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題目 (Title):

平衡控制的短期恢復：與兒童癌症後化學治療引起的周邊神經病變之關係

Short-Term Recovery of Balance Control: Association With Chemotherapy-Induced Peripheral Neuropathy in Pediatric Oncology.

摘要中文翻譯**目的:**

敘述兒童與青少年在接受神經毒素治療非中樞神經系統癌症後的平衡控制以及短期復原，並探討化學治療引起的周邊神經病變與平衡控制的關係。

方法:

65 位診斷為白血病、淋巴瘤或其他實質腫瘤的兒童與青少年參與研究，在開始治療後 3 至 6 個月期間以及治療完成後 3 與 6 個月，接受布魯茵克斯-歐希瑞斯基 (Bruininks-Oseretsky) 平衡分測驗以及兒童修正版整體神經損傷量表 (Pediatric Modified Total Neuropathy Scale) 測驗化學治療引起的周邊神經病變 (chemotherapy-induced peripheral neuropathy; CIPN)。

結果:

78% 的受試者在治療期間的平衡分測驗表現比母群體平均低一個標準差或更低，但在治療完成後 6 個月則進步為 53%，其中白血病組在二個時間點的表現都最差。治療期間的平衡分數與動作 CIPN 有中度相關，治療後 6 個月與感覺 CIPN 較緊密相關。

結論:

兒童癌症治療導致的輕至中度平衡缺損在治療完成後 6 個月雖會進步，但即使 CIPN 有改善，平衡缺損仍持續存在。

Original Abstract

PURPOSE:

To describe the incidence and short-term recovery of balance control in children and adolescents receiving neurotoxic treatment for noncentral nervous system cancers and to investigate the association of chemotherapy-induced peripheral neuropathy and balance control.

METHODS:

Sixty-five children and adolescents diagnosed with leukemia, lymphoma, or other solid tumors were tested 3 to 6 months into treatment and 3 and 6 months following treatment using the Bruininks-Oseretsky Balance Subscale and Pediatric Modified Total Neuropathy Scale scores of chemotherapy-induced peripheral neuropathy (CIPN).

RESULTS:

Seventy-eight percent of the participants scored 1 standard deviation or more below population means on the balance subscale while on treatment, and this improved to 53% by 6 months posttreatment, with the leukemia group performing worse at both time points. On-treatment balance scores were moderately associated with motor CIPN, while at 6 months posttreatment they were more closely associated with sensory CIPN.

CONCLUSIONS:

Mild to moderate balance impairments improve but can persist, even when CIPN has improved, 6 months after treatment for childhood cancer.

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