

## 脑白质疏松症对急性缺血性卒中患者影响的 Meta 分析

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**【摘要】** 目的 评价脑白质疏松症 (LA) 对急性缺血性卒中 (AIS) 患者的影响。方法 计算机检索 PubMed、EMBase、Web of Science (WOS)、The Cochrane Library、万方数据知识服务平台、中国生物医学文献数据库 (CBM) 和中国知网 (CNKI) 等数据库, 筛选关于 LA 对 AIS 患者预后影响的病例对照研究, 检索时间为建库至 2017-11-30; 采用 RevMan 5.3 软件进行 Meta 分析。结果 共纳入 29 篇文献, 其中英文文献 28 篇, 中文文献 1 篇, 包括 15 883 例患者。Meta 分析结果显示, 有 LA 组患者改良 Rankin 量表 (mRS) 评分高于无 LA 组 [ $MD=1.71, 95\%CI (1.29, 2.27), P=0.000 2$ ]; 有 LA 组患者 Barthel 指数 (BI) 评分低于无 LA 组 [ $MD=2.51, 95\%CI (1.62, 3.88), P<0.000 1$ ]; 有 LA 组患者颅内出血转化发生率高于无 LA 组 [ $OR=1.34, 95\%CI (1.15, 1.58), P=0.000 3$ ]; 有 LA 组患者症状性颅内出血发生率高于无 LA 组 [ $OR=1.69, 95\%CI (1.31, 2.19), P<0.000 1$ ]; 两组患者病死率比较, 差异无统计学意义 [ $OR=1.11, 95\%CI (0.66, 1.85), P=0.69$ ]; 有 LA 组患者卒中复发率高于无 LA 组 [ $OR=1.55, 95\%CI (1.26, 1.91), P<0.000 1$ ]; 两组患者血管再通率比较, 差异无统计学意义 [ $OR=1.04, 95\%CI (0.74, 1.45), P=0.83$ ]。结论 现有证据表明, AIS 合并 LA 患者神经功能损伤较重, 日常生活活动能力较差, 颅内出血转化发生率、症状性颅内出血发生率、卒中复发率较高。

**【关键词】** 卒中; 脑白质疏松症; 预后; Meta 分析

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**Impact of Leukoaraiosis on Prognosis in Patients with Acute Ischemic Stroke: a Meta-analysis** FU Min-jun<sup>1</sup>, HU Lang<sup>1</sup>, ZHAO Ya-ya<sup>1</sup>, JIANG Zhen-xiu<sup>2</sup>, LIU Ning<sup>2</sup>

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**【Abstract】 Objective** To evaluate the impact of leukoaraiosis in patients with acute ischemic stroke. **Methods** We searched PubMed, EMBase, Web of Science (WOS), The Cochrane Library, WanFang Data, CBM and CNKI to collect case-control studies about impact of leukoaraiosis on prognosis in patients with acute ischemic stroke from creating database to 2017-11-30, and RevMan 5.3 software was used to carry out the Meta-analysis. **Results** A total of 29 literatures were involved at last, including 28 English literatures and 1 Chinese literature, and 15 883 patients were enrolled. Meta-analysis results showed that, mRS score [ $MD=1.71, 95\%CI (1.29, 2.27), P=0.000 2$ ], incidence of intracranial hemorrhagic transformation [ $OR=1.34, 95\%CI (1.15, 1.58), P=0.000 3$ ], symptomatic intracranial hemorrhage [ $OR=1.69, 95\%CI (1.31, 2.19), P<0.000 1$ ] and recurrence rate [ $OR=1.55, 95\%CI (1.26, 1.91), P<0.000 1$ ] in patients with leukoaraiosis was statistically significantly higher than that in patients without leukoaraiosis, respectively, Barthel index in patients with leukoaraiosis was statistically significantly lower than that in patients without leukoaraiosis [ $MD=2.51, 95\%CI (1.62, 3.88), P<0.000 1$ ], while no statistically significant differences of fatality rate [ $OR=1.11, 95\%CI (0.66, 1.85), P=0.69$ ] or vascular recanalization rate [ $OR=1.04, 95\%CI (0.74, 1.45), P=0.83$ ] was found in patients with leukoaraiosis or not. **Conclusion** Based on existing literature evidence, leukoaraiosis may result in relatively severe neurological function deficit, poor activities of daily living, high risk of intracranial hemorrhagic transformation, symptomatic intracranial hemorrhage and recurrence in patients with acute ischemic stroke.

**【Key words】** Stroke; Leukoaraiosis; Prognosis; Meta-analysis

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