

隧道式重瞼成形術

俞世放 管宇峰

作者單位：(200072) 中國上海鐵路局中心醫院眼科

摘要 重瞼成形術，術式多種多樣，主要分為非切開法與切開法。從近期效果看，非切開法術後反應輕、恢復快，眼瞼的皮膚疤痕不明顯，但遠期效果不夠穩定，且不能對眶脂進行處理。而傳統切開法重瞼成形術適應範圍廣，而且效果持久、穩定。但術後反應較大，會在眼瞼皮膚上留下手術切痕。作者自1997年開始嘗試一種新的手術方式——隧道式重瞼成形術。通過86例，最長28個月，最短2個月的觀察，效果良好。

關鍵詞 隧道式 重瞼術

Tunnel doubled blepharoplasty *Shifang Yu, Yufeng Guan. Department of Ophthalmology, Centre Hospital of railway bureau, Shanghai 200072, China*

Abstract Doubled blepharoplasty, which has a various types, was mainly classified into the cutting open and non-cutting open. In a short term, the latter has less reaction, and quick recurrence, the scar is not evident in the eyelid. But in a long term, it is not stable and don't treat the adipose orbitae. While, the former has a broad adaptability and a stable and lasting effect. But its postoperative reaction is too strong, and can leave the scar in the eyelid. The author tried a new operation from 1997--tunnel doubled blepharoplasty 86 cases were observed, the follow up period was 2~28 months, and its effect was good.

Key words Tunnel Doubled blepharoplasty

表面麻醉在小切口非超聲乳化白內障摘除術中的應用

汪丹

作者單位：(400020) 中國重慶市江北區第一人民醫院眼科

摘要 目的 探討表面麻醉在小切口非超聲乳化白內障摘除術中應用的安全性和有效性。方法 將各類白內障患者共計158例(158眼)採用表面麻醉下經鞏膜隧道小切口白內障摘除，人工晶體植入術。結果 術中完全無痛，配合良好的150例，占95%；術中娩核時稍感疼痛8例，經追加表面麻醉藥後緩解；術後2天視力>0.3的146例，占92.4%；後囊破裂10例，占6%。結論 表面麻醉在小切口非超聲乳化白內障摘除人工晶體植入術中的應用是安全、有效的，但表面麻醉的應用仍有局限性，應根據手術醫生的手術經驗及病人的配合程度及病情選擇應用，以保證手術的最佳效果。

關鍵詞 表面麻醉 小切口 非超聲乳化 白內障摘除術

Application of surface anesthesia in non-phacoemulsification operation of cataract extraction with small incision *Dan Wang. Department of Ophthalmology, Jiangbei district First Hospital, Chongqing*

400020, China

Abstract Objective To explore the safety and validity of surface anesthesia in non-phacoemulsification operation of cataract extraction with small incision. **Methods**

Non-phacoemulsification operation of cataract extraction with small scleral tunnel incision and intraocular lens implantation were performed on 158 eyes (158 cases) for all kinds of cataract. **Results** 150 operations (95%) were carried out painlessly, 8 cases had a little got relieved after surface anesthesia. Two days later, 146 eyes (92.4%) had the sight of >0.3 and 10 cases (6%) had posterior capsule rupture. **Conclusion** Surface anesthesia is safe and efficient in non-phacoemulsification operation of cataract extraction with small incision and intraocular lens implantation. But there are still some limitations. In order to get the best clinical results, surface anesthesia should be performed according to the doctor's experience and the patient's condition

Key words Surface anesthesia Non-phacoemulsification Cataract extraction Small incision

影響 NAION 中心視力的因素及療效評價

王潤生 陳青山 雷曉琴 呂沛霖 王建洲

作者單位：(710004) 中國陝西西安市第四醫院暨西安市眼底病研究所

摘要 目的 探討非動脈炎性前部缺血性視神經病變 (nonarteritic anterior ischemic optic neuropathy, NAION) 影響中心視力的因素及治療效果，以利于療效評定及預後判斷。方法 240例 NAION 患者(160例接受住院治療)的臨床資料，從中心視力、水腫程度、缺血部位、視野、FFA 檢查等方面進行統計分析。結果 240例 NAION 患者中心視力的損害程度，在不同缺血部位、水腫程度之間有顯著的差異 ($P < 0.005$)。160例患者住院治療，視盤水腫消退時間最長為35天，最短11天，平均時間21.5天，中心視力提高者104例，穩定者52例，有效率為97.5%，視野改善者134例，有效率為83.8%，FFA 造影復查缺血改善者141例，有效率為88.1%。結論 影 NAION 中心視力的重要因素是缺血部位、水腫程度，積極針對性的治療對防止 NAION 致盲有重要意義。

關鍵詞 非動脈炎性前部缺血性視神經病變 中心視力 視野 FFA 治療效果

The cause and the effects of visual acuity on nonarteritic anterior ischemic optic neuropathy *Runsheng Wang, Qingshan Chen, Xiaojin Lei, et al. Department of ophthalmology, Xi'an fourth hospital, Xi'an 710004, China*

Abstract Objective To investigate the cause and the effects of visual acuity on nonarteritic anterior ischemic optic neuropathy (NAION) for accessing. **Methods** 240 cases of NAION were analyzed in visual acuity, optic disc ischemia,