神经外科麻醉手册

Handbook of Neuroanesthesia

原 著 Philippa Newfield James E. Cottrell

主 译 王保国 韩如泉





三人民卫生出版社

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第4版

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前 言

著名的神经外科麻醉医生 Harvey Cushing 为麻醉学作出了众多的贡献,建立了神经外科医生与神经外科麻醉医生之间的密切合作关系,并使我们受益至今。1894年,当时是哈佛医学院一名普通医学生的 Cushing 和他的朋友 E. Amory Codman用病房的体温-脉搏-呼吸单记录患者手术过程中的脉搏、体温以及呼吸,从而诞生了世界上第一张麻醉单。曾有这样一个未经证实的故事,Cushing 和 Codman 还就麻醉的实施水平而进行竞赛,赌注是一顿晚餐,根据患者的术后状态来评定胜负。完美的麻醉状态是患者术后充分清醒、回到病房后能够服从指令并且无恶心、呕吐。1898年,Cushing 在肩、臀部和疝的手术中应用可卡因作局部麻醉剂,用气压装置测量血压,并经意大利的 Scipione Riva-Rocci 于 1902年返回波士顿时得到发展。他所进行的神经外科手术几乎没有严重的术后感染病例,这主要归因于他习惯先在伤口周围应用局部麻醉,用敷料覆盖伤口并每天亲自更换。

在神经外科麻醉医生、神经外科医生、神经监护医生、神经病理医生、神经放射以及神经介入医生的通力合作下,诞生了这样一本可以为神经外科麻醉以及术后加强监护提供简明纲要性指导的第四版《神经外科麻醉手册》。该手册的内容针对清醒开颅、神经介入诊断和治疗、急慢性疼痛的治疗、监测形式、急性颅脑损伤和蛛网膜下腔出血以及其他方面的进展均作了相应的更新。每章后均列有指导进一步学习的参考文献。

正因为广大致力于为神经外科手术患者提供更好的医疗服务的医生的聪明才智、创造性、充沛的精力以及坚定的决心,才有过去数年中神经外科麻醉以及神经监护学的极大进展。我们真诚地感谢那些通过教学、研究以及临床工作为神经外科麻醉

的发展做出贡献的麻醉医生,更要对为本书的出版做出慷慨奉献的人们致以特别的谢意。

我们还要对负责第3版和第4版的总体规划、撰写、编辑以及出版全过程的 Anne Minaidis 女士致以特别诚挚的谢意。在手册的出版过程中,她在编者、作者和出版者之间的联络、沟通以及协调中发挥着不可替代的作用。我们感谢她在第四版出版的全过程中表现出的组织能力、幽默、高效、机智以及优雅。

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总

论



脑和脊髓的生理与代谢

Ira S. Kass

I. 脑和脊髓的生理学

为便于理解麻醉和手术对神经系统的影响,首先需要 了解细胞神经生理学以及在器官水平的神经生理功能。本 节简要介绍神经生理学的基本原理。

A. 细胞神经生理学

细胞膜电位的变化是神经元兴奋性的基础,达到 阈电位时可触发一次动作电位。动作电位传至轴突 末梢并释放神经递质,进而影响下一个神经元的膜电 位水平。

- 1. 膜电位是由细胞膜内外离子的浓度差形成的。每个 离子的平衡电位和细胞膜对它的电导(通透性)决定 了该离子对膜电位的影响。
 - a. 如果已知细胞内离子(如钾离子, K_i)浓度和细胞外离子浓度(K_o),则该离子的平衡电位(E)可用 Nernst 公式计算。如果一个离子仅带一个正电荷,那么在 37° C时,这个公式可以简化为 $E_K = -61\log[K_i/K_o]$,由此可以推算出通常情况下神经系统中钾离子的平衡电位大约是-90mV, 钠离子大约是+45mV。
 - (1)神经细胞膜对不同离子的通透性决定了它的 膜电位,而细胞膜对每个离子的通透性(g)也 因进人不同的细胞膜和跨膜时间不同而异。 神经元在某一时间点的膜电位水平可以用以 下公式来计算:

 $E_{\rm m} = [g_{\rm K}(E_{\rm K}) + g_{\rm Ni}(E_{\rm Ni}) + g_{\rm x}(E_{\rm x})]/(g_{\rm K} + g_{\rm Ni} + g_{\rm x})$ $g_{\rm x}$ 是代表 x 离子的通透性, $E_{\rm x}$ 代表该离子的等电位值。神经元的静息膜电位水平大约是 $-70 {\rm mV}$,它更接近于 $E_{\rm k}(-90 {\rm mV})$ 而不是 $E_{\rm Ni}$ (+45 mV),这是因为神经元在静息情况下 $g_{\rm K}$ 远元大于 $g_{\rm Ni}$ 。

- (2)浓度相关和电场相关的驱动力决定了特定 离子的移动方向是进入细胞内还是移出细 胞外。这就是这个离子的一个电化学梯度 平衡。
- 2. 在神经元细胞膜上,由于神经元兴奋,膜电位去极 化超过一定的阈值后产生动作电位。在动作电位 产生期间,g_{Na}先是快速增加,随后恢复到基础水 平,同时钾离子 g_K 缓慢增加,这种通透性的改变 导致短时快速去极化和复极化,有时在动作电位 后还会发生超极化(图 1-1)。
 - a. Na 离子通透性的改变,是由于细胞膜上选择性通过 Na 离子的蛋白通道的开放造成的,这个通道有一个激活门和一个失活门,两个门均需处在开放状态 Na 离子才可通过。这个通道的快速开放及关闭也就导致了动作电位的短暂性。
 - b. 在静息状态下,钾离子通道的开放较钠离子多。 动作电位时,钠通道大量开放, g_{Na} 大于 g_{K} ,从 而使神经元去极化,膜去极化又会引起 K 通道 的开放,使 $g_{K} > g_{Na}$ 而产生复极。在动作电位后,当钠通道失活时,增加的 g_{K} 会造成静息水平以下的超极化,这就是所谓的"后超极化",这 在神经元上较为常见。