

- patients. AJNR 1990; 11:633.
- 2 Eskridge JM. Interventional neuroradiology. Radiology 1989; 172:991.
 - 3 Guglielmi G, et al. Endovascular treatment of posterior circulation aneurysms by electrothrombosis using electrically detachable coils. J Neurosurg 1992; 77:515.
 - 4 Higashida RT, et al. Advances in the treatment of complex cerebrovascular disorders by interventional neurovascular techniques. Circulation 1991; 83:196.
 - 5 Knuckey NW, et al. Thrombosis of difficult intracranial aneurysms by the endovascular placement of platinum-Dacron microcoils. J Neurosurg 1992; 77:43.
 - 6 Kinugasa K, Mandai S, et al. Direct thrombosis of aneurysms with cellulose acetate polymer: Part I, II. J Neurosurg 1992; 77:497.
 - 7 Vinuela F, et al. Update on interventional neuroradiology. AJR 1989; 153:23.
 - 8 Casasco AE, et al. Selective endovascular treatment of 71 intracranial aneurysms with platinum coil. J Neurosurg 1993; 79:3.
 - 9 Taki W, et al. Radiopaque solidifying liquids for releasable balloon technique: A technical note. Surg Neurol 1980; 13:140.
 - 10 Goto K, et al. Permanent inflation of detachable balloons with a low-viscosity hydrophilic polymerizing system. Radiology 1988; 169:787.
 - 11 Yang PJ, et al. Platinum coil: A new transvascular embolic agent. AJNR 1988; 9:547.
 - 12 Guglielmi G, et al. Transvascular electrothrombosis of saccular aneurysms: Part I: Electrochemical basis, technique and experimental results. Part II: Preliminary clinical experience. J Neurosurg 1991; 75:1.
 - 13 王忠诚,等. 自制微弹簧圈血管内闭塞颅内动脉瘤(附20例临床报告). 中华神经外科杂志1994;10:1.
 - 14 Fox AJ, et al. Use of detachable balloons for proximal artery occlusion in the treatment of unclippable cerebral aneurysms. J Neurosurg 1987; 66:40.
 - 15 O'Reilly GV, et al. Laser-induced thermal occlusion of berry aneurysms: Initial experimental results. Radiology 1989; 171:471.
 - 16 Heilman CB, et al. Aneurysm recurrence following endovascular balloon occlusion. J Neurosurg 1992;77:260.
 - 17 Kwan ESK, et al. Enlargement of basilar artery aneurysms following balloon occlusion -- "Water-hammer effect". J Neurosurg 1991; 75:963.

逆行胶囊导管扩张前列腺的围术期造影

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适应证 观察良性前列腺增生症、前列腺肥大所致尿道狭窄的疗效及操作的正确与否。

禁忌证 1. 中叶增生为主的前列腺增生症; 2. 严重的泌尿系感染; 3. 有严重的心、肺、肝、肾等全身疾病者。

造影剂 60% 复方泛影葡胺稀释。

造影前准备 检查前患者自解小便, 排尿困难者应插管导尿。

造影方法 常规消毒铺巾, 尿道粘膜浸润麻醉下, 先行逆行性及排尿性尿道造影检查, 了解前列腺段尿道的长度, 受压的程度及主要狭窄段; 然后, 固定好定位好的扩张器, 缓慢注气使气囊缓慢均匀充起, 直至气压表达 2~3 个大气压, 摄气囊充气造影像, 观察气囊充起情况和气囊位于的部位, 满意后维持 10 分钟; 扩张结束后退出胶囊导管, 再行逆行性及排泄尿道造影, 最后膀胱内留置导尿管。

摄影技术 1. 扩张前后逆行性及排尿性尿道造影。

胶片尺寸: 20×25cm(8×10英寸)。滤线设备: 滤线器(+), 距离 100cm。摄影体位: 患者仰卧摄影台上, 正中面对准台面中线, 矢状面与台面垂直。下肢伸直, 上肢放于身体两侧。胶片长轴与身体长轴垂直, 胶片横放于滤线器托盘上, 下缘包括全尿道。阴茎拉向左方, 与台面尽可能平行。中心线: 经耻骨联合下缘垂直射入胶片中心。屏气情况: 曝光时嘱患者屏气。

2. 扩张时气囊充气造影。胶片尺寸: 20×25cm(8×10英寸)。滤线设备: 滤线器(+), 距离: 100cm。摄影体位: 患者仰卧摄影台上, 正中面对准台面中线, 矢状面与台面垂直。下肢伸直, 上肢放于身体两侧。胶片长轴与身体长轴平行, 胶片纵放于滤线器托盘上, 下缘包括全尿道。阴茎拉向下方, 与台面尽可能平行。中心线: 经耻骨联合下缘垂直射入胶片中心。屏气情况: 曝光时嘱患者屏气。

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