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トピックス

血中レジスチン規定因子としての SNP の意義

大沼 裕, 大澤 春彦

愛媛大学大学院分子遺伝制御内科学(糖尿病内科)

愛媛医学 31(4):161-165, 2012

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武智 健一,長櫓 巧

愛媛大学大学院生体機能管理学分野

愛媛医学 31(4):166-170,2012

エディトリアル

『腹腔鏡下前立腺全摘徐術初期 10 例の治療成績』について

菅 政治

愛媛県立中央病院泌尿器科

愛媛医学 31(4):171-172,2012

Risk factors for insomnia in community-dwelling older persons

Ryuichi Kawamoto

Department of Community Medicine, Ehime University Graduate School of Medicine

愛媛医学 31(4):173-174, 2012

原 著

腹腔鏡下前立腺全摘徐術 初期 10 例の治療成績

渡辺 隆太1), 宇田 尚史1)*1, 西村 謙一1)*2, 稲田 浩二1), 山下 与企彦1), 岡 明博1), 織田 英昭2)

- 1) 市立宇和島病院泌尿器科 *1 現・松山市民病院泌尿器科 *2 現・愛媛大学医学部附属病院泌尿器科
- 2) おだクリニック

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Summary

We evaluated the clinical results of laparoscopic radical prostatectomies (LRP) based on an initial 10 patients between August, 2010 and December, 2010. All of the procedures were performed successfully; there was no conversion to open retropubic surgery. The obturator lymph nodes were dissected in all cases. Mean operative time was 335.9 minutes (range 288 to 480 minutes). Mean blood loss was 777.8 ml (range 450 to 1400 ml). No patients required allogenic transfusion. Autogenic transfusion was performed in all patients. The mean weight of the resected specimens was 32.8 g (range 17 to 58 g). The median follow-up period in this series was 13.6 months. Mean catheterization time was 10.7 days (range 7 to 16 days). Pathological stage was pT2a in 0 cases, pT2b in 0 cases, pT2c in 7 cases and pT 3a in 3 cases. Positive resection margins were found in 4 patients; 3 patients in pT2c and 1 patient in pT 3a. Continence rates were 10% at one month, 40% at 3 months, 70% at

6months and 90% at 12 months. In these 10 initial LRP patients, mean operative time and mean catheterization time were longer than those of conventional laparotomic radical prostatectomies. We have taken too much time to master the procedure, but the more cases we experienced the better results we obtained.

Key Words: prostate cancer, laparoscopic radical prostatectomy, initial 10 patients' assessment

Association between antihypertensive drug use and subjective sleep disturbance in the general population

Shinichi Hitsumoto¹⁾, Isao Saito²⁾ and Takeshi Tanigawa²⁾

- 1) Department of Medical Welfare Support Center, Ehime University Graduate School of Medicine
- 2) Department of Public Health, Social Medicine and Medical Informatics, Ehime University Graduate School of Medicine 愛媛医学 31(4):179-185, 2012

要旨

我々の研究は、降圧剤の使用と主観的な睡眠障害との関連性を明らかにすることを目的としている。愛媛県県下市町村における健康診査を、1999年から2007年までの間に受けた40歳以上の地域住民男女90、376人(男性:31、968人、女性:58、408人)を対象として横断的調査を行った。データは心臓血管疾患の既往歴を持たない、主観的な睡眠障害についての情報が利用可能であったものとし、主観的な睡眠障害は健診問診票を使って評価した。調査地域では、男性の8、9%、女性の16、0%が不眠を訴えていた。男女とも年齢が増すにつれ不眠の出現割合は増加していることも明らかであった。またBMIと不眠が負の相関関係にあり、"やせ"に不眠の割合が高かった。なお本研究のように、血圧や降圧剤の不眠へ及ぼす影響に着目しての大規模フィールド調査データを分析した文献は極めて少ない。

主観的な睡眠障害と降圧剤使用との関連を、多変量解析によって調整したオッズ比は、男性では1.20(1.13-1.28)、女性では1.27[1.15-1.41](95%の信頼区間(CI))であり、正の相関関係が認められた。また収縮期血圧が低いほど、主観的な睡眠障害を訴える割合が高いといった負の相関が男女ともに見られた。さらにその関連は降圧剤を服薬している男性においていっそう顕著であった。さらに体重階層で見ると、この相関関係は降圧剤を服薬している太り過ぎでない男性に明らかであった。以上のように現在の主観的な睡眠障害は強く降圧剤使用と相関することを示唆する結果が得られた。

降圧剤の服薬が高血圧の予防対策として、ますます積極的に行われている昨今、降圧剤等血圧のコントロールを、不眠というQOLの維持向上に極めて阻害因子となる要因に十分留意して行う必要性を提案する。

Key Words: subjective sleep disturbance, antihypertensive drug, epidemiology

総説

意味性認知症の臨床

鉾石 和彦 1),2), 福原 竜治 2), 清水 秀明 2)

1) 自衛隊阪神病院精神科, 2) 愛媛大学大学院脳とこころの医学分野

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Summary

Semantic dementia (SD) is a progressive, degenerative dementia characterized by selective and progressive loss of semantic memory associate with focal atrophy of the left anterior temporal lobe. In the case of left dominant temporal atrophy, the patient shows Gogi (word-meaning) aphasia. SD is a progressive, degenerative disease; therefore there is no causal therapy to treat it. Some pharmacotherapy and rehabilitation for aphasia has been attempted as a symptomatic treatment.

Key Words: semantic dementia, Gogi-aphasia, frontotemporal lobar degeneration

臨床経験録

食道胃静脈瘤出血例の短期予後不良因子に関する検討

宮本 安尚 1),2) ,二宮 朋之 1) ,平岡 淳 1) ,長谷部 昌 1) ,道堯 浩二郎 1)

1) 愛媛県立中央病院消化器病センター 2) 市立宇和島病院内科

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Summary

Background / Aim: Prognostic factors for short-term mortality following acute variceal bleeding have not been clear. We elucidate the prognostic factors for early death in patients with acute variceal bleeding.

Methods and Materials: Ninety-eight patients with acute bleeding of esophago-gastric varices, who were treated with endoscopic hemostasis successfully, were enrolled. We evaluated their clinical backgrounds and retrospectively elucidated the prognostic factors for early death.

Results: Twelve patients (12.2%) died within 30 days after endoscopic hemostasis (early mortality group). The causes of death were hepatic failure in 6, aggravation of poor general condition by bleeding in 5 and a worsened case of the original disease (ATL) in one. Multivariate regression analysis revealed that independent prognostic risk factors for early mortality were a shock index ≥ 1.5 at the arriving hospital (p=0.0029, OR 50.9), the presence of portal vein tumor thrombus (Vp3-4) (p=0.0025, OR 28.1), and Child-Pugh class C (p=0.040, OR 16.1). However, the early mortality rate was only 7% (6/89) in patients with 0 or 1 of these 3 risk factors; the early mortality rate was 67% (6/9) in patients with 2 or 3 of these factors.

Conclusion: A shock index ≥ 1.5, and the presence of Vp3-4 and Child-Pugh class C were independent risk factors of early mortality in acute bleeding from esophago-gastric varices. These factors are thought to be useful for predicting poor prognosis in patients with acute bleeding from esophago-gastric varices.

Key Words: variceal bleeding, early mortality, risk factors

症例報告

悪性胃十二指腸狭窄に対する経内視鏡的胃十二指腸ステント留置症例の検討

土居 裕和, 市川 壮一

愛媛県立今治病院消化器内科

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Summary

Objectives: Although an invasive treatment, surgical gastrojejunostomy is a commonly used palliative treatment for malignant gastric outlet obstruction(mGOO). Recently, an endoscopically placed duodenal stent has been introduced as an alternative treatment. We report our experiences with the duodenal stent.

Methods: Six inoperable patients with mGOO received an endoscopically placed duodenal stent. The mGOOs were caused by the following carcinomas: gastric cancer(4/6), duodenum papilla cancer(1/6), and pancreas body cancer(1/6). Oral intake was measured by the Gastric Outlet Obstruction Scoring System(GOOSS) before and after duodenal stent placement.

Results: Technical success was achieved in 100% (6 ⁄ 6) of cases. The average stent deployment time was 31 minutes. Patients needed an average 2.7 days to recover their ability to eat. Median time with a GOOSS score of 2 or more was 59 days. Median survival time was 64 days after duodenal stent placement. A major complication never occurred.

Conclusion: Endoscopic duodenal stenting improved oral intake rapidly in a majority of patients with mGOO,

and resulted in quality of life improvements.

Key Words: malignant gastric outlet obstruction, duodenal stent, gastric cancer

愛媛県で7年ぶりに診断されたレプトスピラ症の1例

金子 政彦¹⁾,寺岡 裕貴¹⁾,中西 英元¹⁾,川本 裕介¹⁾,宇賀 小百合¹²

1) 市立宇和島病院内科 2) 同循環器内科

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Summary

We report a case of leptospirosis infection in Ehime after an interval of seven years. A 42-year-old man was admitted on September 3, 2011 for a 5-day inability to walk due to severe progressive bilateral leg pain, a fever with shaking chills, and conjunctival suffusion. Laboratory findings showed liver damage without jaundice, renal failure with proteinuria and hematuria, and progressive thrombocytopenia. At first he was diagnosed with Japanese spotted fever, Levofloxacin (LVFX) and Minocycline (MINO) were initiated. It was noted that he was exposed to contaminated river water approximately 7 days before the fever developed. Furthermore, we treated him with Ampicillin (ABPC) because he was found to have conjunctival suffusion. A microscopic agglutination test showed elevated antibody titers working against the Leptospira. Following our patient's diagnosis of leptospirosis, we continued treating him with LVFX, MINO, and ABPC for 10 days and consequently, he recovered fully. Reports show that leptospirosis cases in Japan have decreased recently, but as this case can still be seen even in Ehime, diagnosticians should be aware of patients suffering from the same conditions as those caused by leptospirosis.

Key Words: Leptospirosis, conjunctival suffusion, renal failure

アザチオプリンによる急性呼吸促迫症候群が疑われた潰瘍性大腸炎の 1 例

村上 英広* , 兒玉 明洋, 竹下 英次, 清家 裕貴, 宮本 安尚, 岡本 傳男, 市川 幹郎 市立宇和島病院消化器内科 *コレスポンディングオーサー

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Summary

A 42-year-old male with ulcerative colitis is thought to have developed acute respiratory distress syndrome (ARDS) as a consequence of azathioprine therapy. After taking azathioprine for 14 days in a daily dose of 50 mg, the patient developed an acute pyelonephritis. Administration of antibiotics improved the leukocyturia, however, a dry cough and eruption were developed at the next day. High fever and rapidly increasing dyspnea has been appeared at 17 days after azathioprine therapy. Computed tomography of the chest showed bilateral ground-glass opacity and interstitial pulmonary edema. We diagnosed ARDS according to the criteria that PaO2 /FiO2 ratio was less than 200 mmHg. His condition has been improved after discontinuing azathioprine and the administration of prednisolone with non-invasive positive pressure ventilation. Azathioprine may have been related to the development of ARDS because of the history of medication and the result of drug-induced lymphocyte stimulating test. Clinicians should be alert to this serious adverse event when treating patients with azathioprine.

Key Words: azathioprine, acute respiratory distress syndrome, ulcerative colitis

術前 MDCT で絞扼部の直接所見が得られた大網裂孔ヘルニアの 1 例

石丸 啓 $^{1)}$, 鈴木 秀明 $^{1)}$, 湯汲 俊悟 $^{1)}$, 安原 美文 2 , 高橋 志津江 2 , 久保 義一 3 , 山内 一彦 3 , 廣岡 可奈 3 , 阿部 聖裕 3 , 岩田 猛 3

1) 独立行政法人国立病院機構愛媛病院外科 2) 同放射線科 3) 同内科

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Summary

A 79-year-old man was admitted to our hospital in an emergency for acute abdominal pain. He had no previous history of abdominal surgery or trauma. Abdominal CT revealed a loop formation of the small intestine with edematous wall thickness and fluid collections in the lower abdomen. It accompanied a strangulation obstruction of the attenuated mesentery. A diagnosis of strangulation obstruction by an internal hernia was made, and an emergency operation was performed. We performed resection of the necrosed portion of the small intestine, about 70 cm in length, that had prolapsed, and was strangulated through the hiatus of the greater omentum. The postoperative course was favorable, with the man discharged 14 days postoperatively. Multidetector-row CT (MDCT) examination with Multiplannar reformation (MPR) is very useful for preoperative diagnosis of an internal hernia.

Key Words: Transomental hernia, MDCT, MPR

研究会抄録

第 48 回愛媛臨床血液懇話会

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第 21 回愛媛肝臓外科研究会

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第 129 回愛媛整形外科集談会

愛媛医学 31(4):222-226, 2012