

急性缺血性脑血管病患者脑动脉粥样硬化的分布

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[摘 要] **目的** 分析国内缺血性脑血管病人颅内、外颈动脉粥样硬化的程度和分布, 以指导脑血管病的治疗和预防。**方法** 通过经颅和双功能彩色多普勒超声检测颅内、外血管, 检测动脉粥样硬化程度, 并参照其病史、CT 或 MRI 检查及生化指标综合分析。**结果** 201 例患者, 颅内、颈内动脉及分支狭窄 75 人, 患病率为 37%, 颅外颈动脉大于 50% 狭窄的有 50 例, 患病率为 25%, 其中 12 例为颈内动脉闭塞, 患病率为 6%, 糖尿病是造成颅内、外血管狭窄的危险因素之一。**结论** 脑梗塞患者颅内血管病变是发病的原因之一, 同时发现颅外血管病变日益增多。

[关键词] 动脉粥样硬化; 颈动脉; 脑血管超声

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The Distribution of Cerebral Atherosclerosis in the Patients with Acute Ischemic Stroke

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[Abstract] **Objective** To direct the therapy and the prevention of cerebrovascular disease, we analyzed the state and distribution of arteriosclerosis of intracranial and extracranial arteries in the patients with acute ischemic stroke. **Methods** The intracranial and extracranial arteries were checked by and Duplex. **Results** There were 75 cases (37%) with the stenosis of intracranial arteries and their branches and 50 cases (25%) with more than 50% stenosis of extracranial arteries. 12 case(6%) of patients had carotid occlusion. The diabetes is one of the risk factors of the stenosis of intracranial and extracranial arteries. **Conclusion** The main cause of ischemic stroke is stenosis of intracranial arteries, and more cases of stroke have abnormal extracranial arteries.

[Key words] Arteriosclerosis; Carotid artery; Cerebral vessels ultrasound

颈动脉粥样硬化是引起缺血性脑血管病的重要的危险因素之一。以往的研究认为种族的不同动脉粥样硬化的部位不同, 白人颈动脉颅外段病变多于颅内病变, 而亚洲人和黑人颅内血管病变引起缺血性脑血管病的多见^[1-3, 8]。但近年发现, 国人脑梗塞的患者颅外血管病变有逐渐增加的趋势。本文通过超声方法对缺血性脑血管病人进行颅内、外血管检测进一步研究其病变分布及程度。

1 资料和方法

1.1 资料 我院从 1998 年 10 月至 1999 年 4 月急诊连续入院急性脑梗塞(颈内动脉系统)患者 201 例, 男 126 例, 女 75 例, 年龄 34~82 岁, 平均年龄 62±10 岁。全部经头颅 CT 和(或)MIR 证实。

1.2 方法 TCD 为 NEUROGUARD(美国), 探头 2.0MHz 探测颅内血管。颅内血管狭窄诊断标准^[6]: 收缩期峰值流速(PSV) > 140cm/s, 平均流速(MV) > 80cm/s, 其中包括下列特征之一, 频谱形态改变、峰钝、峰时延长, 伴涡流或湍流, 血流声频粗糙, 或双侧血流速度不对称高于 30cm/s 以上。分为单

窄(一支血管血流异常)和多支血管狭窄(多支血管血流异常)。颅外颈动脉检测使用 HDI-3000(美国)。对颈内动脉、颈总动脉、球部进行探索, 根据管腔的直径、面积, 颈内动脉与颈总动脉 PSV、舒张末期流速(EDV)比值以及颈内动脉狭窄段与远端血流速度比值综合判断管腔的狭窄程度。分为正常, 轻度狭窄(<50%), 中度狭窄(50%~79%), 重度狭窄(80%~99%), 闭塞。根据超声回声的特征分均质斑块(相对周围组织均一回声, 为等回声或强回声)和不均质斑块(斑块内超过 20% 面积的超声影像不同其余斑块的影像)。发现颅外狭窄 > 70% 患者复查血管造影和(或)MRA 证实。

我们使用 SPSS 统计软件包, 统计方法为 *t* 检验, 卡方检验和 Fisher 精确检验。

2 结果

201 例脑梗塞患者中, 高血压病 127 例(63%), 糖尿病 36 例(18%), 有吸烟史 92 例(46%), 有饮酒史 52 例(26%)(见表 1)。三酰甘油升高(> 200mg/dl) 55 人次, 胆固醇升高(> 250mg/dl) 34 人次, 高密度脂蛋白降低(< 40 mg/dl) 43 人次, 低密度脂蛋白升高(> 120mg/dl) 99 人次。经头颅 CT 或 MIR 检查发现在颈内动脉供血区内单发梗塞灶 124 例(皮层梗塞 36 例, 皮层下梗塞 5 例, 基底节梗塞 83 例), 多发梗塞灶(多于 2 个病灶) 77 例。

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Sturge-Weber 综合征的 CT 与 MRI 比较影像学研 究(附 9 例报告)

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[摘要] **目的** 探讨 CT 与 MRI 在诊断 Sturge-Weber 综合征中的价值。**方法** 收集 Sturge-Weber 综合征的病例共 9 例。所有患儿均行常规 CT 扫描和 MRI 检查, 其中 2 例同时行 MRI 增强扫描。**结果** ①CT 表现: 6 例一侧脑叶受累; 2 例双侧额顶叶均受累; 1 例 CT 未见异常。其中 5 例脑叶呈中重度萎缩; 8 例皮层内出现脑回状钙化; 3 例一侧受累脑叶灰白质分界不清; 2 例合并一侧脉络丛扩大; 1 例合并有深静脉血管团出现。②MRI 表现: 9 例 MRI 中 5 例一侧脑叶受累; 4 例双侧额顶枕叶均受累。所有患儿均有不同程度的脑萎缩, 其中轻度者 4 例, 中度者 3 例, 重度者 2 例。仅有 2 例在萎缩的皮层下出现钙化; 8 例受累脑叶灰白质分界不清; 5 例一侧脑室内脉络丛呈囊状扩大; 3 例一侧颅板板障增厚; 4 例于侧脑室旁、室管膜下区出现粗大的静脉团。2 例增强扫描后, 受累侧皮层出现脑回状强化。**结论** MRI 与 CT 的综合分析, 对于本病的诊断和病情的判定有一定的价值。

[关键词] Sturge-Weber 综合征; 磁共振成像; 计算机体层摄影

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MRI and CT in the Diagnosis of Sturge-Weber Syndrome

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[Abstract] **Objective** To compare the efficacy of CT and MRI in the diagnosis of Sturge-Weber syndrome in nine cases. **Methods** Nine children suffered from Sturge-Weber syndrome were included in this study. Routine CT and MR examination were performed in all nine cases. In 2 cases, a contrast-enhanced T1-weighted SE sequence was carried out. **Results** ① CT findings: CT showed abnormal cerebral involvement which were bilateral in two cases, ipsilateral in six, except in one case with normal appearance. Among them, cerebral lobar atrophy was moderate and marked in five cases. In 8 of all 9 cases, cerebral calcifications were demonstrated within cortical areas. The choroid plexus was enlarged with respect to the contralateral plexus in only two patients. Enlarged vessel was present in deep cerebral region in one case. And the interfaces between gray matter and white matter were blur in three cases. ② MRI findings: The cerebral lobar involvement showed bilateral in four cases, ipsilateral in five. Atrophy was slight in four cases; moderate in three; marked in two. Calcification was demonstrated in only two cases while no cortical calcification was seen in seven other cases. The choroid plexus was enlarged with respect to the contralateral plexus in five patients. The interfaces between gray matter and white matter were blur in eight cases. Moreover, enlarged vessels were present in the subependymal and periventricular regions in four cases. The thickness of cranial diploe was present in three cases. After contrast administration in two cases, enhancement was noted within involved cortical areas. **Conclusion** MRI, combined with CT plays an important role in the diagnosis of Sturge-Weber syndrome.

[Key words] Sturge-Weber syndrome; MRI; CT

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Sturge-Weber 综合征是一种少见的先天性神经皮肤血管畸