

総会記事

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誌上発表：1～22

1.

Efficacy of olfactory and pareidolia tests compared with that of indicative biomarkers in diagnosis of dementia with Lewy bodies

(高齢診療科)

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Although olfactory decline and visual hallucinations are useful in distinguishing dementia with Lewy bodies (DLB) from Alzheimer's disease (AD) in a clinical setting, neither is easy to evaluate quantitatively. The pareidolia test is used for objective quantification and evaluation of visual hallucinations, the Odor Stick Identification Test for the Japanese (OSIT-J[®]) is used to objectively quantify olfactory decline. The present study investigated the efficacy of these olfactory and pareidolia tests in differentiating AD from DLB. Their usefulness was then compared with that of the indicative biomarkers in neuroimaging for a clinical diagnosis of DLB. A total of 24 probable DLB and 22 probable AD patients were enrolled. All underwent 4 diagnostic procedures: uptake of dopamine transporter in single photon emission computed tomography (DaT-SPECT) and meta-iodobenzylguanidine (MIBG) in myocardial scintigraphy, the pareidolia test, and OSIT-J[®]. The sensitivity, specificity, and accuracy of these methods in differentiating DLB from AD were compared. Sensitivity and specificity in differentiating DLB from

AD were 86% and 100% by the heart-to-mediastinum ratio of MIBG uptake; 82% and 96% by the specific binding ratio on DaT-SPECT; 77% and 67% by the combination of OSIT-J[®] and pareidolia test scores; 73% and 62% by the pareidolia test scores; and 77% and 58% by the OSIT-J[®] scores, respectively. The present results suggest that the pareidolia and OSIT-J[®] tests should be considered before resorting to nuclear neuroimaging in the diagnosis of DLB.

2.

小脳橋角部類上皮腫に対する手術アプローチの重要性～50症例の検討～

(脳神経外科)

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【目的】 小脳橋角部類上皮腫の手術において、再発予防の観点から十分な被膜切除を重視している。被膜切除と神経機能温存を両立する為には手術アプローチの選択が重要と考えている。手術アプローチ・摘出率・術後神経症状の改善・神経機能温存率・再発率について後方視的に検証し、当科の手術成績を報告する。

【対象・方法】 対象は1999年から2018年に手術を行った小脳橋角部類上皮腫50例で、平均年齢は38歳で、男性19例・女性31例であった。手術アプローチはcombined transpetrosal approach (CTPA) 26例・lateral suboccipital approach (LSO) 17例・anterior transpetrosal approach (ATP)+LSO 4例・ATP 3例で