

下的地区肝癌死亡率为36.3/10万,如那桐公社基本不食玉米,全部以大米为主粮,肝癌死亡率仍高达40.6/10万。这说明除黄曲霉毒素外,可能还存在普遍导致肝癌高发的因素。

摘 要

调查肝癌高发区(隆安)8,799人和低发区26,242人,高发区HBsAg阳性率显著高于低发区,其中以0~9岁组为最高。高发区以1岁组,低发区以5岁组为HBsAg携带的年龄高峰,高发区在生命的早期即已受到HBV的高度感染。

对隆安携带者、非携带者1,042人进行了2~4年前瞻性观察,发现男性儿童HBsAg阴转率低,阳转率高。认为早期的HBsAg携带与以后的慢性肝病和肝癌高发有关。由配对和非配对追踪观察,发现HBsAg携带者发生肝癌的相对危险性较非携带者高4.29和6.7倍。认为乙型肝炎感染可能是导致肝癌的主要病因,而玉米黄曲霉毒素的污染和饮水污染不是肝癌发生的主要因素。

ABSTRACT

To determine the prevalence of HBsAg among residents in areas with high or low incidence of primary hepatocarcinoma, samples of serum were

collected from 8,799 and 26,242 persons respectively. The HBsAg prevalence was found to be much higher in all age groups, especially in the group of 0~9 years of age in the area with high incidence of primary thepatocarcinoma (Longan County) than in that area with low incidence. The highest prevalence occurred in one-year-old children in Longan County and in the group of 5 year olds in an area with low incidence. The present study showed that children in Longan were at high risk from a very early age. The prospective study data among 1,042 carriers and non-carriers in the period of 2~4 years indicated that the HBsAg acquisition rate was significantly higher and the rate of HBsAg-becoming-negative was much lower in young age groups (below 10 years), especially males, than in older age groups. This suggested that a high incidence of primary hepatocarcinoma may be largely related to the early acquisition of HBV infection. Statistical analysis showed that the incidence of primary hepatocarcinoma in HBsAg carriers was much higher than in matched and unmatched controls. It was found that the relative risk for primary hepatocarcinoma in HBsAg carriers was 4.29 and 6.7 times higher than that in non-carriers. HBV infection was considered as a major etiological factor in the development of primary hepatocarcinoma. It was also found that corn contaminated with aflatoxin and contaminated water were not main factors for the development of primary hepatocarcinoma.

(参加工作的还有南宁地区,桂林地区等18个县、市、地区防疫站)

山村蛲虫病流行情况调查

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蛲虫病流行较广泛,国内各地报告儿童感染率在39~50%;某幼托单位高达87.86%。我们于1980年对福建省尤溪县的某山村作了蛲虫调查,结果如下:

一、感染率:清晨用棉拭擦受检者肛门,检查虫卵,连检三次均无虫卵者为阴性。全村259人,计查244人。年龄1~81岁。244人中,有163人阳性,感染率为66.8%。

二、年龄组与阳性率:受检者244人中,1~5岁受检30人,阳性19人,阳性率为63.33%;6~15岁受检79人,阳性67人,84.81%;16~25岁40人,阳性21人,52.50%;26~45岁54人,阳性37人,68.52%;46~81岁41人,阳性19人,46.34%。学龄组与成人组 $u=6.59$, $p<0.01$;26~45岁组与16~25岁组 $u=2.31$, $P<0.05$;26~45年组与46~81

岁组 $u=2.71$, $P<0.05$ 。

性别与感染率的关系,男女两组无显著性差别。

三、阳性儿童的家庭感染:在30户阳性儿童家中,儿童与成人均感染的为27户(90%);儿童阳性而成人阴性的仅3户(10%)。

四、阳性儿童污染环境的调查:选择易于被阳性儿童污染的草席、饭勺柄、患儿手指、指甲、内裤裆,于清晨以棉拭取样各30份(只有指甲将藏泥部分剪下浸泡、沉淀取沉渣镜检),结果是:草席阳性30份(100%);饭勺柄阳性18份(60%);指甲阳性30份(100%);手指阳性24份(80%);内裤裆阳性27份(90%)。

由此可见蛲虫病患儿污染环境是严重的,因此极难阻断感染、传播。今后防治本病,应予注意阻断感染、传播的问题。