

放射介入联合治疗妇科恶性肿瘤的临床效果

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【摘要】：目的：探究分析放射介入联合治疗妇科恶性肿瘤的临床效果。方法：选取于 2019 年 1 月至 2022 年 9 月，我院收治的妇科恶性肿瘤患者共 50 例，作为本次研究对象。采用电脑盲选的方式，将 50 例恶性肿瘤患者随机分为对照组以及观察组。对照组采用腹腔镜下子宫切除以及广泛盆腔淋巴结切除术进行治疗；观察组采用放射介入联合治疗的方式进行干预。对比分析对照组以及观察组的肿块消退情况；临床症状缓解情况以及并发症发生率。**结果**：经治疗干预后，观察组在肿块消退情况；临床症状缓解情况以及并发症发生率方面明显优于对照组，其中 ($P < 0.05$)，差异具有统计学意义。**结论**：在对妇科恶性肿瘤患者进行治疗的过程中，采用放射介入联合治疗的方式对患者进行干预，能够有效改善患者的肿块消退情况以及临床症状缓解情况，同时能够显著降低患者的并发症发生率，在实际应用的过程中具有优良的效果，值得进一步的推广与应用。

【关键词】：妇科恶性肿瘤；放射介入技术；肿块消退情况；临床症状缓解情况；并发症发生率

Clinical Effect of Combined Radiological Intervention in the Treatment of Gynecological Malignant Tumors

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Abstract: Objective: To explore and analyze the clinical effect of combined radiological intervention in the treatment of gynecological malignant tumors. Methods: From January 2019 to September 2022, a total of 50 patients with gynecological malignant tumors in our hospital were selected as the research objects. By means of computer blind selection, 50 patients with malignant tumors were randomly divided into control group and observation group. The control group was treated with laparoscopic hysterectomy and extensive pelvic lymphadenectomy; the observation group was treated with radiation intervention combined therapy. The tumor regression, clinical symptom relief and complication rate in the control group and the observation group were compared and analyzed. Results: After treatment and intervention, the observation group was significantly better than the control group in terms of mass regression, clinical symptom relief and complication rate ($P = 0.05$), and the difference was statistically significant. Conclusion: In the process of treating patients with gynecological malignant tumors, the intervention of radio-interventional therapy can effectively improve the tumor regression and clinical symptoms of patients, and can significantly reduce the incidence of complications in patients. , has excellent effect in the process of practical application, and is worthy of further promotion and application.

Keywords: Gynecological malignancies; Radiological intervention; Tumor regression; Clinical symptom relief; Incidence of morbidity

前言

1 资料与方法

1.1

25

32- 73

49.36± 3.06

6

14

5

25

32- 71

48.77±

2.97

7

[1- 2]

13

5

P 0.05

[3]

[4-5]

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