

# 腹腔镜及开放供肾切取术后供者生活质量随访研究

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**【摘要】** 目的 根据国际通用的 SF-36 健康调查量表及世界卫生组织生存质量测定量表 WHOQOL-100 比较, 腹腔镜取肾(LDN)及开放取肾(ODN)术后供者的生活质量。方法 供者男 12 例、女 22 例, 按手术方法分成 LDN 组( $n=15$ )和 ODN 组( $n=19$ ), 采用电话及门诊随访方式, 随访 1、6 和 12 个月, 对 SF-36 健康调查量表及生存质量测定量表 WHOQOL-100 的结果进行分析。结果 SF-36 健康调查量表显示, 两组术后 1 月躯体疼痛差异有显著性意义( $P < 0.05$ ), 供者更倾向于 LDN; 两组 SF-36 评分在总体健康(GH)、活力(VT)、精神健康(MH)、情感职能(RE)、生理职能(RP)等方面差异无显著性意义; 两组躯体疼痛(6 月内)及社会关系(12 月内)差异有显著性意义( $P < 0.05$ ), 供者更倾向于 LDN。两组 WHOQOL-100 调查结果差异无显著性意义。结论 LDN 较 ODN 术后疼痛感更少和创伤较小, 两组供肾切取术在其它方面无明显差异。

**【关键词】** 肾移植; 腹腔镜取肾; 开放取肾; 供者; 生活质量

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**Quality of life of living kidney donors: laparoscopic versus open donor nephrectomy** *DI Wen-jia, DENG Xiao-fan, DOU Ke, et al. (Multi-Organ Transplantation Center, Sichuan Provincial People's Hospital, Chengdu 610072, China)*

**【Abstract】 Objectives** The aim of this randomized study was to compare patient-reported outcome after laparoscopic versus open donor nephrectomy during 1 year follow-up. The evidence base has so far not allowed for a decision as to which method is superior as seen from a long-term quality of life-perspective. **Methods** The donors were randomized to laparoscopic ( $n = 15$ ) or open ( $n = 19$ ) nephrectomy, with follow-up at 1, 6, and 12 months. Outcomes were health status (SF-36) and overall quality of life (QOLS-100). **Results** There was a significant difference in favor of laparoscopic surgery regarding the SF-36 subscale bodily pain at 1 month postoperatively ( $P < 0.05$ ). Analysis based on intention to treat revealed no long-term differences between groups in SF-36 scores. When subtracting the reoperated/converted donors of the laparoscopic group, significant differences in favor of laparoscopy were revealed in the subscales bodily pain at 6 months and social functioning at 12 months ( $P < 0.05$ ). No significant differences were found in QOLS-100 scores between groups. **Conclusion** Laparoscopic donor nephrectomy is an attractive alternative to open donor nephrectomy because of less postoperative pain. However, long-term comparison only revealed significant differences in favor of laparoscopy when adjusting for reoperations/conversions. Both groups reached baseline scores in most SF-36 subscales at 12 months and this may explain why possible minor benefits are hard to prove.

**【Key words】** Kidney transplantation; Laparoscopic nephrectomy; Open nephrectomy; Donor; Quality of life

同种异体肾移植术是终末期肾病最佳的治疗方法, 但近年来供肾短缺现象日趋严重, 增加活体供肾成为解决这一矛盾的重要途径。长期以来, 国内外普遍采用经

腰部切口开放取肾(ODN), 手术创伤较大, 常使有意供肾者望而却步。与 ODN 相比, 腹腔镜取肾(LDN)使供肾者损伤小, 恢复快, 且供肾质量仍可得到保障。这一

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