

台中榮民總醫院
內部過敏免疫風濕科

血管炎特別紀錄表(一)

Churg-Strauss syndrome

此處刷卡用

健保榮民	健保員工	健 保	健保員眷	民 眾	
姓名			病房	床位	年齡
					病歷號

1990 Criteria for the Classification of Churg-Strauss Syndrome (Traditional Format), Their Sensitivity And Specificity Versus Other Defined Vasculitis Syndromes

1. Criteria and definition for the classification of Churg-Strauss syndrome

	Criteris	Definition
_____	1.Asthma	Hitstory of wheezing or diffuse highpitches rales On expiration
_____	2.Eosinophilia >10%	Eosinophilia >10% on white blood cell differential count.
_____	3.Neuropathy, mono or poly	Development of mononeuropathy, multiple mononeuropathies, or polyneuropathy (glove/ stocking distribution) attributable to sys vasculitis.
_____	4.Pulmonary infiltrates, non-fixed	Migratory or transitory pulmonary infiltrates on radiographs (not including fixed infiltrates),attributable to a systemic vasculitis.
_____	5.Paranasal sinus abnormality	History of acute or chronic paranasal ainus pain or tenderness or radiographic opacification of the paranasal sinuses
_____	6.Extravascular eosinophils	Biopsy including artery, arteriole, or venule, showing accumulations of cosinophils in extravascular areas

* For classification purposes, a patient shall be said to have Churg-Strauss syndrome (CSS) if at least 4 of these 6 criteria are positive. The presence of any 4 or more of the 6 criteria yields a sensitivity of 85% and a specificity of 99.7%. (See Table 3 for criteria definitions.)

Masi AT, Hunder GG, Lie JT, Michel BA, Bloch DA, Arend WP, et al. The American College of Rheumatology 1990 criteria for the classification of Churg-Strauss syndrome (allergic granulomatosis and angiitis). Arthritis Rheum 1990;33:1094---100.

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