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トピックス

公衆衛生学発展のための分野横断的研究の展開

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発熱とけいれんのメカニズム

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エディトリアル

COPD治療の現状と展望

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臨床研究における試験デザインの重要性

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C型慢性肝炎に対する3剤併用抗ウィルス療法

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原著

安定期COPD患者に対する吸入気管支拡張薬上乗せ効果の検討

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Summary

Aims: Our investigation determined whether combining bronchodilators improves respiratory function and quality of life (QOL) for COPD patients compared to baseline.

Patients and methods: We enrolled twenty-four patients with chronic obstructive pulmonary disease (COPD) who showed respiratory symptoms despite receiving long-acting inhaled bronchodilators. Pulmonary function tests and the COPD assessment test (CAT) were evaluated at baseline, 6 weeks, and

14 weeks after the administration of add-on bronchodilators (salmeterol / fluticasone combination : SFC or

tiotropium: TIO).

Results: All participants were given the add-on therapy. Levels of forced vital capacity, forced expiratory volume in 1 second, and peak expiratory flow were significantly increased after the treatment at 14 weeks compared with those of baseline. The treatment also showed a trend toward improvement in scores of CAT.

Conclusions: These findings suggest that the addition of SFC or TIO treatments to long-acting bronchodilators as treatments for patients with COPD improves respiratory function and QOL.

Key Words: COPD, Add-on therapy, COPD assessment test (CAT)

60歳以上のC型肝炎患者に対するTelaprevir/Pegylatedinterferon/

Ribavirin併用療法の安全性と治療効果

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Summary

Eighty-eight patients with chronic hepatitis C in six hospitals in Ehime prefecture, which belong to the Ehime Kan-en Network (EKEN) study group, were treated with a triple combination therapy of telaprevir, pegylated-interferon, and Ribavirin.

The patients were divided into two groups: those younger than 60 years old and those 60 years old or older. The both groups get the same treatment. We compared the frequency of several adverse events (anemia, renal failure, hyperuricemia, digestive disorder and dermatological symptoms), discontinuation of the treatment due to these side effects, and treatment efficacy. Hemoglobin and renal function were significantly lower in the older group at several time points during the treatment period. Hyperuricemia and dermatological symptoms were not significantly different between the two groups. The triple combination therapy for the older group was discontinued more frequently than for the younger group due to a higher incidence of (41.6% vs. 9.6%, p=0.001). Moreover, the older group achieved a sustained virological response for 12 weeks (SVR12) less frequently than the younger group (66.6% vs 90.3%, p=0.012). These results suggest we need much more careful observations during treatment of older patients, and the continuation of the treatment may be important to achieve the SVR12 for the older patients.

Key Words: telaprevir, triple therapy, elderly patients

症例報告

播種性血管内凝固症候群を来し重症化が危惧された薬物性肝障害の1例

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Summary

A 17-year-old woman developed liver dysfunction associated with general malaise and abdominal pain following the administration of multi-ingredient cold medication 10 days ago. Her laboratory data also revealed an increase in eosinophil and abnormalities in blood coagulation tests. Viral markers and autoantibodies were negative, but a lymphocyte stimulation test for multi-ingredient cold medication was positive. She was diagnosed with drug-induced liver injury complicated with disseminated intravascular coagulation. Her symptoms resolved and liver function test results returned to normal following discontinuation of the cold medicine and administration of corticosteroids. The possibility of drug-induced liver injury must be considered when liver dysfunction or other symptoms develop during any medication, even cold medicine.

Key Words: drug-induced liver injury, disseminated intravascular coagulation, cold medicine

研究会抄録

第 134 回 愛媛整形外科集談会

愛媛医学 33(1):38-41, 2014

第9回 愛媛異常運動研究会

愛媛医学 33(1):42-44, 2014

愛媛医学投稿規定・作成の手引き

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