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诺和锐 30 与诺和灵 30R 治疗老年 2 型糖尿病的临床观察

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摘要 目的: 观察诺和锐 30 和诺和灵 30R 治疗老年 2 型糖尿病的临床效果。方法: 将 2009 年 1 月—2011 年 1 月期间住院的年龄 ≥ 60 岁的 2 型糖尿病患者 120 例随机分为诺和锐 30 组(60 例)、诺和灵 30R 组(60 例), 均为每日早晚 2 次皮下注射。治疗 12 周, 观察两组血糖控制等临床效果, 并分析比较。结果: 两组的 7 点血糖、糖化血红蛋白(HbA_{1c})较治疗前明显下降, 差异有统计学意义($P < 0.05$)。治疗后诺和锐 30 组早餐后 2 h、晚餐后 2 h、睡前 22:00 血糖较诺和灵 30R 组低, 差异有统计学意义($P < 0.05$); 两组空腹、午餐前、晚餐前血糖、午餐后 2 h 及 HbA_{1c} 变化差异无统计学意义($P > 0.05$)。诺和锐 30 组低血糖发生率低于诺和灵 30R 组($P < 0.05$)。诺和锐 30 组日胰岛素用量少于诺和灵 30R 组($P < 0.05$)。两组患者体重的增加值差异无统计学意义($P > 0.05$)。结论: 治疗后诺和锐 30 组的早、晚餐后及睡前 22:00 血糖有明显降低, 低血糖发生率较低, 更适宜以餐后血糖高为主的老年 2 型糖尿病患者。

关键词 诺和锐 30; 诺和灵 30R; 老年; 2 型糖尿病

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Clinical study of BIAsp 30 and BHI 30 in elderly patients with type 2 diabetes

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Abstract Objective: To observe the curative effect of novorapid 30 (BIAsp 30) and novolin 30 (BHI 30) in elderly patients with type 2 diabetes. Methods: Hospitalized elderly patients from January 2009 to January 2011 were randomly divided into the BIAsp 30 group (60 patients) and the BHI 30 group (60 patients). The two groups were treated with BIAsp 30 or BHI 30 twice daily in morning and evening. Through 12 weeks' treatment, plasma glucose control and the other incidence were compared in two groups. Results: The seven-times blood glucose and glycosylated hemoglobin (HbA_{1c}) decreased distinctly in two groups after treatment ($P < 0.05$). In the BIAsp 30 group, 2 hours postprandial glucose levels after breakfast and supper, 22:00 level were significantly decreased ($P < 0.05$). The other four times glucose levels and HbA_{1c} were not different significantly between the two treatments ($P > 0.05$). The rate of hypoglycaemia in the BIAsp 30 group was much lower than that in the BHI 30 group ($P < 0.05$). The quantity of daily insulin in the BIAsp 30 group was significantly less than that in the BHI 30 group ($P < 0.05$). The body weight of the two groups had no distinct difference ($P > 0.05$). Conclusion: After treatment, in the BIAsp 30 group, 2 hours postprandial glucose levels after breakfast and supper, 22:00 level were significantly decreased. The rate of hypoglycaemia in the BIAsp 30 group was much lower than that in the BHI 30 group. BIAsp 30 is more suitable in elderly patients with type 2 diabetes, especially in patients with high postprandial blood glucose.

Key words BIAsp 30; BHI 30; elderly; type 2 diabetes

糖尿病血糖的控制目标要求空腹和餐后血糖均达标。研究发现餐后血糖在糖尿病微血管和大血管并发症发生发展中起至关重要的作用^[1-3], 大量研究表明餐后高血糖成为糖尿病并发症的独立危险因素^[4]。因此应重视糖尿病餐后血糖的控制。本研究应

用随机临床对照试验, 旨在比较诺和锐 30 和诺和灵 30R 治疗 2 型糖尿病的临床效果。

1 资料与方法

1.1 一般资料

选择 2009 年 1 月—2011 年 1 月收治的 2 型糖