



New treatment destroys skin cancer cells more precisely, without surgery



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AUSTIN (KXAN) — On a lake, with fishing rod in hand Eugene Hester's in his happy place.

"You catch fish every 20 to 30 percent of the time you go out, the rest of the time you're going to work for it," said Hester. "That's what makes it worth it, that you worked for it."

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While radiation therapies aren't new, Dr. Ladd is now using a new device called the SRT-100 Vision, which has an ultrasound component. With the ultrasound, doctors can create a footprint to precisely target the cancer.

"We can see below the surface of the skin. How deep is this cancer? Is it smooth or is it irregular? What's the shape of the skin cancer? What kind of energy are we going to need to treat it?" said Dr. Ladd. For the first time, he says dermatologists can see below the surface without cutting the skin.

Superficial Radiation has a 95 percent cure-rate and Mohs surgery has a 95-98 percent cure-rate.

虽然放射治疗不是新鲜技术，但 Ladd 博士现在使用一种称为 SRT-100 Vision 的新装置，其具有超声组件。使用超声波，医生可以创建运行轨迹以精确对癌症进行靶向治疗。

“通过这种装置，我们可以看到皮肤表面以下。这个癌究竟有多深？是平滑还是不规则？皮肤癌的形状是什么？我们需要什么样的能量来治疗它？这些问题都可以依靠这种装置，通过观察以及分析得出“Ladd 博士说。

他说，这是第一次，皮肤科医生可以不切割皮肤就能看到皮肤表面的下面。

浅表辐射具有 95% 的治愈率，而莫氏手术具有 95-98% 的治愈率。

<http://kxan.com/2016/10/13/new-treatment-destroys-skin-cancer-cells-more-precisely-without-surgery/>

Diagnosis of aortic valvular stenosis by multislice cardiac computed tomography

Current improvements in spatial, temporal, and contrast resolution of multislice computed tomography (CT) could be useful in the assessment of valvular diseases. We evaluated the diagnostic accuracy of multislice CT for the identification and quantification of aortic valvular stenosis (AS), compared with echography.

Consecutive patients, referred for coronary CT, were evaluated for AS, by the use of standard electrocardiography-gated 16-slice CT protocol. Multiplanar reformat was applied to systolic phases of the cardiac cycle, with projection on thick slices for measuring the aortic valvular area(AVA).

CT results were compared with echocardiographic-based measurement of the AVA. Among 107 enrolled patients, CT analysis of the AVA was feasible in 103. Among the 30 patients with AS, Bland-Altman analysis showed good agreement between the two methods [mean difference 27 mm²(240-25 mm²)].

CT analysis of aortic valve is feasible in most cases and allows for reliable diagnosis and quantification of AS.

多层心脏电脑断层诊断主动脉瓣膜狭窄

目前在多层计算断层扫描(CT)空间、时间和对比剂的改善使得其对于评估瓣膜疾病可能是有用的。我们评估多层螺旋 CT 与回波扫描术在识别和量化主动脉瓣膜狭窄 (AS) 的诊断准确性。

连续的病人,有冠状动脉 CT 评估主动脉瓣狭窄,通过使用标准心电图扫描 16 层 CT 协议。选择格式化被应用于心动周期中的收缩压阶段,并在厚片与投影测量主动脉瓣膜区。

CT 结果与基于标准心电图扫描的测量方法相比较,在 107 登记的病人中,CT 分析在 103 人中是可行的。30 名患者中, Bland-Altman 分析显示良好之间的协议有两种方法(平均差 27 平方毫米(240 - 25 平方毫米))。

CT 分析主动脉瓣在大多数情况下是可行的,对主动脉瓣狭窄有可靠的诊断和量化。