

利伐沙班不同疗程防治全髋关节置换术后深静脉血栓的效果及安全性观察

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摘要 目的:观察利伐沙班不同疗程对全髋关节置换术后深静脉血栓(DVT)的防治效果及安全性。方法:采用回顾性研究方法,选择2014年12月—2015年12月我院127例择期行全髋关节置换术患者的临床资料,根据抗凝药物不同分为A组(83例,又根据抗凝疗程分为A1组40例和A2组43例)和B组(44例)。A组患者于术后6~8 h给予利伐沙班片10 mg,po,qd,其中A1组疗程为5周(35 d)、A2组疗程为2周(14 d)。B组患者于术前12 d给予依诺肝素钠注射液5 000 AxaIU,sc,qd;术后给予依诺肝素钠注射液5 000 AxaIU,sc,qd,疗程为2周。比较3组患者的DVT发生率,术前3 d和疗程结束后的凝血酶原时间(TT)、活化部分凝血活酶时间(APTT)、血红蛋白(Hb)含量、全血黏度、血浆黏度、血小板计数和抗凝安全性。结果:A1组患者的DVT发生率为0,显著低于A2组(9.30%)和B组(11.36%),差异均有统计学意义($P<0.05$);A2组与B组比较,差异无统计学意义($P>0.05$)。无论是术前3 d,还是疗程结束后,3组患者的PT、APTT、Hb含量、全血黏度、血浆黏度和血小板计数比较,差异均无统计学意义($P>0.05$)。3组患者均未出现重大出血事件和肺栓塞;A组患者轻微出血事件发生率为5.00%,略高于A2组(2.33%)和B组(2.27%),但差异无统计学意义($P>0.05$);A2组和B组比较,差异也无统计学意义($P>0.05$)。结论:全髋关节置换术后给予利伐沙班长疗程5周(35 d)抗凝,对患者凝血功能、血小板无明显影响,不仅能够降低DVT发生率,还不会增加出血风险,安全性较好。

关键词 全髋关节置换术;下肢深静脉血栓;利伐沙班;凝血功能

Effects and Safety Observation of Different Treatment Courses of Rivaroxaban in Prevention and Treatment of Deep Venous Thrombosis after Total Hip Replacement

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