

VI
² P<0.05
 2
 2.1
 73 91.3%
 13 15.7% 10 12.0%
 15 18.1% 4 cm 9
 10.8% 7 8.4%
 10 12.0%
 1 1.2% 40 48.2% VI

2.4
 3 3.6%
 II III IV V
 1 1.2% PTC

2.2 VI
 83 VI
 VI
 P>0.05 1

3
 3.1 PTC
 20
 2012
 PTC

1				%	²	P
10	3	76.9	5.1	<0.05		
30	40	42.9				
45	20	44.4	5.94	<0.05		
45	27	71.1				
24	36	40	5.85	<0.05		
10	3	76.9				
34	39	46.6	0.21	>0.05		
6	4	60				
13	2	86.7	10.85	<0.01		
27	41	39.7				
4	32	43.2	4.99	<0.05		
4	8	88.9				

PTC
 2009
 American Thyroid Association ATA
 <1 cm PTC
 [2] 2012
 4 cm
 + [6]
 42 +
 1~3
 PTC
 3.2 CLND
 CLND
 CLND
 CLND
 cN₀ PTC
 PTC
 PTC

2.3
 23 27.7%
 4.8% 1 1.2%
 D₃
 1

[7]
 CLND
 [8] VI

VI
 [9-10], cN₀ PTC
 , 50%~60%,
 [11-12]

VI
 [13-15]

VI
 CLND
 cN₀

cN₀ PTC
 PTC
 48.2%

VI
 VI
 VI

CLND

cN₀

3.3 CLND

CLND

TNM

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[11] , , , . cN₀

[16]

[17]



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 1. 目的 探讨选择性淋巴结清扫术 (SLND) 在乳头状甲状腺癌 (PTC) 治疗中的临床意义。
 2. 方法 回顾性分析 2010 年 1 月至 2016 年 12 月收治的 100 例 PTC 患者。根据是否行 SLND 分为 SLND 组 (n=50) 和未行 SLND 组 (n=50)。比较两组患者的临床病理特征、手术并发症、术后复发率及生存率。
 3. 结果 SLND 组患者术中出血量、术后引流管拔除时间均明显短于未行 SLND 组 (P<0.05)。两组患者术后复发率、生存率均无显著差异 (P>0.05)。
 4. 结论 SLND 在 PTC 治疗中具有微创、术后恢复快的优点, 且不影响患者的长期生存率, 可作为 PTC 治疗的一种选择。

关键词: 甲状腺癌; 淋巴结清扫术; 临床意义
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 通信作者: 王宇, 电子邮箱: wangyu@zjhu.edu.cn
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 作者单位: 浙江大学医学院附属第一医院, 浙江 杭州 310003

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