

# 经导管局部灌注紫杉醇模拟药物涂层球囊预防 小型猪髂总静脉狭窄的实验研究

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**【摘要】** 目的 建立小型猪髂总静脉狭窄模型。观察模拟药物涂层球囊(drug-coated balloon, DCB)对髂总静脉狭窄段的影响及安全性评估。**方法** 取20头幼龄、健康、雄性小型猪实施静脉全身麻醉后,以过大球囊损伤小型猪髂总静脉建立动物模型。将建模成功的小型猪随机分为实验组和对照组。实验组以双球囊封堵灌注紫杉醇处理狭窄段静脉,对照组不进行此操作。术前及术后2周抽取静脉血,术前及术后2月静脉造影及观察狭窄段静脉病理切片。比较2组小型猪肝肾功能指标、髂总静脉管腔内径及管壁组织学改变情况。**结果** 17头小型猪存活至实验终点。实验组( $n=9$ )与对照组( $n=8$ )术后2周谷丙转氨酶(ALT)、谷草转氨酶(AST)、肌酐(Cr)及血尿素氮(BUN)相比,差异无显著性( $P>0.05$ );实验组[( $3.74 \pm 1.24$ ) mm]与对照组[( $2.25 \pm 1.41$ ) mm]术后2月管腔内径对比,差别有显著性( $P<0.05$ );镜下,实验组与对照组处理段髂总静脉内膜、中膜均增厚,且对照组增厚更明显。**结论** 过大球囊扩张小型猪髂总静脉,制备小型猪髂总静脉狭窄模型可行;经导管局部灌注紫杉醇对小型猪肝肾功能影响不大;模拟DCB可减轻小型猪髂总静脉狭窄程度。

**【关键词】** 小型猪;动物模型;髂总静脉狭窄;紫杉醇;药物涂层球囊

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## Experimental study on prevention of common iliac vein stenosis in miniature pigs by regional perfusion of paclitaxel to simulate drug-coated balloons

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**【Abstract】 Objective** To establish the common iliac vein stenosis model in miniature pigs. Next, to observe the influence and evaluate the safety of simulated drug-coated balloons (DCB) on the stenosis segment of the common iliac vein. **Methods** Twenty young and healthy male miniature pigs were selected for intravenous general anesthesia. Under anesthesia, the animal model was established by oversized balloon dilatation. After the animal model was successfully established, the miniature pigs were randomly divided into an experimental group and control group. Stenosis segment veins

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in miniature pigs of the experimental group were occluded by two balloons and perfused with paclitaxel. These steps were not performed in miniature pigs from the control group. Venous blood specimens were taken before and two weeks after operation. Venography was performed and pathological sections of stenotic segment veins observed before and two months after the operation. Hepatorenal function index, diameter of the common iliac vein, and histological changes of the venous wall were compared between both groups. **Results** Seventeen miniature pigs survived to the end of the experiment. Two weeks after the operation, there were no significant differences ( $P > 0.05$ ) between the experimental group ( $n = 9$ ) and control group ( $n = 8$ ) regarding alanine aminotransferase, aspartate aminotransferase, creatine, and blood urea nitrogen values. However, two months after the operation, lumen diameter was significantly different ( $P < 0.05$ ) between the experimental group [ $(3.74 \pm 1.24)$  mm] and control group [ $(2.25 \pm 1.41)$  mm]. Compared with the untreated contralateral common iliac vein, the intima and media of the target vein were thicker in both the experimental group and control group. Indeed, this was more obvious in the control group than experimental group. **Conclusions** The common iliac vein stenosis model can be established in miniature pigs by oversized balloon dilatation. Local perfusion with paclitaxel has little effect on hepatorenal function of miniature pigs. Using this approach, simulated DCB can reduce the degree of common iliac vein stenosis in miniature pigs.

**【Key words】** miniature pigs; animal model; common iliac vein stenosis; paclitaxel; drug-coated balloon, DCB

药物涂层球囊 (drug-coated balloon, DCB) 最早用于治疗冠状动脉狭窄性病变<sup>[1]</sup>, 此后逐步向外周动脉狭窄性病变的治疗中推广<sup>[2]</sup>, 国外近期有将 DCB 应用于肺静脉狭窄<sup>[3]</sup> 及中心静脉狭窄<sup>[4]</sup> 治疗的报道, 但将 DCB 用于外周静脉狭窄性病变治疗的动物实验及临床研究罕见。参阅相关文献<sup>[5-9]</sup>, 本研究采用“双球囊封堵注药”的方法模拟 DCB 的作用, 并通过动物实验探讨 DCB 对于外周静脉狭窄性病变的治疗价值, 在目前具有一定的创新性和现实意义。

## 1 材料和方法

### 1.1 实验动物

取 6 ~ 8 月龄、体重 16 ~ 20 kg 的雄性普通级实验用巴马小型猪 20 头, 随机分入实验组 ( $n = 10$ ) 和对照组 ( $n = 10$ )。实验前两组均禁食 12 h, 禁饮 4 h。实验动物由上海市浦东新区老港镇华新特种养殖场实验猪繁育与实验研究基地提供 [SCXK (沪) 2012-0013]。实验用巴马小型猪饲养于普通级半开放式猪舍 [SYXK (苏) 2016-0006]。本实验经南京医科大学实验动物伦理委员会批准, 伦理审批编号 [201607-029]。本实验全过程中, 充分尊重“动物福利”, 以动物实验的“3R 原则”为指导, 最大限度地给予实验动物人道主义关怀。

### 1.2 主要试剂与仪器

氯胺酮、戊乙奎醚、丙泊酚、碘佛醇、碘普罗胺、紫杉醇注射液、注射用头孢拉定等。医用血管造影 X 射线机: Artis Zee, Siemens 公司; 血管鞘组、超滑导丝、交换导丝、血管内造影导管, Terumo 公司; 球

囊扩张导管: Cordis Powerflex™ P3 (6 mm、8 mm), Johnson & Johnson 公司; 压力泵: Encore™ 26 Inflator, Boston Scientific 公司; 徕卡切片及组织包埋系统; Gudien (固迪安) 大动物尸体解剖台。

### 1.3 实验方法

#### 1.3.1 麻醉和建模

氯胺酮 8 mg/kg + 戊乙奎醚 0.02 mg/kg 颈后肌内注射, 同时给予流量 5 L/min 面罩吸氧, 并经耳缘静脉持续泵入氯胺酮 5 mg/(kg·h) + 丙泊酚 5 mg/(kg·h) 维持麻醉。麻醉满意后选择 1.3:1 的过大气球囊<sup>[10]</sup> 扩张拟处理段髂总静脉, 造成静脉内、中膜机械性损伤。

#### 1.3.2 模拟药物涂层球囊

实验组小型猪, 撤出建模用球囊导管后, 经股静脉鞘在导丝引导下置入一枚球囊导管 (球囊 1), 使球囊 1 头端位于之前处理段静脉远心端。之后, 行经皮颈静脉穿刺或颈静脉切开穿刺 (经皮穿刺困难时), 置入 5F 血管鞘。经导丝引导, 置入另一枚球囊导管 (球囊 2), 球囊 2 头端位于处理段静脉近心端。远心端及近心端球囊直径选择与该处所测量静脉内径相等或略大 (1:1 ~ 1.1:1), 该两处球囊起封堵静脉血流, 延长紫杉醇与处理段血管壁作用时间的作用。压力泵分别充盈球囊 1 及球囊 2, 并经球囊 1 导管腔在透视下缓慢推注紫杉醇与碘普罗胺的混合溶液, 紫杉醇的浓度约为 4 mg/mL, 推注持续时间为 120 s。模式图及 X 线造影图像, 见图 1、图 2。推注结束后, 依次排空并撤出球囊 1 及球囊 2, 并拔出股静脉及颈静脉鞘管。对照组不行以上操作。

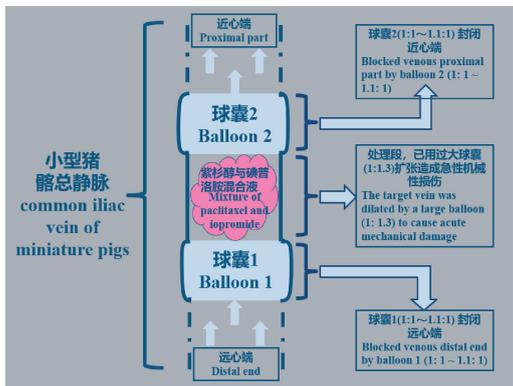


图 1 经导管向小型猪髂总静脉局部灌注紫杉醇模拟 DCB 模式图

Figure 1 Pattern diagrams of simulated drug-coated balloons with local perfusion of paclitaxel into the common iliac vein of miniature pigs



图 2 经导管向小型猪髂总静脉局部灌注紫杉醇模拟 DCB 静脉造影图像

Figure 2 Venography image of simulated drug-coated balloons with local perfusion of paclitaxel into the common iliac vein of miniature pigs

### 1.3.3 小型猪术后管理

小型猪麻醉复苏后,送回动物实验中心,两组均给予常规饲料喂养,同时予 10 mg/kg 剂量的头孢拉定注射液行臀大肌注射,连用 3 d。每日喂食两次,日投喂量为体重的 2%,清洁水饮用无限制。实验组和对照组小型猪术前、术后 2 周抽取静脉血标本(抽血前禁食 12 h)评估肝肾功能变化;术前及术后 2 月行髂总静脉 X 线造影检查,观察髂总静脉管腔狭窄情况并测量其内径;术后 2 月造影检查后,空气栓塞处死小型猪,解剖分离髂总静脉标本,HE 染色后,镜下观察处理段髂总静脉管壁病理学改变。

### 1.4 统计学方法

用 IBM SPSS Statistics 20 软件统计分析数据,计量资料用平均数 ± 标准差 ( $\bar{x} \pm s$ ) 表示,组间均数

比较采用方差分析。每组手术前后比较采用配对样本  $t$  检验,组间比较采用两独立样本  $t$  检验。 $P < 0.05$  为差异有显著性。

## 2 结果

### 2.1 小型猪一般情况

20 头小型猪中,1 头麻醉过程中死亡,1 头建模操作过程中死亡,1 头死于术后饲养过程中,其余 17 头均存活至实验终点。实验组 ( $n = 9$ ) 对比对照组 ( $n = 8$ ),体重 [ $(17.7 \pm 1.17)$  kg vs.  $(17.4 \pm 1.40)$  kg,  $P = 0.631$ ]、月龄 [ $(7.16 \pm 0.40)$  月 vs.  $(7.14 \pm 0.39)$  月,  $P = 0.933$ ]。两组体重及月龄差异均无显著性 ( $P > 0.05$ )。

### 2.2 小型猪肝肾功能指标变化

实验组术前对比术后 2 周、实验组术后 2 周对比对照组术后 2 周,谷丙转氨酶 (alanine aminotransferase, ALT)、谷草转氨酶 (aspartate aminotransferase, AST)、肌酐 (creatinine, Cr) 及血尿素氮 (blood urea nitrogen, BUN) 差异均无显著性 ( $P > 0.05$ )。见表 1、表 2。

表 1 实验组术前与术后 2 周肝肾功能指标对比 ( $\bar{x} \pm s$ )

Table 1 Comparison of liver and kidney function indices in the experimental group between preoperative and 2 weeks after operation

指标 Indices	术前 Preoperative	术后 2 周 2 weeks after operation
ALT(U/L)	19.37 ± 1.58	21.85 ± 3.04
AST(U/L)	17.71 ± 8.42	19.96 ± 3.95
Cr(umol/L)	93.41 ± 14.54	96.12 ± 16.16
BUN(mmol/L)	5.96 ± 1.00	6.80 ± 2.10

注:术后 2 周与术前对比,  $P > 0.05$ 。

Note. Two weeks after operation compared with preoperative,  $P > 0.05$ .

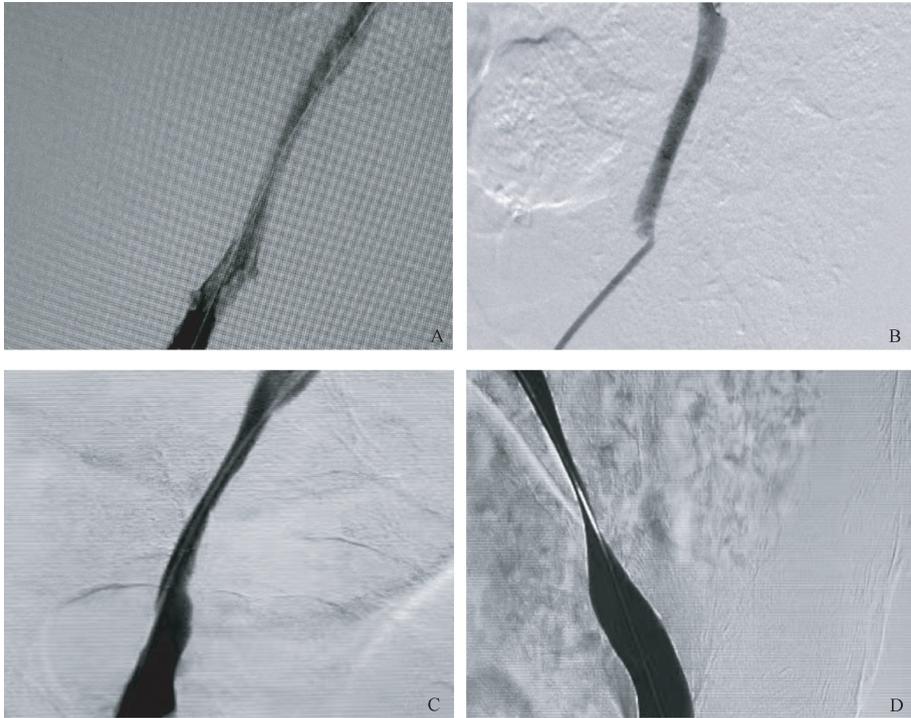
表 2 实验组与对照组术后 2 周肝肾功能指标对比 ( $\bar{x} \pm s$ )

Table 2 Comparison of liver and kidney function indices between the experimental group and control group at 2 weeks after operation

指标 Indices	对照组 Control group	实验组 Experimental group
ALT(U/L)	19.70 ± 4.33	21.85 ± 3.04
AST(U/L)	18.82 ± 6.28	19.97 ± 3.95
Cr(umol/L)	93.64 ± 11.77	96.12 ± 16.16
BUN(mmol/L)	6.66 ± 1.80	6.80 ± 2.10

注:实验组与对照组对比,  $P > 0.05$ 。

Note. The experimental group compared with the control group,  $P > 0.05$ .



注:A:术前小型猪髂总静脉X线造影,管腔内壁光滑;B:术后2月小型猪髂总静脉X线造影,管腔轻度狭窄( $< 30\%$ ),管壁稍毛糙;C:术后2月小型猪髂总静脉X线造影,管腔中度狭窄( $\geq 30\%$ ,  $< 70\%$ );D:术后2月小型猪髂总静脉X线造影,管腔重度狭窄( $\geq 70\%$ )。

图3 髂总静脉造影图像

Note. A: X-ray radiography of the common iliac vein in miniature pigs before operation showed smooth vascular cavity inner walls. B: X-ray radiography of the common iliac vein in miniature pigs two weeks after operation showed narrowing of the lumen ( $< 30\%$ ) and slight hardening of the vascular wall. C: X-ray radiography of the common iliac vein in miniature pigs two weeks after operation showed moderate narrowing of the lumen ( $\geq 30\%$ ,  $< 70\%$ ). D: X-ray radiography of the common iliac vein in miniature pigs two weeks after operation showed severe narrowing of the lumen ( $\geq 70\%$ ).

Figure 3 Venography image of common iliac vein

### 2.3 小型猪髂总静脉管腔内径变化

小型猪术前及术后2月髂总静脉造影图像,见图3。

实验组术前对比实验组术后2月管腔内径  $[(5.08 \pm 0.43) \text{ mm vs. } (3.74 \pm 1.24) \text{ mm}, P < 0.05]$ ;对照组术前对比对照组术后2月管腔内径  $[(5.07 \pm 0.72) \text{ mm vs. } (2.25 \pm 1.41) \text{ mm}, P < 0.05]$ ,两组术后管腔内径均较术前减少,说明建模是成功的。术前实验组对比对照组管腔内径  $[(5.08 \pm 0.43) \text{ mm vs. } (5.07 \pm 0.72) \text{ mm}, P > 0.05]$ ;术后2月实验组对比对照组管腔内径  $[(3.74 \pm 1.24) \text{ mm vs. } (2.25 \pm 1.41) \text{ mm}, P < 0.05]$ ,术前两组管腔内径无明显差别,而术后2月对照组管腔较实验组狭窄,说明模拟DCB能够延阻静脉管腔狭窄的进展。见表3。

表3 实验组与对照组术前、术后2月处理段管腔内径对比( $\bar{x} \pm s$ )

Table 3 Comparison of lumen diameter of the target vein in the experimental group and control group at preoperative and 2 weeks after operation

管腔内径(mm) Lumen diameter	术前 Preoperative	术后2月 2 weeks after operation
对照组 Control group	$5.07 \pm 0.72$	$2.25 \pm 1.41^*$
实验组 Experimental group	$5.08 \pm 0.43$	$3.74 \pm 1.24^{*\Delta}$

注:术后2周与术前对比,\* $P < 0.05$ ;实验组与对照组对比, $\Delta P < 0.05$ 。

Note. Two weeks after operation compared with preoperative,\* $P < 0.05$ . The experimental group compared with the control group, $\Delta P < 0.05$ .

### 2.4 小型猪髂总静脉管壁组织病理变化

术后2月,实验组与对照组小型猪在完成造影检查后,空气栓塞法处死,解剖分离处理段及对侧相同部位未处理髂总静脉标本(空白对比)。经脱

水、透明、浸蜡、包埋、切片及 HE 染色后,100 倍、200 倍光学显微镜下观察并照相。光镜下见:实验组与对照组小型猪髂总静脉管壁在过大球囊扩张后 2 月,内弹力膜均显示不清,内膜、中膜界限模糊;与对侧相同部位未处理髂总静脉相比,实验组与对照组处理段髂总静脉内膜、中膜均增厚,且对照组增厚更明显;对照组处理段髂总静脉内、中膜的平滑肌细胞(vascular smooth muscle cells, VSMCs)数量和体积明显多于实验组,且细胞排列紊乱;实验组与对照组外弹力膜均残缺不完整,且对比差别不大。实验组与对照组术后 2 月,小型猪髂总静脉病理改变,见图 4。

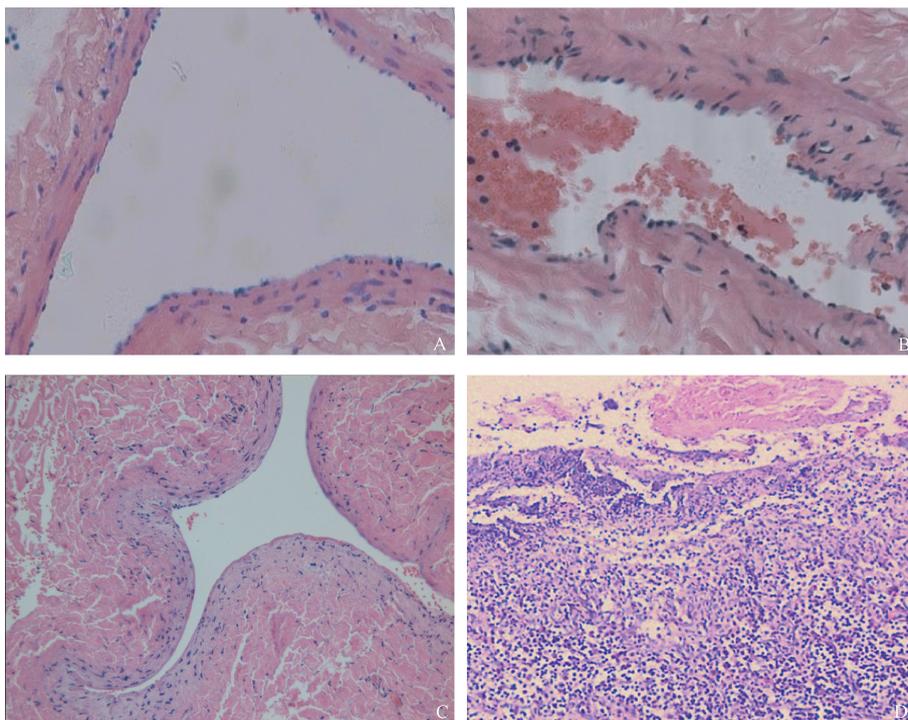
### 3 讨论

狭窄性病变不仅存在于外周动脉疾病的发生与发展过程中,其与外周静脉疾病进程亦密切相

关。髂静脉<sup>[11]</sup>、锁骨下静脉<sup>[12]</sup>、移植器官静脉<sup>[13]</sup>、透析道静脉<sup>[14]</sup>等的原发及治疗后再狭窄发生率并不低。然而,目前针对外周静脉狭窄发生机制的研究远不如针对外周动脉的研究深入。

利用过大球囊扩张小型猪髂总静脉,造成静脉管壁的机械性损伤,而损伤修复过程是形成静脉管腔狭窄的病理基础。本研究实验结果表明,利用这一原理构建小型猪髂总静脉狭窄模型是切实可行的。

本实验开始实施时,国内尚未有用于外周的 DCB 产品上市,而用于冠状动脉的 DCB 直径又不能满足实验需要。所以该实验设计为:采用两枚球囊分别封堵目标段静脉近心端和远心端后,再向封闭段静脉管腔内注入紫杉醇与碘普罗胺混合液,以此延长活性药物与管壁接触时间来模拟 DCB 的作用。实验结果证明,这样的实验设计,在操作上完全可



注:A:对侧髂总静脉( $\times 200$ ),内、中膜完整,界限清晰;B:对照组髂总静脉( $\times 200$ ),内、中膜增厚,中膜 VSMCs 增多紊乱;C:实验组髂总静脉( $\times 100$ ),内、中膜轻度增厚;D:对照组髂总静脉( $\times 100$ ),内、中膜增厚伴大量淋巴细胞浸润。

图 4 小型猪髂总静脉病理改变(HE 染色)

Note. A: In the contralateral common iliac vein, the internal and middle membranes were intact with clear boundaries ( $\times 200$ ). B: In the common iliac vein of the control group, the internal and middle membranes were thickened with increased VSMCs in the middle membrane ( $\times 200$ ). C: In the common iliac vein of the experimental group, the inner and middle membranes were slightly thickened ( $\times 100$ ). D: In the common iliac vein of the control group, the internal and middle membranes were thickened with considerable lymphocytic infiltration ( $\times 100$ ).

Figure 4 Histological changes of common iliac vein of the miniature pigs. HE staining

行;在效果上达到了实验预期,在 2 个月观察期内有效地减轻了小型猪髂总静脉狭窄程度;在安全性上,对小型猪肝、肾功能指标无明显影响,且在整个实验过程中未观察到其他相关不良事件。

本实验通过模拟 DCB 的作用,对小型猪髂总静脉狭窄模型处理段管壁组织的病理转归过程产生了正面干预:与对照组相比,实验组小型猪髂总静脉管壁内 VSMCs 在紫杉醇的作用下增殖、迁移和分泌受到明显抑制,减轻了静脉内膜、中膜增生程度,从病理机制上降低了静脉再狭窄的发生。

实验中存在不足及有待改进之处:在临床上,静脉狭窄常见于:髂静脉狭窄、锁骨下静脉狭窄、血液透析道狭窄、TIPS 术后分流道狭窄、Budd-Chiari 综合征、器官移植后静脉吻合口狭窄等。多数静脉狭窄性病变的形成为慢性、渐进性过程,本实验以急性机械损伤的方法建立小型猪髂总静脉狭窄模型,与实际病变的发生、发展可能存在一定差别。在后续实验改进中,通过适当的方法建立静脉慢性狭窄的动物模型用于研究,可能更加贴近临床实际。此外,本研究通过一定的实验设计,利用“双球囊封堵注药法”来模拟 DCB 对静脉管壁的作用,并不是直接使用 DCB 进行实验。“双球囊封堵”操作步骤繁琐,小型猪颈静脉穿刺困难,常需切开暴露穿刺,增加了手术时间及术后感染风险。目前用于外周的 DCB 产品已在国内上市,后续实验中可直接使用 DCB,以获得更为准确的实验数据。本实验还存在样本量较小、随访时间较短的不足。在后续的研究中,应增加样本数量、延长随访时间,在静脉狭窄的模型上进一步验证 DCB 对静脉狭窄性病变的有效性及其安全性,使实验结果更具说服力,对临床治疗有更高的指导价值。

#### 参考文献:

- [ 1 ] Nishiyama N, Komatsu T, Kuroyanagi T, et al. Clinical value of drug-coated balloon angioplasty for de novo lesions in patients with coronary artery disease [J]. *Int J Cardiol*, 2016, 222: 113 - 118.
- [ 2 ] Collieran R, Harada Y, Cassese S, et al. Drug coated balloon angioplasty in the treatment of peripheral artery disease [J]. *Expert Rev Med Devices*, 2016, 13(6): 569 - 582.
- [ 3 ] Mueller GC, Dodge-Khatami A, Weil J. First experience with a new drug-eluting balloon for the treatment of congenital pulmonary vein stenosis in a neonate [J]. *Cardiol Young*, 2010, 20(4): 455 - 458.
- [ 4 ] Massmann A, Fries P, Obst-Gleditsch K, et al. Paclitaxel-coated balloon angioplasty for symptomatic central vein restenosis in patients with hemodialysis fistulas [J]. *J Endovasc Ther*, 2015, 22(1): 74 - 79.
- [ 5 ] Ng VG, Mena C, Pietras C, et al. Local delivery of paclitaxel in the treatment of peripheral arterial disease [J]. *Eur J Clin Invest*, 2015, 45(3): 333 - 345.
- [ 6 ] Gertz ZM, Wilensky RL. Local drug delivery for treatment of coronary and peripheral artery disease [J]. *Cardiovasc Ther*, 2011, 29(6): e54 - e66.
- [ 7 ] Sharma S, Christopoulos C, Kukreja N, et al. Local drug delivery for percutaneous coronary intervention [J]. *Pharmacol Ther*, 2011, 129(3): 260 - 266.
- [ 8 ] 王锦达, 杨庭树, 孙志军, 等. 应用双球囊灌注导管局部注射紫杉醇对犬冠状动脉支架内再狭窄的预防作用 [J]. *中国医学科学院学报*, 2012, 34(1): 8 - 13.
- [ 9 ] Oberhoff M, Herdeg C, Al Ghobainy R, et al. Local delivery of paclitaxel using the double-balloon perfusion catheter before stenting in the porcine coronary artery [J]. *Catheter Cardiovasc Interv*, 2001, 53(4): 562 - 568.
- [ 10 ] 管耘园, 卢辉和, 盛臻强, 等. 过大球囊扩张配合高脂饮食建立小型猪冠状动脉硬化模型 [J]. *江苏医药*, 2006, 32(4): 372 - 373.
- [ 11 ] Raju S. Best management options for chronic iliac vein stenosis and occlusion [J]. *J Vasc Surg*, 2013, 57(4): 1163 - 1169.
- [ 12 ] Clark DD, Albina JE, Chazan JA. Subclavian vein stenosis and thrombosis: a potential serious complication in chronic hemodialysis patients [J]. *Am J Kidney Dis*, 1990, 15(3): 265 - 268.
- [ 13 ] Yang J, Xu MQ, Yan LN, et al. Management of venous stenosis in living donor liver transplant recipients [J]. *World J Gastroenterol*, 2009, 15(39): 4969 - 4973.
- [ 14 ] Campos RP, Do Nascimento MM, Chula DC, et al. Stenosis in hemodialysis arteriovenous fistula: evaluation and treatment [J]. *Hemodial Int*, 2006, 10(2): 152 - 161.

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