

# 不同雾化吸入诱导吸痰对痰标本量和痰检结果影响

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**摘要:**目的 比较高渗盐水与糜蛋白酶雾化吸入诱导吸痰对痰标本量和痰检结果的影响。方法 选取2013年8月—2015年2月在上海交通大学附属第一人民医院分院拟诊肺癌患者60例,随机分为高渗盐水组29例和糜蛋白酶组31例,分别雾化吸入后留痰送检,以纤维支气管镜检查、穿刺活检或术后病理为对照标准,比较两组患者痰标本量和肺癌检出率的差异。结果 高渗盐水组平均收集痰液量显著多于糜蛋白酶组( $P < 0.05$ ),高渗盐水组留痰标本合格率显著高于糜蛋白酶组( $P < 0.05$ ),两组痰检肺癌的检出率分别是77.8%和43.6%,差异有统计学意义( $P < 0.05$ )。结论 高渗盐水雾化吸入诱导吸痰能规范送检痰标本的质量,提高痰检的效果,有利于疾病的诊断。

**关键词:**肺癌;痰检;雾化吸入;诱导吸痰

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**Effects of atomization inhalation of hypertonic saline solution and chymotrypsin solution on sputum analysis for detecting lung cancer cell** (Branch of Shanghai First People's Hospital, Shanghai Jiao Tong University, Shanghai 200081, China)

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**Abstract: Objective** To compare the effects of atomization inhalation of hypertonic saline solution and chymotrypsin solution on sputum analysis for detecting lung cancer cell. **Methods** Sixty cases with suspected lung cancer in Branch of Shanghai First People's Hospital, Shanghai Jiao Tong University were enrolled from August 2013 to February 2015. They were randomly divided into the hypertonic saline group ( $n = 29$ ) and the chymotrypsin group ( $n = 31$ ). The lung cancer cell detection was performed by collecting sputum with atomization inhalation of hypertonic saline solution and chymotrypsin solution. The sputum analysis results were proved by fibrobrochoscope, biopsy or postoperative pathology. **Results** The average amount of collected sputum in the hypertonic saline group was significantly more than that in the chymotrypsin group ( $P < 0.05$ ). The qualified rate of sputum specimens in the hypertonic saline group was significantly higher than that in the chymotrypsin group ( $P < 0.05$ ). The detection rates of lung cancer cell were 77.8% and 43.6% in the hypertonic saline group and the chymotrypsin group, respectively. There was significant difference between the two groups ( $P < 0.05$ ). **Conclusion** Atomization inhalation of hypertonic saline solution is better than chymotrypsin solution in collecting sputum for detecting lung cancer cell.

**Key Words:** Lung cancer; Sputum analysis; Atomization inhalation; Induced sputum

肺癌已经成为人类致死的第1恶性肿瘤。由于中晚期肺癌的预后差,肺癌的早诊早治尤为重要<sup>[1-3]</sup>。周围型肺癌通过影像学及穿刺活检比较容易术前诊断。中心型肺癌因靠近肺门大血管及气道,穿刺活检风险

高,术前细胞病理诊断主要以纤支镜为主。但相当多的老年、慢性肺病患者有创的穿刺活检、纤支镜等检查风险较高,且不易接受。通过常规留痰筛检肺癌具有无创、简便和易被患者接受的特点,其特异性高,但敏感性较低,易漏诊,假阴性率约为15%~47%<sup>[4,6]</sup>。敏感性低的原因主要包括患者无痰或痰液过少,脱落肿瘤细胞过少;炎细胞混杂;细胞退变、形态上不典型,以至于与一

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