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CT评价系统联合D-二聚体对重症急性胰腺炎早期预后评估的作用

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Early prognostic value of CT evaluation system combined with D-dimer in severe acute pancreatitis

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摘要 HTML全文 图表 参考文献

目的 观察重症急性胰腺炎(SAP)患者早期Balthazar CT分级、改良CT严重指数(MCTSI)评分、血浆D-二聚体水平与预后之间的关系,进一步探讨联合诊断对SAP早期预后评估的临床价值。**方法** 收集2014年1月至2016年12月73例SAP患者的临床资料。分析24 h血浆D-二聚体水平及48 h腹部CT检查结果。应用Balthazar CT分级、MCTSI评分和D-二聚体水平绘制受试者工作特征曲线(ROC),通过计算曲线下面积(AUC)来比较三者判断SAP预后的价值。**结果** Balthazar CT分级的AUC值为0.722(95%CI: 0.560-0.884), MCTSI的AUC值为0.694(95%CI: 0.515-0.872), D-二聚体的AUC值为0.760(95%CI: 0.616-

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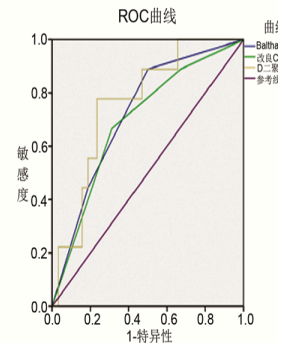
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0.905), 三者均可预测SAP死亡的发生。D-二聚体与CT评价系统的相关性分析显示, CT分级高的患者血浆D-二聚体水平显著高于CT分级低的患者, 差异具有统计学意义($P < 0.05$); MCTSI评分高的患者血浆D-二聚体水平显著高于MCTSI评分低的患者, 差异具有统计学意义($P < 0.05$)。 **结论** 早期应用CT评价系统联合D-二聚体水平有助于判断重症急性胰腺炎患者不良预后。

关键词: [重症急性胰腺炎](#) / [Balthazar CT分级](#) / [MCTSI](#) / [D-二聚体](#)

Objective To observe the relationship between Balthazar CT grading, modified CT severity index (MCTSI) score, plasma D-dimer level and prognosis in early stage of severe acute pancreatitis (SAP) patients, and to further explore the clinical value of combined diagnosis and early stage prognosis assessment of SAP. **Methods** General datas of 73 SAP patients admitted and treated in the second hospital of Dalian Medical University from January 2014 to December 2016 were retrospectively analyzed. Plasma D-dimer and abdominal CT examination were detected for 24 h and 48 h respectively. The ROC was plotted using Balthazar CT grading, MCTSI score and D-dimer level, and the area under the curve (AUC) was calculated to compare the prognostic value of the three for SAP. **Results** The AUC value of Balthazar CT grading was 0.722 (95% CI: 0.560-0.884), the AUC value of MCTSI was 0.694 (95% CI: 0.515-0.872), and the AUC value of D-dimer was 0.760 (95% CI: 0.616-0.905), all of which could predict the occurrence of SAP death. To Further study on the correlation between D-dimer and CT evaluation system showed that the plasma D-dimer level of patients with high CT grade was significantly higher than that of patients with low CT grade, and the difference was statistically significant ($P < 0.05$). The plasma D-dimer level of patients with high MCTSI score was significantly higher than that of patients with low MCTSI score, and the difference was statistically significant ($P < 0.05$). **Conclusions** Early application of CT evaluation system combined with D-dimer level can help to evaluate the poor prognosis of patients with severe acute pancreatitis.

Keywords: [severe acute pancreatitis](#) / [balthazar CT grading](#) / [MCTSI](#) / [D-dimer](#)

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