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帕瑞昔布钠在经皮椎体成形术中镇痛效果的临床研究

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「摘要」目的 观察帕瑞昔布钠在经皮椎体成形术中的镇痛效果。方法 选取 2017 年 7 月至 2019 年 6 月重庆市大足区人民医院收治的骨质疏松症脊柱骨折患者 200 例,采用随机数字表法分为 A 组(术前 30 min 注射帕瑞昔布钠)、B组(术前 30 min 注射帕瑞昔布钠及盐酸哌替啶)、C组(盐酸哌替啶)和 D组(对照组),每组 50 例。记录 4 组患者术前静息、活动时,术后 6 h,术后 3、7 d,术中给药后即刻(T0)、注入局部麻醉药后(T1)、 穿刺针到达骨膜(T2)、注入骨水泥时(T3)各时间点视觉模拟疼痛量表(VAS)评分,观察4组患者不良反应发 生情况,包括术中、术后 24 h 恶心、呕吐、寒战、精神症状(烦躁等)等。结果 200 例患者中男 42 例,女 158 例, 女性发病率明显高于男性;平均年龄(73.02 \pm 7.35)岁,A 组患者平均年龄(72.14 \pm 7.57)岁,B 组患者平均年龄 (72.74 ± 7.97) 岁,C 组患者平均年龄 (73.98 ± 7.32) 岁,D 组患者平均年龄 (73.22 ± 6.56) 岁。200 例患者术后 疼痛均明显缓解,术前活动时 VAS 评分与术后 6 h,术后 3、7 d 比较,差异均有统计学意义(P < 0 . 05); A A B 组 患者 T2、T3 VAS 评分均较 C、D 组明显改善,差异均有统计学意义(P<0.05)。A、B 组患者 T2、T3 VAS 评分 比较,差异均无统计学意义(P > 0.05)。结论 经皮椎体成形术是治疗老年性骨质疏松性骨折的有效方法,术 前 30 min 使用帕瑞昔布钠可降低术中疼痛。

「关键词」 帕瑞昔布钠;镇痛;骨质疏松症;压缩性骨折;脊柱骨折;经皮椎体成形术

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Clinical study on analgesic effect of parecoxib sodium in percutaneous vertebroplasty*

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[Abstract] Objective To observe the analgesic effect of parecoxib sodium in percutaneous vertebroplasty (PVP). Methods A total of 200 patients with osteoporotic spinal fractures treated in the hospital from July 2017 to June 2019 were collected and divided into the group A (injected by parecoxib sodium at 30 min before operation), group B (injected by parecoxib sodium and pethidine hydrochloride at preoperative 30 min), group C (pethidine hydrochloride) and group D (control group) by adopting the random number table method. The VAS score at preoperative rest and activity, postoperative 6 h, 3, 7 d, immediately after intraoperative administration (T0), after injection of local anesthetic drug (T1), puncture to periosteum (T2) and injection of bone cement (T3) were recorded in 4 groups. The adverse reactions occurrence including nausea, vomit, chill and psychiatric symptoms (agitation, etc.) was observed in 4 groups. **Results** Among 200 patients, there were 42 males and 158 females. The incidence rate in female was significantly higher than that in male. The mean age was (73.02 ± 7.35) years old. The mean age was (73.02 ± 7.35) , which in the group A was (72.14 ± 7.57) year old, which in the group B was (72.74 \pm 7.97) year old, which in the group C was (73.98 \pm 7.32) year old and which in the group D was (73, 22 ± 6 , 56) year old. Postoperative pain in 200 cases was significantly relieved. The VAS score had statistical difference between before operation and at postoperative 6 h, 3, 7 d (P <

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