的刺激作用,但是对阴性组细胞无此作用。结论:推测 GHRH 对 GH 的分泌效应除受腺苷酸环化酶 - cAMP - 蛋白激酶 A 第二信使系统的调节外,尚有蛋白激酶 C 信号系统存在,可能与细胞间多信号传导系统的交叉通讯有关。

关键词: 垂体腺瘤; gsp 癌基因; 生长激素释放激素

TPA Enhances the Releasing Effect of GHRH on Somatotropinomas with Positive Gsp Oncogene

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Objective :Evaluating the role of PKC transduction system on GH secretion of human pituitary somatotropinomas. **Methods** :PCR and direct sequencing analysis were used to evaluate the expression of gsp oncogene in 10 patients with active acromegaly. The pituitary somatotropinomas were obtained from the patients upon whom a transcranial or transsphenoidal adenomectomy was performed. After surgical resection ,tissue were processed for cell culture and tested the releasing effects of GHRH and TPA ,an activator of PKC ,in vitro. **Results** : Of the 10 patients ,3(30%) were gsp oncogene positive. GHRH releasing effect was statistically significant on 2 of the 3 patients ,but of 7 patients with gsp oncogene negative ,4 was statistically significant. TPA enhanced GHRH releasing effect on adenoma cells with gsp positive ,but in vain on gsp negative ones. **Conclusion** : GHRH releasing effect is also regulated by PKC signal transduction system as well as by adenylyl cyclase - cAMP - PKA transduction system in pituitary cells.

Key words : pituitary adenomas; gsp oncogene; GHRH

31 例老年人非何杰金淋巴瘤治疗分析

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对 31 例老年人(>60 岁)非何杰金淋巴瘤临床治疗进行分析。治疗方案:CHOP(环磷酰胺、阿霉素、长春新碱及强的松)方案。将病人分为二组,A 组:CHOP 方案普通药物剂量组;B 组:CHOP 方案根据病人年龄及体质状态药物剂量减至 A 组的 1/2~2/3。结果发现 B 组与 A 组完全缓解率基本一致,但是 3 年存活率明显高于 A 组,化疗相关残废率低于 A 组,化疗药物副作用亦低于 A 组。提示对老年人非何杰淋巴瘤适当减低化疗药物剂量,有利于提高疗效,保证生活质量,延长生存期。

关键词: 非何杰金淋巴瘤; 治疗; 老年人