

-2540.

5 Yi H, Fukagawa M, Yamato H, et al. Prevention of enhanced parathyroid hormone secretion, synthesis and hyperplasia by mild dietary phosphorus restriction in early chronic renal failure in rats: possible direct role of phosphorus. *Nephron*, 1995, 70(2): 242 - 248.

6 Brancaccio D, Gallieni M, Cozzolino M. Treatment of hyperparathyroidism-why is it crucial to control serum phosphate? *Nephrol Dial Transplant*, 1996, 11(3): 420 - 423.

7 Fournier A, Moriniere P, Sebert JL, et al. Calcium carbonate, an aluminum free agent for control of hyperphosphatemia, hypocalcemia and hyperparathyroidism in uremia. *Kidney Int Suppl*, 1986, 18; S114 - 119.

8 Block GA, Port FK. Re-evaluation of risk associated with hyperphosphatemia and hyperparathyroidism in dialysis patients: Recommendations for a change in management. *Am J Kidney Dis*, 2000, 35(6): 1226 - 1237.

9 Guérin AP, London GM, Marchais SJ, et al. Arterial stiffening and vascular calcifications in end-stage renal disease. *Nephrol Dial Transplant*, 2000, 15(7): 1014 - 1021.

10 Castro R, Herman A, Ferreira C, et al. RenaGel efficacy in severe secondary hyperparathyroidism. *Nefrologia*, 2002, 22(5): 448 - 455.

11 Zhang Q, Li M, Lu Y, et al. Meta-analysis comparing sevelamer and

calcium-based phosphate binders on cardiovascular calcification in hemodialysis patients. *Neohron Clin Pract*, 2010, 115(4): c259 - c267.

12 王海燕, 李晓枚, 赵明辉, 等. 单侧输尿管梗阻致肾间质纤维化模型//王海燕. 肾脏病学. 第三版. 北京: 人民卫生出版社, 2008: 620 - 622.

13 Locatelli F, Cannata-Andia JB, Drüeke TB, et al. Management of disturbances of calcium and phosphate metabolism in chronic renal insufficiency, with emphasis on the control of hyperphosphataemia. *Nephrol Dial Transplant*, 2002, 17(5): 723 - 731.

14 Cozzolino M, Staniforth ME, Liapis H, et al. Sevelamer hydrochloride attenuates kidney and cardiovascular calcifications in long-term experimental uremia. *Kidney Int*, 2003, 64(5): 1653 - 1661.

15 Braunlin W, Zhorov E, Guo A, et al. Bile acid binding to Sevelamer HCl. *Kidney Int*, 2002, 62(2): 611 - 619.

16 Llach F, Massry SG. On the mechanism of secondary hyperparathyroidism in moderate renal insufficiency. *J Clin Endocrinol Metab*, 1985, 61(4): 601 - 606.

[收稿日期] 2010-06-08

(本文编辑 书 实)

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感染的同时给予积极机械通气。在本组死亡病例中,有 4 例使用单克隆抗体(赛尼哌),2007 年后 7 例肺部感染患者均未使用单克隆抗体(赛尼哌),仅 1 例死亡。提示单克隆抗体联合强效免疫抑制药物在降低急性排斥同时,可能会过度抑制患者的自身免疫功能,导致感染不易控制。

总之,本研究表明近三年新疆地区活体肾移植呈快速增长,2006 年后约占同期肾移植总量的 69.4%。患者以少数民族居多(占 74.4%),供者多为三代旁系亲属,而汉族患者则以直系亲属供肾为主。人/肾短期和中期存活率明显高于尸体肾移植,并与国内、外报道活体肾移植人/肾存活率相近,AR 和肺部感染发生率分别为 9.1% 和 10.2%,死亡率为 6.3%,表明单克隆抗体联合强效免疫抑制药物可降低急性排斥的发生率,但其对重症感染的不良作用应引起临床关注,长期存活率仍有待进一步观察。

参 考 文 献

1 朱同玉. 亲属活体肾移植中应注意的几个问题. *肾脏病与透析肾移植杂志*, 2006, 15(1): 49 - 50.

2 石炳毅. 应重视亲属活体供肾移植的医疗安全性. *中华泌尿外科杂志*, 2006, 27(10): 653 - 655.

3 Andreoni KA, Brayman KL, Guidinger MK, et al. Kidney and Pancreas Transplantation in the United States, 1996-2005. *Am J Transpl*, 2007, 7(5Pt2): 1359 - 1375.

4 Wright L, Daar AS. Ethical aspects of living donor kidney transplantation and recipient adherence to treatment. *Proc Transplant*, 2003, 13(2): 105 - 109.

5 Haberal M, Karakayali H, Moray G, et al. Long-term follow-up of 102 living kidney donors. *Clin Nephrol*, 1998, 50(4): 232 - 235.

6 张小东, 胡小鹏, 王 勇, 等. 153 例亲属活体供肾移植的临床观察. *中国医学科学院学报*, 2009, 31(3): 300 - 302.

7 薛武军, 宋 勇, 田普训, 等. 158 例亲属活体肾移植的临床研究. *中南大学学报(医学版)*, 2009, 34(9): 867 - 873.

8 曾凡军, 刘 斌, 蒋继贫, 等. 亲属活体肾移植 101 例分析. *中华器官移植杂志*, 2006, 27(5): 265 - 267.

9 王彦斌, 刘 健, 孟 伟, 等. 新疆地区 331 例肾移植分析. *中华器官移植杂志*, 2006, 27(8): 460 - 462.

10 沙建军, 刘 炜, 应 亮, 等. 亲属活体供肾移植与尸体供肾移植的临床疗效比较. *中华器官移植杂志*, 2006, 27(1): 11 - 13.

[收稿日期] 2010-07-12

(本文编辑 律 舟 佑 桉)