cases of hepatotoxin contact workers in 4 factories was carried out. All the serial examination data were observed and analyzed systematically, guided by the more sensitive laboratory criteria mentioned above. Definitive diagnoses were made in 1035 cases. Basing on this extensive investigation, suggestions were made by the research section on the steps in the diagnosis of OCTH and the recommended mode of logical thinking in dealing with this entity. A «Guide for the Health Monitoring of Hepatotoxin Workers» was established, prov-

iding a more practical approach in the diagnosis of OCTH and the preferential criteria to be used in the future.

I. A comprehensive and relatively up-todate working reference for hygiene professional, «The Diagnstic Criteria and Principles in Management of Occupational Toxic Hepatiopathy» was compiled.

In addition, a study of combined factors influencing the type and extent of liver damage and their differential diagnoses was included as a part of this cooperative research.

急性邻甲苯胺中毒7例报告

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急性邻甲苯胺中毒国内报道不多,现将 我 院 自 1988年以来收治的 7 名中毒病例报告如下。

一、职业接触情况

7 例均为宽甸县化工厂工人,本厂生产 邻 甲 苯 胺,原料为邻硝基甲苯、铁粉、氯化胺。4 例因停电 反应釜停止运转而进入充满邻甲苯胺气体反应釜内检修;3例为邻甲苯胺车间操作工,因生产设备简陋,房屋狭小,天气炎热,无通风设备及个人防护,而发生急性中毒。

二、临床资料

7_、例患者中,男性 4 例,女性 3 例,年龄24~39 岁。

1. 主要症状与体征

本组病例主要症状有头痛、头晕、恶心、口唇紫 绀及肉眼血尿,同时有腰痛和下腹部 痛, 尿急、尿 颗、尿痛膀胱刺激症状。

2. 实验室检查

血常规:红细胞、血红蛋白、血小板均正常。尿常规:尿蛋白 + ~ 卅,红细胞满视野 5 例,白细胞 + ~ 卅 7 例,BUN、Cr、CO₂CP 均正常,尿细菌培养

均阴性。心电图:除1例有窦性心动过缓伴 **ST—T** 改变,其余正常。

三、治疗经过

入院后立即脱去污染衣服,用肥皂水彻底清洗,用1%美兰 40mg 加 25% GS 40ml 静脉缓慢注射 1~2次。适当使用能量合剂、止血剂、抗生素及对症处理。经治疗10天内全部症状消失,尿常规恢复正常,均痊愈出院。出院诊断为急性邻甲苯胺中毒致高铁血红蛋白血症及出血性膀胱炎。

讨论

邻甲苯胺 $(CH_3C_6H_4NH_2)$ 为无色液体,暴露空气和日光中变成红棕色,极微溶于水,溶于乙醇和乙醚,能与蒸气一同挥发。

邻甲苯胺均能经皮肤吸收,其粉尘和蒸气经呼吸 道吸入。本品是强烈的高铁血红蛋白形成剂。急性中 毒时主要表现为头痛、头晕、口唇紫绀,可有尿急、 尿频、尿痛等膀胱刺激症状,并能致肉眼或 镜 下 血 尿,严重者甚至有尿闭。美兰为本病的特效解毒剂, 应尽早尽快使用。