Japan Society of Obstetrics and Gynecology

7-22 子宮筋腫が原因と思われる深部静脈血栓症に併発した肺塞栓症の2症例の検討

福島県立医大
添田　周，中尾真理子，渡辺尚文，西山　浩，山田秀和，栁田　薫，佐藤　章

[緒言] 近年，エコノミークラス症候群に代表される深部静脈血栓症（DVT），それより発生する肺塞栓症（PE）については産科，婦人科領域においても遭遇する可能性の高い生命予後不良な合併症である．特に婦人科領域においては悪性疾患においてその危険度が増すため，周術期管理において多大な注意が払われている．しかし，良性の子宮筋腫が原因と思われるDVT，PEの発生の報告は極めて少ない．今回我々は，子宮筋腫が原因と思われる深部静脈血栓症に併発した肺塞栓症の2症例を経験したので報告する．[症例1] 48歳，子宮筋腫の診断で手術目的に入院．手術前日，病棟で意識消失した．動脈血酸素分圧の著明な低下と，心エコー上右心負荷所見認めPEと診断した．左総長骨静脈に血栓形成を認めた．凝固系は正常でBMI23.7と肥満も認めず，子宮筋腫による血管の圧迫が血栓の原因と診断した．抗凝固療法及び下大静脈フィルター挿入後子宮全摘出術を施行した．[症例2] 43歳，呼吸苦・下肢の浮腫を主訴に内科受診した．動脈血酸素分圧の著明な低下と，右心負荷を認め，肺シンチグラフィーにて肺塞栓と診断した．左総長骨静脈に血栓形成を認め，骨盤CT上新生児頭大の腫大した子宮を認めた．BMI33.1と肥満認める以外はDVTのリスクファクターを認めず，子宮筋腫による血管の圧迫が原因と推測され，抗凝固療法及び下大静脈フィルター挿入後子宮全摘出術を施行した．いずれの2症例とも子宮摘出術後の経過は良好でDVTの再発も認めていない．[結語] 良性疾患である子宮筋腫が原因と考えられるDVTにおいて，抗凝固療法，下大静脈フィルター挿入などの処置を行い子宮全摘出術をすることが有効な治療法であった．

7-23 Qualitative real-time PCR using Taqman and SYBR Green for analysis of cell culture systems for. KIAA1434 expression

Christine Lindner*, Eric Steiner*, Marcus Schmidt*, Jürgen Brieger**, Jan Hengstler***, Jens Sagemüller*, Heinz Kölbl*
*Dept. of Obstetrics and Gynaecology, **Dept. of otorhinolaryngology ***Institute of Toxicology Johannes Gutenberg University Mainz, Germany

Objective: KIA1434 was identified in endometrial cancer tissue using Differential Display technique and Taqman-Assay. The aim of this study was, to evaluate the expression of KIA1434 in different cell culture systems. **Methods:** Total mRNA of respective confluent primary cell cultures systems was isolated. Reverse transcribed mRNA from the differential expressed mRNA sample representing KIAA1434, concerning to NCBI blast-to-sequence analysis, was measured by real-time polymerase chain reaction (Taqman PCR). **Results**: Differential expressed mRNA from endometrial cancer tissue, representing KIAA1434, was measured in all cell culture systems, but with different intensity. The highest expression was detected in Deuser PT and NIH3t3 cell culture systems. **Conclusion:** The expression of KIA1434 was detectible in all used cell culture systems. Our results indicates that there is a high production of KIAA1434 in Deuser PT and NIH3t3 cell culture systems. Therefore KIAA1434 is a hypothetical protein, these two cell cultures might be useful for further investigations on KIAA1434.

7-24 Direct Effects of GnRH Antagonist (Cetrorelix) on Proliferative Activity, Apoptosis and EGF Expression in Cultured Human Uterine Leiomyoma Cells

Department of Obstetrics and Gynecology, Kobe University Graduate School of Medicine
Wei Chen, Shigeki Yoshida, Hiroya Matsuo, Noriyuki Ohara, Mayumi Morizane, Takeshi Maruo

[Objective] To elucidate direct effects of GnRH antagonist on uterine leiomyoma growth, proliferative activity, and apoptosis in cultured leiomyoma cells treated with GnRH antagonist were examined in vitro. [Methods] Isolated leiomyoma cells were cultured in serum-free condition for 6 days in the absence or presence of GnRH antagonists (Cetrorelix) (10^{-8}mol/l to 10^{-5} mol/l). Effects of Cetrorelix on the number of viable cells, PCNA expression, poly-ADP ribose polymerase (PARP) protein expression, TUNEL-positive rate, and EGF mRNA expression were examined by viable cell counting using tripan-blue, immunostaining, Western blot, TUNEL, and semi-quantitative RT-PCR, respectively. [Results] Treatment with Cetrorelix (10^{-7} to 10^{-5} mol/l) resulted in a decrease in the number of viable cells, PCNA-positive rate and EGF mRNA expression in cultured leiomyoma cells as compared with control cultures. Treatment with 10^{-5} mol/l Cetrorelix remarkably increased PARP expression after 24-h associated with increased TUNEL-positive rate, significantly decreased PCNA expression after 2-day, and then suppressed EGF mRNA expression in cultured leiomyoma cells after 4-day. [Conclusion] GnRH antagonist may directly inhibit leiomyoma cell growth by down-regulating cell proliferation and up-regulating apoptosis in association with decrease in EGF mRNA expression in those cells.

NII-Electronic Library Service