

新思路。

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• 科研新闻速递 •

严重 G⁻ 菌脓毒症患者 CD4⁺ 淋巴细胞和 NK 细胞的早期变化

为了探讨严重脓毒症时淋巴细胞和自然杀伤细胞(NK)的早期改变以及其与表达于骨髓样细胞上的可溶性触发受体-1(sTREM-1)的关系,最近有研究者收集 49 例患者严重脓毒症发生前 12 h 内及 6 例健康志愿者的血液标本。其中 49 例患者均存在高度怀疑革兰阴性(G⁻)菌感染的证据。白细胞用单克隆抗体标记,并在流式细胞仪上检测,sTREM-1 采用酶联免疫吸附法(ELISA)检测。结果表明,脓毒症患者 CD3/CD4 比值明显低于对照组($P < 0.0001$),而 NK 细胞数量明显高于对照组($P = 0.011$)。患者的 CD4⁺、CD8⁺ 和 CD14⁺ 细胞平均值分别为 $(7.41 \pm 2.26)\%$ 、 $(7.69 \pm 3.42)\%$ 和 $(1.96 \pm 4.22)\%$ 。NK 细胞 $> 20\%$ 和 sTREM-1 > 180 g/L 的患者存活时间较长。CD4⁺ 细胞和 CD3/CD4 比值间呈负相关($r = -0.305$, $P = 0.049$),而血清 sTREM-1 和 NK 细胞百分比呈正相关($r = 0.395$, $P = 0.014$)。从健康志愿者血液中分离出来的 NK 细胞在内毒素的刺激下可释放 sTREM-1。因此,CD4 淋巴细胞减少和 NK 细胞增加是脓毒症的早期标志。NK 细胞 $> 20\%$ 对于患者存活率的增加是有利的,这可能与 sTREM-1 的增加有关。

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