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トピックス

遺伝子から診た特発性心筋症

藤本 香織, 大木元 明義, 大蔵 隆文, 檜垣 實男

愛媛大学大学院循環器・呼吸器・腎高血圧内科学

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整形外科分野における神経障害の研究; 病態の解明と治療法の開発

尾形 直則, 森野 忠夫, 堀内 秀樹, 山内 豪大朗, 森実 圭, 日野 雅之, 濱本 雄一郎, 三浦 裕正

愛媛大学大学院整形外科学

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エディトリアル

アラニン: グリオキシレート アミノ基転移酵素2は, 未知の機能を持つ重要な脳内タンパク質である!

上野 修一

愛媛大学大学院精神神経科学

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分娩監視装置による分娩管理と愛媛県における周産期医療連携の現状

越智 博

愛媛県立中央病院産婦人科

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臨床研究は今後どのように推進されるべきか

荒木 博陽

愛媛大学医学部附属病院薬剤部

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原 著

アラニン: グリオキシレート アミノトランスフェラーゼ2の脳内分布

安部 賢郎

愛媛大学大学院精神神経科学

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Summary

Alanine : glyoxylate aminotransferase 2 (AGXT2 ; EC 2.6.1.44) is known to be an important amino enzyme that transfers not only D-3-aminoisobutyrate, an intermediate of thymine degradation, to 2-methyl-3-oxopropanoate but also an asymmetric dimethylarginine, a competitive inhibitor of nitric oxide synthase, to α -keto- δ - (NG, NG-dimethyl guanidino) valeric acid with pyruvate as an amino acceptor. Large amounts of AGXT2 are distributed in the kidney and the liver but they are also found in the brain. In order to clarify the role of AGXT2 in the brain, AGXT2 enzyme assay was performed in a pig brain tissue. Following this experiment, the pig AGXT2 cDNA

sequence was determined by 5'- and 3'-race methods and the mRNA distribution of the AGXT2 gene in the pig and the rat brains was studied with quantitative realtime PCR methods. In both brains, the AGXT2 mRNA was distributed throughout the brain tissues, with relatively high expression found in the frontal cortex, striatum and hippocampus. It is suggested that the AGXT2 gene may play an important role in the central nervous system.

Key Words : alanine : glyoxylate aminotransferase 2, D-3-aminoisobutyrate, asymmetric dimethylarginine

当院における急速遂娩術に関する検討

森 美妃¹⁾, 松原 圭一¹⁾, 内倉 友香¹⁾, 高木 香津子¹⁾, 橋本 尚¹⁾, 鍋田 基生¹⁾,
小泉 幸司¹⁾, 松原 裕子¹⁾, 藤岡 徹¹⁾, 濱田 雄行¹⁾, 檜垣 高史²⁾, 那波 明宏¹⁾

1)愛媛大学大学院産婦人科学 2)同小児科学

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Summary

[Introduction] When the fetal status is impaired in utero the fetus should be immediately delivered for treatment. Recently, the indicators to objectively evaluate the results of a cardiotocogram was published by the Japan Society of Obstetrics and Gynecology (JSOG classification) . We evaluated those cases, in whom emergency cesarean section or vacuum extraction were performed in Ehime University Hospital, with concern to the relationship between the indicators and oxytocia.

[Method] We retrospectively analyzed neonatal prognostic factors in 95 cases who underwent urgent cesarean sections or vacuum extractions in our hospital from January, 2007 through December, 2011.

[Results] Non reassuring fetal status was the most common indicator of the decision to proceed with forced delivery. Umbilical arterial blood pH was lower in the group of vacuum extraction than in the group of cesarean section. There was a correlation between neonatal neurological prognosis and JSOG classification, umbilical arterial blood pH, and Apgar score.

[Conclusions] Generally, the neonatal prognosis was good. It is thought that we could comply fully with the indicators and technique of oxytocia. This study demonstrated that JSOG classification was correlated to neonatal neurological prognosis. Oxytocia based on JSOG classification could lead to the neonatal prognosis.

Key Words : non reassuring fetal status, oxytocia, neonatal neurological prognosis

大学における自主臨床研究の支援体制について

永井 将弘¹⁾, 山崎 知恵子¹⁾, 山下 梨沙子¹⁾, 野元 正弘²⁾

1)愛媛大学医学部附属病院臨床薬理センター 2)愛媛大学大学院薬物療法・神経内科学

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Summary

We carried out a questionnaire survey concerning the current situation of clinical research support system in university hospitals. The questionnaires were collected from 68 out of 80 university hospitals. Clinical researches were partially supported in about 70% of the establishments. However clinical research coordinators (CRC) were involved in the clinical researches in only less than 50% of the establishments. The reason why CRC can't afford to support clinical researches is because they are currently supporting sponsor initiated clinical trials. The contents of the support for clinical researches include : preparation of an application form, research protocol and an informed consent form. For support of CRC, data manager,

trial statistician, monitor and fostering of superior investigators are necessary to perform high-quality clinical researches.

Key Words : clinical research, questionnaire, support system

総 説

新しいダニ媒介性疾患, 重症熱性血小板減少症候群について

四宮 博人

愛媛県立衛生環境研究所

愛媛医学 32(3):196-200, 2013

Summary

Severe fever with thrombocytopenia syndrome (SFTS) is a recently identified emerging viral infectious disease in China that is caused by a novel phlebovirus in the family Bunyaviridae, SFTS virus. The first SFTS case in Japan was identified in Yamaguchi prefecture in Jan. 2013, though the patient had died in the autumn of 2012. Since then, 13 patients with SFTS (8 patients dead) have been identified in the west part of Japan, including Ehime prefecture (as of April 23, 2013). Humans become infected through tick bites or contact with blood from SFTS patients. The major symptoms of SFTS include fever and gastrointestinal symptoms. Regional lymphadenopathy was also frequently observed. The most common abnormalities in laboratory testing were thrombocytopenia and leukocytopenia. Multiorgan failure developed in most patients, as shown by elevated serum levels of AST, ALT and LDH. Proteinuria and hematuria were also observed. The mortality rate of patients with SFTS varies between 12% and 30%. SFTS has recently been determined to be a category IV infectious disease under the National Epidemiological Surveillance of Infectious Disease in Japan and required notifying all cases on and after March 4, 2013.

Key Words : SFTS, thrombocytopenia, tick

症例報告

姿勢異常が STN-DBS により改善したパーキンソン病の1例

矢部 勇人¹⁾, 田中 寿知²⁾, 野元 正弘³⁾

1) 済生会松山病院神経内科 2) 同脳神経外科 3) 愛媛大学大学院薬物療法・神経内科学

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Summary

A-63-year-old woman was admitted to the hospital because of gait disturbance. She had a diagnosis of Parkinson's disease since 2002. She responded well to the treatments of Parkinson's Disease, but developed wearing off a few years later. The wearing off can not be managed by the frequent medication. Her UPDRS (Unified Parkinson's Disease Rating Scale) Part III score was 18 points at On time and 25 points at Off time. She had marked camptocormia even at On time. She underwent bilateral STN (subthalamic nucleus) -DBS (deep brain stimulation). After the STN treatment her signs of PD such as akinesia or rigidity improved and the UPDRS Part III score decreased to 17, and camptocormia improved. STN-DBS may be effective not only traditional PD symptoms but also camptocormia which has attention recently on the treatment of PD.

Key Words : camptocormia, STN-DBS, Parkinson disease

研究会抄録

愛媛脳神経外科懇話会第106回学術集会

愛媛医学 32(3):204-207, 2013

第132回愛媛整形外科集談会

愛媛医学 32(3):208-210, 2013