

见细胞浆内发荧光,阳性率为81.3%,比病毒分离阳性率(50%)高。在有荧光显微镜的单位,只要有试剂供应,在AHC流行初期仅有少数病人时,采用此法,可快速作出病原诊断,对于控制本病的流行有重要意义。国外文献已报道采用这种方法作E70型引起的AHC的快速诊断和疫情监测[5,6],但还未见用于CA 24v引起的AHC的诊断。免疫荧光快速诊断法,在城市可以应用,对于无条件开展荧光试验的边远地区可作结膜细胞涂片,丙酮固定后寄送到有条件的实验室作荧光试验。

**Study on Rapid Diagnosis of Acute Hemorrhagic Conjunctivitis Caused by Coxsackievirus A24 Variant** Mu Guifan, et al., Department of Microbiology and Immunology, Faculty of Basic Medicine, Peking Union Medical College

An pandemic of acute hemorrhagic conjunctivitis(AHC) caused by Coxsackievirus A 24 variant(CA 24v) occurred in China in 1988. Rapid diagnosis of AHC was investigated by immunofluorescence technique. The bacteria-free conjunctival swab samples were inoculated into HeLa cell monolayer. The Virus-specific antigens in infected cells were examined by indirect immunofluorescence test.

Of 35 samples, 17 was identified as CA 24v. The results of isolation and typing could be obtained within 5 days. Further, CA 24v antigen in infected conjunctival cells were examined by indirect immunofluorescence test. Of 48 smears of conjunctival cells, 39 was positive. Positive rate were 81.3%.

**Key words** Acute Hemorrhagic Conjunctivitis(AHC) Coxsackievirus A24 Variant

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## 121例白血病患者流行病学分析

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我院自1982年1月至1987年12月六年间共收治白血病患者121例。其中,108例来自住院病人,13例来自门诊患者。所有病例均按1986年全国天津分型讨论会制定的标准进行诊断和分型。现将结果报告如下:

①性别分布:男性65例占53.72%,女性56例占46.28%,男女比为1.16:1,无显著差异( $P>0.05$ )。②年龄分布:在11个月至66岁间,发病高峰年龄在20~29、10~19和30~39岁组,69.4%的病例 $\leq 35$ 岁。60岁以上组发病率最低。③型别构成:在121例白血病患者中,急性白血病106例占87.60%,慢性白血病13例占10.74%,此外还有2例淋巴肉瘤细

胞白血病占1.66%。急性白血病中以急性非淋巴细胞白血病占首位(78例),急、慢性之比为8.15:1( $P<0.01$ )。④季节分布:按月计算,5月和8月最高,各17例,6月最低,只2例。按季度计算,三季度最高共39例,一季度最低共25例。⑤血型分布:在有记录的68例中,A型24例,B型21例,O型26例,AB型4例。⑥职业分布:工人26例,农民64例,幼童及学生24例,干部5例,教师2例。⑦危险因素:在有记载的病历中,喜食腌制品的45例,接触农药史的38例,有吸烟史的22例,接触各种肉眼可见的粉尘的18例,其它因记载不详未列入。