# Index Medicus for the WHO Eastern Mediterranean Region

with Abstracts



## IMEMR Current Contents

Vol. 7 No. 2





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with Abstracts

**IMEMR Current Contents** 

June 2008 Vol. 7 No. 2

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### **IMEMR Current Contents**

#### Rationale

The Index Medicus for the WHO Eastern Mediterranean Region (IMEMR) has sustained its indexing policy, which has made it a vital current awareness information tool, for technical staff of the Regional Office, health care staff and medical professionals who are able now to access heath literature published in the Region as soon as it is published. A document delivery service to support the Index has also been activated which will enable any user to acquire a copy of any article listed in the Index.

The cumulative version of the Index Medicus is available now on the Internet as part of EMRO web site. A CD-ROM version of the same is also being provided upon request.

#### Scope and Coverage

The **IMEMR Current Contents** is issued on a quarterly basis including articles added to Index Medicus for the Eastern Mediterranean Region (IMEMR) Database<sup>1</sup>.

#### **Indexing Level**

Each article has been indexed and assigned to a "Main Heading", plus added headings according to the Medical Subject Headings (MeSH) list of the National Library of Medicine (NLM). Up to five added headings (including the respective country) have been allowed. Subheadings (or qualifiers) are used in indexing to qualify MeSH headings by pinpointing some specific aspects of the concept represented by the heading, e.g. "LIVER-Drug Effects" indicates that the article is not about the liver in general, but about the effect of drugs on the liver.

#### Organization of the IMEMR

#### The main body of the Index

The Index is organized in alphabetical order, according to the <u>Main Subject Headings</u> (MeSH). In most cases one main subject is assigned to each article. Under the main subject, entries are sorted by <u>Subheading</u> in alphabetical order also. Each entry includes the title of the article, author(s), journal title, year (date of publication), volume number, issue number, page numbers, number of references, subject descriptors and geographic descriptors. Abstracts have been added and are searchable on the database on the Internet. (as shown in Figure 1)

#### **Author Index**

The IMEMR includes the author's index which also indicates the subjects covered by each author.

#### Computer facilities

The Current Contents has been produced using the **UNESCO WINISIS** package. Countries or journals publishers interested in a subset of the database may be provided with data sets in WINISIS format upon request.

#### Availability of photocopies

Photocopies of articles cited in IMEMR may be obtained from EMRO Library, upon request.

#### Availability on the Internet

This issue, as well as all forthcoming issues, will appear in WHO/EMRO web site on the Internet, as part of the complete edition of the Index. Internet address is <a href="http://www.emro.who.int/HIS/VHSL/Imemr.htm">http://www.emro.who.int/HIS/VHSL/Imemr.htm</a>

<sup>&</sup>lt;sup>1</sup> Including the countries of Afghanistan, Bahrain, Djibouti, Egypt, Islamic Republic of Iran, Iraq, Jordan, Kuwait, Lebanon, Libyan Arab Jamahiriya, Morocco, Oman, Pakistan, Palestine, Qatar, Saudi Arabia, Somalia, Sudan, Syrian Arab Republic, Tunisia, United Arab Emirates, Yemen

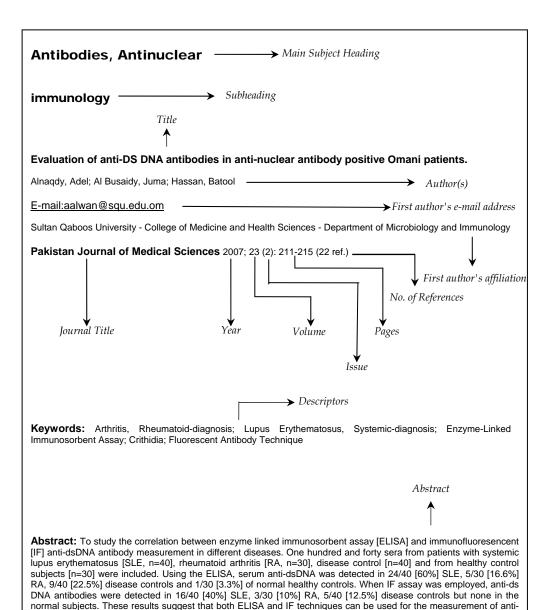


Figure (1): Sample of IMEMR citation

ds DNA antibodies in clinical laboratories and, these antibodies are not unique to SLE.

## **Subject Index**

#### **Abdomen**

#### abnormalities

An unique and unusual lucent shadow seen on a plain x-ray abdomen anteroposterior view in erect position.

Toke, Satyawan P.

E-mail:rmbendale@rediffmail.com

Al-Shabana General Hospital - Department of Radiology Saudi Medical Journal 2007; 28 (2): 302-304 (2 ref.)

Keywords: Thorax-abnormalities; Situs Inversus; Stomach-abnormalities; Stomach-radiography

#### **Abnormalities**

#### congenital

Pattern of congenital malformations in consanguineous versus nonconsanguineous marriages in Kashan, Islamic Republic of Iran.

Mosayebi, Z.; Movahedian, A.H.

E-mail:mosayebiir@yahoo.com

Kashan University of Medical Sciences - Department of Paediatrics

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 868-875 (27 ref.)

Keywords: Consanguinity; Sex Distribution; Prospective Studies; Abnormalities-epidemiology

**Abstract:** This study determined the types, patterns and prevalence of congenital malformationamong the offspring of consanguineous and nonconsanguineous parents. In this prospective studyof 3529 neonates delivered alive during a 1-year period, 109 had congenital malformations[3.09/1000 live births]. The rate of congenital malformation was 2.0% among neonates fromnonconsanguineous marriages and 7.0% from consanguineous marriages. The most commonmalformations were genitourinary [32.1%], musculoskeletal [22.0%] and cardiovascular [14.7%].Of the total malformed infants, 8.3% died within the neonatal period. Male infants were at greaterrisk for birth malformations. A history of congenital malformation was more common in siblings of consanguineous than nonconsanguineous marriages.

#### Abnormalities, Multiple

Currarino triad associated with malrotation of the colon.

Daoud, Faiez S.; AbuRub, Mohammad A.; Hadidy, Azmy M.

E-mail:drfaiezd@yahoo.com

Jordan University Hospital - Department of General Surgery Saudi Medical Journal 2007; 28 (2): 279-282 (15 ref.)

**Keywords:** Constriction-pathology; Anus Diseases; Spinal Diseases; Teratoma; Sacrum; GeneticPredisposition to Disease; Meningocele; Colon-pathology; Syndrome

**Abstract:** Currarino triad is a rare congenital condition characterized by a sacral bony defect, presacral mass, and anorectal malformations. We describe an unusual case of complete Currarinotriad in a 22-year-old female with sacral bony defect, anal stenosis, recto-vaginal fistula, and dualpathology meningocele and teratoma in the pre sacral mass associated with malrotation of thecolon. This combination has not been reported previously. The clinical presentation, surgicalmanagement and review of literature are discussed.

Floating-Harbor syndrome in a Kuwaiti patient: a case report and literature review.

Bastaki, L.; El Nabi, M.M.H.; Azab, A.S.; Gouda, S.A.; Al Wadaani, A.M.; Naguib, K.K.

Ministry of Health - Kuwait Medical Genetic Centre

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 975-979 (24 ref.)

**Keywords:** Growth Disorders; Bone Diseases, Developmental; Face-abnormalities; Speech Disorders; Mental Retardation; Syndrome

#### **Adiposity**

Adiposity and physical activity levels among preschool children in Jeddah, Saudi Arabia.

Al Hazzaa, Hazzaa M.; Al Rasheedi, Amani A.

E-mail:halhazzaa@hotmail.com

King Saud University - Exercise Physiology Laboratory Saudi Medical Journal 2007; 28 (5): 766-773 (41 ref.)

Keywords: Motor Activity; Obesity-epidemiology; Child, Preschool

**Abstract:** To assess the levels of adiposity and physical activity among Saudi preschool childrenfrom Jeddah. Participants included 224 Saudi preschool children, randomly selected from publicand private preschools in Jeddah

during April and May of 2006, using a multistage stratifiedsampling technique. Measurements included weight, height, body mass index, triceps andsubscapular skinfolds, fat percentage, fat mass [FM], fat-free mass [FFM], FM index [FMI] and FFM index [FFM], time spent watching television and physical activity levels using electronic pedometer for 3 continuous days during weekdays. The fat content averaged 20.6% of bodyweight, while the prevalence of obesity was 10.8%. There were significant gender differences infat percentage, FM, FFM, FMI, and FFMI. The mean value for pedometer-determined steps countsfor the preschool children was 6773.2 steps per day. Boys were significantly more active than girls. Only 22.4% of the preschool children had 10000 steps or more per day. There were no significantage differences in skinfolds measurements, fat percentage, FMI, FFMI, central obesity or dailysteps counts. Television viewing time increased by 22.5% from age 4 to age 6. Compared tonon-obese, obese preschool children were significantly heavier, taller and had higher values for alladiposity indices and television viewing time. A considerable proportion of Saudi preschool childrenis obese and even a greater proportion is physically inactive. Obesity and physical inactivityrepresent major risks for a number of non-communicable diseases, and an early intervention ismost appropriate.

#### Agammaglobulinemia

High production of IL-18 by dendritic cells induced by sera from patients with primary antibody deficiency.

Nourizadeh, Maryam; Aghamohammadi, Asghar; Moazzeni, Seyed Mohammad; Mahdavi, Mahdi; Rezaei, Nima; Hadjati , Jamshid

University of Teharn - Immunology, Asthma and Allergy Reserach Institute

Iranian Journal of Allergy, Asthma and Immunology 2007; 6 (2): 59-65 (32 ref.)

Keywords: Immunologic Deficiency Syndromes; Interleukin-18; Dendritic Cells

**Abstract:** Predominantly antibody deficiencies are a category of primary immunodeficiencydiseases, which consist of several rare disorders such as common variable immunodeficiency[CVID] and X-linked agammaglobulinemia [XLA]. We evaluated the effects of CVID and XLApatients' sera as a source of microenviromental factors on maturation and function ofmonocyte-derived DCs. Blood was collected from 10 CVID and 5 XLA patients beforeimmunoglobulin replacement therapy and also from 8 healthy volunteers in order to obtainnecessary sera for this study. Monocyte derived DCs were generated from blood cells obtainedfrom healthy volunteers in the presence of GM-CSF, IL-4 and 10% serum concentrations fromcases and controls. Immature DCs were incubated with monocyte conditioned medium [MCM] andTNF-alpha in order to generate mature DCs. Interleukin 18 [IL-18] production by CD40L-activatedmature DCs was measured after 24 hours of culture in vitro. IL-18 production by DCs generated inthe presence of CVID and XLA patients' sera were 6.75 +/- 2.59 and 7.08 +/- 1.75 ng/ml,respectively, which were significantly higher than normal serum conditioned DCs [3.55 +/- 0.68]ng/ml. These results suggest that the sera of patients with predominantly antibody deficienciesmay contain soluble factor[s] that can induce a significant increase in IL-18 production by DCs.

#### Age Determination by Skeleton

Association between chronological and skeletal ages among a sample of Saudi male children.

Al Hadlaq, Adel; Hashim, Hayder; Al Shalan, Thakib; Al Hawwas, Abdullah; Al Mutairi, Nasser; Al Zahrani, Talal E-mail:aalhadlaq@hotmail.com

King Saud University - College of Dentistry - Department of Preventive Dental Sciences

SDJ - Saudi Dental Journal [The] 2007; 19 (1): 1-7 (26 ref.)

Keywords: Wrist-radiography; Hand-radiography; Child

Abstract: Assessment of skeletal maturity is a necessary clinical need in orthodontics and otherhealth professions. The aim of this study was to detect the association between chronological ageand skeletal age in a selected Saudi male sample and to compare their skeletal maturity rate withother populations. Hand-wrist radiographs were obtained for 115 subjects and the skeletal age foreach subject was determined using a standard hand-wrist radiographic atlas. Also, the skeletalmaturity stage for each subject was established using Bjork assessment method. Statistical testswere performed to detect significant differences between chronological and skeletal ages atdifferent skeletal maturity stages. The rate of skeletal maturity of the participating Saudi samplewas also compared to analogous values that were previously established for other populations. The findings of the present study indicated that the participating Saudi children had a tendencytowards late maturation with the mean skeletal age of the participating subjects being significantlylower [P<0.05] than the chronological age at various skeletal maturity stages. When consideringthe rate of skeletal maturity, the participating Saudi children demonstrated a comparable maturityrate to that of other children from different populations. The results of the present study couldenhance the diagnosis and treatment planning in orthodontics, pedodontics, and other healthdisciplines.

#### Alopecia Areata

#### drug therapy

Treatment of alopecia areata by topical diclofenac sodium gel in comparison to benzoyl peroxide. A novel single blind therapeutic clinicaltrial.

Bukhari, Iqbal A.

King Faisal University - College of Medicine - Department of Dermatology

Saudi Medical Journal 2007; 28 (5): 813 (1 ref.)

**Keywords:** Diclofenac-administration, dosage; Benzoyl Peroxide-therapeutic uses; Administration, Topical; Gels; Irritants-therapeutic uses; Clinical Trials; Single-Blind Method

#### **Alum Compounds**

#### toxicity

Amelioration of aluminium-induced liver damage by vitamin E.

Kutlubay, Recep; Oguz, Emin O.; Abban, Gulcin; Turgut, Sebahat

Pamukkale University - Faculty of Medicine - Department of Histology and Embryology

Saudi Medical Journal 2007; 28 (2): 197-200 (28 ref.)

**Keywords:** Liver-injuries; Liver-chemically induced; Rats; Treatment Outcome; Liver Regeneration; Vitamin E-therapeutic uses

**Abstract:** To investigate the effects of aluminium sulphate on the microscopic morphology of theliver and on vitamin E amelioration of aluminium-induced liver damage. Rats were injected intraperitoneally with aluminium sulphate alone or aluminium sulphate together with vitamin E, withsaline injected rats used as the control group. The study took place in Pamukkale UniversityFaculty of Medicine in 2005. The rats exposed to aluminium showed morphological changes inaddition to previously reported biochemical changes in the liver. The anti-oxidant vitamin Esignificantly diminished the liver damage seen due to aluminium. There is an apparent protectiveeffect of vitamin E on parenteral aluminium exposure.

#### **Amenorrhea**

#### genetics

#### Cytogenetic studies in amenorrhea.

Rajangam, Sayee; Nanjappa, Leelavathy

E-mail:sjmcdhg@yahoo.co.in

St. John's Medical College - Division of Human Genetics **Saudi Medical Journal** 2007; 28 (2): 187-192 (19 ref.)

**Keywords:** Amenorrhea-etiology; Cytogenetics; Chromosome Disorders; Sex Chromosome Disorders; Prevalence;

Karyotyping

**Abstract:** To study the frequency of the chromosomal abnormality [CA], referred for karyotyping, and counseling in individuals with primary amenorrhea [PA] and secondary amenorrhea [SA]. Wereport on a retrospective survey of 865 women with amenorrhea [620-PA and 245-SA] at theDivision of Human Genetics, Department of Anatomy, St. John's Medical College, Bangalore, Indiafrom 1973 to 2005. The frequency of the CA in amenorrhea was 23.35%, while PA was 26.13%, and SA was 16.33%. Numerical CA was prevalent in 45.54% of the total; 43.83% in PA, and52.5% in SA. In numerical chromosomal abnormality, the observed karyotypes were: 45,X;47,XXX; X mosaicism [45,X/46,XX; 45,XX/47,XXX; 45,XX/47,XXX; 46,XX/47,XXX]. Ymosaicism [45,X/46,XY; 45,X/47,XYY]; and others: 46,XX/47,XX+10; 46,XX/46,XY; 46,XX/47,XXX+1n, 46,XX/46,XX+1n, 46,XX/47,XXX+1n, 46,XX/46,XX+10,X

#### Anemia

#### epidemiology

Prevalence and severity of anemia in pediatric hemodialysis patients.

Azhir, Afshin; Nasiri, Jafar; Gheisari, Alaleh

E-mail:azhir@med.mui.ac.ir

Isfahan University of Medical Sciences - Al-Zahra Hospital - Department of Pediatrics

Saudi Medical Journal 2007; 28 (2): 249-253 (25 ref.)

**Keywords:** Hemodialysis; Prevalence; Hemoglobins-blood; Albumins; Erythropoietin, Recombinant; Iron; Hyperparathyroidism; Time Factors; Cross-Sectional Studies; Severity of Illness Index

**Abstract:** To determine the prevalence and severity of anemia, and to identify independent predictors for anemia in children on hemodialysis. We conducted this cross sectional study on 25children aged 7?20 years receiving hemodialysis from September 2005 to January 2006 in IsfahanUniversity of Medical Sciences, Isfahan, Iran. A total of 22 [82%] patients had hemoglobin [Hb]level of <11 g/dL [anemia] and 12 [48%] patients had Hb values <8 g/dL [severe anemia]. Themean age was 15.5 +/- 3.7 years. Mean time on hemodialysis was 20.44 +/- 15.25 months. Anemia was more common and severe among children who were on dialysis <6 months. Therewas an inverse relation between

severity of anemia and duration of hemodialysis [r=-0.465,p=0.019]. Nearly all patients were treated with recombinant human erythropoietin [rHuEPO]. Children with severe anemia received a slightly higher dose of erythropoietin [r=0.202 p=0.09]. There was a correlation between serum albumin and Hb level [r=0.511, p=0.01]. Intact parathyroidhormone [iPTH] levels were >200 pg/mL in 16 patients [66%] and >400 pg/mL in 9 patients [37.5%]. There was a reverse correlation between iPTH level >200 pg/mL and Hb level [r=-0.505, p=0.046]. The prevalence of anemia in our study appears to be higher than that reported in the otherstudies in spite of extensive use of rHuEPO and iron supplementation. We found this to beespecially true for patients who were on dialysis <6 months and with low albumin and severehyperparathyroidism.

#### Anemia, Sickle Cell

#### immunology

Red cell alloimmunization in sickle-cell anaemia patients.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1181-1189 (23 ref.)

Keywords: Erythrocytes-immunoligy; Blood Transfusion; Isoantibodies

**Abstract:** This study in King Fahd Hospital of the University, Saudi Arabia, assessed thefrequency of alloimmunization to red cell antigens in sickle-cell anaemia patients over 1996-2004in order to evaluate the risk of alloimmunization and identify the most common alloantibodies. Aretrospective analysis of the transfusion history and medical records of 350 patients aged 2 to 75years who had received at least 1 transfusion found that 48 patients had developed alloantibodies [13.7%]. The most common alloantibodies detected were: anti-E alone [18.8%], nonspecific[12.5%], inconclusive [12.5%], anti-K [10.4%] and anti-c 3 [6.3%]. Some patients had 1 alloantibody, while others more than 1 and even multiple antibodies. Nine patients had a persistent positive direct antiolobulin test.

#### Anesthetics, Inhalation

#### administration, dosage

Single breath vital capacity induction of anesthesia with 8% sevoflurane versus intravenous propofol for laryngeal tube insertion in adults.

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Saudi Medical Journal 2007; 28 (1): 36-40 (19 ref.)

**Keywords:** Anesthetics, Intravenous-administration, dosage; Anesthesia-methods; Intubation-methods; Vital Capacity; Propofol-administration, dosage; Methyl Ethers-administration, dosage; Respiration; Larynx

**Abstract:** To compare the conditions for laryngeal tube airway insertion obtained by the inhalationof 8% sevoflurane using a vital capacity breath [VCB] technique with propofol intravenousinduction. We carried out a prospective, randomized, single blind study at King Abdullah UniversityHospital, Irbid, Jordan from September 2005 to April 2006. Involved in this study were 80 adult[ASA physical status I and II] patients aged 26-70 years undergoing elective surgery under generalanesthesia. The patients were randomized into 2 groups. An independent observer noted the timeto loss of consciousness, the presence of adverse events, time to successful laryngeal tubeplacement and the number of attempts needed until a successful laryngeal tube insertion. With thesingle VCB method, sevoflurane produced a loss of consciousness faster than propofol did [51.6+/- 4.4 versus 59.7 +/- 4.9 seconds, p<0.001]. The insertion of laryngeal tube was faster in thepropofol group [77.2 +/- 20.2 versus 122.2 +/- 33.3 seconds, p<0.001] and required fewer attempts[1.2 +/- 0.4 versus 1.6 +/- 0.7, p<0.02]. The overall incidence of complications during the induction anesthesia as well as during the laryngeal tube insertion, especially apnea [42% versus 0%;p<0.001], was more frequent in the propofol group [82.5% versus 27.5%; p<0.001]. We concludethat vital capacity breath induction with sevoflurane produces a faster loss of consciousness andfewer side effects than propofol and efficient for laryngeal tube insertion, but takes slightly longerthan propofol due to the prolonged jaw tightness.

#### Aneurysm, Dissecting

#### surgery

Survey of operative outcome for aortic dissection.

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Madani Heart Hospital - Department of Cardiothoracic Surgery **Saudi Medical Journal** 2007; 28 (5): 752-754 (14 ref.)

**Keywords:** Aortic Aneurysm-surgery; Treatment Outcome; Questionnaires

**Abstract:** To survey the results of operative outcome for aortic dissection. A retrospective studyon 46 patients, admitted for operation in Shahid Madani Heart Hospital in Tabriz, Iran from1994-2003. A questionnaire was used for collecting data. Statistical analysis was performed andwas carried out through a descriptive statistical methods. We included 30 males [65%] and 16females [35%]. Seven [15.2%] died in the operating room before surgery, while 39 patients [59%male and 41% female] underwent surgery. The mean age of patients was 48.9 +/- 2.3 years old.Preoperative diagnosis was carried out by transesophageal echocardiography and angiography. All patients were operated in an emergency situation. In 42% of patients aortic valve replacement[AVR] with ascending aorta was replaced and in10% the aortic valve was repaired with acute aortic dissection. In 10% of patients, the ascendingaorta with aortic arch was replaced. Four patients [14%] had distal aortic dissection andreplacement. Major complications were hemorrhage [31%] and respiratory failure [13.8%]. A totalof 20.7% died in hospital, and only 21 patients [45.5%] could be followed for 10 years. Acute aortic dissection is a fatal disease. With early diagnosis and surgical intervention, we can saveapproximately 75% of patients with very good functional class and survival in the mid term.

#### **Angiotensin-Converting Enzyme Inhibitors**

#### adverse effects

Angiotensin converting enzyme inhibitors impair recombinant human erythropoietin induced erythropoiesis in patients with chronic renalfailure.

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Saudi Medical Journal 2007; 28 (2): 193-196 (23 ref.)

**Keywords:** Receptors, Angiotensin-antagonists and inhibitors; Kidney Failure, Chronic; Anemia-drugtherapy; Erythropoietin, Recombinant; Treatment Outcome; Erythropoiesis-drug effects

Abstract: To investigate the effects of angiotensin converting enzyme [ACE] inhibitors/angiotensinreceptor blockers [ARBs] and other anti-hypertensive agents on recombinant human erythropoietin[rHuEPO] in chronic renal failure [CRF] patients. The present study was conducted at theNephrology Department, Khan Research Laboratories Hospital and Quaid-i-Azam University,Islamabad, Pakistan during March 2004 to February 2005. One hundred patients, 55 males and 45females [age range 13-78 years] were divided into 2 groups. Group-I patients received rHuEPOand ACE inhibitors/ARBs while Group-II patients received rHuEPO with other antihypertensivessuch as calcium channel blockers or beta-adrenergic receptor blockers. Monthly increment inhematocrit [HCT%] was monitored in both groups for 4 continuous months. One-way ANOVA onDunn's, univariate and multivariate analyses were carried out to determine any significantimprovement in erythropoiesis between the 2 treatment groups. Monthly increase in HCT% wassignificantly greater in the group that was treated with rHuEPO and antihypertensives other thanACE inhibitors/ARBs compared with that treated with ACE inhibitors/ARBs, an effect observedeven at a higher dose of rHuEPO, and the patients were iron replete. The present data from ourpopulation confirms that ACE inhibitors/ARBs interfere with rHuEPO therapy for treatment ofanemia in CRF. The ACE inhibitors/ARBs inhibit erythropoiesis induced by rHuEPO in CRFpatients, therefore, simultaneous use of ACE inhibitors/ARBs and rHuEPO should be carried outwith caution.

#### therapeutic uses

#### The role of renin blockers in the prevention of diabetes.

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Saudi Medical Journal 2007; 28 (1): 91-95 (23 ref.)

**Keywords:** Diabetes Mellitus-prevention and control; Receptors, Angiotensin-antagonists and inhibitors; Randomized Controlled Trials

Abstract: To evaluate the role of renin blockers angiotensin converting enzymes inhibitors [ACEI] or angiotensin receptor blockers [ARB] in the prevention of diabetes. We did a meta-analysis usingthe Cochrane group methodology of all available randomized controlled trials [RCTs] thatevaluated the role of renin blockers in which outcomes of newonset diabetes was reported. Thismeta-analysis was conducted between April 2005-April 2006 at King Faisal Specialist Hospital andResearch Center, Riyadh, Kingdom of Saudi Arabia. Thirteen trials including 91,388 individualsmet the inclusion criteria. There was a statistically significant reduction in the incidence ofnew-onset diabetes in patients receiving renin blockers compared to other antihypertensive agents[relative risks=0.79; 95% confidence interval=0.75-0.84]. There was a statistically significantreduction in the incidence of new-onset diabetes in patients receiving renin-blockers compared todiuretics, conventional antihypertensive therapy [diuretics or beta-blockers], and calcium channelblockers. Renin blockers reduce the incidence of new-onset diabetes and should be considered asfirst line therapy, when indicated, in patients at high risk for diabetes.

#### **Anterior Cruciate Ligament**

#### surgery

[Functional outcome of lower limb following anterior cruciate ligament reconstruction; a prospective clinical study].

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Tehran University Medical Journal [TUMJ] 2007; 65 (2): 62-68 (32 ref.)

Keywords: Prospective Studies; Knee-surgery; Treatment Outcome; Lower Extremity

Abstract: Both isokinetic testing and functional tests are commonly used to evaluate anteriorcruciate ligament reconstructed [ACLR] patients. The object of this study was to evaluate motorperformance of the knee and determine the relationship of isokinetic test scores to scores on avariety of lower extremity functional tests. Ten healthy subjects and eleven ACLR patients at leastsix months after surgery performed the following: knee isokinetic tests at 60 and 180 deg/sec;three functional tests including leg vertical jump, single hop, and triple cross-over hop for distance.The International Knee Document Committee Subjective Knee Evaluation Form [IKDCSKEF] wasused to score the selfassessment of each study participant. Paired T-test was used to comparethe involved and uninvolved knee. Pearson correlation coefficients were used to determine therelationship between the scores on the isokinetic test and functional tests. Significance wasdetermined by P<0.05. IKDCSKEF score was significantly lower in patients than control subjects.Quadriceps peak torque and functional test scores were significantly lower in the involved knee ofthe ACLR subjects compared to the uninvolved knee. Correlation coefficients of isokinetic peaktorque to body weight and functional testing were not significant in patients or control subjects, while the limb symmetry index [LSI] of the quadriceps isokinetics peak torque to body weight andthe LSI of the functional tests were significant [r = 0.54 to 0.97]. These results indicate a significant relationship between the LSI of various functional tests and the LSI of isokinetic testing amongACLR patients. Thus, in situations where an isokinetic dynamometer is not available, the LSI offunctional tests can be used to estimate quadriceps deficiency for ACLR patients.

#### Anti-Inflammatory Agents, Non-Steroidal

#### adverse effects

Endoscopic findings in children on non-steroidal anti-inflammatory drugs [NSAIDs].

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IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 197-200 (14 ref.)

Keywords: Endoscopy, Gastrointestinal-utilization; Peptic Ulcer-etiology; Risk Factors; Gastritis-etiology

Abstract: Non-steroidal anti-inflammatory drugs [NSAIDs] remain as the initial approach to thepharmacologic management in juvenile rheumatoid arthritis [JRA]. Gastrointestinal [GI] damageassociated with NSAIDs is common in adults, but there are few studies available in children. Thisstudy was performed to determine the GI complications due to the use of NSAIDs in a cohort of JRA patients by endoscopy. Twenty-one patients with JRA who were using NSAIDs for at least 3months were assessed clinically and by endoscopy at Pediatric Immunology Clinic of NemazeeHospital affiliated to Shiraz University of Medical Sciences in Shiraz, southern Iran from June 1999to June 2003. The mean age of the patients was 9.8 years [11 females], and the mean durationunder NSAIDs management was 16 months. The most common NSAIDs used was diclofenac. Glsymptoms were found in 42.9% of patients including 33.4% abdominal pain and 9.5% vomiting. There was no significant difference between the patients and symptoms free subjects in regard tomean duration of treatment. Macroscopic endoscopic lesions were found in 85.7% and infection ofHelicobacter pylori [Hp] in 14.3% of cases. There was no significant relationship betweenendoscopic findings and duration of treatment or clinical symptoms. Our data showed that patientsusing NSAIDs had frequent GI damage without any relationship to the duration of treatment. Therewere also a high number of children with GI damage and without any clinical complaint. Furthermore, we found no significant relationship between the duration of drug use and the Glcomplaints, and no relation between duration and GI complaints to upper GI tract endoscopiclesions. The possibility of GI derangements with NSAIDs in pediatric age group is high. Closemonitoring of symptoms and prevention measures are suggested.

#### Antibodies, Anticardiolipin

Anticardiolipin antibodies in stroke patients in Sudan. Appraisal of their significance in a region of high burden of endemic infections.

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**Neurosciences** 2007; 12 (1): 21-24 (22 ref.)

Keywords: Antibodies, Antiphospholipid; Cerebrovascular Accident-blood; Seroepidemiologic Studies; Prevalence;

Risk Factors; Infection

**Abstract:** To screen and evaluate the significance of anticardiolipin seroprevalence in patientswith acute ischemic stroke, in patients with infectious disease, and in healthy subjects resident inSudan, a tropical country endemic for

several infectious diseases. We conducted the study inKhartoum Teaching Hospital in Khartoum, Sudan between July 2003 and January 2005. Weincluded 89 stroke cases, 30 infectious disease patients, and 30 asymptomatic healthy subjects. We estimated IgG and IgM anticardiolipin antibody titers in serum samples from all subjects in the3 study categories at the time of hospital admission. We found a significantly higher prevalence ofanticardiolipin antibodies in the stroke and infection groups compared to the healthy subjects. However, there was no significant difference in anticardiolipin seroprevalence between patientswith stroke and patients with infectious disease. Caution is necessary when interpreting thepresence of antiphospholipid antibodies as a stroke risk in patients harboring infection or living inplaces with high endemicity of infectious diseases.

#### **Antitubercular Agents**

Impact of anti-tuberculosis therapy on plasma zinc status in childhood tuberculosis.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1078-1084 (26 ref.)

Keywords: Zinc-blood; Treatment Outcome

**Abstract:** This study compared plasma zinc levels in 15 children with active pulmonarytuberculosis, 15 malnourished children and 15 healthy children. Mean plasma zinc concentrationsin children with tuberculosis [71.7 microg/dL] were not significantly different than the other 2groups [72.5 and 76.9 microg/dL]. The zinc status of the children with tuberculosis was evaluatedafter 2 months and 4 months of DOTS therapy. The serum zinc level during antituberculosistherapy decreased after 1 month and then recovered to the initial level after 4 months oftreatment.

#### **Appendicitis**

#### diagnosis

Computed tomography and ultrasonography in the diagnosis of equivocal acute appendicitis. A meta-analysis.

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Saudi Medical Journal 2007; 28 (2): 173-180 (60 ref.)

**Keywords:** Appendicitis-radiography; Appendicitis-ultrasonography; Appendectomy; Tomography, X-RayComputed; Early Detection

**Abstract:** Acute appendicitis is the most common acute surgical condition of the abdomen.Computed tomography [CT] and Ultrasonography [US] can reduce the rate of complications andunnecessary appendectomies, in addition, they can establish an alternative diagnosis. We carriedout a systematic review to evaluate the evidence relating radiological imaging [US and CT scan]and early detection of acute appendicitis in patients presenting with equivocal findings, and toprovide recommendations to use radiological imaging [US and CT scan] in diagnosing acuteappendicitis as part of the initial clinical assessment of the patients presenting with equivocalfindings to reduce complications and unnecessary appendectomies. We used the MEDLINE tosearch for articles published from 1966 to December 2005 that related to radiological imaging ofacute appendicitis; additional articles were identified from the bibliographies of review articles. Selection criteria were used to limit the analysis to prospective studies with more than 100 patients involved in each study group. Forty-five studies fulfilling our inclusion and exclusioncriteria were extracted, and 13,046 patients were included. Although the CT scan was moresensitive than US in diagnosing patients with equivocal appendicitis [93.4% [95% CI 92.1-94.6]versus 83.7% [95% CI 82.3-85.0]], either diagnostic study should be used as part of the initialassessment of the patients presenting with equivocal findings.

#### **Aprotinin**

#### administration, dosage

Ultra-low dose aprotinin effects on reducing the need for blood transfusion in cardiac surgery.

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Saudi Medical Journal 2007; 28 (1): 49-53 (21 ref.)

**Keywords:** Blood Transfusion-statistics and unmerical data; Cardiac Surgical Procedures-adverseeffects; Hemostatistics-administration, dosage; Postoperative Hemorrhage-prevention and control

Abstract: To assess the effects of ultra-low dose one million kallikrein inhibitor units [KIU] ofaprotinin on bleeding and the need for transfusion after cardiac surgery. We carried out thisrandomized clinical trial on 162 cardiac surgery patients in Shahid Madani Hospital, Tabriz, Iranfrom April 2004 to December 2005. The patients were randomly divided into 2 groups of 81individuals. In the aprotinin group, 0.5 million KIU infused before and 0.5 million KIU duringcardiopulmonary bypass. In the placebo group, 100 ml normal saline was infused as above. Theneed to use fresh frozen plasma [FFP], packed red blood cells [PRBCs] transfusion during, afteroperation, the rate of chest tubes

drainage at 6, 12 and 24 hours after surgery were measured in 2groups. Chest tubes drainage at 6 hours after surgery was 190 +/- 24 ml in the aprotinin group and266 +/- 33 ml in the placebo group [p=0.066]. The amount of bleeding at 12 and 24 hours wassignificantly different between 2 groups [p=0.048, p=0.009]. The frequency of blood productstransfusion in the aprotinin group was 68% and in the placebo group was 75% [p=0.02]. Thenumber of PRBCs and FFP units transfused were significantly lower in the aprotinin group[p=0.000, p=0.005]. Total amount of blood and products transfusion in the aprotinin group was2.56 +/- 0.27 units and in placebo group it was 4.37 +/- 0.27 units [p=0.0001]. Results indicate thatthe use of one million KIU of aprotinin in cardiac surgery is effective in reducing postoperativebleeding and transfusion requirements.

#### Arrhythmia

[Cardiac rhythm disturbance in athletes with cardiac connective tissue dysplasia syndrome].

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Russian State University of Physical Culture - Department of Sports Medicine Tehran University Medical Journal [TUMJ] 2007; 65 (2): 18-23 (11 ref.)

Keywords: Mitral Valve Prolapse; Connective Tissue Diseases; Sports

Abstract: Cardiac connective tissue dysplasia syndrome consists of mitral valve prolapse [MVP], anomalously located chordae tendinae of the left ventricle, or a combination of the two. MVP ismarked by the displacement of an abnormally thickened mitral valve leaflet into the left atriumduring systole. The nonclassic form of MVP carries a low risk of complications. Patients withsevere classic MVP can suffer from mitral regurgitation [MR], infective endocarditis, and,infrequently, sudden death from cardiac arrest. Anomalously located left ventricular chordaetendinae are fibrous or fibromuscular bands that stretch across the left ventricle from the septum tothe free wall. They have been associated with murmurs and arrhythmias. The purpose of this studyis to assess the performance, as measured by the physical working capacity [PWC170] andmaximal oxygen consumption [VO2 max], in athletes with cardiac connective tissue dysplasiasyndrome. Of the 183 male athletes studied, 158 had cardiac connective tissue dysplasiasyndrome and 25 were normal, healthy controls. Their mean age was 16.23 [+/- 5.48] years andmean training time was 5.2 [+/- - 4.6] years. Athletes with cardiac connective tissue dysplasiasyndrome were divided to four groups. Group 1 consisted of those with MVP; Group 2 had patientswith an additional cord in left ventricle; Group 3 was made up of athletes with a combination of MVP and additional cord; Group 4 contained athletes with a combination of MVP and MR. Allsportsmen were studied by echocardiograph, veloergometer, and those with arrhythmias werestudied and recorded using a Holter monitor. The most common form of this syndrome in our studygroups was MVP. The PWC170and VO2 max among the athletes with the combination of MVP+MR [Group 4] was lower than that of athletes in other groups [P<0.05]. The most commonarrhythmia among the athletes with anomalously located left ventricular chordae, Group 2, wasWolf-Parkinson-White [WPW] syndrome and early repolarization syndrome. The PWC170 and VO2max in athletes with WPW syndrome, was lower than the other athletes who did not have WPWsyndrome [P<0.05]. Conclusion: The lowest PWC170 and VO2 max were in those athletes with aprogressive abnormality. However, the PWC170 and VO2 max among athletes with anomalouslylocated left ventricular chordae was normal. Therefore, among athletes with a combination of anomalously located left ventricular chordae and disruption of rhythm, the PWC170 and VO2 maxare lower than normal.

#### Arteriovenous Fistula

Creation of permanent hemodialysis vascular access in patients with failed arteriovenous fistula.

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Saudi Medical Journal 2007; 28 (2): 213-215 (16 ref.)

Keywords: Renal Dialysis; Graft Occlusion, Vascular; Cost-Benefit Analysis; Surgical Procedures, Operative

**Abstract:** To compare the patency rate and complications of arteriovenous fistula [AVF] withsynthetic graft in patients with previous history of failed AVF. This study was carried out at SinaHospital, Tehran, Iran from April 2002 to July 2003. Patients who had been referred to our centerwith previous failed attempt for creation of AVF were collected. We again tried to create an AVF insome of these patients according to physical examination and clinical judgment of the vascularsurgeon. A synthetic graft was inserted for the remainder of the patients. All patients were followedup for 3 months. Elbow fistula placement was possible in 43% of patients including half of patientswith diabetes and half of those more than 65 years old. Failure occurred in 33% of grafts versus19% of fistulas. The complications were venous hypertension in one case and infection in 2 cases, all from the graft group. Our results show lower failure, mortality, and complication in AVFs thanthe synthetic graft, similar to previous reports. However, there were some limitations such as smallsample of patients and short duration of follow up in our study. We suggest that AVF is an optioneven in patients who had previous multiple procedures with the advantage of being cost-effective, and with fewer complications. However, we cannot conclude any superiority for one method, as its not a properly designed comparative trial.

#### surgery

[Prediction of early failure of vascular-access arteriovenous fistula based on immediate postsurgical evaluation].

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Tehran University Medical Journal [TUMJ] 2007; 65 (2): 40-45 (27 ref.)

**Keywords:** Arteriovenous Fistula-complications; Renal Dialysis; Kidney Failure, Chronic

Abstract: For patients requiring chronic hemodialysis, the preferred site for vascular access is anautogenous arteriovenous fistula. Although a properly formed fistula is advantageous because it isless susceptible than other types of vascular accesses to infection and clot formation and can lastlonger than any other types of vascular access, AV fistula has a high rate of early failure that canincrease immediate cost and complications. In this study, the prognostic value of physicalexamination of arteriovenous fistula by the surgeon at the end of the surgery was evaluated. In thegeneral surgery ward of Imam Khomeini Hospital in 326 chronic renal failure patients, 354arteriovenous fistula operations were accomplished by two surgeons from 1377 to 1381 [ca. 1998to 2002]. The performance of each fistula was divided into the following groups by the surgeon atthe end of operation: 1] systolic and diastolic thrill, 2] systolic thrill 3] souffle 4] pulse 5] notfunctional. Clinical function of the fistula was evaluated by the same surgeon in the following daysif no souffle or thrill, early failure was detected on initial inspection. : In the 354 cases of arteriovenous fistula, the total early failure rate was 12.7%. The lowest early-failure rate was 3.5%in the systolic and diastolic thrill group. The highest early-failure rate was in the not functionalgroup [P<0.001]. There was no correlation between early failure and age, sex, surgeon andlocation of fistula. Optimally, an arteriovenous fistula has a thrill with a soft compressible pulse. Atthe end of each operation, if the surgeon cannot detect a thrill at the fistula site, can find only pulse, or if the function is otherwise unsatisfactory, considering of a new arteriovenous fistula may be required, however it is better to postpone the surgery.

#### Arthritis, Rheumatoid

#### immunology

Increased serum anti-mycobacterial antibody titers in rheumatoid arthritis patients. Is there any specific antigenic target?.

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Saudi Medical Journal 2007; 28 (5): 717-722 (20 ref.)

**Keywords:** Antibodies, Bacterial-blood; Antigens, Bacterial-immunology; Mycobacteriumtuberculosis-immunology; Mycobacterium bovis-immunology; Enzyme-Linked Immunosorbent Assay

Abstract: To investigate the presence of immunoreactivity against mycobacterial antigens in thesera of patients with rheumatoid arthritis [RA] and to detect the target of the immune reaction. Thisstudy was carried out on 60 patients with RA, and 25 patients with no joint diseases in thelaboratory of Clinical Microbiology Department of Ankara University Medical Faculty, Ankara,Turkey between July 2003 to January 2004. Secreted and cellular antigens of Mycobacteriumtuberculosis [M. tuberculosis] H37Rv and Mycobacterium bovis [M. bovis] were isolated andpurified by high performance liquid chromatography to antigenic fractions. The immunoreactivity ofpatient and control sera against these antigens were determined by enzyme-linked immunosorbentassay [ELISA]. Immunoreactivity against mycobacterial antigens in RA patients were significantlyhigher than controls. Significant difference between patients and controls has been determinedwith M. bovis Bacillus Calmette Guerin [BCG] culture fluid and sonicate antigens, but not with M.tuberculosis H37Rv. This suggests that the antigen triggering immune response in patients withRA may belong to or mainly expressed on M. bovis BCG. The ELISA results showed significant difference between RA patients and controls with all antigenic fractions. Presence of increasedimmunoreactivity against mycobacterial antigens in the sera of patients with RA was detected. When statistical analyses was considered, we cannot put forward any antigenic fraction alone asthe one responsible for the increased reactivity.

#### **Asthma**

#### epidemiology

Asthma and other allergic diseases in 13-14-year-old schoolchildren in Urmia: an ISAAC study.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1005-1016 (27 ref.)

**Keywords:** Asthma-diagnosis; Prevalence; Risk Factors; Sex Factors; Students; Rhinitis, Allergic, Seasonal-diagnosis; Questionnaires; Respiratory Sounds

**Abstract:** We determined the prevalence and risk factors of asthma, allergic rhinitis and atopiceczema in 3000 13-14-year-old schoolchildren in Urmia, Islamic Republic of Iran. We used theInternational Study of Asthma and Allergies

in Childhood [ISAAC] written and video questionnaires. With the written questionnaire, the prevalence of current symptoms [within the past 12 months] was: wheeze 14.5%, allergic rhinitis 23.6% and eczema 10.1%. Self-reported asthma ever wasonly 2.1%. With the video questionnaire, the prevalence of wheeze was lower; 7.4% for wheeze atrest ever and 4.6% during the past 12 months. Boys had a significantly higher prevalence for mostitems examined except for eczema.

#### etiology

### Association of the expression of IL-4 and IL-13 genes, IL-4 and IgE serum levels with allergic asthma.

Afshari, Jalil Tavakkol; Hosseini, Reza Farid; Farahabadi, Sara Hosseini; Heydarian, Farhad; Boskabady, MohammadHossein; Khoshnavaz, Rasoul; Razavi, Alireza; Karimiani, Ehsan Ghayoor; Ghasemi, Gholamreza Bu-Ali Research Institute - Immunology Research Centre - Department of Immunology

Iranian Journal of Allergy, Asthma and Immunology 2007; 6 (2): 67-72 (22 ref.)

**Keywords:** Asthama-immunology; Asthma-physiopathology; Interleukin-4; Interleukin-13; PolymeraseChain Reaction; Electrophoresis; Immunoglobulin E

Abstract: Immune and inflammatory responses mediated by cytokines, play important roles in thepathophysiology of asthma. These responses are associated with overexpression of Th2 cytokinessuch as IL-4 and IL-13. These two cytokines use common receptors for signaling that lead toidentical immunological effects and regulation of the Th1/Th2 balance. The aim of this study was todetermine whether patients with allergic asthma display overexpression of IL-4 and IL-13 genes. Using RT-PCR, we examined the expression of IL-4 and IL-13 genes in twenty asthmatic casesand twenty normal individuals. Total levels of serum IgE and IL-4 were also determined by ELISAmethod. Expression of IL-13 gene in 70% of patients with allergic asthma was higher than controls[P=0.01]. There was no correlation between the expression of IL-13 gene and total level of serumIgE [P=0.07]. Expression of IL-4 gene was detected in 30% of the patients and none of the normalindividuals as determined by RT-PCR [P=0.01]. Mean of serum IgE levels in patients and controlswere 84.9 IU/ml and 62.2 IU/ml, respectively. Level of serum IgE was more than 100 IU/ml in 30% of patients [P=0.03]. Mean of serum IL-4 levels in patients and controls were 15.73 pg/ml and13.07 pg/ml, respectively. There was a relation between levels of serum IgE and IL-4 in 73% ofcases. The results showed that there was a correlation between the expression of IL-4 gene andthe level of serum IL-4. Levels of serum IgE and IL-4 were considerably higher in asthmatics thannonasthmatic controls.

#### E-selectin S128R polymorphism leads to severe asthma.

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Iranian Journal of Allergy, Asthma and Immunology 2007; 6 (2): 49-57 (44 ref.)

Keywords: Asthma-physiopathology; Polymerase Chain Reaction; E-Selectin; Genotype; Polymorphism, Genetic

Abstract: The E-selectin mediates the interaction of activated endothelial cells with leukocytes andplays a fundamental role in the pathogenesis of asthma. It has been suggested that an S/R[Serine128Arginine] polymorphism of E-selectin alters ligand binding function. Our purpose in this study was to determine whether this Serine 128Arginine polymorphism influences the risk ofasthma and also to analyze the possible correlation of disease severity in Iranian patients withpolymorphism of E-selectin. We studied human E-selectin gene polymorphism in 172 asthmaticpatients and 173 healthy volunteers by polymerase chain reaction-restriction fragment lengthpolymorphism [PCR-RFLP]. To determine the severity of the asthma's situation, a questionnairewas prepared requesting the following information: age, sex, clinical signs and symptoms and pastmedical history. After the participants filled in the questionnaire, all active or ex-smoker patientswere excluded. A trained observer assessed airway reversibility, peak flowmetry and spirometry inasthmatic patients. We found increased serum levels of soluble E-selectin [sE-selectin] inasthmatic patients compared with healthy subjects [P<0. 0001]. Frequencies of the SS, SR, andRR genotypes were found as 66.3%, 31.4%, and 2.3% in the patients and 91.9%, 8.1%, and 0.0% in control subjects, respectively. The 128Arg allele was more prevalent in patients than controls[OR 5.78; 95% CI, 3.07-10.86, P<0.0001]. However, in this study the polymorphism was notassociated with circulating sE-selectin levels. We found a direct correlation between the level ofsE-selectin and the severity of asthma [P=0.001]. On the other hand, there was a close relationbetween 128Arginine carriage and disease severity [P<0.0001]. These results suggest that the Ser128Arg polymorphism of the E-selectin gene is a genetic factor that may be associated with theseverity of asthma.

#### **Atrial Fibrillation**

#### diagnosis

A 36-year-old man with palpitation.

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Hamad General Hospital - Department of Medicine Saudi Medical Journal 2007; 28 (1): 153-154 (5 ref.)

**Keywords:** Atrial Fibrillation-complications

#### Audiometry, Evoked Response

[Accuracy of cortical evoked response audiometry in estimating normal hearing thresholds].

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Opposite Buali Hospital - Rehabilitation Faculty - Department of Audiology **Tehran University Medical Journal [TUMJ]** 2007; 65 (3): 17-22 (25 ref.)

Keywords: Hearing Tests; Auditory Threshold

Abstract: Cortical Evoked Response Audiometry [CERA] refers to prediction of behavioral pure-tone thresholds [500-4000 Hz] obtained by recording the N1-P2 complex of auditory longlatency responses. CERA is the preferred method for frequency-specific estimation of audiogramin conscious adults and older children. CERA has an increased accuracy of determination of thehearing thresholds of alert patients with elevated hearing thresholds with sensory hearing loss;however few publications report studies regarding the use of CERA for estimating normal hearingthresholds. The purpose of this research was to further study the accuracy of CERA in predictinghearing thresholds when there is no hearing loss. Behavioral hearing thresholds of 40 alert normalhearing young adult male [40 ears] screened at 20 dB HL in 500-8000Hz, predicted by recordingN1-P2 complex of auditory evoked long latency responses to 10-30-10 ms tone bursts. AfterCERA, pure tone audiometry performed by other audiologist. All judgments about presence ofresponses performed visually. Stimulus rate variation and temporary interruption of stimulus presentation was used for preventing amplitude reduction of the responses. 200-250 responseswere averaged near threshold. In 95% of the hearing threshold predictions, N1-P2 thresholds werewithin 0-15 dB SL of true hearing thresholds. In the other 5%, the difference between the CERAthreshold and true hearing threshold was 20-25 dB. The mean threshold obtained for tone burstsof 0.5, 1, 2 and 4 kHz were 12.6 +/- 4.5, 10.9 +/- 5.8, 10.8 +/- 6.5 and 11.2 +/- 4.1 dB, respectively, above the mean behavioral hearing thresholds for air-conducted pure tone stimuli. On average, CERA has a relatively high accuracy for the prediction of normal hearing sensitivity, comparable tothat of previous studies performed on CERA in hearing-impaired populations.

#### **Auditory Threshold**

#### physiology

#### Hearing threshold in patients with chronic renal failure.

Lasisi, Akeem O.; Salako, Babatunde L.; Kodiya, Mohammed A.; Amusat, Mohammed A.; Osisanya, Wemimo P.

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University of Ibadan - Department of Otorhinolaryngology Saudi Medical Journal 2007; 28 (5): 744-746 (16 ref.)

Keywords: Kidney Failure, Chronic-physiopathology; Kidney Failure, Chronic-complications; HearingLoss,

Sensorineural-etiology

Abstract: To determine the pattern of hearing loss among patients with chronic renal failure [CRF]. This is a case control study carried out jointly by the Otorhinolaryngology and NephrologyDepartments of the University College Hospital Ibadan, Nigeria between December 2004 andMarch 2006. Consecutive CRF patients who satisfied the inclusion criteria were recruited, thepatients had not had hemodialysis prior to inception of the study. Parameters like age, gender,duration of illness and blood pressure were recorded and pure tone audiometry was carried out. The data was analyzed using the Statistical Package for Social Sciences. Thirty-three CRFpatients and 28 healthy controls [34 males and 27 females] were used. The age range was 16-72years, mean of 45.30 [SD 16.20]. Sensorineural hearing loss was found in 67% of CRF and 32% ofcontrols. The mean hearing threshold of CRF was 47.42 [SD 18.55] while the controls was 35 db,unpaired t-test [value -5.155] and Pearson correlation p=0.0008, r=0.614 showed the differencewas significant. There was a correlation between duration of renal disease and hearing thresholdp=0.00387 [r=0.73]. There was no correlation between the hearing threshold and the diastolicblood pressure p=0.056 dosage of diuretics p=-0.155 [r=0.12] and creatinine level of the patientsp=0.35 [r=0.31]. Sensorineural hearing loss is common among patients with CRF and related tothe duration of renal disease, we recommend periodic audiological assessment incorporated in thecare of these patients.

#### **Autoimmune Diseases**

#### Autoimmune progesterone anaphylaxis.

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Shahid Sadoughi University of Medical Sciences - School of Medicine - Department of Pediatrics

Iranian Journal of Allergy, Asthma and Immunology 2007; 6 (2): 97-99 (13 ref.)

Keywords: Dermatitis-etiology; Anaphylaxis; Progesterone-adverse effects; Skin Tests

**Abstract:** Progesterone induced dermatitis is a rare disorder. It typically occurs in females due toan autoimmune phenomenon to endogenous progesterone production, but can also be caused byexogenous intake of a synthetic progestin. Here in, we present a case of autoimmuneprogesterone anaphylaxis [AIPA] observed in an adolescent female. The patient is an 18-year-oldCaucasian female with no significant past medical history and no prior exogenous hormone use, who presented to her primary care physician complaining of cyclic skin eruptions with dyspnea, cough and respiratory distress. She noted that her symptoms occurred monthly, just prior to hermenses. An intradermal skin test using 0.1 cml of progesterone was performed. The patientdeveloped a 15mm wheal after 15 minutes, confirming

the diagnosis of AIPA. The patient was started on a continuous regimen of an oral conjugated estrogen [0.625mg]. The skin eruptions andrespiratory symptoms have not returned since the initiation of this therapy. Autoimmuneprogesterone dermatitis manifests via the occurrence of cyclic skin eruptions. Women with the disorder commonly present with dermatologic lesions in the luteal phase of the menstrual cycle, if there are any other organ involvement in addition to skin [e.g. lung, GI] the reaction should becalled as autoimmune progesterone anaphylaxis. Diagnosis of AIPA is confirmed by performing askin allergen test using progesterone.

#### **Back Pain**

#### etiology

Transforaminal epidural steroid injection for the treatment of severe back pain caused by cement leakage during kyphoplasty procedure.

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GATA Medical Faculty - Department of Anesthesiology and Reanimation

Neurosciences 2007; 12 (1): 79-80 (8 ref.)

**Keywords:** Back Pain-drug therapy; Steroids-therapeutic uses; Injections, Epidural; Treatment Outcome; Magnetic Resonance Imaging

**Abstract:** Kyphoplasty is a minimally invasive procedure that is increasingly used to treat paincaused by compression fractures of vertebral bodies. A 56-year-old woman who had acompression fracture on the vertebral body of L5 vertebra was admitted to the AlgologyDepartment with a severe low back and leg pain. Kyphoplasty was planned for pain relief. Shesuffered severe pain in her back and left leg immediately after the procedure because of a leakageof injected cement through the fracture line. After injection of triamcinolone and bupivacainetransforaminally into the L5-S1 anterior epidural space, her pain complaints ended. If radicularpain symptoms caused by cement leakage are secondary to a chemically mediated non-cellularinflammatory reaction, transforaminal epidural steroid injection should be useful.

#### **Bacterial Infections**

#### microbiology

Study of the bacterial agents in nosocomial and acquired infections based on the blood culture in neonatal intensive care unit of a hospital, north east of Iran.

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University of Mashhad - Medical School - Imam Reza Hospital **Saudi Medical Journal** 2007; 28 (5): 723-726 (17 ref.)

Keywords: Cross Infection-microbiology; Cross Infection-epidemiology; Sepsis-microbiology; IntensiveCare Units,

Neonatal

**Abstract:** To study the distribution of bacterial agents in bloodstream infections amonghospitalized patients in the neonatal intensive care unit [NICU]. From March 2003 to February2004, 1341 blood samples were taken from hospitalized infants in NICU of Imam Reza Hospital inMashhad north east of Iran. In this study, 6 ml of blood was extracted from the patients havingsepticemia, which was then added to the bottle containing the blood culture broth. The bottleswere labeled and incubated at 35 degrees celcius for maximum of 7 days. The result shows thatout of the 202 patients with positive blood cultures 109 had gram positive organisms while 93 hadgram negative organisms. In those with gram-positive bacteria, 73 cases were acquired infectionand 36 cases were nosocomial infection. These results for gram negative bacteria showed that 51cases were due to acquired infection and 42 cases due to nosocomial infection. In determining therelation between the rate of death and the type of infection, we found that out of 202 patients 83[41%] died. Of these cases 48 [39%] were due to acquired infection and 35 [45%] were due tonosocomial infection. We conclude that nosocomial bloodstream infection is an important target forthe most aggressive strategies for prevention and control.

#### **Behcet Syndrome**

#### P50 variations in Behcet's patients without neurologic findings.

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Neurosciences 2007; 12 (1): 50-52 (24 ref.)

Keywords: Electroencephalography; Early Detection; Auditory Perception; NeurologicManifestations

**Abstract:** In the present study, subclinical lesion involvement was investigated using the P50component in Behcet's patients without neurological manifestation. We performed this clinicalresearch in Erciyes University, Faculty of Medicine between December 2000 and November 2001. The studies were carried out on 18 Behcet's patients without neurologic findings and 18 volunteersfor control. Standard Ag/AgCl electrodes in plastic cups were used for monopolar

EEG derivations. They were attached with electrode paste and tape at the Cz [vertex] according to the 10-20system. The auditory stimuli were delivered in pairs. The P50 waves, which may be taken fromapproximately 50 msec from the stimuli, were collected by computer system. Amplitudes and attencies of the P50 components were measured in the same system. This study showed that thesuppression of P50 responses performed by the test stimuli, was significantly more decreased in Behcet's patients than the control subjects. The decrease of the suppression of the auditory P50 response to repeated stimuli reflects a deficit in the central nervous system's ability, such asattention, cognition, and sensory input in Behcet's patients and can be used as aneurophysiological marker in subclinical lesions in these patients.

#### beta 2-Microglobulin

#### cerebrospinal fluid

## Elevated cerebrospinal fluid beta-2 microglobulin as a tumor marker in a patient with myeloma of the central nervous system.

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Saudi Medical Journal 2007; 28 (1): 128-130 (12 ref.)

**Keywords:** Tumor Markers, Biological-cerebrospinal fluid; Multiple Myeloma-cerebrospinal fluid; BrainNeoplasms-cerebrospinal fluid

**Abstract:** Myeloma involvement of the nervous system is rare. Extensive literature review revealedonly a few cases reported from different parts of the world. The presence of CNS symptoms and detection of plasma cells in the CSF is the usual basis of diagnosis. In addition, immunoelectrophoresis and immunofixation for detection of monoclonal protein confirm thediagnosis in some cases, while some authors used flow cytometry and cytogenetic studies on CSF. Reports of multiple myeloma also include unfavorable cytogenetic abnormalities of chromosome 13. We report a case with relapsed CNS multiple myeloma with the detection of elevated beta-2 microglobulin [beta2M] as a tumor marker in the CSF.

## Elevated cerebrospinal fluid beta-2 microglobulin as a tumor marker in a patient with myeloma of the central nervous system.

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Neurosciences 2007; 12 (1): 68-70 (12 ref.)

**Keywords:** Multiple Myeloma-diagnosis; Tumor Markers, Biological; Central Nervous System Neoplasms; Plasma Cells; Flow Cytometry; Cytogenetics; Electrophoresis; Magnetic Resonance Imaging

**Abstract:** Myeloma involvement of the nervous system is rare. Extensive literature review revealedonly a few cases reported from different parts of the world. The presence of CNS symptoms and detection of plasma cells in the CSF is the usual basis of diagnosis. In addition, immunoelectrophoresis and immunofixation for detection of monoclonal protein confirm thediagnosis in some cases, while some authors used flow cytometry and cytogenetic studies on CSF. Reports of multiple myeloma also include unfavorable cytogenetic abnormalities of chromosome 13. We report a case with relapsed CNS multiple myeloma with the detection of elevated beta-2 microglobulin [beta2M] as a tumor marker in the CSF.

#### beta-Lactamases

#### biosynthesis

## Prevalence of extended-spectrum beta-lactamases-producing isolates over a 1-year period at a University Hospital in Oman.

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Saudi Medical Journal 2007; 28 (1): 22-27 (45 ref.)

**Keywords:** Escherichia coli-drug effects; Escherichia coli-enzymology; Klebsiella pneumoniae-drugeffects; Klebsiella pneumoniae-enzymology; Microbial Sensitivity Tests; Hospitals, University; Time Factors; Prevalence

Abstract: To evaluate the prevalence of extended-spectrum beta-lactamases isolates over oneyear period at Sultan Qaboos University Hospital. We identified the ESBL isolates during a12-month period from July 2004 to June 2005, using a commercial system, and confirmed theresult using the National Committee for Clinical Laboratory Standards-approved double-diskdiffusion method. Sensitivity was recorded for a wide range of antibiotics, aminoglycosides, carbapenem, cephalosporins, quinolones, aztreonam, ampicillin, amoxicillin/clavulanate, ampicillin/sulbactam, piperacillin - tazobactam, trimethoprim / sulfamethoxazole and nitrofurantoin.Of the total ESBL isolated, 29.6% were from medical ward, followed by outpatients clinic, 24.3%.Urine was the main source of ESBLs 70.4%, followed by 16.5% from blood. We observed a 100% sensitivity to carbapenems, whereas 93.9% of the isolates were susceptible to amikacin.Cephalosporins were 100% resistant, except for cefoxitin, which demonstrated sensitivity of 77.4%.

Aztreonam, ampicillin, co-amoxyclav and ampicillin/sulbactam were 100% resistant. Of theisolates, 57.4% were sensitive to nitrofurantoin, whereas Tazocin showed 49.6% sensitivity and co-trimoxazole 13.9%. To quinolones, 74.8% of the isolates were resistant. Excess use of thirdgeneration cephalosporins led to increase rate of ESBLs, which are difficult to treat. Carbapenemare most reliable for treatment of infections caused by ESBL isolates. However, overuse of carbapenem may lead to resistance of other gram-negative organisms. Therefore, justifiable use ofthird-generation cephalosporins, will be an effective means of controlling and decreasing thespread of ESBL isolates.

#### beta-Thalassemia

#### complications

Beta thalassemia major, a cause of testicular microlithiasis.

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IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 212-214 (26 ref.)

**Keywords:** Lithiasis-pathology; Lithiasis-etiology; Lithiasis-diagnosis; Testis-pathology; Testis-ultrasonography; Calcium

**Abstract:** Testicular microlithiasis is a rare condition characterized by deposition of calcium in theLamina of semineferous tubules of testis. The ultrasound of testicular microlithiasis shows bright1-3 mm echogenic foci in parenchyma. Herein, we report a first case of testicular microlithiasis inmajor beta thalassemia that was demonstrated in testicle's ultrasound

#### diagnosis

Screening for beta-thalassaemia carriers in Egypt: significance of the osmotic fragility test.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 780-786 (19 ref.)

Keywords: Heterozygote Detection; Osmotic Fragility; Sensitivity and Specificity; Transferrin; Iron-blood; Hemoglobin A2

**Abstract:** To estimate beta-thalassaemia carrier rate and to determine an accurate massscreening test, we tested 1000 randomly selected children aged 5-16 years from differentgeographical areas of Egypt. Microcytosis was present in 412 participants. The osmotic fragilitytest was positive in 81.1% of the 90 beta-thalassaemia carriers; in the indeterminate group [12participants], the test was positive in 83.3%; in the 310 who were iron deficient, the test waspositive in 63.9%. beta-thalassaemia carrier rate was >/= 9%. Serum iron, microcytosis, HbA2level and transferrin saturation were accurate tests for detecting carriers. For the one-tube osmoticfragility test, sensitivity was 87.0% and specificity 34.1%; the test has limited use for a massscreening programme in Egypt, where iron deficiency is prevalent.

#### **Bicuspid**

#### anatomy and histology

Frequency of two canals in maxillary second premolar tooth.

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Hamdard University - Dental Hospital - Department of Oral and Maxilofacial Surgery

JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 12-14 (28 ref.)

**Keywords:** Dental Pulp Cavity-anatomy and histology; Bicuspid-radiography; Sex Factors; Age Factors; Cross-Sectional Studies

Abstract: To determine the frequency of two canals in relation to age and gender as well as roleof shift cone angle radiographic technique in maxillary second premolar tooth. A cross-sectional study. The study was conducted in Operative Department [Endodontic Department], HamdardUniversity Dental Hospital, Karachi, from January 2004 to February 2005. One hundred and twentypatients were selected for the study, based on non-probability purposive sampling technique. Twenty patients were dropped out of the study and the data was analyzed for 100 patients. Allpatients were examined clinically as well as radiographically. Then the canals were opened to further confirm and treat the tooth. The findings were noted on a performa and then cross-tabbedfor the significant difference. One hundred patients [43 males [43%] and 57 females [57%]] whosemean age was 36.2 [SD+/-7.3] were treated. Forty [40] years was the age limit for dividing thepatients into two groups. Out of 43 males, 27 [63%] were below 40 years and out of 57 females, 38 [67%] were below 40 years. Statistical analysis with Chi-square revealed no significant difference. Out of 43 males, 27 [63%] had two canals and out of 57 females, 30 [53%] had twocanals with no significant difference between the two groups. Results of parallel X-ray were crosstabbed with shift cone angle technique and the difference was highly significant [Chi-square value9.61 and p-value 0.002]. Frequency of two canals was high is not age or gender dependant. Shiftcone angle technique should be used as radiographic support for the clinical examination toidentify the number of canals. The second canal became apparent with shift cone technique in 78% cases where additional periapical radiographs with shift cone angle technique were taken.

#### **Birth Intervals**

Birth interval: perceptions and practices among urban-based Saudi Arabian women.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 881-892 (29 ref.)

Keywords: Cross-Sectional Studies; Age Factors; Perception; Urban Population; Educational Status; Contraceptives, Oral

**Abstract:** To determine perceptions towards birth spacing, actual birth interval and associatedsociodemographic factors, we carried out a cross-sectional study on 436 mothers aged 15-50years in Al-Khobar. All had had >/= 2 children within the previous 10 years. Only 5.2% preferred abirth interval of < 2 years, 28.2% preferred a 2-< 3-year interval, while the rest favoured >/= 3years. Education and employment status were predictors of birth spacing preference. About halfwere not aware of the physical benefits associated with longer birth interval. Only 26.3% had meanbirth interval < 2 years. Age and employment status were significant positive predictors of longerbirth interval. Oral contraception was the most popular method adopted for child spacing.

#### **BK Virus**

#### BK virus infection in a renal transplant Saudi child.

Maghrabi, Mohamed; Osoba, Abimbola O.; Marwan, Dalia King Khalid National Guard Hospital - Department of Pediatrics

Saudi Medical Journal 2007; 28 (1): 121-124 (13 ref.)

Keywords: Kidney Transplantation; Polymavirus Infections-diagnosis; PostoperativeComplications-diagnosis; Child

Abstract: BK human polyomavirus BKV causes an asymptomatic primary infection in children, butlater, establishes latency mainly in the urinary tract. Virus-host interactions influencing persistenceand pathogenicity are not well-understood. We present here a 12-year-old Saudi boy, who hadrenal transplant in Egypt. Seven months later, he was admitted to our Pediatric Nephrology Unit asa case of renal impairment. He developed BKV infection, diagnosed and successfully managed inour hospital. This case demonstrates the expanding clinical importance of BKV in a post renaltransplant patient. This virus can be detected in transitional cells in the urine decoy cells usingcytology. Testing for BKV deoxyribonucleic acid in urine and blood is an early detection assay, andcan be used as a screening test in the early stages. The early reduction of immunosuppressioncan improve the prognosis. No specific antiviral treatment has been established yet. This is thefirst report of detecting BK virus in a Saudi post-transplant child in urine and blood specimens byusing polymerase chain reaction.

#### **Blood Donors**

Supply of donated blood in the Islamic Republic of Iran, 2001-2002.

Shooshtari, M.M.; Pourfathollah, A.A.

Iranian Blood Transfusion Organisation - Research Center

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 980-981 (3 ref.)

Keywords: Blood; Blood Cells; Plasma

#### blood

Hepatitis B surface antigen, hepatitis C and HIV antibodies in a low-risk blood donor group, Nigeria.

Egah, D.Z.; Banwat, E.B.; Audu, E.S.; Iya, D.; Mandong, B.M.; Anele, A.A.; Gomwalk, N.E.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 961-966 (22 ref.)

**Keywords:** Hepatitis B Surface Antigens; Hepatitis C Antibodies; HIV Antibodies; Seroepidemiologic Studies; Prospective Studies; Comorbidity

**Abstract:** We investigated the seroprevalence of human immunodeficiency virus [HIV], hepatitis Bvirus [HBV] and hepatitis C virus [HCV] infection among 258 clergymen-in-training [age range18-39 years] who represented a donor population that fulfilled the criteria for safe bloodtransfusion. In all, 15.1% of the men were positive for HBsAg, 4.3% were positive for anti-HCV and2.7% were HIV- positive; 22.1% were infected with at least one of these viruses. Coinfection withHIV and HBV was found in 0.4% of the subjects, HBV and HCV in 0.4%, and HIV and HCV in 0%.This underscores the importance of routine screening of blood before transfusion, regardless of thedonor background.

#### **Body Mass Index**

A comparative study of reference data for body mass index of school children in Shiraz [Southern Iran] and CDC standards.

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IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 185-190 (36 ref.)

Keywords: Students; Reference Standards; Dental Health Surveys

Abstract: Several methods have been used to estimate adiposity with high precision, but BMI hasbecome the most common marker in identifying overweight and obese subjects. This study wasperformed to present reference data for body mass index [BMI] of school children aged 6.5-11.5years in Shiraz, southern Iran. The data of present study are based on a random multi stagesample survey of 2397 healthy school children in Shiraz, southern Iran. The participants were1268 boys and 1129 girls and their heights and weights were measured in 2002-2003 academicyear. Joint height-weight measurements were available for 2195 [91.6%] including 1138 boys[89.7%] and 1057 girls [93.6%]. Healy-Rasbash-Yang [HRY] distribution-free method was applied to estimate BMI age-related centiles. Cubic polynomials in age are shown to adequately fit the BMIdata [on log scale]. Children are now heavier than those born over ten years earlier. Boys BMI lieabove girls to around 10 years of age, which is subsequently reversed for overweight and obesecentiles. Comparison of these BMI curves with those of CDC charts showed substantialdifferences at every age and suggested the necessity for the use of locally based BMI norms forassessing body mass index of children in Shiraz, Southern Iran. Also, a positive secular trend inBMI is seen during the past decade in Iran.

#### **Body Temperature**

#### methods

Study between axillary and rectal temperature measurements in children.

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Royal Medical Services - Department of Paediatrics

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1060-1066 (23 ref.)

Keywords: Body Temperature-standards; Age Factors; Fever

**Abstract:** We compared axillary and rectal temperatures in 216 patients to assess the reliability ofaxillary temperature for determining fever in children under 14 years of age. Beyond the neonatalperiod, the mean rectal temperature was significantly higher than the axillary temperature. Thesensitivity of axillary temperature in detecting fever was 87.5% among neonates but only 46% among older children. Axillary temperature correlated well with rectal temperature in neonates butnot older children. There was no direct mathematical relationship between axillary and rectaltemperature. Axillary temperature should be taken in neonates as it is less hazardous; rectaltemperature should be used beyond this age.

#### **Bone Wires**

Percutaneous multiple K-wire fixation for humeral shaft fractures.

Khan, Abdul Q.; Iraqi, Aftab A.; Sherwani, Mohammad Khalid A.; Abbas, Mazhar; Sharma, Adesh

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Saudi Medical Journal 2007; 28 (1): 144-146 (5 ref.)

Keywords: Fracture Fixation-methods; Humeral Fractures-surgery; Prospective Studies

#### **Breast Feeding**

Fundamental rights of infants are quaranteed in Islam - Breastfeeding is mandatory.

Khattak, Iftikhar A.; Niamat, Ullah <u>E-mail:ialamk@yahoo.com</u>

Agriculture University - Department of Human Nutrition **Saudi Medical Journal** 2007; 28 (2): 297-299 (4 ref.)

Keywords: Islam; Socioeconomic Factors; Health Knowledge, Attitudes, Practice; HumanRights

#### **Breast Neoplasms**

#### diagnosis

Barriers to and factors facilitating breast cancer screening among Iranian women: a qualitative study.

Lamyian, M.; Hydarnia, A.; Ahmadi, F.; Faghihzadeh, S.; Aguilar Vafaie, M.E.

Tarbiat Modares University - Faculty of Medical Science - Department of Health Education

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1160-1169 (20 ref.)

Keywords: Early Detection; Attitude; Questionnaires; Mass Screening

**Abstract:** This study used qualitative methodology to understand Iranian women's views aboutbarriers to and factors facilitating screening for early detection of breast cancer. Using groundedtheory with in-depth interviews of 31 participants, themes emerged from the data in 2 maincategories [internal and external] with 3 sub-categories: women's attitudes, feelings and beliefs;women's social network experiences; and accessibility. Facilitating factors for screening wereself-care, fear, proactive coping, state of mind and advocacy. Barriers were negligence, cancer-related fear, low self-efficacy, fatalism, misinformation, ineffective health communicationand competing priorities.

#### pathology

Baseline staging of newly diagnosed breast cancer - Kuwait Cancer Control Center experience.

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Medical Principles and Practice 2007; 16 (1): 22-24 (11 ref.)

**Keywords:** Breast Neoplasms-diagnosis; Neoplasm Staging; Bone Neoplasms-secondary; LiverNeoplasms-secondary; Lung Neoplasms-secondary; Retrospective Studies

**Abstract:** To determine the value of staging investigations in detecting metastases in newlydiagnosed asymptomatic patients with breast cancer. A retrospective review of patients' files withnewly diagnosed breast cancer in the period from 1993 to 1998 was performed. Due to inadequateinformation, thirty-eight files were excluded leaving 785 files for analysis. Of the total 785 patients, we found distant metastases at the time of primary diagnosis in 36 [4.6%] patients, bonemetastases in 29 [3.7%] patients, pulmonary metastases in 6 [0.8%] patients and liver metastasesin 5 [0.6%] patients. Overall, 0.7% of patients with clinical stage I and II disease had metastasescompared with 16.2% of patients with clinical stage III disease [statistically significant p = 0.0001]. The results confirm the low yield of routine bone scans, liver ultrasound and chest X-ray amongpatients with asymptomatic early-stage breast cancer. These tests are therefore notrecommended for such patients, although intensive investigations are appropriate for moreadvanced tumors.

#### therapy

Can saline be an alternative to aesthetic surgery in extended breast quadrantectomy?.

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Saudi Medical Journal 2007; 28 (2): 201-205 (17 ref.)

**Keywords:** Surgical Procedures, Operative; Sodium Chloride-therapeutic uses; Prospective Studies; Magnetic Resonance Imaging; Patient Satisfaction; Surgery, Plastic; Treatment Outcome; Frozen Sections

**Abstract:** To explore other simpler options sparing the patients the morbidity and cost in extendedbreast quadrantectomy. This prospective study was undertaken at King Fahd Hospital of theUniversity, Al-Khobar, Eastern Province of Saudi Arabia between 1999-2005. Factors consideredfor patients undergoing breast-conserving surgery were based on age, tumor size, pathologicalcharacteristics, and patient's preference. Frozen section was adopted in all procedures to insurenegative margins. After extended quadrantectomy, 200-400 cc was injected into the cavity toretain breast contour. Magnetic resonance imaging was used for postoperative assessment. Twenty-four patients were included, aged 28-43 years and tumor size 3-5 cms. All margins werenegative on frozen section. The contour of the breast was restored with saline, MRI was employedfor follow up at the immediate post operative period and at 4-6 months, it demonstrated restoredbreast contour and the saline filled cavity replaced by lipo-fibrous tissue. Follow up after 4-24months showed that all patients noticed some degree of asymmetry, yet were satisfied with theresult, none required or requested additional surgery. In large tissue excisions injecting saline intocavities temporarily prevents the caving in of the redundant skin, which has the tendency topermanently adhere to the fascia thereby preventing gross deformities. It has proven effective, contour storing and scored high satisfaction among patients. It certainly does not replace cosmeticbreast surgery, however, it should be considered in centers were onco-plastic surgery is notreadily available.

#### **Burns**

#### mortality

Comparison of mortality and mean hospital stay between patients with burns in upper and lower extremities in Southern Iran.

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Shiraz University of Medical Sciences - School of Medicine - Department of Surgery

IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 201-204 (16 ref.)

Keywords: Burns-complications; Length of Stay; Lower Extremity-injuries; Upper Extremity-injuries

**Abstract:** Burn injury according to severity, extent and organ involvement leads to differentmortalities and morbidities. Considering burn injuries of similar extent, the mortality related to lowerextremity seems to be higher than that of upper extremity. This study was performed to comparethe mortality and mean hospital stay between two groups of burn patients with upper and lowerextremities admitted to Ghotbeddin Hospital during a two years period. The present retrospectivestudy encompassed 322 patients aged from 15-40 years with 45% females and 55% males andburns of 15%-40% during a two years period. Depending on 2/3 or more of total burns; they weredivided into two groups with burns in the upper and lower extremities. Upon comparison of themean hospital stay and mortality rate, it was shown that the mean hospital stay in those with burnsof lower extremity was two weeks, which was longer than that in patients with upper extremityburns. Mortality in lower extremity burns was about 10% more than that of upper extremity. Itseems that treatment of lower extremity burns along with appropriate planning for intensive care ofthis organ would help reduce mortality, save time and lower costs.

#### **Bursitis**

#### drug therapy

Comparison between intraarticular triamcinolone acetonide and methylprednisolone acetate injections in treatment of frozen shoulder.

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Al-Mustansiriya University - College of Medicine - Department of Pharmacology

Saudi Medical Journal 2007; 28 (5): 707-712 (31 ref.)

**Keywords:** Methylprednisolone-analogs and derivatives; Methylprednisolone-administration, dosage; Triamcinolone Acetonide-administration, dosage; Diabetes Complications-drug therapy; Injections,Intra-Articular

Abstract: To compare the effectiveness of triamcinolone acetonide [40 mg] andmethylprednisolone acetate [60 mg] in Iraqi patients with primary and secondary frozen shoulder. A total number of 135 [93 males and 42 females] patients with frozen shoulder, allocated atoutpatient clinic of rheumatology in Al-Yarmook Teaching Hospital [Baghdad-Iraq] from January2004 to December 2005, were enrolled in non-controlled clinical trial. The diagnosis of frozenshoulder was made using the guidelines for shoulder complaint issued by the Dutch College ofGeneral Practitioners. Intraarticular injections of 40 mg triamcinolone acetonide [46 males and 22females] or 60 mg methylprednisolone acetate [47 males and 20 females] were given every 3weeks [not more than 3 injections] by using posterior route. Both triamcinolone acetonide [81.8%]and methylprednisolone acetate [83.3%] were equally effective in primary frozen shoulder. Triamcinolone acetonide is significantly improved diabetic frozen shoulder in comparison tomethylprednisolone acetate [69% versus 39%]. Also patients on triamcinolone acetonide requiredless number of steroid injections and higher percent of severe cases were significantly improved bytriamcinolone acetonide in comparison with methylprednisolone acetate. We conclude thattriamcinolone acetonide is a good rescue for painful stiff shoulder particularly for resistant cases aswith diabetes mellitus, and with long duration of illness. Also, its efficacy can be observed with lessfrequent injections.

#### Calcitonin

#### therapeutic uses

Effects of salmon calcitonin on fracture healing in ovariectomized rats.

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Shanghai Jiao Tong University - Shanghai Sixth People's Hospital - Department of Orthopedic Surgery

Saudi Medical Journal 2007; 28 (1): 60-64 (33 ref.)

**Keywords:** Fracture Healing-drug effects; Bone Density Conservation Agents-therapeutic uses; Ovariectomy; Rats **Abstract:** To explore the effects of salmon calcitonin on the healing process of estenantotic fractures.

Abstract: To explore the effects of salmon calcitonin on the healing process of osteoporoticfractures in ovariectomized rats. We performed this study in The First Affiliated Hospital ofGuangzhou Medical College, Guangzhou, China, during the period March 2002 to December2004. We used 120 female adult Wistar rats in this experiment, among which 90 underwentovariectomy [OVX] and the other 30 had sham-operation. All rats had their left tibias fractured 3months later. The 90 OVX rats were randomly divided into 3 groups with 30 in each, while the 30sham-operated rats served as control group. After the fracture the rats had subcutaneous injectionof normal saline, salmon calcitonin and estrogen, respectively. X-ray film, histological examination,bone mineral density [BMD] measurement and biomechanics testing were carried out to evaluatethe fracture healing. Compared with OVX rats treated with normal saline, the rats with salmoncalcitonin had significantly higher BMD values in the left tibia, higher max torque, shear stress of the left tibia 8 weeks after fracture [p<0.05], and presented with stronger callus formation, shorterfracture healing time and faster normalization of microstructure of bone trabeculae. Salmoncalcitonin can, not only increase BMD in osteoporotic bone, but also enhance the bonebiomechanical properties and improve the process of fracture healing in fractured osteoporoticbone.

#### Calcium

#### blood

Management of calcium and phosphorus metabolism in hemodialysis patients in Tehran province, Iran.

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IJKD - Iranian Journal of Kidney Diseases 2007; 1 (1): 25-28 (13 ref.)

**Keywords:** Calcium-metabolism; Phosphorus-blood; Phosphorus-metabolism; Parathyroid Hormone; Kidney Failure, Chronic: Bone Density

**Abstract:** Our aim was to evaluate the degree of achievement of the recommended values inNational Kidney Foundation Dialysis Outcomes Quality Initiative [K/DOQI] guidelines for thelaboratory indicators of bone metabolism in patients undergoing hemodialysis [HD] in Tehranprovince. We evaluated the laboratory information of 2630 Hp patients in Tehran province.Demographic data of the patients and the clinical information including the duration of dialysissession, dialysate calcium concentration, KtV, and serum values of calcium, phosphorus, and intact parathyroid

hormone [PTH] were recorded. The laboratory values were compared to therecommended ranges by the K/DOQI work group in patients with end-stage renal disease. Only1.8% of the patients could enjoy a successful management according to the K/DOQI recommendations for the 4 target laboratory tests of serum calcium, phosphorus, intact parathyroidhormone, and calcium-phosphorus product. Hypocalcemia was diagnosed in 33.2% of thepatients, whereas 13.6% were diagnosed with hypercalcemia. Hypophosphatemia and secondaryhyperparathyroidism were diagnosed in 6.8% and 24.2% of the patients, respectively. Our findingsproved that complying with the recommendations established by the K/DOQI work group in theclinical management of mineral metabolism is very demanding. Phosphate binders frequently leadto untoward toxicities and imbalance in bone metabolism of patients on HD, warranting newcost-effective therapies with fewer side effects. It would be of great interest to analyze, in thefuture, the benefits derived from the effect of new therapies such as calcimimetics or newphosphate binders regarding the achievement of the K/DOQI guidelines.

#### **Campylobacter Infections**

#### epidemiology

Occurrence of Campylobacter jejuni in Shiraz, Southwest Iran.

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Medical Principles and Practice 2007; 16 (1): 59-62 (30 ref.)

**Keywords:** Campylobacter Infections-microbiology; Campylobacter jejuni-isolation and purification; Diarrhea-epidemiology; Diarrhea-microbiology; Dysentery, Bacillary-epidemiology; Dysentery, Bacillary-microbiology; Salmonella-isolation and purification; Shigella-isolation and purification

**Abstract:** To investigate the occurrence of Campylobacter jejuni among other bacterial agents ofacute diarrhea. Over a period of 3 months, 114 specimens of acute diarrhea were collected frompatients aged 2-58 years referred to Nemazi Hospital, Shiraz, Iran. The samples were tested forbacterial pathogens causing acute diarrhea. Of the 114 samples, 40 proved to be positive forbacterial enteric pathogens: C. jejuni 11 [9.6%], Salmonella spp.18 [15.8%] and Shigella spp. 11[9.6%]. Maximum prevalence of C. jejuni was observed in patients aged 11-15 years. Significantlymore females than males were infected with all diarrheal agents [p <0.05]. This study confirmed the presence of C. jejuni as a significant cause of gastroenteritis in Shiraz, Southwest Iran.

#### Carcinoma, Renal Cell

#### secondary

Late pulmonary metastasis of renal cell carcinoma after nephrectomy.

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Saudi Medical Journal 2007; 28 (2): 286-287 (5 ref.)

Keywords: Carcinoma, Renal Cell-surgery; Kidney Neoplasms-pathology; Lung Neoplasms-secondary; Lung

Neoplasms-pathology; Nephrectomy; Time Factors

#### Cardiovascular Diseases

#### therapy

The cost of new therapies in cardiovascular care. Time for hope or despair for developing countries.

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Saudi Medical Journal 2007; 28 (5): 675-682 (77 ref.)

**Keywords:** Developing Countries-economics; Hydroxymethylglutaryl-CoA ReductaseInhibitors-economics; Hydroxymethylglutaryl-CoA Reductase Inhibitors-therapeutic uses; PlateletAggregation Inhibitors-economics; Platelet Aggregation Inhibitors-therapeutic uses; Stents-economics; Ticlopidine-economics; Ticlopidine-therapeutic uses; Ticlopidine-analogs and derivatives

**Abstract:** In recent years, remarkable therapeutic advances have been made in the field ofinterventional cardiology with the introduction of statins, thienopyridines, such as clopidogrel anddrug-eluting stents. Only a small minority in developing countries can afford these new treatmentmodalities, while the public health system would be rapidly bankrupted if it were to provide thesemodalities for all patients who might benefit from it. The purpose of this review article is to provideinsight regarding the cost-effectiveness of these new treatment strategies and to address theadded costs resulting upon their adoption and their appropriateness in developing countries.

#### Catheterization, Peripheral

#### adverse effects

[Predictors of Side Branch Compromise and related early complications after percutaneous coronary intervention].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 30-35 (23 ref.)

Keywords: Catheterization, Peripheral-standards; Catheterization, Peripheral-utilization; MyocardialInfarction; Risk

Factors

Abstract: Percutaneous Coronary Intervention [PCI] for bifurcated lesions is associated with a lowrate of success and high rate of complications compared to such treatment of lesions of most othermorphologies. Symptoms occurring at the time of procedure caused by PCI may require additional angiography with or without stenting through stent struts, which subsequently increases risks ofrestenosis and stent thrombosis. The purpose of this study was to evaluate the incidence of majorside branch [>1mm] complications during PCI and their clinical, angiographic, and interventional predictors. Of 104 consecutive patients, we evaluated 50 lesions with ostial stenosis [group 1] and 54 lesions without ostial stenosis [group 2] as a control group. Age, sex, major coronary arterydisease risk factors, and left ventricular ejection fraction [LVEF], were compared between groups.Morphology, location, type of lesion, length of lesion, main and side branch diameters interventional approach, and clinical and interventional outcomes were the main variables studiedduring this trial. Side Branch Compromise [SBC] occurred in 41 [39.4%] of the total number ofcases: 52% in group 1 and 27.8% in group 2 [p=0.01]. More than 80% of SBC occurred in mainbranches with stenosis [p=0.02]. SBC did not correlate with clinical characteristics, bifurcationlocation, LVEF, or stent number. Chest pain was reported in 18% of the cases during or after PCI. Three non Q wave myocardial infarctions [MI] occurred after SBC, each with >2 mm branchdiameters [p=0.02]. SBC was not associated with adverse clinical outcomes. The risk of MI afterlosing the side branch of a bifurcation lesion is not usually as high as it is after losing the mainbranch. Furthermore, it may not be a serious problem as one of the problems of the bifurcationlesion is the high rate of post procedural non Q wave MI associated with SBC. These findingsdemonstrate that side branch ostial stenosis >50%, and main branch stenosis > 80% wereimportant predictors of SBC. Protection of side branches > 2mm is highly recommended during coronary intervention.

#### **Celiac Disease**

#### [Celiac disease in Iran].

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Tehran University Medical Journal [TUMJ] 2007; 65 (2): 1-11 (47 ref.)

Keywords: Developing Countries; Antibodies

Abstract: Until a few decades ago, celiac disease was considered to be essentially a disease ofEuropean people and to be very rare in Middle Eastern countries. During the last two decades, having met the criteria for the WHO general screening, the advent and application of novelserological assays used to screen for celiac disease and the use of endoscopic small bowel biopsyhave led to increasing numbers of diagnoses of celiac disease in western countries. With this newdata, our knowledge on both the clinical pattern and epidemiology of celiac disease has increased, and is now known to be a relatively common autoimmune disorder. Studies performed in differentparts of the developing world have shown that the prevalence of celiac disease in this area issimilar to or even higher than that in western countries. In fact, celiac disease is known to be themost common form of chronic diarrhea in Iran. However, contrary to common belief, celiac disease is known to be themost common form of chronic diarrhea in Iran. However, contrary to common belief, celiac disease is more than a pure digestive alteration. It is a protean systemic disease, and, with a 95 percentgenetic predisposition, has a myriad of symptoms including gastrointestinal, dermatological, dental, neurological and behavioral that can occur at a variety of ages. Monosymptomatic, oligosymptomatic, atypical [without gastrointestinal symptoms], silent and latent forms of celiacdisease have been identified. In this study we review the epidemiology of celiac disease based onthe studies performed in Iran and discuss its pathogenesis, the role of antibodies in the diagnosis of celiac disease and the importance of its diagnosis and treatment in Iran.

#### Cerebrovascular Accident

#### diagnosis

Siriraj score as a tool for clinical diagnosis of stroke.

Iqbal, A.; Qureshi, S.S.; Shabbir, B.; Hamid, A.; Butt, N.F.; Firdous, S.; Jamil, S.; Khan, M.Z.U.

King Edward Medical University - Mayo Hospital - Department of Medicine

Annals of King Edward Medical College 2007; 13 (1): 101-104 (9 ref.)

**Keywords:** Shock, Hemorrhagic-diagnosis; Shock-diagnosis; Tomography, X-Ray Computed; Prospective Studies; Diagnosis, Differential; Severity of Illness Index; Consciousness; Headache; Vomiting

**Abstract:** Siriraj stroke score is a diagnostic tool to differentiated ischemic from haemorrhagicshock. This study was carried out to access SSS accuracy as compared to CT scan. This studywas carried out in the Department of Medicine and Neurology of Mayo Hospital, Lahore. Thirty twopatients were included in the study who had stroke SSS was applied as well as CT scan was done.Out of them 6% were misdiagnosed. Overall predictive accuracy was 87.5%. Siriraj stroke score isnot 100% accurate. CT scan should be advised before starting definitive stroke therapy.

#### Chickenpox

#### epidemiology

Five-year surveillance of chickenpox in Qassim, Central Saudi Arabia.

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Primary Health Care Administration - Health Education and Training Department

Saudi Medical Journal 2007; 28 (5): 808-810 (8 ref.)

Keywords: Population Surveillance

#### **Child Abuse**

#### Child abuse and neglect in the Arab Peninsula.

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Saudi Medical Journal 2007; 28 (2): 241-248 (31 ref.) Keywords: Child Abuse, Sexual; Munchausen Syndrome

Abstract: To provide an overview of the problem and patterns of child abuse and neglect in the 7countries of the Arab Peninsula, and to highlight some of the difficulties and shortcomings. Thisstudy was conducted by reviewing medical literature, published between January 1987 and May2005. In addition, reports were obtained from regional meetings and professional organizations. Each study or report was reviewed, assessed, and summarized. Three studies from Kuwaitidentified 27 children; 22 with physical abuse, 3 with sexual abuse, and 2 with Munchausen'ssyndrome by proxy [MSP], and 3 deaths. Eleven case reports from Saudi Arabia identified 40abused children; 24 with physical abuse, 6 with sexual abuse, 4 with MSP, and 6 with neglect. Fatal outcome was documented in 5 children. In Oman, 5 cases of MSP were reported. A total of150 hospital-based cases were reported from Bahrain; 50 with physical abuse, 87 with sexualabuse, and 10 with both forms of abuse. In Yemen, population based surveys revealed a widespread use of corporal punishments and cruelty to children at homes, schools, and juvenilecenters, which ranged from 51-81%. Children in the Arab Peninsula are subjected to all forms ofchild abuse and neglect. Child abuse is ignored or may even be tolerated and accepted as a formof discipline, abused children continue to suffer and most abusers go free, unpunished anduntreated. Confronting these realities is a necessary step in the long and hard road to breaksilence, respond to and prevent child abuse and neglect in the Arab Peninsula.

#### Chlamydia Infections

#### epidemiology

Chlamydia trachomatis infection in women attending health centres in Babol: prevalence and risk factors.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1124-1131 (22 ref.)

**Keywords:** Chlamydia Infections-etiologgy; Prevalence; Risk Factors; Socioeconomic Factors; AgeFactors; Polymerase Chain Reaction; Behavior; Enzyme-Linked Immunosorbent Assay

**Abstract:** We determined the prevalence of Chlamydia trachomatis infection and risk factors forinfection among 550 sexually active women < 45 years attending gynaecology clinics in Babol, Islamic Republic of Iran. The women were interviewed about sociodemographic and behavioural variables associated with the infection and underwent pelvic examination and blood tests. The prevalence of C. trachomatis was 11.6%. There was a significant association between C. trachomatis infection and income, husband's education and woman's age [< 25 years], and alsodrug addiction of husband, non-use of condoms and not having heard of sexually transmitted infections. The only clinical signs significantly associated with infection were cervical friability and mucopurulent cervicitis..

#### Cholecystectomy

Mini Cholecystectomy -better option than conventional cholecystectomy.

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#### Annals of King Edward Medical College 2007; 13 (1): 113-115 (10 ref.)

**Keywords:** Surgical Procedures, Operative-methods; Laparoscopy; Prospective Studies; PostoperativeComplications; Treatment Outcome

**Abstract:** Cholecystectomy is the gold standard procedure for symptomatic gallstones. It can beperformed by either open or by laparoscopic method. Open cholecystectomy can further be doneby either conventional method or by using a smaller incision known as minicholecystectomy. Manystudies previously have shown that minicholecystectomy has comparable results with laparoscopicor open cholecystectomy. This prospective study consisted of 100 patients and was done over aperiod of one year. Patients were randomly allocated as Group A [conventional cholecystectomy]and Group B [mini cholecystectomy]. The age and sex distribution were comparable. Minicholecystectomy was successfully performed in 46 [92%] of cases, while 4 [8%] cases wereconverted to conventional cholecystectomy. Ike total operative time was comparable in twogroups. Moreover patients in Group B had less postoperative pain, shorter stay in hospital andreturned early to their work. The postoperative complications were also comparable in both groups. This comparative study concluded that minicholecystectomy offer less postoperative pain, shorterhospitalization, and early return to work, without any increased risk of postoperative complications. Moreover it does not require sophisticated methods or additional specialized skills and thus can beperformed by any experienced general surgeon.

#### Cholelithiasis

#### epidemiology

#### Frequency of infection in cholelithiasis.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 48-50 (20 ref.)

**Keywords:** Biliary Tract Diseases-epidemiology; Comorbidity; Cholelithiasis-surgery; Cholecystectomy; Bile-microbiology

Abstract: To determine the frequency of infection in cholelithiasis and find common infectingorganisms with their antibiotic sensitivity. A descriptive study. This study was conducted inSurgical Unit - I, Jinnah Postgraduate Medical Centre [JPMC], Karachi, Pakistan, from April 2001to March 2002. First 100 cases of cholelithiasis, selected and operated by open or laparoscopiccholecystectomy were included in this study. Patients with acute cholecystitis, history of jaundice, stones and / or dilated common bile duct were excluded from the study. Ultrasound was the maintool for pre-operative diagnosis. During cholecystectomy, bile was aspirated and specimens weresent to laboratory for microbiological examination. The results were recorded on a proforma. Outof 100, 36 patients had positive bile culture. The most common organism was E. coli [17 patients]followed by Klebsiella [9], Pseudomonas [6], Staphylococcus aureus [2], Salmonella [1] andBacteroids fragalis [1] patient. In this study, most of the biliary organisms were highly sensitive tothe 2nd generation cephalosporins and quinolones. From the bacterological assessment, it seemsthat both endogenous and exogenous contamination were the causes of wound sepsis. It was alsofound that the infection of bile did not increase the risk of postoperative wound infection whenprophylactic perioperative antibiotics were used.

#### Circumcision, Male

#### complications

#### Meatal stenosis in circumcised males - Is it preventable?.

Khan, M.S.; Anwar, S.; Butt, K.; Mannan, A.; Tasneem, R.A.

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Annals of King Edward Medical College 2007; 13 (1): 78-80 (17 ref.)

Keywords: Penis-injuries; Surgery, Plastic; Postoperative Complications; Recurrence; Treatment Outcome

**Abstract:** Meatal stenosis is most commonly seen among the circumcised males. The trueincidence of this post circumcision complication is not known. The most favored hypothesisregarding the etiology is ammoniacal furnes produced in the wet diapers, which cause meatitis ofunprotected glans. It is treated by meatoplasty. 26 pediatric patients suffering from meatal stenosiswere treated between Jan. 2003 and Dec. 2005 both inclusive [Mean age was 4.36 years andranging 2 - 10] and mean follow up was 4 months. Patients were studied for presenting symptoms, size of meatus, perimeatal balanitis, pyuria and postoperative complications such as bleeding, infection and recurrence. They were advised postoperative dilatation with ophthalmic ointmentnozzle for one month. Patients with prior history of circumcision were included in the study. Themost common symptom in our study was thinning of urinary stream 17 [65.4%] cases. Othercommon symptoms were painful micturition in eight and bloody spotting in seven cases. Eightpatients were having pin hole meatus and three cases were having pyuria. Compliance for postoperative dilatation was 76.9% [20 cases]. No case of recurrence was seen. It can be concluded that meatal stenosis is related to infant circumcision. It is treated by meatoplasty with satisfactoryoutcome. Whether we would be able to prevent this post circumcision complication? There is noobvious solution to this problem for the time being.

#### Coated Materials, Biocompatible

Effect on the bond strength between composite resin and glass ionomer cement.

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Annals of King Edward Medical College 2007; 13 (1): 16 (8 ref.)

Keywords: Composite Resins; Glass Ionomer Cements

**Abstract:** Glass ionomer cements are tooth-coloured materials that bond chemically to dental hardtissues and release fluoride for a relatively long period. Glass ionomer is the ideal radiopaque linerfor use under all types of composites. It bonds to dentin, reduces microleakage enhances the bondstrength of composite.

#### **Colorectal Neoplasms**

#### diagnosis

Clinical characteristics of colorectal cancer in Southern Iran, 2005.

Saberi Firoozi, M.; Kamali, D.; Yousefi, M.; Mehrabani, D.; Khademolhosseini, F.; Heydari, S.T.; Blourian Kashi, K. Shiraz University of Medical Sciences - Nemazee Hospital - Department of Internal Medicine

IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 209-211 (17 ref.)

**Keywords:** Colorectal Neoplasms-pathology; Questionnaires; Age Distribution; Neoplasm Metastasis; Colorectal Neoplasms-epidemiology; Risk Factors

**Abstract:** Colorectal cancer is the second leading cause of cancer-related mortality andrepresents a major public health problem in developed countries. The objective of presentinvestigation was to determine the epidemiologic aspects and clinical characteristics of colorectalcancer in Shiraz, southern Iran. This was a retrospective study carried out during 2000-2005, andcomprised 491 subjects with pathologically documented colorectal cancer. They were registered inFars Cancer Registry, affiliated to Shiraz University of Medical Sciences, southern Iran. Aquestionnaire including data on demographic information, histological types of cancer, site ofprimary cancer and metastasis were completed by trained interviewers. Among 491 subjects,57.2% were male and the most common age was 65-75 years. Patients under 45 years of agerepresented 22.8% of all colorectal cancer cases while 32% were over 65 years old. Those with ahistory of cancer in their first-degree relatives included 26.9% of the patients. Adenocarcinomawas the most common reported histological type of cancer [96.1%]. Among all subjects, 60.7%suffered from abdominal pain, 28.4% abdominal distention and 28.0% rectal bleeding. Othersymptoms included diarrhea/constipation, nausea/vomiting, urogenital problems and masssensation. The most common sites of metastasis were lung, brain and ovary.

#### **Community Health Services**

Do free-of-charge public health services impede cost recovery policies in Khartoum state, Sudan?.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 939-952 (26 ref.)

Keywords: Socioeconomic Factors; Health Surveys; Questionnaires; Health Care Costs; Cost-Benefit Analysis

**Abstract:** We carried out a household survey in Khartoum state in 2001 to analyse thecharacteristics of those who receive free public health services and to ascertain whether there areany impediments to cost recovery policies for health care use. Data were collected throughinterviews based on an adapted questionnaire. Those who had other income, always orsometimes had dependents and visited the health services twice in the previous 3 months weremore likely to receive free public health services. This does not support claims that beneficiaries of these services are the well-off.

#### **Community-Acquired Infections**

#### etiology

Etiology of community-acquired pneumonia in hospitalized patients in Jordan.

Al Tawfiq, Jaffar A.; Al Ali, Musa K.

Saudi Aramco Medical Services Organization - Dhahran Health Center - Internal Medicine Services Division

Saudi Medical Journal 2007; 28 (2): 307 (5 ref.)

**Keywords:** Community-Acquired Infections-microbiology; Community-Acquired Infections-epidemiology; Pneumonia-microbiology; Pneumonia-epidemiology; Hospitalization; Prospective Studies

#### Contrast Media

#### adverse effects

Effects of intraarticular contrast media on synovial membrane and cartilage. An electron microscopic evaluation in rabbit knees.

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Saudi Medical Journal 2007; 28 (5): 713-716 (10 ref.)

**Keywords:** Cartilage, Articular-drug effects; Synovial Membrane-drug effects; Injections, Intra-Articular; Contrast Media-administration, dosage; Gadolinium DTPA-adverse effects; Iohexol-adverse effects; Rabbits

Abstract: To evaluate the histological and ultrastructural alterations in rabbit knee joint cartilageand synovia induced by intraarticular injections of 2 water soluble contrast agents. The study wasconducted at the Department of Orthopedics and Traumatology, Medical Faculty, OsmangaziUniversity, Eskisehir, Turkey in January 2002. To examine the effect of contrast agents on articularcartilage and synovial membrane, rabbit model was used. Specimens from 62 knee joints wereexamined by light microscopy and transmission electron microscopy one hour, one day, one weekand 2 weeks after intraarticular administration of gadolinium-diethylenetriamine pentaacetic acid,iopromide or saline. In the knees injected with saline, light microscopic changes of the synoviumconsisted of edema only. Edema and hyperemia were seen in contrast agent injected knees. Ultrastructurally, numerous and large pinocytotic vesicles in A cells of the synovial membrane wereseen in contrast agent injected groups. In the knees injected with saline the cartilage wereultrastructurally normal but contrast agent injected knees showed increased activation ofchondrocytes with increase of dense glycogen accumulation, large lipid vacuoles and matrixmaterial. There were very rare pycnotic cells in these samples. The rating scale has been usedand the means of the total scores were determined for the groups. The effects of contrast agentsreduced gradually on the cartilage and synovium in general but did not become completely normalin the observation period.

## **Coronary Arteriosclerosis**

## etiology

The relative impact of smoking or Hypertension on severity of premature coronary artery disease.

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IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 177-181 (33 ref.)

**Keywords:** Risk Factors; Smoking-complications; Hypertension-complications; Myocardial Infarction; Coronary Angiography; Angina Pectoris

Abstract: Not much information is available about the effect of smoking and hypertension on thenumber and severity of vessel involvement and left ventricular ejection fraction [LVEF] at coronaryangiography of young patients with coronary artery disease. The present study describes therelative importance and comparative effect of smoking and hypertension on severity of prematurecoronary artery disease. The study comprised 240 consecutive patients under the age of 45 years,with a diagnosis of acute myocardial infarction [AMI], unstable angina or stable angina, whounderwent coronary angiography. Other aspects investigated included evaluation of smokingprofile and HTN in each patient, LVEF, the number and type of vessel involvement as well as theseverity of stenosis. Of 216 patients, 142 [approximately 60%] were smoker and 74 [31%] werehypertensive. Left anterior descending coronary artery [LAD] involvement was more common insmoker young patients who had more severe stenosis of LAD vessel and lower LVEF thanhypertensive young subjects. Higher frequency of right coronary artery [RCA] involvement andmore severe stenosis of this vessel were found in hypertensive young individuals compared tosmoker young patients. Our study indicated that smoking was more prevalent and also a moreimportant risk factor in coronary artery disease of young adults. Smoker young patients tended tohave more LAD involvement, more severe stenosis of this vessel and also lower LVEF, compared to hypertensive young patients.

# **Coronary Artery Bypass**

Comparison of neurological outcomes in patients undergoing conventional coronary artery bypass grafting, on-pump beating heartcoronary bypass, and off-pump coronary bypass.

Sabban, Mostafa A.; Jalal, Anjum; Bakir, Bakir M.; Al Shaer, Ahmad A.; Abbas, Osama A.; Abdalaal, Mohammed M.; Awadallah, Yasser A.; Al Saddique, Ahmed A.; Fouda, Mohammed A.

King Khalid University Hospital - Department 37

Neurosciences 2007; 12 (1): 35-41 (21 ref.)

**Keywords:** Coronary Artery Bypass, Off-Pump; Risk Factors; Neurologic Manifestations; Treatment Outcome; Postoperative Complications; Tomography, X-Ray Computed

**Abstract:** To study the differences in the prevalence of neurological complications followingcoronary artery bypass [CAB] carried out by conventional, on-pump beating and off-pumptechniques. A retrospective analysis of all isolated coronary bypass operations [n=127] performedin King Fahad Cardiac Center, Riyadh over a period of one year starting

from January 2005. Outof 127 patients, 73 underwent conventional CAB graft [CABG], 33 patents on-pump beating heartcoronary bypass, and 21 had off pump coronary bypass grafting [OPCAB]. All patients hadpreoperative carotid scans and those who developed neurological complications underwentCT-brain and expert neuro-psychiatric assessment. Preoperative characteristics of patients in all 3groups were similar. The bypass times in the conventional CABG group were significantly longerthan the on-pump beating group. The maximum number of grafts was in the on-pump beatinggroup, followed by the conventional CABG, and the least in the OPCAB group. Seven out of 73cases in the conventional bypass group developed neurological events of various severities. Onlyone out of 33 patients developed acute confusional state in the on-pump beating group and noneurological events were noticed in 21 patients operated by the OPCAB technique. Low ejectionfraction, preoperative congestive cardiac failure, non-elective surgery and preoperativecatastrophic state were found to be significant risk factors independent of the bypass technique. This study shows no significant difference in the prevalence of neurological complications amongdifferent types of bypass surgery in our institution. There was a trend towards less neurologicaloutcomes in the OPCAB and on-pump beating groups.

# Coronary artery bypass surgery in patients with end stage renal disease: overall outcome in single centre experience.

Naqvi, A.H.; Parvez, Z.; Chaudhary, F.A.; Shafi, T.

Sheikh Zayed Hospital - Department of Cardiothoracic Surgery

Annals of King Edward Medical College 2007; 13 (1): 70-72 (8 ref.) Keywords: Kidney Failure, Chronic; Treatment Outcome; Coronary Disease

Abstract: Coronary artery bypass surgery and its entire perioperative management is demandingin patients with end stage renal disease [ESRD]. We included data from all patients onhemodialysis who underwent coronary artery bypass grafting [CABG] between November 1st,2003 and November 1st, 2006 at Sheikh Zayed hospital and Federal postgraduate medicalinstitute, Lahore, Pakistan. During the study period 41 patients with end stage renal diseaseunderwent coronary artery bypass grafting at the Sheikh Zayed hospital and Federal postgraduatemedical institute, Lahore. Among these patients, we recorded a perioperative mortality of 19.51%. Six months survival rate was 75.60 % among study group patients. The incidence of peripheralartery disease is reported significantly higher in the dialysis dependent patients. Uremic patientsshowed significantly lower hemoglobin serum levels [4], fresh frozen plasmas [FFP's] whenneeded. Our preliminary study indicates that coronary artery bypass surgery can be performed with acceptable midterm results when the specific requirements of this patient group are taken intoaccount.

# Early effects of coronary artery bypass grafting on left ventricular regional wall motion abnormalities.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 3-7 (24 ref.)

Keywords: Coronary Disease-physiopathology; Ventricular Dysfunction, Left-physiopathology; TimeFactors

Abstract: To determine the early effects of Coronary Artery Bypass Grafting [CABG] on regionalleft ventricular wall motion abnormality in patients undergoing surgery for proven Coronary ArteryDisease [CAD]. Quasi-experimental study. Department of Cardiac Surgery, National Institute of Cardiovascular Diseases, Karachi, from October 2005 to April 2006. Patients and Methods: A totalof a 100 adult patients who underwent elective CABG were selected. Preoperativeechocardiography was done to note if segmental left ventricular wall motion at basal, mid andapical levels were normal, hypokinetic, akinetic, dyskinetic, or aneurysmal. Postoperativeechocardiography was done between 4th and 6th day and change in left ventricular segmentalwall motion was noted. Seventy-five patients [n=75] were included in the analysis. These results showed that effect of CABG on anterior segmental wall motion abnormalities was insignificant[p=.609], the effect on the anterior IVS showed deterioration of segmental wall motion and thiseffect was significant [p=.001], effect is insignificant on anteriolateral segmental wall motionabnormalities [p=.078], normal preoperative segments in posterior wall showed stability [p=.664]while disappearance of dyskinetic, reduction in akinetic segments postoperatively and inferior wallmotion have same effects as of posterior wall. Comparison of pre-operative and postoperativeechocardiographic data revealed early improvement in segmental wall motion of posterior and inferior wall, while alterations in segmental wall motion of anterior, anterior-lateral and septal wall. Myocardial revascularization by CABG improves early left ventricular regional wall motionabnormalities where SVG is used as conduit for revascularization whereas no significantimprovement occurs in early segmental wall motion in areas revascularized by LIMA.

#### Negative suction versus non-negative suction after coronary surgery.

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Queen Alia Heart Institute - Department of Cardiac Surgery Saudi Medical Journal 2007; 28 (1): 146-147 (5 ref.) Keywords: Postoperative Care-methods; Drainage; Suction

#### Preoperative transcranial and carotid Doppler study in coronary artery bypass graft patients.

Farhoudi, Mehdi; Parvizi, Rezayat; Bilehjani, Eisa; Tarzamni, Mohammad K.; Mehrvar, Kaveh; Safaiyan, Abdol Rasool E-mail:farhoudim@tbzmed.ac.ir

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Neurosciences 2007; 12 (1): 42-45 (19 ref.)

**Keywords:** Ultrasonography, Doppler, Transcranial; Ultrasonography, Doppler; PostoperativeComplications; Risk Factors; Risk Assessment; Evaluation Studies; Carotid Arteries; NeurologicManifestations

Abstract: To assess the correlation of postoperative neurologic complications with preoperativetranscranial and carotid Doppler study findings of coronary artery bypass graft [CABG] patients. Ina descriptive, analytic, follow up study we prospectively studied 201 patients undergoing electiveand isolated CABG surgery during a 12 month period from October 2003 to September 2004 atMadani Hospital of Tabriz Medical Sciences University, Iran. Neurologic examination, intracranialcerebral arterial study using transcranial Doppler [TCD] and carotid duplex were performedpreoperatively. Intraoperative and postoperative complications were followed up for one month. Two hundred and one patients [158 male, 43 female] with a mean age of 57.29 +/- 9.67 were studied. Out of these, 131 patients had 3 coronary vessels disease, 64 had 2 vessels, 5 had onevessel, and one patient had diffuse coronary disease. A TCD was performed in 183 patients and disclosed abnormalities in 22 patients and was normal in 161 cases. The total number of involvedarteries was 34. Among 154 carotid duplex studied patients, 102 had plaque, inducing <50%stenosis in 99, 50-74% stenosis in one, and 75-90% stenosis in 2 cases. Postoperative neurologiccomplication occurred as follows: 4 stroke, 7 delirium, and 3 amnesia. One of the operated patientsdied. Nine of 161 patients with normal TCD [5.6%] and 5 of 22 [22.7%] with intracranial cerebralarterial disease [ICAD] showed central nervous system [CNS] complications [p=0.015]. There were significant correlations between number of involved cerebral arteries and post CABG CNScomplications [p=0.0001], including stroke [p=0.007], and between diabetes mellitus history withthese complications [p=0.012]. Our results suggest that ICAD is an independent risk factor for CNScomplications after CABG surgery. Hence, we recommend pre-CABG evaluation of the cerebralarteries by TCD, for the risk assessment of CABG surgery.

## **Coronary Disease**

### epidemiology

Prevalence of risk factors of coronary heart disease among diabetic patients in Medina city.

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Ministry of Health

Saudi Medical Journal 2007; 28 (2): 294-296 (6 ref.)

Keywords: Diabetes Mellitus-physiopathology; Prevalence; Risk Factors; Comorbidity; Cross-SectionalStudies

# Creutzfeldt-Jakob Syndrome

## diagnosis

[Creutzfeldt-Jakob disease associated with non sterile phlebotomy [case report]].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 82-85 (11 ref.)

Keywords: Prions; Magnetic Resonance Imaging; Brain-pathology; Dementia; Phlebotomy

Abstract: Creutzfeldt-Jakob disease [C-JD] is a rare disorder characterized with rapidlyprogressive mental decline, myoclonic jerk and finally death. The transmissible pathogen for thisdisease is a proteinaceous infectious particle termed prion. The prion protein is encoded by a gene[designated as PRNP] on the short arm chromosome 20.This disorder is diagnosed based onclinical findings, course of disease, EEG, MRI and confirmed with brain biopsy. A 56-year- oldwoman presented with confusion, disorientation, hyper somnolence, psychiatric problems such ashallucination, progressive mental deterioration and myoclonic jerks. She had history of severaltimes phlebotomy with traditional and non sterile methods in two past years. She had no pasthistory of other disease. Her illness was diagnosed based on clinical findings, course of herillness, typical MRI, EEG and rule out other dementing disease. She died after one month. in anypatients with psychiatric disorders, rapidly progressive mental deterioration and myoclonic jerksC-JD should be considered as an important diagnosis. Treatable dementing disease should beconsidered and ruled out at first. The significance of phlebotomy in C-JD has yet to bedetermined.

#### Cross Infection

#### epidemiology

Causes of nosocomial pneumonia and evaluation of risk factors in a University Hospital in Turkev.

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Mustafa Kemal University - Medical Faculty - Department of Infections Diseases and Clinical Microbiology

Saudi Medical Journal 2007; 28 (1): 114-120 (30 ref.)

**Keywords:** Pneumonia, Bacterial-epidemiology; Pneumonia, Bacterial-microbiology; Risk Factors;Incidence; Hospitals, University; Prospective Studies

Abstract: To determine the incidence, risk factors, mortality rate, and organisms causingnosocomial pneumonia [NP]. We carried out this study in the Intensive Care Units [ICUs], GeneralMedical and Surgical wards of Baskent University, Training and Research Hospital in Adana, Turkey, between November 2000 and August 2002. Patients were observed from the time ofadmission until 48 hours after discharge from the hospital. In this study, 618 [2.1%] nosocomialinfections [NIs] were detected in 29778 patients. One hundred and fifteen of these infections wereNP and investigated with surveillance prospectively. The most frequently isolated microorganisms in NP were methicillinresistant Staphylococcus aureus [MRSA] 32.8%, Pseudomonas species21.5%, methicillin-sensitive Staphylococcus aureus [MSSA] 10.2%, Klebsiella species [9.1%] and Acinetobacter species 5.9%, E. coli; 5.4% [10/186], Streptococcus species; 4.8% [9/186], Candidaspecies; 4.8% [9/186], Enterobacter species; 2.7% [5/186] and the other bacteria; 2.7%. Thepredominant pathogens isolated in this study were MRSA [33.8%], Pseudomonas species [16.9%]and MSSA [16.9%] in early-onset pneumonias and MRSA [32.2%], Pseudomonas species [24.0%], and Klebsiella species [10.7%] in late-onset pneumonias. This study demonstrated that thepossibility of developing NP, significantly increases with such risk factors as decreased level ofconsciousness, respiratory failure, mechanical ventilation and tracheostomy. Each center shouldknow its patients' profile, the factors that increase the infection, the antibiotic resistance patterns ofmicroorganisms, and the distribution of hospital infections in every department. Strategies toprevent both development of antibiotic resistance and spread of resistant organisms arenecessary.

# Cyclin-Dependent Kinase Inhibitor p21

### analysis

Expression of p21 and p27 in gallbladder cancer.

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Saudi Medical Journal 2007; 28 (5): 683-687 (34 ref.)

**Keywords:** Cyclin-Dependent Kinase Inhibitor p27-analysis; Gallbladder Neoplasms-chemistry; TumorMarkers, Biological-analysis

**Abstract:** To investigate the expression of p21 and p27 factors in gallbladder cancer [GBC], and tocorrelate their expression with clinicopathological parameters: age, gender, stage, invasion, andgrade. Thirty-two surgically resected specimens were collected between 1994-2001 from differenthealth centers in north Jordan. Tissues belong to 25 females and 7 males were examinedimmunohistochemically. The study took place in the Pathology Department Jordan University ofScience and Technology, Jordan. Levels of p21 were found in 75% and p27 in 25%. Furthermore, p21 was expressed in 50% of the specimens which are belong to patients with ages <64 years, whereas all specimens for ages > 64 years have p21WAF1/CIP1 expression [p=0.001]. Theexpression of p21 between advanced stages [stages III and IV] was 89.5% and early stages[stages I and II] was 53.8 % [p=0.031]. The p27 expression was markedly decreased in GBCcases [25%] and there were no significant correlation between p27KIP1 expression and allclinicopathological parameters including gender, world Health Organization grades, stages, andinvasion, whereas the expression of p21 was 75% and there was a significant correlation betweenp21 and the clinicopathological parameters including gender, stages, and invasion.

# Cytomegalovirus Infections

## congenital

Fatal congenital cytomegalovirus infection following recurrent maternal infection after a 7-year interval.

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Saudi Medical Journal 2007; 28 (2): 264-267 (12 ref.)

Keywords: Recurrence; Infant Mortality

Abstract: It is generally accepted that the risk for fetal infection is greatest with maternal primarycytomegalovirus CMV infection and much less likely with recurrent infection. Here, we report afatal case of congenital CMV infection

following recurrent maternal infection after a 7-year interval.A 3-month-old female baby presented with fever, jaundice, vomiting and stopping breast-feeding.Physical examination revealed mild respiratory distress, hepatosplenomegaly, microcephaly andgrowth retardation. Laboratory examination included bilirubin concentrations Total: 7.17 mg/dl; conjugated 6.67 mg/dl, aspartate transaminase 141 IU, and alanine transaminase 499 IU.Enzyme-linked immunosorbent assay test results revealed + CMV IgM and + CMV IgG. She diedon the 10th day of admission with the diagnosis of CMV hepatitis, pneumonia, and multi-organfailure. Nuclear and cytoplasmic inclusions were demonstrated in the lung, liver and brain onpostmortem biopsy. This case highlights that the outcome of babies born to mothers with recurrentmaternal CMV infection may be more severe and fatal than previously thought.

## **Decompression, Surgical**

#### adverse effects

Complications of MVD for trigeminal neuralgia.

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K.E. Medical University - Mayo Hospital - Department of Neurosurgery, Lahore General Hospital

Annals of King Edward Medical College 2007; 13 (1): 57-58 (10 ref.)

Keywords: Trigeminal Neuralgia-surgery; Tomography, X-Ray Computed; Treatment Outcome

**Abstract:** This standard approach describes the decompression of offending vessels at the rootentry zone of 5th cranial nerve. We have operated upon 25 patients with different age group. C.T.Scan of all patients was normal except two. One had CP angle tumor and other had rightepidermoid cyst. The aim of study was to evaluate the outcome and complication in one yearfollow up.

#### **Deferoxamine**

#### therapeutic uses

High-dose deferoxamine treatment [intravenous] for thalassaemia patients with cardiac complications.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1053-1059 (25 ref.)

**Keywords:** Deferoxamine-administration and dosage; Thalassemia-complications; Treatment Outcome; Cardiomyopathies-drug therapy; Ferritins-blood

**Abstract:** As a means to manage cardiac conditions, we determined the effects of high-doseintravenous [IV] deferoxamine in 15 thalassaemia patients with cardiomyopathy and high ferritinand haemoglobin levels. The patients received IV deferoxamine, 130 mg/kg per day over 10-14hours [maximum 5 g] for 5 consecutive days. All patients underwent a full evaluation beforereceiving deferoxamine, and 2 days and 1 month after completing the treatment. Visual andauditory examinations were done to detect any side-effects. After treatment, cardiovascularsymptoms decreased considerably and systolic function showed significant improvement, butthere was no significant effect on diastolic function, electro-cardiography and physical findings. There were no significant side-effects reported.

## **Deglutition Disorders**

## etiology

A rare cause of intermittent dysphagia: giant fibrovascular polyp of the proximal esophagus.

Palanivelu, Chinnusamy; Rangarajan, Muthukumaran, John, Suviraj James; Annapoorni, Shankar; Senthilkumar, Saravanan GEM Hospital - Department of M.I.S. and G.I. Surgery

JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 51-52 (10 ref.)

**Keywords:** Esophageal Diseases-complications; Polyps-complications; Polyps-diagnosis; DiseaseProgression; Polyps-surgery; Suture Techniques; Tomography, X-Ray Computed

**Abstract:** Fibrovascular polyps account for only 0.5-1% of all benign esophageal tumors andcauses intermittent dysphagia. The patient was a 63-year-old gentleman with graduallyprogressive intermittent dysphagia of 40 days duration. Investigations revealed a submucosaltumor of the proximal esophagus causing luminal compromise. Excision was performed through acervical esophagotomy and specimen was subject to histopathological examination. Postoperativerecovery was uneventful and he was completely relieved of his symptoms.

# Dental Leakage

Effect of marginal leakage around class II composite resin restorations.

Hussain, K.; Anwar, F.; Tareen, M.K.; Tariq, M. Bolan Medical College - Dental Section

Annals of King Edward Medical College 2007; 13 (1): 133-134 (12 ref.)

Keywords: Composite Resins; Esthetics, Dental; Dental Restoration Wear

**Abstract:** The desire for improved esthetics have led to the appearance of "posterior compositeresins" for occlusal restorations. Forty extracted permanent human molars and premolars ofmesial or distal class II cavities were included. There was no leakage found at 58% and 89%. Thelowest degree of leakage for all filling methods was found at the occlusal margin.

## **Dentures**

# Dimensional accuracy of removable dies made from Pindex system as a function of sectioning time.

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SDJ - Saudi Dental Journal [The] 2007; 19 (1): 8-14 (18 ref.)

Keywords: Dental Implants

**Abstract:** Existing literature has indicated that dental stone after mixing undergoes continuousisotropic expansion. The maximum expansion [70%] of dental stone occurs approximately after 2hours from the start of mix and the value progressively increases in the following 24 hours. Thisstudy compared the linear dimensional distortion of removable dies made from Pindex [R] systemsectioned at 3 time intervals ranging from 1.5 hours to 24 hours. Ninety impressions were made of a metal master model with polyvinyl siloxane impression material [Reprosil] and poured in Type IVdental stone [Excalibur]. The master casts were sectioned at 3 time intervals: 1.5 hours, 2 hoursand 24 hours from the start of mix for the first pour. The linear distance between the twoabutments were made with traveling microscope and compared with the master model. Data wereanalyzed with one-way ANOVA/ Tukey post hoc test [a = 0.05]. The results indicated thatsectioning the master cast of Pindex[R] system at 1.5 hours showed significantly less linear distortion due to expansion of the gypsum [P<.001], compared with those sectioned at 2 hours and24 hours from the start of mixing stone for the first pour.

# Depression

# Prevalence, symptomatology, and risk factors for depression among high school students in Saudi Arabia.

Asal, Abdel Rahman A.; Abdel Fattah, Moataz M.

Al-Hada Armed Forces Hospital - Department of Psychiatry

Neurosciences 2007; 12 (1): 8-16 (42 ref.)

Keywords: Prevalence; Signs and Symptoms; Risk factors; Students; Sex Factors; EarlyDetection

Abstract: To assess the prevalence and pattern of depression in a secondary school sample of Saudi Arabia adolescents. Four hundred and ninety secondary school students, comprising 306males [62.4%] and 184 females [37.6%], in the age group 16-20, were surveyed from January toMay, 2005 in Taif, Saudi Arabia, using the Arabic Beck's Depression Inventory [BDI] by a teamconsisting of a psychiatrist and psychologist. The prevalence of depression according to the BeckDepression Inventory [CBDI] [cut-off point: 19] was 110 [22.4%] for moderate [19-29], 36 [7.3%] forsevere [30-40], and 18 [3.7%] as very severe [>40] in this study group, with a clear predominance of prevalence of depression in girls than in boys [1.5 times]. Multivariate logistic regressionanalysis demonstrated that the most significant risk factors involved were: gender, birth order, history of psychiatric illness, history of relative loss, and familial history of chronic diseases. Factoranalysis revealed that self-criticalness, agitation, and loss of energy had the highest scores in thetotal sample. In the male subgroup, loss of energy, self-criticalness, punishment feeling, and agitation had the highest score while in the female subgroup, self-criticalness, agitation, and cryinghad the highest scores. Our findings provide gender differences in the prevalence andpresentation of depressive symptoms. The experience of stressful life events increases the risk ofdepression. Assessment using screening is recommended. The increased risk for the onset ofdepression in adolescents reinforces the importance of early recognition and intervention.

# **Diabetes Complications**

Diabetes mellitus: the leading cause of haemodialysis in Jordan.

Abdallah, S.; Ahmad, A.T.; Batieha, A.; Ajlouni, K.

National Centre for Diabetes, Endocrinology and Genetics

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 803-809 (26 ref.)

Keywords: Renal Dialysis-etiology; Sex Distribution; Age Distribution; Kidney Transplantation

**Abstract:** This study aimed to define the role of diabetes mellitus as a cause of end-stage renaldisease requiring haemodialysis in Jordan, and to compare diabetic and nondiabetic patients. Allpatients on haemodialysis in Jordan at the time of the survey in 2003 [n = 1711] were personally interviewed and additional data were obtained from medical records. Diabetes mellitus was themost common cause of end-stage renal disease [29.2% of cases]. The mean age of

patients washigher in diabetics [57.5 years, standard deviation [SD] 12.3] than nondiabetics [45.4 years, SD17.1]. Duration on haemodialysis was significantly shorter in diabetics compared to nondiabetic patients.

#### **Diabetes Mellitus**

## drug therapy

Rimonabant as potential treatment for the neglected epidemic of diabetes in the Middle East and Arabian Peninsula. Implication forprevention.

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Saudi Medical Journal 2007; 28 (5): 806-808 (5 ref.)

**Keywords:** Pyrazoles-therapeutic uses; Receptors, Cannabinoid-antagonists and inhibitors; DiabetesMellitus-epidemiology; Endocannabinoids-physiology; Metabolic Syndrome X-drug therapy; Piperidine-therapeutic uses; Randomized Controlled Trials

## **Diabetes Mellitus, Experimental**

## pathology

A comparative study of the ultrastructure of submandibular, parotid and exocrine pancreas in diabetes and fasting.

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Saudi Medical Journal 2007; 28 (1): 28-35 (31 ref.)

**Keywords:** Fasting; Pancreas, Exocrine-ultrastructure; Parotid Gland-ultrastructure; SubmandibularGland-ultrastructure: Rats

Abstract: To comparatively analyze the ultrastructural changes in the submandibular and parotidglands and in the exocrine pancreas following diabetes induced by Streptozotocin exposure andthe effects of fasting and insulin treatment on these alterations. For experimental procedure, weincluded 48 Sprague-Dawley type rats in July 2001-March 2002 at Gazi University, Turkey. Wedivided the rats into 8 groups following the infusion of Streptozotocin. While the degenerationmanifested itself as accumulation of secretions within the mucous cells in the submandibulargland, lipid droplets were absent, being replaced by vacuolar structures. The parotid gland andexocrine pancreas, having similar properties, were affected similarly. Diabetes-induced loss ofgranules was observed in the serous cells in both glands. There was diffuse lipid accumulationwithin these cells. Regarding granule content, we observed the most prominent degenerativechanges in the parotid gland. While cellular loss was observed in neither the submandibular, northe parotid gland, we noted presence of apoptotic cells was noted in the pancreas. State of fastingwas found to cause alterations within the glands indicating increased activity. While insulintreatment was seen to restore the structure to normal in general in both of the 3 glands. This studydemonstrated that both of the 3 glands are affected by diabetes and concomitant fasting, and thiseffect manifests itself via the granule content.

# Diabetes Mellitus, Type 2

#### immunology

The opposite associations of lycopene and body fat mass with humoral immunity in type 2 diabetes mellitus: a possible role inatherogenesis.

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Shaheed Beheshti University of Medical Sciences - National Nutrition and Food Technology ResearchInstitute

Iranian Journal of Allergy, Asthma and Immunology 2007; 6 (2): 79-87 (41 ref.)

Keywords: Body Mass Index; Oxidative Stress; Atheroscterosis; Anthropometry

**Abstract:** This study examined the possible effects of lycopene at physiological dosage and bodyfat mass on the humoral immune response in patients with type 2 diabetes mellitus [T2DM]. A totalof 35 patients with Typ2 diabetes mellitus from both sexes aged 54 +/-9 yrs from the IranianDiabetes Society were introduced into a double blind placebo controlled clinical trial conducted for2 months. After a 2-week lycopene free diet washout period, patients were allocated to eitherlycopene supplementation group [10mg/d] [n=16] or placebo age- and sex matched group [n=19] for 8 weeks. Patients were instructed to keep their diets and physical activities as unchanged aspossible. Lycopene supplements increased serum lycopene levels [p<0.001]. While intake ofdietary energy and nutrients did not change in either groups, the ratio of total antioxidant capacityto malondialdehyde increased significantly in the lycopene group [p=0.007]. There was an inversecorrelation between serum levels of lycopene and those of IgG [r=-0.338, p=0.008]. On thecontrary, changes of serum levels of lycopene directly correlated with those of IgM [r=-0.466,p=0.005]. Interestingly, changes of the amount of fat mass correlated directly with those of serumIgG [r=0.415, p=0.044] but inversely with of serum IgM [r=-0.469, p=0.021]. While truncal fatmight promote adaptive humoral immunity, lycopene

probably by inhibiting MDA-LDL formationmight attenuate T cell dependent adaptive [pro-atherogenic] humoral immune response. Thesefindings may have preventive implications in long term diabetic complications, notablyatherogenesis.

## **Diabetic Foot**

An Arab tradition could lead to a disaster in diabetic patients.

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King Abdul Aziz Medical City - Department of Family Medicine **Saudi Medical Journal** 2007; 28 (5): 800-801 (5 ref.)

Keywords: Posture; Arabs; Culture

# **Diabetic Neuropathies**

Subclinical autonomic neuropathy in Saudi type 2 diabetic patients.

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Neurosciences 2007; 12 (1): 46-49 (23 ref.)

Keywords: Diabetes Mellitus, Type 2-complications; Heart Rate; Blood Pressure; Autonomic Pathways

**Abstract:** To compare the results of autonomic function tests obtained from diabetic patients whohad no symptoms or signs of somatic or autonomic neuropathy with those obtained from controlsubjects. We studied 32 diabetic Saudi patients [17 males, 15 females] and 34 control subjects [170f either gender] at King Khalid University Hospital, Riyadh, in the period 2004-2005. The meanage of patients was 50.3 +/- 5.04, and of controls was 49.9 +/- 5.86 years. In diabetics, the meanduration of the disease was 8.7 +/- 3.1 years [range 5-15 years], and the mean glycatedhemoglobin was 7.76 +/- 1.14. The same observer performed the autonomic function tests. Indiabetics, the resting heart rate [beats/min] was 80.5 +/- 4.13, mean orthostasis ratio was 1.06 +/-0.035, mean Valsalva ratio was 1.19 +/- 0.036, mean forced sinus arrhythmia was 12.66 +/- 0.8beats/min, mean diastolic blood pressure increase in response to isometric exercise was 13.03 +/-1.36 mm Hg, and sympathetic skin response was present in only 18 [56.3%] out of 32 patients. These results were significantly different from the control group [p<0.001]. Diabetic patients, withno symptoms or signs of neuropathy, can have impaired autonomic function. We consider thissubclinical autonomic neuropathy.

#### prevention and control

## [Evaluation and prevention of diabetic neuropathy].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 1-6 (26 ref.)

Keywords: Diabetic Neuropathies-diagnosis; Diabetes Complications

Abstract: Diabetic neuropathy is an incapacitating disease that afflicts almost 50 percent ofpatients with diabetes. A late finding in type 1 diabetes, diabetic neuropathy can be an earlyfinding in non insulin-dependent diabetes. Diabetic neuropathies are divided primarily into twogroups, sensorimotor and autonomic. Patients may acquire only one type of diabetic neuropathy ormay present with combinations of neuropathies, such as autonomic neuropathy or distal symmetricpolyneuropathy, the latter of which the most common form. Motor deficits, orthostatic hypotension, silent cardiac ischemia, hyperhidrosis, vasomotor instability, gastroparesis, bladder dysfunction, and sexual dysfunction can also result from diabetic neuropathy. Strict control of blood sugar, combined with proper daily foot care, is essential to avoid the complications of this disorder. Withthe potential to afflict any part of the nervous system, diabetic neuropathy should be suspected inall patients with type 2 diabetes as well as patients who have had type 1 diabetes for over fiveyears. Although some patients with diabetic neuropathy notice few symptoms, upon physicalexamination mild to moderately severe sensory loss may be noted by the physician. Idiopathicneuropathy has been known to precede the onset of type 2 diabetes.

# **Diabetic Retinopathy**

#### diagnosis

Abnormal Cambridge low-contrast grating sensitivity results associated with diabetic retinopathy as a potential screening tool.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 810-818 (38 ref.)

**Keywords:** Early Detection; Cross-Sectional Studies; Sensitivity and Specificity; DiabeticRetinopathy-complications; Contrast Sensitivity; Diabetes Complications

**Abstract:** Contrast sensitivity is proposed as a potential screening tool for the early detection ofdiabetic retinopathy. A cross-sectional study was performed in a tertiary referral university eyecentre. A total of 80 diabetes patients were recruited and tests were performed on 154 eyes. Contrast sensitivity was checked using Cambridge low-contrast grating. Abnormal contrastsensitivity was observed in 27.1% of eyes with diabetic retinopathy, compared with 9.0% inunaffected eyes, a statistically significant difference. Cambridge low-contrast grating is a potentialscreening tool for early detection of diabetic retinopathy by non-ophthalmologistsp.

# **Down Syndrome**

## epidemiology

#### Incidence of Down syndrome in Dubai, UAE.

Murthy, Sabita K.; Malhotra, Ashok K.; Mani, Sara; Shara, Maryam Essa A.; Al Rowaished, Eman Essa Mohd;Naveed, Sehba; Al Khayat, Abdulla Ibrahim; Al Ali, Mahmoud Taleb

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Medical Principles and Practice 2007; 16 (1): 25-28 (27 ref.)

Keywords: Incidence; Maternal Age

Abstract: To describe incidence of Down syndrome in Dubai, United Arab Emirates [UAE]. A totalof 63,398 newborn babies in Dubai [24,250 UAE nationals and 39,148 non-UAE] during a 5-yearperiod of 1999-2003 were routinely examined by experienced nurses, neonatologists, pediatriciansand/or general practitioners for symptoms of Down syndrome. Those suspected with Downsyndrome were referred to the cytogenetic laboratory for karyotyping. A total of 141 cases wereconfirmed cytogenetically as Down syndrome. Of these, 139 were trisomy 21 and of the remaining2, 1 was a translocation and the other a mosaic. Theoverall incidence of Down syndrome in Dubaiwas 1/449 live births [2.2 per 1,000]; 1/319 live births [3.13 per 1,000] among UAE nationals and 1/602 live births [1.66 per 1,000] among non-UAE nationals. The mean maternal age of UAEnational mothers was 33.48 ' 8.08, with 41.66% of the mothers being in the advanced maternalage group [>35 years]. The higher incidence of Down syndrome among UAE nationals iscomparable to incidences reported for other Arab populations in the Middle Eastern region. Advanced maternal age, with mothers bearing children until their 50s and higher parity, appear tobe the major contributing factors for the increased incidence. The study indicates the need toprovide efficient genetic counseling and to introduce an effective antenatal screening program andprenatal diagnostic services to reduce the psychological and genetic burden on the families andcommunity.

## **Drowning**

#### prevention and control

Effect of submersion injury on water safety practice after the event in children, Saudi Arabia.

Hijazi, Omar M.; Shahin, Amr A.; Haidar, Nasser A.; Sarwi, Muna F.; Musawa, Eman S.

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King Fahad National Guard Hospital - Department of Pediatrics Saudi Medical Journal 2007; 28 (1): 100-104 (26 ref.)

Keywords: Safety-standards; Risk Factors; Questionnaires; Child

**Abstract:** To bring to light issues surrounding water safety practices and the impact of suchincidents on these practices in our community. We conducted a prospective observational study atKing Abdul-Aziz Medical City, Riyadh, Kingdom of Saudi Arabia of all children <12 years of agepresenting with submersion injury in the period between January 1999 through December 2004noting the demographics and the pattern of water safety practices prior to and after event. A total of29 patients were included. The majority of incidents took place in swimming pools. Water safetypractices were lacking in most cases as evidenced by the fact that 87% of the victims were notproperly supervised at the time of the event. None of swimming pools met the required safetyregulations. Cardiopulmonary resuscitation knowledge was virtually nonexistent. The event did nothave a positive impact on the water safety practices of the affected families. Submersion injury isalso prevalent in land locked areas. Water safety practices are deficient in our community. Submersion injury was not enough to have a consistent positive impact on water safety practices of the affected families. Much can be carried out to improve water safety and save lives.

## **Drug Delivery Systems**

Drug discovery and delivery in the 21st century.

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Medical Principles and Practice 2007; 16 (1): 1-14 (125 ref.)

Keywords: Drug Design

**Abstract:** Drug discovery in the late 20th century has increasingly focused on the definition and characterization of the macromolecular substrates that serve as targets for drug design. The advent of genomics and the molecular biology revolution has permitted both the definition of newtargets and the characterization of the genetic basis of disease

states. The introduction of powerfulnew technologies should greatly accelerate the pace of new drug discovery. Although genomics,both human and nonhuman, should in principle increase the number of potential drug targets andprovide a greater understanding of cellular events contributing to the pathology of disease this hasyet to occur in practice, primarily because of the underlying complexity of cellular signalingprocesses. The emerging discipline of systems biology is attempting to bring both order andunderstanding to these signaling processes. Genomics has, however, impacted on drug discoveryin ways that are important beyond a mere increase in potential drug target numbers. Genomicshas provided the tools of contemporary drug discovery, the pharmacogenomic pathways topersonalized medicine, and has greatly influenced the nature of synthetic organic chemistry, adiscipline that is still the cornerstone of contemporary drug discovery. In the future, genomics andthe tools of molecular biology will have a corresponding impact on drug delivery processes andmechanisms through introduction of drug delivery machines capable of both synthesis andactivation by disease-specific signals. Such machines will be based on a synthetic genome, usingan expanded genetic code, and designed for specific drug synthesis and delivery and activation by pathological signal. This essay is based upon a lecture of the same title presented at the Facultyof Medicine, Kuwait University during a visit in the spring of 2005. It is intended, as was thelecture, to be a broad, descriptive and speculative overview rather than a comprehensive anddetailed review.

# **Drug Utilization Review**

Improving rational drug use in Africa: the example of Sudan.

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Kuwait University - Faculty of Pharmacy - Department of Pharmacy Practice

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1202-1211 (37 ref.)

Keywords: Patient Care; Self Medication; Health Education

**Abstract:** The aim of this review is to determine the extent of irrational drug use and contributingfactors in Sudan and to identify the interventions that need to be strengthened to promote therational use of drugs in the country and to evaluate the impact of different types of intervention. Wepresent an overview of studies describing patterns of drug prescribing, dispensing andself-medication. Rates for inappropriate prescribing and dispensing practices and prevalence ofself-medication with antimicrobials and herbal products were alarmingly high. Indicators of rationaldrug use have worsened over the past decade despite the implementation of managerial, regulatory and training interventions. Multifaceted interventions have proved effective in changingsuboptimal prescribing practices. Educational interventions are needed to address self-medicationand adherence.

### **Duodenal Ulcer**

#### complications

Bleeding duodenal ulcer in patients admitted to Erbil City Hospital, Iraq: 1996-2004.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 787-793 (18 ref.)

**Keywords:** Gastrointestinal Hemorrhage-mortality; Gastrointestinal Hemorrhage-therapy; Gastrointestinal Hemorrhage-prevention and control; Risk Factors

**Abstract:** The frequency of bleeding duodenal ulcer was assessed in patients admitted with uppergastrointestinal bleeding to Erbil City hospital from the Emergency Department during 1996-2004.Of 740 such patients, 556 [75.1%] were diagnosed with bleeding duodenal ulcer: 312 [56.1%] were managed conservatively while 238 [42.8%] underwent surgery. Overall mortality over the 9years was 4.7%. Over the 3 consecutive 3-year periods, mortality fell from 7.1% in the first 3 yearsto 2.2% in the final 3 years. Overall mortality among the 238 patients treated surgically was 8.4%. This fell from 13.3% in 1996-98 to 3.1% in 2002-04. Mortality in the conservatively managedpatients was 1.9%.

# Dyskeratosis Congenita

## pathology

Light and scanning electron microscopic investigation of the changes in hair with Dyskeratosis congenita.

Celik, Hakan H.; Erbil, Hakan; Tatar, Ilkan; Ozdemir, Mehmet B. Hacettepe University - Faculty of Medicine - Department of Anatomy

Saudi Medical Journal 2007; 28 (2): 296-297 (5 ref.)

Keywords: Dyskeratosis Congenita-complications; Hair-pathology; Hair-abnormalities; Microscopy, Electron, Scanning

#### Ear

#### abnormalities

Pre-Auricular sinus: review and comparative study of surgical techniques.

Akram, A.; Tariq, M.; Khan, A.M.; Elahi, F.N.; Akbar, F.

Mayo Hospital

Annals of King Edward Medical College 2007; 13 (1): 124-125 (13 ref.)

Keywords: Microscopy-utilization; Treatment Outcome; Recurrence; Surgical Procedures, Operative

**Abstract:** To determine the role of operating microscope in excision of preauricular sinus. Aretrospective study. From January 2005 to July 2006 at Mayo Hospital, Lahore. All the patientswho underwent preauricular sinus excision under operating microscope were studied. Patientsreviewed in follow up for recurrence of sinus and other complications. A follow up of all operatedpatients for a period of minimum of 8 months revealed good results without any recurrence. Magnification employed during surgery minimizes the risk of recurrence of preauricular sinuses.

#### **Echinococcosis**

## complications

Hydatid disease of the first rib causing thoracic outlet syndrome.

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Medical Principles and Practice 2007; 16 (1): 68-70 (5 ref.)

**Keywords:** Echinococcosis-pathology; Thoracic Outlet Syndrome-etiology; Thoracic OutletSyndrome-diagnosis; Thoracic Outlet Syndrome-pathology; Ribs-pathology

**Abstract:** To present a case of hydatid disease of the first rib as a rare cause of thoracic outletsyndrome. A 57-year-old female patient who had suffered from pain on the left shoulder radiating tothe arm and numbness and weakness on the left arm for 3 months was admitted to our hospital. She had undergone an operation due to a mass lesion of the first rib compressing the thoracicoutlet which was detected in the preoperative examinations. During the intraoperative examinationit was decided that the lesion was a hydatid cyst and the first rib was totally resected. This reportshows that hydatid disease should be taken into consideration amongst the tumoral diseases ofthe first rib as a very rare cause of thoracic outlet syndrome.

# Echocardiography, Doppler

## methods

Predictive accuracy of tissue Doppler imaging for assessment of noninfarct myocardial region in patients with acute myocardial infarction.

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Medical Principles and Practice 2007; 16 (1): 40-46 (18 ref.)

**Keywords:** Myocardial Infarction-diagnosis; Myocardium-pathology; Coronary Angiography; ObserverVariation; Predictive Value of Tests; Sensitivity and Specificity

Abstract: To investigate the value of pulsed tissue Doppler imaging [TDI] in order to predictsignificant coronary artery stenosis supplying the noninfarct region in patients after acute anteriormyocardial infarction. Transthoracic echocardiography and coronary angiography were performed n 220 patients with acute anterior myocardial infarction. The TDI-derived variables of the mitralvalve annulus in the noninfarct region, systolic velocity [Sm], early diastolic velocity [Em] and latediastolic velocity [Am], were estimated in centimeters per second, and the Em/Am ratio wascalculated. Predictive indices revealed that the impaired TDI-derived variables, Sm, Em, Am and the Em/Am ratio, were an indicator for predicting significant coronary stenosis in the noninfarctregion. Multivariate analysis revealed that the impaired Sm and Em velocities were significantly associated with age of the patients, coronary collaterals and infarct-related artery stenosis [p <0.05]. Receiver-operating characteristic curve data of TDI-derived variables for prediction of significant coronary stenosis revealed that the cut-off values of Sm, Em, Am and Em/Am ratio were 7.2 cm/s, 6.4 cm/s, 12.1 cm/s and 0.56, respectively. The K coefficient value indicated that therewas an agreement between coronary angiography and the TDI-derived variables Sm, Em, Am and Em/Am ratio in noninfarct regions [K = 0.770, 0.731, 0.693 and 0.679, respectively]. There was asignificant correlation between the severity of coronary artery stenosis [independent variable] and impaired Sm and Em/Am ratio [dependent variables], y = 11.5 - 0.05x, r = -0.902, [p < 0.05], and y= - 0.14x + 1.87, r = -0.754, [p < 0.05], respectively. TDI can be used to identify patients with significant stenosis of the coronary arteries supplying the noninfarct region and consequently maybe helpful in considering patients for coronary angiography in the early postinfarction period.

# **Education, Medical**

English for specific purposes: implications in medical education.

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NED University of Engg. and Technology - Department of Humanities and Management

JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 1-2 (4 ref.)

Keywords: Language; Students, Medical; Teaching; Research; Physicians

# **Elaeagnus Umbellata Extract [Substance Name]**

Antibacterial activity of Elaeagnus umbellata [Thunb.] a medicinal plant from Pakistan.

Sabir, Mubasher S.; Ahmad, Dilnawaz S.; Hussain, Imtiaz M.; Tahir, Kaleem M.

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Saudi Medical Journal 2007; 28 (2): 259-263 (28 ref.)

**Keywords:** Plants, Medicinal-therapeutic uses; Plants, Medicinal-isolation and purification; Anti-BacterialAgents;

Escherichia coli; Pseudomonas; Staphylococcus

Abstract: To evaluate the biological activity of Elaeagnus umbellata extracts on standardmicroorganism strains as well as multi-drug resistant bacteria isolated from hospitals. We carriedout this study at the Plant Pathology Laboratory of the University College of Agriculture, RawalakotPakistan during the period between September-November 2004. Flowers, leaves, and berries ofthe plant were extracted in different solvents and tested for their antibacterial activity by discdiffusion method on selected organisms like methicillin resistant Staphylococcus aureus [S. aureus], multi-drug resistant Pseudomonas aeruginosa [P. aeruginosa], and enterohemorrhagicEscherichia coli [E. coli]. The ether extract of flower was found to be highly effective against E. coli,P. aeruginosa, S. aureus, and Bacillus subtilis [B. subtilis]. The alcohol extract of these leaves alsodemonstrated strong activity against gram positive and negative bacteria. The aqueous extractfrom the berry strongly inhibited the growth of E. coli and S. aureus whereas, it exhibited a verysmall zone of inhibition against B. subtilis. Multi-drug resistant P. aeruginosa was found completelyresistant to aqueous extract. The acetone extract of the berry showed good activity against P.aeruginosa. The present study reports the antibacterial activity of Elaeagnus umbellata. Most ofthe extracts displayed broad-spectrum activity, since gram positive bacteria including S. aureus, B.subtilis and gram-negative bacteria including E. coli and P. aeruginosa were inhibited. Thesepreliminary findings may provide the basis for traditional use of this plant in the treatment ofinfectious diseases

# **Embryo Transfer**

#### methods

Hyaluronic acid versus albumin in human embryo transfer medium.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 876-880 (15 ref.)

Keywords: Hyaluronic Acid; Albumins; Pregnancy Rate; Culture Media

**Abstract:** We compared the implantation and pregnancy rate through in vitro fertilization [IVF]using hyaluronic acid and albumin as transfer medium in 60 women randomly allocated to 2groups. In treatment group A [n = 30], embryos were transferred to medium supplemented withhyaluronic acid. In the control group B [n = 30], embryos were transferred to medium containingalbumin. There were no significant differences between the groups in terms of mean age of thefemales, mean duration of infertility and mean number of embryos. The pregnancy rate in groups Aand B were 81.8% and 71.4% respectively, a non-statistically significant difference. Hyaluronic acidcan successfully replace albumin as transfer medium.

# **Emergency Service, Hospital**

#### trends

Trends in emergency department utilization in a hospital in the Eastern region of Saudi Arabia.

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**Saudi Medical Journal** 2007; 28 (2): 236-240 (23 ref.)

Keywords: Emergency Service, Hospital-utilization; Demography; Length of Stay; Patient Admission; Emergency

Medicine

**Abstract:** To examine the changes in emergency department [ED] utilization over a 3-year periodand identify the factors that affect utilization. We performed an analysis of administrative EDrecords at King Abdul-Aziz Hospital from the years 2003 to 2005 for all patients to assess thedemographic characteristics, periodicity of ED use, and acuity level. During the study period, thenumber of ED visits increased approximately 30%. Patients demographic characteristics, periodicity, and acuity were comparable for ED visits across each study year. Fall [betweenSeptember and November] was the busiest season [30%], and the greatest volume was between3 and 11 pm [57.5% of all visits]. We found that 52% had 1 visit, 18% had 2 visits, 12% had 3 visits, and 8% had 4 or more visits. The Canadian Triage and Acuity Scale [CTAS] IV and V visitscomprised 59.5% of the ED visits. The patients' admission has increased from 7.2-9%, while theED length of stay increased from 72 minutes to 78 minutes during the study period. Emergencydepartment utilization increased during the study period, with almost no change in the proportionsfor triage category. The numbers of patients requiring hospital admission increased, as the lengthof their stay. Nearly 60% of emergency visits are for CTAS IV and V care. There were significant patients with multiple visits to ED. We recommend the strengthening of the primary health care inour institution and a designated "Fast Track" in ED for the expeditious management of low acuitypatients.

## **Endocarditis, Bacterial**

#### therapy

Successful treatment of infective endocarditis in four kidney transplant recipients.

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Shaheed Beheshti Medical University - Shaheed Labbafinejad Medical Center - Department of KidneyTransplantation

IJKD - Iranian Journal of Kidney Diseases 2007; 1 (1): 43-45 (5 ref.)

**Keywords:** Kidney Transplantation; Treatment Outcome; Graft Rejection; Echocardiography

**Abstract:** Infective endocarditis [IE] is a serious complication in kidney transplantation, leading tograft loss and a high mortality rate. We report 4 successfully managed cases of IE in kidneytransplant recipients. Blood culture revealed Enterococcus in 2 patients, group D Streptococcus in 1, and no bacteria in 1. All of the patients were diagnosed based on at least 2 major Duke criteriafor diagnosis of IE. Although a mild increase in the serum creatinine level was observed in 3 out of 4 patients, no graft rejection occurred during the follow-up. Early diagnostic and the rapeuticintervention, particularly intensive antibiotic therapy and surgical management can preserve thepatient and the kidney allograft. Studies on previous recurrent infections and simultaneousdiseases such as cytomegalovirus in these patients are warranted.

# **Endometrial Neoplasms**

#### complications

[Fertility preservation in young women with endometrial carcinoma; report of three cases].

Mousavi, A.S.; Behtash, N.; Karimi Zarchi, M.; Modarres Gilani, M.; Ghaemmaghami, F.

Tehran University of Medical Sciences - Department of Obstetrics and Gynaecology

Tehran University Medical Journal [TUMJ] 2007; 65 (2): 82-87 (38 ref.)

**Keywords:** Endometrial Neoplasms-diagnosis; Infertility, Female-etiology; Infertility, Female-radiography: Ultrasonography

Abstract: Although endometrial cancer is primarily a disease of the postmenopausal female, 25% of patients are premenopausal, with 3-5% in women 40 years old or younger. The younger groupof women with endometrial carcinoma are frequently nulligravid with a history of infertility, and astrong desire to preserve fertility. This may pose a therapeutic dilemma for both patients andtreating physician. We reported 3 young patients with atypical; complex hyperplasia or early stageendometrial cancer that treated with conservative hormonal therapy. Medical treatment of youngpatients with endometrial carcinoma and complex atypical hyperplasia who wish to preservefertility is a reasonable and appealing option. A comprehensive evaluation prior to counseling thepatient should include. A complete history and physical examination. A formal D and C with reviewof history with an experienced gynonc pathologist. Evaluation of the pelvic and abdomenpreferably with contrast-enhanced MRI or transvaginal ultrasound. In patients found to have aclinical stage I grade I tumor and who want to preserve fertility, thorough counseling include risksand benefits, and explanation that the data is partial and incomplete due to the lack of appropriatecontrolled studies is mandatory. In patients considered for medical treatment, a high doseprogestin regimen should be started with endometrial sampling every 3 months until completeregression of the tumor is documented. Although most responses are long standing, there is asmall risk of progression during or after cessation of progestin therapy.

#### **Exudates and Transudates**

### analysis

Estimation of p53 antibodies in malignant effusions.

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Lahore Medical and Dental College - Department of pathology

Annals of King Edward Medical College 2007; 13 (1): 7-10 (36 ref.)

**Keywords:** Neoplasms-genetics; Antibodies; Enzyme-Linked Immunosorbent Assay; Cross-SectionalStudies; Tumor Markers. Biological

**Abstract:** To detect the presence of antibodies against p53 protein in the sera and cytologicallypositive malignant effusions. Cross-sectional study. Department of Pathology, PostgraduateMedical Institute, Lahore from March 1997 to November 1999. Forty cancer patients were selectedwith different types of malignancies and having cytologically positive effusions. Both sera andrespective effusion fluid were collected and stored at '20°C. Anti-p53 ELISA was then carried outby using commercially available ELISA kit. according to the manufacturer's instructions. A positivep53 antibody level corresponded to the presence of antibodies against mutant p53 proteinproduced as a result of a mutation of p53 gene in the said cancer. Positivity for anti-p53 antibodieswas observed in 27 out of 40 sera [67.5%] and in 19 out of 40 effusions [47.5%] of patients withdifferent types of cancers. The comparison revealed a significant difference with a p value of <0.05. Out of these, 18 subjects had positive anti-p53 antibodies in both the sera and in respectiveeffusion fluids, yielding an overall sensitivity of 66.6% and specificity of 92.3%. The present studydemonstrates the usefulness of anti-p53 antibody estimation both in the serum and in effusions,as a marker of neoplasia and as an adjunct to conventional diagnostic cytopathological techniquesespecially in those tumours in which p53 gene mutations occur.

# Fasting

# physiology

The effect of fasting on QT Interval.

Akram, M.; Nisa, M.U.; Shafiq, M.; Butt, W.T.; Tariq, S.; Samad, A.; Saad, S.

King Edward Medical University - Department of Physiology

Annals of King Edward Medical College 2007; 13 (1): 116-118 (33 ref.)

Keywords: Electrocardiography; Hypoglycemia; Blood Glucose

**Abstract:** QT interval reflects the total duration of ventricular depolarization and repolarization inthe ECG. Experimental hypoglycaemia and spontaneous clinical episodes of hypoglycaemia leadto the lengthening of the heart rate corrected QT interval or QTc. This is associated with elevatedrisk of sudden death. To find out the effect of fasting blood glucose levels on QT interval and thecorrected QT interval [QTc]. Fasting and post prandial blood glucose levels and ECG of healthyyoung adults were studied and QT interval, RR interval and QTc were determined. The fasting QTccame out to be 0.408+/-0.020 as compared to the post prandial value of 0.380+/-0.019. Thestudent's t test showed a highly significant value [p<0.0001]. There is significant prolongation of QT interval and QTc during fasting but within normal physiological limits.

#### Fertilization in Vitro

#### drug effects

# Effect of low-dose aspirin therapy on implantation rate in women undergoing in-vitro fertilization cycles.

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Saudi Medical Journal 2007; 28 (5): 732-736 (44 ref.)

**Keywords:** Embryo Implantation-drug effects; Aspirin-administration, dosage; Aspirin-pharmacology;Randomized Controlled Trial

**Abstract:** To determine the effect of low-dose aspirin on ovarian response, implantation andpregnancy rates in patients undergoing in-vitro fertilization [IVF] cycles. We performed arandomized analysis of 145 infertile women with a mean+/-SD age of 29.6 +/- 4.47 years whounderwent cyles of IVF. Patients received 100 mg of aspirin [n=72] or placebo [n=73] daily. Thisstudy was conducted in Royan Institute, Tehran, Iran from April 2002 to January 2004. Aspirin wasstarted on the 21st of their preceding menstrual cycle and it was continued until menstruation or anegative pregnancy test. Pregnant women received the medication until 12 weeks of pregnancy. The main outcome measures were number of follicles >/=15mm, number of oocytes retrieved, serum E2 levels, cancellation rate, Ovarian Hyperstimulation Syndrome [OHSS] occurrence, number of embryos transferred, and implantation and pregnancy rates. There were statisticallysignificant differences between the treatment group and the control group in the number of follicles[7.4 +/- 4.1 versus 9.0 +/- 4.8] and OHSS occurrence [5.6% versus 23.3%] but not in the othermeasures. The addition of aspirin low dose [100 mg/daily] to the standard long protocol for oocyteretrieval did not improve implantation and pregnancy rates in unselected patients undergoing IVFcycles.

#### **Fetofetal Transfusion**

### complications

Acardia acephalus fetus in a twin pregnancy.

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Neurosciences 2007; 12 (1): 86-87 (5 ref.)

Keywords: Twins, Monozygotic; Ultrasonography; Abnormalities

#### Fibroadenoma

## pathology

Breast fibroadenoma in female adolescents.

Tiryaki, Tugrul; Senel, Emrah; Hucumenoglu, Sema; Cakir, Bahar C.; Kibar, Ayse E.

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Saudi Medical Journal 2007; 28 (1): 137-138 (9 ref.)

Keywords: Fibroadenoma-surgery; Breast Neoplasms-pathology; Breast Neoplasms-surgery; Retrospective Studies

**Abstract:** Palpable breast masses in pediatric patients are uncommon. Fibroadenoma which mustbe distinguished from malignant tumors is the most frequent breast tumor in adolescent girl. Fineneedle aspiration FNA biopsy is highly specific in breast masses. The final cosmetic result isimportant when planning the surgical excision. Therefore it is mandatory to know preoperativecytology of the mass. Five girls who had undergone operation with breast masses between1999-2004 were evaluated retrospectively. The mean age at presentation was 13 years. Eachpatient underwent FNA biopsy before excision. Aspiration cytology of the lump showedfibroadenoma confirmed by subsequent histopathology. The breast masses can be handledoperatively through a circumareolar incision without any complication. Protection of the developingbreast bud, nipple and areola is as important as appropriate excision of the lesion. Cosmeticresults have been satisfactory and there has been no evidence of recurrence.

#### **Fibroblast Growth Factors**

# Effect of basic fibroblast growth factor on cardiomyocyte differentiation from mouse embryonic stem cells.

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Saudi Medical Journal 2007; 28 (2): 181-186 (26 ref.)

Keywords: Myocytes, Cardiac; Cell Differentiation; Erythropoietin; Mice; Embryonic StemCells

Abstract: To investigate the effect of basic fibroblast growth factor [bFGF] on the differentiation ofembryonic stem cells [ESCs] into early cardiomyocytes. Embryoid bodies [EBs] were producedfrom mouse ESC line [Royan B1] in hanging drops and cultured for 5 days as suspension. Duringthe first 2 days of suspension, the EBs of the experimental group were treated with 10 ng/ml ofbFGF and subsequently plated onto gelatin-coated tissue culture dishes [day 7]. The differentiatedcells were evaluated pharmacologically, by immunocytochemistry, and so forth. The study wascarried out in the Department of Stem Cells, Royan Institute, Tehran, Iran in 2005. The beatingfrequency in the bFGF treated EBs was less than that in the control group. In addition, the beatingin the EBs of the experimental group, treated with isoprenaline and phenylephrine, was only morethan 7+3 days in comparison to the control group. The response of the EBs to carbachol was morein the bFGF group than 7+14 days. In all the stages of development, the beating cells in the EBs ofboth groups expressed beta-actinin, myosin light chain isoform 2V, cardiac alpha-myosin heavychain [alpha-MHC], and cardiac beta-myosin heavy chain [beta-MHC]. Nonetheless, during 7+3days, the last 2 genes were more advanced in the bFGF group. The atrial natriuretic factor wasalso expressed at a late stage in both groups. Basic fibroblast growth factor can only promote theearly maturation of ESC-derived cardiomyocytes in terms of chronotropic characteristics and expression of cardiac alpha-MHC and beta-MHC.

#### Fissure in Ano

#### drug therapy

Chemical versus surgical sphincterotomy for chronic fissure in ano.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 44-47 (25 ref.)

**Keywords:** Fissure in Ano-surgery; Nitroglycerin-therapeutic uses; Vasodilator Agents-therapeutic uses; Chronic Disease; Treatment Outcome

Abstract: To evaluate the efficacy and costs of chemical [topical glyceryl trinitrate ointment]versus lateral internal sphincterotomy for the treatment of chronic anal fissure. Aquasi-experimental study. This study was conducted at D.H.Q. /Allied Hospital, Faisalabad fromNovember 2001 to October 2003. Out of 74 patients, topical treatment was applied to 46. Eighteenpatients never followed this modality of treatment so were excluded from the study. The remaining28 patients applied 0.2% glyceryl trinitrate ointment on their anal verge thrice-a-day for twomonths. The patients in urgency due to pain or refused topical modality were treated by surgicalsphincterotomy. Twenty-eight patients were allocated to undergo surgical sphincterotomy. Thepatients were followed-up and the extent of improvement in presenting symptoms, side effects,complications and costs of these modalities were noted on the questionnaires. Chemicalsphincterotomy relieved symptoms only in 18 [64.3%] patients while surgical sphincterotomyrelieved 28 [100%] patients. In the former, recurrence occurred in 6 [33.3%] patients, but in thelater group incontinence of flatus/ faeces was present in 18 [64.3%] at first week which resolved byeighth weeks. Wound related complications in 4 [14.2%] cases were noted. Average costs oftreatments excluding hospital expenditures were Rs. 164 and Rs. 1244 respectively. Topicalmodality proved to be cost-effective and non-invasive than the surgical modality, but later wassuperior regarding healing of anal fissures.

## Role of Topical Glyceryl Trinitrate in the Management of Anal Fissure.

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Annals of King Edward Medical College 2007; 13 (1): 35-38 (20 ref.)

Keywords: Nitroglycerin-therapeutic uses; Treatment Outcome; Wound Healing; Case-Control Studies; Administration,

Topical

Abstract: 1] To evaluate the effectiveness of topical 0.2% Glyceryl Trinitrate [GTN] ointment insymptomatic relief and healing of anal fissure. 2] To establish the role of GTN as a first linetreatment for both acute and chronic anal fissure. 3] To elaborate the safety profile of GTN withrespect to its side effects. Prospective, randomized case control study. Surgical unit II, JinnahHospital, Lahore. 1 year from 1-2-2005 to 31-2-2006. Fifty patients of all ages and either sex with aclinical diagnosis of fissure in ano [both acute and chronic] were included in the study. Patientswere randomly divided into two groups. The treatment group [Group-A] was advised 0.2% GTNointment whereas the control group [Group-B] was prescribed a local anesthetic ointment[Lignocaine Compound [R] Knoll]. Both groups applied the given drugs twice daily for a period of 8weeks and follow-up at the end of first, second and eighth week was carried out. A longtermfollow-up at the end of 6 months was undertaken to look for any recurrence of the disease. 18patients out of 50 patients presented with acute anal fissure while 32 presented with chronic analfissure. 77% of patients with acute fissure in Group A showed fissure healing while 44% of patientswith acute fissure were benefited in Group B. When the failures of group B were subjected toGTN, 80% of the patients showed healing of their fissures. 81% of patients suffering from chronicanal fissure were cured in Group A while 25% of patients showed improvement in Group B.Nonbenefited patients in group B when subjected to GTN, 66% showed fissure healing.Recurrence was seen in 8 patients in group A [24%] and 3 patients in group [38%] at long termfollow-up. Anal fissure is a common general surgical problem associated with severe anal pain Regarding conservative treatment, the advent of GTN is a healing hope for patients with analfissure. It has revolutionized the non-surgical treatment, as it is effective, safe and economical interms of cure of both acute and chronic anal fissures.

### **Fontan Procedure**

# [Extra cardiac conduit Fontan procedure in 41 patients].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 36-44 (10 ref.)

Keywords: Cardiac Surgical Procedures; Heart Bypass, Right; Heart Defects, Congenital-surgery

Abstract: The Fontan operation is the definitive operation for palliation of complex congenitalheart disease with single -ventricle physiology. The use of the extra cardiac conduit has recentlybeen gaining popularity. The purpose of this study was to compare the outcomes of extra cardiacconduit Fontan procedure [off-pump technique] and that of traditional technique [lateral tunneltechnique] in which cardiopulmonary bypass is routinely used. Forty one patients in different agegroups underwent extra cardiac conduit Fontan procedure between April 2001 and December2004. Data were collected from ICU sheets, files and during follow up visits. Under generalanesthesia and through median sternotomy, using two temporary decompressing shunts, superiorvena cava implanted on right pulmonary artery and a conduit interposed between transectedinferior vena cava and main pulmonary artery. Fenestration was done in almost all patients and previous shunts were closed if there were any. Of our patients, 13 were female and 28 were male. Mean age of the patients was 11.1 years [SD=7.8].In 24.4% of cases Fontan procedure was doneas the first palliative surgery and in 75.6% of them there was previous history of palliative procedures. In 6 patients [14.6%] we were constrained to use cardiopulmonary bypass which waspredictable or necessary in 50% of cases. There was no reoperation due to post operativebleeding. Two cases suffered from prolonged plural effusion. Our in-hospital mortality was 9.8%. During 2-24 months follow up, we found two cases who were in NYHA functional class II and onecase in functional class I. Extra cardiac conduit Fontan procedure could be used in a safe way. The results of this study were comparable and even in some cases better than that of thetraditional technique.

# **Foreign Bodies**

Bilateral intranasal button batteries.

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Annals of King Edward Medical College 2007; 13 (1): 1-2 (24 ref.)

Keywords: Nasal Cavity; Nasal Septum-injuries; Paranasal Sinuses-radiography; Burns, Chemical

**Abstract:** Insertion of foreign body in ear, nose and aero digestive tract is a common conditionencountered in ENT practice. Toddlers and young children are often the victims. The presentation of a child with bilateral insertion of alkaline button batteries into nasal cavities resulting intodelayed septal perforation, and its optimal management has been discussed here.

#### **Gallstones**

## epidemiology

#### Prevalence and risk factors of gallstone disease in a high altitude Saudi population.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 794-802 (42 ref.)

**Keywords:** Gallstones-etiology; Prevalence; Risk Factors; Cross-Sectional Studies; Sex Factors; Altitude: Pancreatitis-complications

**Abstract:** To study the prevalence of gallstone disease and related risk factors in a Saudi Arabianpopulation a cross-sectional community-based study was made of 291 people from Abha district, Asir region. A structured interview collected background data and all participants had upperabdominal ultrasonography to detect gallstones. The overall prevalence of gallstone disease was11.7%. Using logistic regression multivariate analysis, the following were significant risk factors forgallstone disease: female sex, family history of gallstone disease and past history of pancreatitis. Age, education, blood pressure, smoking, coffee intake, overweight, diabetes mellitus, number of pregnancies and use of oral contraceptives were not significant risk factors. Discriminant analysis symptoms showed that only right hypochondrium pain was significantly associated withgallstone disease.

## Genitalia, Male

## injuries

### Male genital self-amputation in the Middle East. A simple repair by anterior urethrostomy.

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Saudi Medical Journal 2007; 28 (5): 791-793 (11 ref.)

Keywords: Self Mutilation-psychology; Urethra-surgery; Schizophrenia-complications; Amputation

**Abstract:** Genital self-mutilation, whether partial or complete, is a rare condition, which usuallyoccurs in psychotic patients and occasionally has a religious background. The initial management of complete genital self-mutilation usually involves a formation of perineal urethrostomy or a morecomplex procedure to form a short penile stump. Here, we present a case of complete genitalself-mutilation in a psychotic male who was managed with simple urethral spatulation to form ananterior urethrostomy.

#### Graves' disease

#### Treatment of Graves' hyperthyroidism - prognostic factors for outcome.

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**Saudi Medical Journal** 2007; 28 (2): 225-230 (39 ref.)

**Keywords:** Prognosis; Treatment Outcome; Treatment Failure; Graves Ophthalmopathy; ThyroidHormones-blood; Antithyroid Agents

**Abstract:** To determine whether clinical and biochemical features of Graves' disease atpresentation predict response to medical and radioiodine treatment. We carried out a retrospective10-year study of 194 consecutive Saudi subjects with Graves' disease who were treated withantithyroid drugs, radioiodine therapy, or both, between January 1995 and December 2004 at KingKhalid University Hospital, Riyadh, Saudi Arabia. At diagnosis, the mean age was 32 +/- 0.9 years.Only 26% of patients had successful outcome after a course of antithyroid medication. None of theclinical or biochemical factors were associated with a favorable outcome of antithyroid treatment.One dose of radioiodine [13-15 mCi [481-555 MBq]] cured hyperthyroidism in 83% of patients.Presence of ophthalmopathy at presentation was shown

to be a significant contributing factor tofailure to respond to a single dose of radioiodine [odds ratio, 6.4; 95% CI, 1.51-24.4; p<0.01]. Failure of radioiodine treatment was also associated with higher serum free T3 concentration atpresentation [p=0.003]. In patients with Graves' hyperthyroidism, radioiodine treatment isassociated with higher success rate than antithyroid drugs. A dose of 13-15 mCi [481-555 MBq]seems to be practical and effective, and should be considered as first line therapy. Patients withhigh free T3 concentration and, those with ophthalmopathy at presentation were more likely to failradioiodine treatment. A higher dose of radioiodine may be advisable in such patients.

#### Growth

Growth of infants in relation to type of feeding in Jahrom, Islamic Republic of Iran.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 846-854 (23 ref.)

Keywords: Breast Feeding; Bottle Feeding; Body Weight; Body Height; Prospective Studies; Reference Values

**Abstract:** We evaluated the growth of 597 infants < 24 months attending health centres in Jahromaccording to type of infant feeding. We also compared our growth curves with those of the NationalCenter for Health Statistics [NCHS]. The infants were divided to 3 groups: exclusively breastfed, exclusively bottle-fed and both breast- and bottle-fed and were assessed monthly for the first yearand every 2 months in the second year. There were no significant differences between the groupsin height and weight in the first few months of birth; later, breastfed infants were significantlyheavier and taller. The mean heights and weights of our infants were lower that those for NCHS.

# Health Knowledge, Attitudes, Practice

Impact of a workshop on the knowledge and attitudes of medical students regarding health research.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 59 (5 ref.)

**Keywords:** Biomedical Research; Students, Medical; Education, Medical, Undergraduate; HealthServices Research; Curriculum

#### Safe injection practice among health-care workers in Gharbiya Governorate, Egypt.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 893-906 (14 ref.)

**Keywords:** Health Personnel; Occupational Exposure; Questionnaires; Infection Control; Cross-Sectional Studies; Safety Management; Protective Devices

**Abstract:** We assessed safe injection practices among 1100 health-care workers in 25 health-carefacilities in Gharbiya Governorate. Questionnaires were used to collect information and 278injections were observed using a standardized checklist. There was a lack of infection controlpolicies in all the facilities and a lack of many supplies needed for safe injection. Proper needlemanipulation before disposal was observed in only 41% of injections, safe needle disposal in47.5% and safe syringe disposal in 0%. Reuse of used syringes and needles was reported by13.2% of the health-care workers and 66.2% had experienced a needle-stick injury. Only 11.3%had received a full course of hepatitis B vaccination.

# **Hearing Loss**

#### epidemiology

Prevalence and patterns of hearing impairment in Egypt: a national household survey.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1170-1180 (24 ref.)

**Keywords:** Hearing Loss-etiology; Hearing Loss-diagnosis; Prevalence; Health Surveys; Age Factors; Otitis Mediacomplications; Presbycusis-complications

**Abstract:** We conducted a national household survey to estimate the prevalence and causes ofhearing impairment in Egypt. From 6 randomly selected governorates [Alexandria, Dakahlia,Luxor, Marsa Matrouh, Minia and North Sinai], 4000 individuals were screened for hearing loss. The prevalence of hearing loss was 16.0% with no significant sex differences. There weresignificant differences between the age groups and governorates: Marsa Matrouh had the highestprevalence of hearing loss [25.7%] and North Sinai the lowest [13.5%]; those >/= 65 years had thehighest prevalence [49.3%], but it was also high in those aged 0-4 years [22.4%]. Otitis media witheffusion [30.8%] was the commonest cause of hearing loss, followed by presbycusis [22.7%].

#### **Heart Murmurs**

## diagnosis

Accuracy of clinical diagnosis versus echocardiography in evaluating heart murmurs. How to measure accuracy?.

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Saudi Medical Journal 2007; 28 (1): 155 (4 ref.)

Keywords: Heart Murmurs-ultrasonography; Reproducibility of Results

## **Heart Septal Defects, Atrial**

# diagnosis

Electrocardiographic patterns of Atrial Septal defects.

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Annals of King Edward Medical College 2007; 13 (1): 108-110 (18 ref.)

Keywords: Electrocardiography-diagnostic use; Bundle-Branch Block

Abstract: This study was designed to evaluate the electrocardiographic features of Atrial SeptalDefect to establish an association with crochetage pattern and incomplete RBBB. ASDs ofPrimum, Secundum and Sinus Venosus type were included in this study. From October 15, 2003till January 15, 2004, a total of 104 consecutive patients of ASD were studied at Punjab Institute ofCardiology, Lahore. Patients were included in the study after confirmation of Atrial Septal Defecton transesophageal echocardiography. The mean age of the study population was 26.28 +/-11.40years. Among these 56[53.8%] patients were females and 48[46.2%] patients were males. Thestudy population consisted of 94[90.4%] Secundum ASD patients followed by Sinus Venosus ASD8[7.7%] patients and Primum ASD in only 2[1.9%] patients. Only 59[56.7%] patients hadcrochetage pattern in any of the leads while it was absent in 45[43.3%] patients p=0.470.Incomplete RBBB was present in 92[88.4%] patients. It was observed in 2[1.9%] patients in ASD Frimum, 82[78.8%] patients in ASD Secundum and 8[7.7%] patients in ASD Sinus Venosus type.P=0.483. Although we did not observe a statistically significant association between crochetagepattern or incomplete RBBB and ASD but the presence of any of these two considerably increasesthe specificity of the ECG for the diagnosis of ASD.

#### **Helicobacter Infections**

[Correlation of H. pylori infection and infertility; a survey in Yazd infertility clinic].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 72-77 (29 ref.)

**Keywords:** Helicobacter pylori; Infertility; Health Surveys; Enzyme-Linked Immunosorbent Assay; Prevalence; Seroepidemiologic Studies

Abstract: Infertility is a worldwide problem. Many different factors may cause infertility. Amongthem, bacterial infection of the reproductive system is one of the main factors. Recently, somelimited investigation has revealed that H. pylori is capable of causing genital inflammation that maylead to infertility. Although known to be a causative agent of gastritis and duodenal ulcers, thisspecies may be transferred orally to the vagina and asymptomatic infection leads to inflammationof the system and finally manifestation of infertility. In addition, infertility may be due to antibodiessynthesized against H. pylori cross-reacting with the genital tissue. In the present study, 180women consisting of 90 cases referred to IVF center of Yazd and 90 matched controls wereenrolled. Serum was taken from all women for detection of IgG and IgM using the ELISAtechnique. A total of 117 [65%] serum samples were positive for Helicobacter, of which 63.3% werefrom fertile and 66.7% from infertile women. The serum positive population was found to be predominantly in the age range of 25-35, although some 35-42 year olds were also serum positive. When the prevalence of Helicobacter infection status was compared with marriage duration inboth groups, it was found that antibody titer in subjects from marriages with durations of greaterthan five years was significantly higher than those of five-year marriages. In addition, higherantibody titers were found in infertile women with fallopian tube [FT] factor and lower titers in thosewith polycystic factors. Although the results were not significant, they nevertheless indicate that theHelicobacter antibody titers in infertile women were higher than those of fertile women [P =0.6]. Therefore, further studies are necessary to determine the role that Helicobacter infection plays withregard to infertility among women. Since the antibody titer in infertile cases with FT factor washigher than others, it may indicate that inflammation caused by H. pylori plays an indirect role inthe induction of infertility.

## diagnosis

Detection of Helicobacter pylori antigen in stool samples for diagnosis of infection in children.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1067-1072 (16 ref.)

**Keywords:** Helicobacter Infections-immunology; Feces-analysis; Sensitivity and Specificity; PredictiveValue of Tests; Polymerase Chain Reaction; Enzyme-Linked Immunosorbent Assay

**Abstract:** The study evaluated a non-invasive antigen test of stool samples for the diagnosis ofHelicobacter pylori infection in children compared with histopathology of gastric biopsies [goldstandard]. The study included 96 children aged 1-5 years old with dyspeptic symptoms referred forendoscopy at Tabriz Children's Hospital, Tabriz, Islamic Republic of Iran from May 2003 to March2004. Of 62 children who were positive by histology, 34 were H. pylori stool antigen positive and of34 patients with negative histology, 27 had negative stool test. The sensitivity and specificity of thetest were low [54.8% and 79.4% respectively] compared with the gold standard and the positiveand negative predictive values were 82.9% and 49.9%. However, the test may be useful for massscreening for H. pylori.

# Helicobacter pylori

## drug effects

Eradication of H. Pylori by quadruple or triple therapy.a comparative study.

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Annals of King Edward Medical College 2007; 13 (1): 67-69 (11 ref.)

**Keywords:** Metronidazole-therapeutic uses; Amoxicillin-therapeutic uses; Treatment Outcome;Omeprazole-therapeutic uses; Clarithromycin-therapeutic uses; Tetracycline-therapeutic uses; DrugTherapy, Combination

Abstract: Quadruple therapy appears to be more effective than standard therapy in managementof patients with helicobacter pylori infection. No data is available on the relative efficacy of tripleand quadruple drug regimens from Pakistan. Consecutive patients with peptic ulcer and H. pyloriinfection were randomized to receive omeprazole 20 mg wice daily along with either amoxycilline[500 mg four times daily] and clarithromycin [500 mg twice daily] [Group A] or tri-protassiumdicitrate hismuthate [120 mg four times daily], metronidazole [400 mg thrice daily] and tetracycline[500 mg 4 times daily] [Group B] for 10 days. Presence H. Pylori infection was looked for using anfecal antigen test before treatment and 30 days after completion of treatment. 17 of 21 patients inGroup A and 16 of 23 in Group B had eradication of infection [80.9 and 69.56% respectively byprotocol analysis]. Side effects occurred in 2 [1%] and 4[2%] patients in Group A and B,respectively. Discontinuation of drug was not required in any patient. Quadruple therapy for initialtherapy of H. Pylori infection does not offer any advantage over standard triple therapy.

#### Hematoma

#### diagnosis

Management of Retroperitoneal haematoma.

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Annals of King Edward Medical College 2007; 13 (1): 32-34 (16 ref.)

**Keywords:** Hematoma-therapy; Retroperitoneal Space; Tomography, X-Ray Computed; Mortality;Laparoscopy-utilization; Abdominal Injuries-diagnosis; Abdominal Injuries-surgery; PeritonealLavage-utilization

**Abstract:** This study was conducted for the management of retroperitoneal haematomas. Themain objectives of the study were to find out the frequency of different visceral injuries in cases ofretroperitoneal haematoma due to trauma to abdomen and to find out the morbidity and mortalityrelated to different zones in retroperitoneal haematoma in patients with abdominal trauma. Overone year, 45 patients of retroperitoneal injury were admitted through emergency. The entire Zone labdominal injuries were explored. Selective Zone II patients underwent surgery while most of ZoneIII patients were managed conservatively. This shows that the depending upon the mode and Zoneof the injuries, retroperitoneal haematomas can be managed conservatively.

# Hemoglobins

#### analysis

Is it necessary to consider obesity when constructing norms for hemoglobin or when screening for anemia using hemoglobin levels?.

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Saudi Medical Journal 2007; 28 (1): 41-45 (31 ref.)

Keywords: Obesity-blood; Anemia-blood; Body Fat Distribution; Cross-Sectional Studies

Abstract: To assess the relationship of total adiposity and abdominal adiposity on hemoglobinlevels in Saudi nonpregnant women. We carried out this cross-sectional study during winter of2002 [from January to March] in and around Abha city, Kingdom of Saudi Arabia. Included in thestudy were 530 non-pregnant women between the age of 18-65 years. Body weight was measuredusing an Avery Beam weighing scale, while height was measured using a stadiometer and waistcircumference using a fiberglass. Hemoglobin levels were estimated using cyanmethemoglobinmethod. Total obesity was defined as body mass index [BMI] >/=30 and abdominal obesity as WC>88 cm. The mean and median hemoglobin levels were significantly higher in abdominally obesewomen compared with totally obese [p<0.04 versus <0.02] and non obese ones [p<0.04 versus<0.03]. No significant differences in the mean and median hemoglobin levels were observed whenabdominally obese women were compared with both abdominally and totally obese ones [p<0.7 forboth]. The mean and the median hemoglobin levels were virtually identical in non-obese and totallyobese women. Statistical analysis showed that the mean hemoglobin level was positively andsignificantly associated with WC [p<0.005] and negatively and insignificantly associated with BMI[p<0.8]. In view of the positive and significant association between abdominal obesity and themean hemoglobin level in this population, abdominal obesity should be considered whenconstructing norms for hemoglobin or when screening for anemia using hemoglobin levels.

## Hemorrhoids

#### surgery

Post hemorrhoidectomy pain. A randomized controlled trial.

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Saudi Medical Journal 2007; 28 (5): 814 (2 ref.)

**Keywords:** Pain, Postoperative-drug therapy; Metronidazole-therapeutic uses; Length of Stay;Randomized Controlled Trials

# **Hepatic Encephalopathy**

#### blood

Serum levels of astroglial S100-beta and neuron-specific enolase in hepatic encephalopathy patients.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1114-1123 (27 ref.)

**Keywords:** -diagnosis; S 100 Proteins-blood; Sensitivity and Specificity; Early Detection; Phosphopyruvate Hydratase; Ammonia-blood; Blood-Brain Barrier

**Abstract:** To find a reliable, noninvasive method for the diagnosis of cognitive impairment inpatients with hepatic cirrhosis we measured serum levels of astroglial S100beta and neuron-specific enolase in cirrhotic patients with and without hepatic encephalopathy [HE].S100beta levels showed a significant increase in groups with HE stage 1 and 2 compared to bothcontrol and cirrhosis patients. However serum neuron-specific enolase levels were not significantly different between the studied groups. S100beta levels had a specificity of 91.3% and sensitivity of51.7% for detection of HE from cirrhosis. Serum S100beta may be a useful surrogate marker forthe diagnosis of mild cognitive impairment in cirrhotic patients before they progress to moreadvanced stages of HE.

# **Hepatitis A**

## epidemiology

Prevalence of hepatitis A IgG in individuals with chronic hepatitis B infection in Babol.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1108-1113 (32 ref.)

**Keywords:** Hepatitis A Antibodies-blood; Prevalence; Age Factors; Enzyme-Linked ImmunosorbentAssay; Hepatitis B-blood; Hepatitis B-immunology

**Abstract:** To determine the prevalence of previous hepatitis A virus [HAV] infection in peoplechronically infected with hepatitis B virus [HBV], we assessed the prevalence of anti-HAV IgG in392 patients. The study was carried out in Babol, northern Islamic Republic of Iran fromSeptember 2004 to March 2005. Prevalence in those aged 10-19 years was 59.4% and wassignificantly lower than that in those aged 20-29 years [89.8%] and those over 29 years [97.5%]. There was no significant difference in prevalence according to sex or place of residence. Asignificant proportion of Iranian adolescents and young adults with chronic HBV infection are at riskof contracting HAV infection.

## **Hepatitis B**

## epidemiology

Hepatitis B and Hepatitis C in blood donors: Analysis of 2-years data.

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Annals of King Edward Medical College 2007; 13 (1): 59-61 (21 ref.)

Keywords: Hepatitis C-epidemiology; Prevalence; Blood Donors; Sex Factors

**Abstract:** The aim of the study was to know the prevalence and sex difference in the prevalence of Hepatitis B and Hepatitis C among healthy blood donors at Ghurki Trust Teaching Hospitalwhich is a teaching hospital situated in periphery of Lahore, admitting patients mostly from ruralpopulation. All blood donors from September 04, 04 to August 11, 06 were enrolled. In total, therewere 7431 donors. The over all prevalence of Hepatitis B was 1.52% and Hepatitis C was 5.34%. Prevalence of Hepatitis C was greater than Hepatitis B in healthy blood donors. Hepatitis B andHepatitis C are nearly as prevalent in rural population of Lahore as in the urban population. Females in the rural population donated blood infrequently and data of female donors was toosmall to, comment on sex difference between the prevalence of the two viruses.

#### immunology

Long-term immunity to hepatitis B among a sample of fully vaccinated children in Cairo, Egypt.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 750-757 (34 ref.)

**Keywords:** Hepatitis B-prevention and control; Hepatitis B Vaccines; Hepatitis B Antibodies-blood; AgeFactors; Questionnaires

**Abstract:** We assessed the long-term immunity to hepatitis B among 242 Egyptian children aged6-12 years who had received a full vaccination course in infancy, and investigated the factorsassociated with immunity. Only 39.4% of the children had protective [v/= 10 IU/L] hepatitis Bsurface antibody levels [HBsAb]. This proportion decreased with age but the decrease was notstatistically significant. The mean level of HBsAb decreased significantly with increasing age [P =0.026]. A significant negative correlation was found between current age and HBsAb levels [r =-0.31, P = 0.041]. Age and weight-for-age were found to be significant predictors of non-protectiveHBsAb levels.

# **Hepatitis B Surface Antigens**

### blood

The prevalence of HBS antigenemia in patients with HIV infection in Shiraz, Southern Iran.

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IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 224-225 (7 ref.)

**Keywords:** Comorbidity; Prevalence; Seroepidemiologic Studies; Enzyme-Linked ImmunosorbentAssay; HIV Infections

# **Hepatocyte Growth Factor**

## physiology

The role of hepatocyte growth factor in the differentiation of dendritic cells from peripheral blood monocytes.

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Saudi Medical Journal 2007; 28 (5): 688-695 (32 ref.)

Keywords: Cell Differentiation-physiology; Dendritic Cells-cytology; Monocytes-cytology; Cells, Cultured

Abstract: To find out the effects of hepatocyte growth factor [HGF] in the development of dendriticcells [DC] from the peripheral monocytes. The study was carried out in Black Sea TechnicalUniversity Hospital, Trabzon, Turkey between 2003-2004. Seven different cytokine combinationswere employed to assess phenotypical and functional differences of DCs from the peripheralmonocytes in serum free culture media. Peripheral monocytes were incubated in media withcytokines for 5 days. The tumor necrosis factor-alpha [TNF-alpha] was added to the cell culture onday 5 and incubated for another 2 days. Surface and co-stimulating molecules on the cells wereassessed by flowcytometry. The functional capacity of the DCs was evaluated on day 7 by purifiedprotein derivative loading and subsequent lymphoproliferation test using methyl tetrazoliumstaining. On the 5th day of incubation DC development was observed in all cytokine groups, butcells were superior in cultures maintained in the presence of interleukin-4 combinations withgranulocyte-macrophage colony stimulating factor [GM-CSF] or with GM-CSF+HGF. Moreover, theexpression of surface and co-stimulating molecules increased significantly after incubation withTNF-alpha. The effect of PPD loaded-DCs on proliferation of lymphocytes was more striking inHGF containing groups. It was concluded that HGF supplemented cultures exert some additiveeffects in relation to function of monocyte-derived DCs. But HGF alone does not seem to augmentmonocyte-derived DC proliferation and maturation significantly.

# Hernia, Inguinal

### surgery

An audit of inquinal hernia repairs - a PESSI experience.

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Annals of King Edward Medical College 2007; 13 (1): 39-40 (8 ref.)

Keywords: Medical Audit; Surgical Procedures, Operative; Treatment Outcome; Recurrence; Surgical Mesh

Abstract: Inguinal hernia repair is the most commonly performed operation in general surgicalpractice. Advanced techniques like open and laparoscopic mesh repairs are the preferredoperations these days. Social Security Health Care System working under PESSI [PunjabEmployees Social Security Institute] provides a closed system of surveillance of operated patients. Patients once operated are on record and present for follow up to the relevant surgical unit for overa period of years, unlike the government hospitals, where patients are lost to follow up once theyget discharged. Retrospective study. Department of Surgery, Punjab Employees Social SecurityHospital, Ferozepur Road, Lahore from January 2001 to December, 2006. To establish thereliability of non-mesh tissue repair technique as a primary procedure in inguinal hernia. About 500patients underwent surgery for inguinal hernias. In those with primary inguinal hernia, tissue repairtechniques [plication of transversalis fascia and darning of posterior wall with prolene No.1] wereused while in those patients who had recurrent inguinal hernias, either tissue repair or mesh repairwas carried out. Tissue repair techniques gave us excellent results with a recurrence rate of 0.4%[2/500] over a mean follow up period of 4.5 years. The reliability of inguinal hernia repair techniqueprimarily with a mesh is not established whereas the old traditional tissue repair techniques havedecades of experience to justify their reliability as far as recurrence is concerned.

#### Comparison of laparoscopic hernia repair [TEP] with Lichtenstein repair for inquinal hernias.

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Annals of King Edward Medical College 2007; 13 (1): 29-31 (21 ref.)

**Keywords:** Laparoscopy-utilization; Surgical Procedures, Operative-methods; PostoperativeComplications; Treatment Outcome; Surgical Mesh

Abstract: The surgical treatment of inguinal hernia varies widely from Lichtenstein hernioplasty to Laparoscopic mesh repair [IPOM,TAPP,TEP]. To compare the per-op difficulties like operatingtime, difficulties in dissection between open mesh repair and TEP. To compare the post-op resultsand complications between the two groups. This is a prospective randomized study conducted at Services Hospital Lahore from 1st May 2005 to 31 May 2006. Total no of patients in the study were63. Ptients were prospectively randomized in two groups. 34 patients underwent open mesh repairwhereas 29 patients underwent TEP repair. The post-op morbidity scores were significantly lowerin the TEP group as compared with the open mesh repair group. However the recurrence rateswere nil in either case. We conclude that for hernias the laparoscopic mesh hernioplasty iscomparable to open mesh repair in terms of patient safety and recurrence rates but due to a longlearning curve the mean operating time is double. This can be minimized by dedication, perseverance and devotion of the budding laparoscopic surgeon.

# Hernia, Umbilical

#### surgery

Management of omphalocele using the sac as supportive material.

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Saudi Medical Journal 2007; 28 (5): 755-758 (17 ref.)

Keywords: Surgical Procedures, Operative-methods; Retrospective Studies

**Abstract:** To document retrospectively the outcome of a newly modified procedure for closure oflarge omphalocele, where the sac was conserved and used as autogenous supportive material. The medical records of 10 patients with omphalocele major admitted to Al-Noor Specialist Hospitalin Makkah, Kingdom of Saudi Arabia in the last 15 years, October 1990 to October 2005, were retrospectively reviewed. The defects were considered by the same treating surgeon too big to beclosed primarily so the sac was preserved to reduce the contents gradually. In the first stage, complete reduction was achieved in all the cases followed by second stage, the surgical closure. There was no mortality related to this intervention. This proposed technique is safe, simple and effective for the treatment of large omphalocele.

#### Homeostasis

## physiology

Homeostasis status between prooxidants and antioxidants as a potent marker in Iranian preeclamptic patients.

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Saudi Medical Journal 2007; 28 (5): 696-700 (24 ref.)

**Keywords:** Pre-Eclampsia-blood; Biological Markers-blood; Antioxidants-analysis; Ascorbic Acid-blood;Oxidants-blood; Malondialdehyde-blood; Pregnancy

Abstract: To measure the plasma oxidant, lipid peroxidation and antioxidants, ascorbate, tomagnify the prooxidants and antioxidants status as a marker of pre-eclampsia. Included in thestudy were 50 preeclamptic and 100 normotensive pregnant women of singleton gestations in theirthird trimester, presented in Allavi Hospitals in Ardabil province of Iran from August 2004 to April 2005. Among these patients plasma malonaldehyde [MDA] and vitamin C concentration wereanalyzed. Blood samples [5 ml] were collected aseptically in heparin bulb. Spectrophotometric methods were employed to determine the plasma concentrations of vitamin C. The Statistical Package for Social Sciences software was used to analyze the data. In preeclampsia, significantincrease in prooxidant MDA was observed as compared to controls. A significant fall inantioxidants vitamin C was noted in preeclampsia as compared to control. The MDA showed asignificant balance to the level of vitamin C. Administration of regular nutritive supplementationcontaining reducing systems like vitamin C should help in maintaining the equilibrium duringnormal pregnancy and theoretically in preeclampsia too but to what extent they help in clinicalpractice is still being investigated.

#### **Hookworm Infections**

## complications

Can worms cause chest pain?.

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Hamad General Hospital - Department of Medicine Saudi Medical Journal 2007; 28 (1): 142-143 (6 ref.)

Keywords: Eosinophilia-parasitology; Pleural Effusion-parasitology

# Hyperlipoproteinemia Type II

#### diagnosis

Homozygous familial hypercholesterolemia with generalized arterial disease.

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Medical Principles and Practice 2007; 16 (1): 75-78 (12 ref.)

**Keywords:** Hyperlipoproteinemia Type II-genetics; Hyperlipoproteinemia Type II-complications; Hyperlipoproteinemia Type II-drug therapy; Homozygote; Coronary Disease-etiology; Fatal Outcome; Pedigree

Abstract: This report describes the clinical features and management of an 11-year-old boy withend-stage homozygous familial hypercholesterolemia [hoFH] and generalized arterial disease. Thepatient presented with recurrent anginal episodes. On examination, he was found to have multipleplanar and tendinous xanthomas, an [LDL] cholesterol level of 24.6 mmol/l and family history ofhypercholesterolemia. Resting electrocardiogram showed ST depression in the anterior andinferior leads. Coronary angiogram outlined 70% stenosis of the left main coronary, ostial stenosisof the right coronary artery and extensive atherosclerotic disease of the aorta and all its majorbranches. The lipid profile was grossly abnormal, but the other biochemical and hematologicalparameters were normal. The patient was managed with metoprolol 12.5 mg twice daily,nitroglycerin infusion, antithrombotics [aspirin 75 mg once daily and heparin infusion 150 units perhour], cholesterol-lowering drugs [simvastatin 10 mg once a day, cholestyramine 4 g twice a day]and analgesics. This case report emphasizes the need to diagnose early familialhypercholesterolemia in families with heart disease and the need to test the partners of affectedpersons so that the risk of conceiving children with hoFH can be counseled.

# Hyperparathyroidism, Primary

## complications

Primary hyperparathyroidism. A rare cause of spinal cord compression.

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King Hussein Medical Center - Department of Medicine Saudi Medical Journal 2007; 28 (5): 783-786 (17 ref.)

Keywords: Spinal Cord Compression-etiology; Parathyroid Neoplasms-complications; Adenoma-complications

Abstract: We report a case of a 62-year-old postmenopausal hypertensive lady who was treatedfor osteoporosis with calcium and Vitamin D. She presented with progressive lower limb weaknessand paresthesia with sensory level at T4. Investigations revealed high parathyroid hormone 1152ng/dl, calcium 10.9 mg/dl, and low phosphorus of 2.4 mg/dl after stopping calcium supplement. Chest x-ray showed an expansile mass lesion of the right 6th rib confirmed by chest CT. ThoracicMRI showed a mass lesion extending from the T3 vertebral body and compressing the spinal cord. There were multiple lytic lesions of the scalp, ribs, femur, and pelvis suggesting metastatic lesions. A neck ultrasound and SESTA MIBI parathyroid scan confirmed a right lower parathyroidadenoma. Excision biopsy of the rib lesion confirmed a vascular lesion with features of browntumor BT. Decompression surgery of the thoracic spine was performed, and the histopathologyconfirmed BT. Two weeks later the patient underwent right parathyroidectomy that proved to be aparathyroid adenoma. She showed a remarkable improvement in her clinical condition and therewere some regression of the bony lesions observed 12 months post parathyroidectomy. This caseshould alert physicians to the association of multiple brown tumors in PHPT and that thepresentation may be an aggressive one mimicking metastasis, patients with osteoporosis warrantat least calcium profile to rule out a secondary cause.

#### etiology

#### Primary hyperparathyroidism due to parathyroid adenoma.

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**Saudi Medical Journal** 2007; 28 (2): 305-306 (11 ref.)

**Keywords:** Hyperparathyroidism, Primary-diagnosis; Parathyroid Neoplasms-diagnosis; ParathyroidNeoplasms-complications; Adenoma-diagnosis; Adenoma-complications; Adenoma-radiography; Adenoma-surgery

## **Hypertension**

## epidemiology

## Hypertension in Saudi Arabia.

Al Nozha, Mansour M.; Abdullah, Moheeb; Arafah, Mohammed; Khalil, Mohamed Z.; Khan, Nazeer B.; Al Mazrou, Yaqoub Y.; Al Maatouq, Mohamed A.; Al Marzouki, Khalid; Al Khadra, Akram; Nouh, Mohammed S.; Al Harthi, SaadS.; Al Shahid, Maie S.; Al Mobeireek, Abdulellah

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Saudi Medical Journal 2007; 28 (1): 77-84 (41 ref.)

**Keywords:** Prevalence; Risk Factors

**Abstract:** To determine the prevalence of hypertension among Saudis of both gender, betweenthe ages of 30-70 years in rural as well as urban communities. This work is part of a major national study on Coronary Artery Disease in Saudis Study [CADISS]. This is a community-based study conducted by examining subjects in the age group of 30-70 years of selected households during a5-year period between 1995 and 2000 in Saudi Arabia. Data were obtained from history using avalidated questionnaire, and examination including measurement of blood pressure. The datawere analyzed to provide prevalence of hypertension. Logistic regression was used to develop arisk assessment model for

prevalence of hypertension. The total number of subjects included in thestudy was 17,230. The prevalence of hypertension was 26.1% in crude terms. For males, theprevalence of hypertension was 28.6%, while for females; the prevalence was significantly lower at23.9% [p<0.001]. The urban population showed significantly higher prevalence of hypertension of27.9%, compared to rural population's prevalence of 22.4% [p<0.001]. The prevalence of CADamong hypertensive patients was 8.2%, and 4.5% among normotensive subjects [p<0.001]. Increasing weight showed significant increase in prevalence of hypertension in a linearrelationship. Hypertension is increasing in prevalence in KSA affecting more than one fourth of theadult Saudi population. We recommend aggressive management of hypertension as well asscreening of adults for hypertension early to prevent its damaging consequences if left untreated. Public health awareness of simple measures, such as low salt diet, exercise, and avoiding obesity, to maintain normal arterial blood pressure need to be implemented by health care providers.

## physiopathology

Systolic hypertension in adult Nigerians with hypertension.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 8-11 (27 ref.)

Keywords: Hypertension-epidemiology; Systole-physiology

Abstract: To determine the prevalence of both systolic and diastolic hypertensions in relation toage and their impacts on target organ among adult Nigerians with hypertension. Observationalstudy. The Cardiovascular Clinic of the University of Ilorin Teaching Hospital, Nigeria, from July2002 to June 2003. Newly diagnosed adult hypertensives, with blood pressure 140/90 mmHg,taken twice with mercury column sphygmomanometer at 3 weeks interval, were studied. The totalnumber of hypertensive patients treated over this period was also taken into consideration. Thenewly diagnosed hypertensives were classified using JNC VI classification. The frequency ofoccurrence of target organ damage such as Left Ventricular Hypertrophy [LVH], heart failure, renalimpairment etc. was charted according to systolic and or diastolic pressures. The occurrence of systolic or diastolic blood pressure was also related with the age of the patients. Blood metabolic parameters were compared in both systolic and diastolic blood pressures for their possible contributory role. Two thousand seven hundred and ninety-two adult hypertensive patients were managed over the study period. Of them, 218 [7.8%] were newly diagnosed and studied. Therewere 94 males and 124 females. Seventy-seven [35.3%] were aged 60 years and above withequal frequency in the gender. One hundred and seventyeight [81.7%] cases had combinedsystolic and diastolic pressures. Twenty-nine [13.3%] patients had systolic hypertension. Twenty-five [86.2%] of these 29 were aged 50 years and above and 20 [69.0%] were aged 60 years and above. Eleven [5.0%] patients had isolated diastolic hypertension and they were all inthe age bracket 40-49 years. Systolic blood pressure was found to be rising with advancing agewhile diastolic blood pressure peaked at mid 40's and declined. Target organ damage occurredmore frequently with systolic hypertension and advancing age than with diastolic hypertension. Systolic hypertension occurred more frequently in this series of adult Nigerians with hypertension. It was higher with advancing age and associated with more target organ damage than the diastolichypertension.

## therapy

Management of hypertensive patients in primary health care setting, auditing the practice.

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Saudi Medical Journal 2007; 28 (1): 85-90 (38 ref.)

**Keywords:** Medical Audit; Primary Health Care; Cross-Sectional Studies

Abstract: To audit the medical care provided to hypertensive patients in a health care center inRiyadh, Kingdom of Saudi Arabia [KSA] and determine the efficient control of hypertension. Wecarried out this cross-sectional study on all patients who visited the Health Care Specialty Center ofKing Abdul-Aziz Medical City, Riyadh, KSA for hypertension follow-up during the study period fromOctober to December 2004. A representative sample of patients was allocated randomly usingsimple randomization method. All patient's records were reviewed for proper recording in adesigned form. Out of the 242 records we reviewed, 201 were included in the study. The patients'mean age was 58.3 +/- 12.5 years. All were Saudis and 78.6% were females. Most of them[84.3%] received their management at primary care level only. Age, gender, presence of diabetes,level of medical care, blood glucose, lipid levels and drugs used for management of hypertensionwere sufficiently recorded. Smoking history, body mass index and family history of ischemic heartdisease were poorly recorded. Quarter of the hypertensive patients was sufficiently controlled. Thefactors associated with poor blood pressure [BP] control were advanced age [p=0.008] andpresence of diabetes, [odds ratio [95% CI]=2.98 [1.47-6.08]]. The study reflects the deficiencies inBP control and physicians practice. Introducing a checklist or electronic medical records may helpthe improvement of care. Frequent auditing is recommended to ensure the required development.

# Hyperuricemia

## complications

Evaluation of independent prognostic importance of hyperuricemia in hospital death after acute myocardial infarction.

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Saudi Medical Journal 2007; 28 (5): 759-761 (12 ref.)

Keywords: Myocardial Infarction-mortality; Inpatients; Prognosis; Risk Factors; Case-Control Studies

Abstract: To evaluate the role of hyperuricemia [serum uric acid level greater than 7 mg/dl] as anindependent short term [in hospital] prognostic factor after acute myocardial infarction [AMI].Included in the study were 2218 patients who were hospitalized with well established AMI fromJune 1996 through to December 2002 in the Coronary Care Unit of Ekbatan General Hospital,Hamedan University of Medical Sciences, Iran. All patients with exclusive criteria, were omittedfrom study. Furthermore, frequency of hyperuricemia in patients [N=59] who expired after AMI wascompared with patients [N=104] whom were discharged from the hospital after AMI. Frequency ofhyperuricemia was measured according to the extension of myocardial necrosis [as the mostimportant prognostic risk factor] based on serum creatine phosphokinase level greater or less than2000 IU, which was 13.3% and 20.7% in the case group, and 9.5% and 9.7% in the controls, respectively. These findings indicate that hyperuricemia is not an independent prognostic riskfactor in hospital death after AMI.

# Hysteroscopy

Hysteroscopy - 3 Years experience at a Teaching Hospital.

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Annals of King Edward Medical College 2007; 13 (1): 122-123 (12 ref.)

**Keywords:** Abortion, Habitual-diagnosis; Hospitals, Teaching; Infertility-diagnosis; Infertility-therapy;Length of Stay; Amenorrhea-diagnosis; Treatment Outcome; Retrospective Studies

Abstract: To evaluate the indications, effectiveness and safety of hysteroscopy in Gynaecological surgery. Design, A retrospective observational study from January 2003 to December 2005 atFatima Memorial Hospital, Lahore. 76 patients who presented in the outpatient department of Gynae and Obstetrics at Fatima Memorial Hospital, Lahore with the following complaints including abnormal uterine bleeding, infertility, recurrent abortions and secondary amenorrhea were includedin the study. They were pre-operatively investigated and admitted a day prior to the surgery anddischarged usually within 24 hours postoperatively. The subsequent follow-up was done inoutpatient department. All the data was recorded and then subsequently analyzed. 76 patientswere inducted in the study. Out of these 36 [47%] had infertility 20 [26.3%] had abnormal uterinebleeding, 8 patients [10.5%] had recurrent abortions, 8 [10.5%] presented with secondaryamenorrhea, 3 patients [3.9%] presented with lost IUCD and one patient [I.3%] had followuphysteroscopy after resection of intra- uterine septum. Hysteroscopic findings revealed intra-uterineadhesions in 8 [10.5%], submucous fibroids in 15 [19.7%], endometrial polyp in 10 [13.1%] uterinesepta in 8 [10.5%], atrophic endometrium in 9 [11.8%] while there was no abnormal finding in 26[34.2%] patients. Two patients [0.6%] sustained uterine perforations, which were diagnosed andmanaged during operation but no other complication occurred. Hysteroscopy is an excellent tool toperform intra-uterine adhesiolysis, polypectomy, submucous myomectomy and endometrial ablation. In addition to being a quicker, less invasive and low risk procedure, it has got the advantage of being cheap with a shorter hospital stay and diminished recovery time. Hysteroscopy, both diagnostic and operative should be an integral part of gynaecological surgeryin the teaching units.

## Hystrectomy

Peripartum hysterectomy.

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Annals of King Edward Medical College 2007; 13 (1): 111-112 (9 ref.)

**Keywords:** Postpartum Period-complications; Cross-Sectional Studies; Maternal Mortality;Anemia-etiology; Postoperative Complications; Socioeconomic Factors; Uterine Inertia-surgery; UterineRupture-surgery; Oxytocinadverse effects

**Abstract:** To find out the frequency, indication and its associated morbidity in our setup. Prospective cross-sectional observational study for the period one year [from June 2003 - May2004] carried out in the Department of Obs / Gynae, Lahore General Hospital Lahore. During thestudy there were 26 cases of peripartum hysterectomy, of which 14 case were of caesareanhysterectomy, while 10 cases were following normal vaginal delivery and 2 cases followed byinstrumental delivery. Uterine atony was the most common indication for peripartum hysterectomyin 12 cases [46.15%]. Uterine rupture including instrumental delivery tear was 2nd most frequentcause in 4 + 2 = 6[23.07%] of cases. In 19.2% [5] of cases abnormal placentation was the cause. In2[7.6%] of cases sepsis was the cause leading to secondary PPH followed by hysterectomy. Asubtotal hysterectomy was carried out in 10 [38.46%] and total hysterectomy was performed in 16[61.53%] cases. there were 4 maternal deaths. Urinary tract injuries occurred in

3[11.53%] cases, fever, chest infection and wound infection were common morbidity. Anemia was found in almostevery case. Intra and post operative Blood transfusion s were given in all cases. Reloparotomywas done in one patient for continues vaginal bleeding. Despite its morbidity and mortalityemergency Obstetric hysterectomy remains an essential life saving tool. Uterine atony, uterinerupture and abnormal placentation were mast common indications, reflecting under utilization ofexisting antenatal, family planning services. Injudicious use of oxytocin, lack of transportationfacilities, poverty and delayed referral all contribute to morbidity and mortality associated withemergency Obstetric hysterectomy.

# Infant, Low Birth Weight

#### Determinants of low birth weight.

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Annals of King Edward Medical College 2007; 13 (1): 41-44 (27 ref.)

**Keywords:** Premature Birth; Fetal Membranes, Premature Rupture; Ultrasonography; ProspectiveStudies; Fetal Growth Retardation

Abstract: To determine the incidence of LBW in study population, with particular reference tocause and mode of prevention thereof, in order to improve the existing practices. Prospectivestudy. Department of Obs and Gynae Unit III, Sir Ganga Ram Hospital, Lahore from January 2002to December, 2002. All those mothers who gave birth to babies weighing less than 2.5 kg duringthis duration were included in the study population. On admission, detailed history was taken fromthe patients. Detailed general physical examination, thorough systemic examination and anabdominal examination was performed in accordance with a preset format. Fetal growth wasmonitored by maternal weight gain and serial measurements of symphysio-fundal height. Ultrasonography was performed to rule out fetal anomalies and serial scan to monitor fetal growth. Other investigations like Blood group and Rh-factor, Blood C/E, Blood sugar level, Liver functiontests, Renal function tests, Ultrasonography and Cardiotocography, were carried out to determine any contributing factor. If patient presented with preterm labor, attempts were made to tocolyse. Iflabor could not be stopped, the babies were delivered and handed over to peadiatrician. Elective induction of labor was performed in case of the babies with congenital anomalies incompatiblewith life. Labor was either induced or spontaneous, route of delivery was either vaginal or bycesarean section and was elective or emergent. Babies were examined for signs of prematurity growth restriction or congenital anomalies. Their APGAR score and weight were recorded. Thebabies were handed over to peadiatrician and were subsequently followed up in the nursery. Outof 3315 deliveries, 135 babies were LBW [4.08%]. Major determinants of LBW were found to be Pre-term labor, PROM and IUGR. No cause for LBW was found in 8.88% of cases, however, 91% of LBW babies had verifiable causes. Other causes of LBW babies were either constitutional orintra-uterine death or congenital abnormalities. While yielding some interesting findings in regardto the nexus between poverty and LBW, the study clearly demonstrate the importance of highquality obstetric and peadiatric input at all stages of fetal development.

## Prevalence and risk factors of low-birth-weight infants in Zahedan, Islamic Republic of Iran.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 838-845 (45 ref.)

Keywords: Birth Intervals; Risk Factors; Prevalence; Cross-Sectional Studies; Multiple BirthOffspring; Twins

**Abstract:** The study investigated the prevalence and risk factors of low birth weight [LBW] in 1109hospital births in Zahedan city, Islamic Republic of Iran. The overall prevalence of LBW was 11.8%[95% CI: 9.9%-13.7%], similar for boys and girls [11.1% and 12.6% respectively]. LBW wassignificantly associated with mother's ethnic origin [Balouch], birth interval < 3 years, twin birth, nouse of supplements during pregnancy, < 4 prenatal care visits, no education, younger age andpresence of maternal disease. There was no effect of mother's parity, occupation and smokingstatus. After logistic regression analysis, the only significant risk factors were: birth interval < 3years, twin birth, no use of ferrous sulfate and maternal disease.

#### Infection

#### transmission

Is Saudi Arabia a fertile land for exchanging infectious diseases?.

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Saudi Medical Journal 2007; 28 (5): 803-804 (5 ref.)

Keywords: Religion and Medicine; Islam

## Infertility, Male

## etiology

Male infertility in Kuwait. Etiologic and therapeutic aspects.

Qadan, Laila R., Ahmed, Adel A.; Kapila, Kusum A.; Hassan, Nahida A.; Kodaj, Jan A.; Pathan, Shahed K.

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Kuwait University - Department of Medicine-Endocrinology Saudi Medical Journal 2007; 28 (1): 96-99 (33 ref.) Keywords: Infertility, Male-therapy; Prospective Studies

**Abstract:** To evaluate the pathological patterns associated with male infertility in Kuwait and tocharacterize treatment outcome after varicocele repair using percutaneous varicoceleembolization. We carried out a prospective study of 64 infertile men in Kuwait between 2001 and2005. All patients included had proven non-obstructive azoospermia or loigospermia [sperm count<20 million/ml]. All patients underwent ultrasonographic evaluation of the scrotum. Fine needleaspiration of the testes was performed on all azoospermic patients. A total of 24 [38%] patientswere azoospermic while 40 [62%] were oligospermic. Sertoli- cell-only pattern was the mostcommon cytopathology associated with primary testicular failure. Among the oligospermic patients,50% had small to moderate varicocele. Spermatic vein embolization resulted in a significant rise inthe mean sperm count from 10.6 +/- 3.8 million/ml to 30.2 +/- 6.8 million/ml [p<0.05] in 5 treatedoligospermic patients, followed by spontaneous pregnancy in 2 couples. No effect was seen onazoospermic patients. From an etiological point of view, we believe that the high incidence ofSertoli cell-only-syndrome among nationals and residents of a country that underwent a majorenvironmental insult strengthens the chances of an environmental role in the development of thissyndrome. From a management point of view, in cultures where in vitro fertilization is either still notwidely acceptable or is unaffordable, oligospermia with clinical or subclinical varicocele deserves atrial of a low risk, out patient procedure, namely, spermatic vein embolization that could improvefertility.

# Injections, Epidural

#### adverse effects

Complications and outcome with epidurals for labour: Analysis of seven years experience.

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Annals of King Edward Medical College 2007; 13 (1): 24-26 (15 ref.)

Keywords: Treatment Outcome; Early Detection; Labor, Obstetric; Urinary Retention

Abstract: To audit the incidence of obstetric epidural complications and its outcome at FatimaMemorial Hospital, Lahore. All parturients who received epidurals for painless deliveries in thelabour room of Fatima Memorial Hospital from 1999 to 2005 were included in this audit. All parturients received bolus of 500-1000m1 of Ringers lactate or 0.9% Normal saline prior toinsertion of epidural catheter. Information regarding parturient's name, age, gravida [primi or multi], effectiveness of epidural or any complication was noted by anaesthetist on register kept in theanaesthesia office. Out of 25916 deliveries during seven years, 2610 [10.07%] parturients received epidural for painless delivery. Those who received epidurals, 437 developed one or more complications. The overall incidence of complications was 19.57 %.Consultants gave epidural to 2004 parturients [76.90 %] and residents gave to 602 parturients [23.10 %]. The most commoncomplication or complaint was shivering, 166 parturient [6.36%]. Next common was hypotension,162 parturients [6.20%]. Inadequate analgesia and missed segment noted in 99 [3.79%] parturients. Post delivery urinary retention was problem in 25 [0.95%]. Dural puncture occurred in 15 [0.57%] and three [0.11%] received blood patch for control of persistent post dural punctureheadache. In three parturients procedure was abandoned. Other complication like Intravascularinjection noted in two [0.07%], Catheter blockade in three [0.11%], Reinsertion of catheter requiredin five [0.19%] and High spinal noted in three [0.11%] parturients. One parturient had total spinaland intubated, Eight [0.30%] parturients complained backaches. Out of 2610, parturients whoreceived epidurals 237 [9.09%] underwent Caesarian sections, 185 [7.09%] deliveries were assisted by Vacuum and 150 [5.57%] by outlet forceps. Every sixth parturient [16.747 %] issusceptible to get some form of complications when epidural analgesia is offered for pain relief butthese complications can be detected early and managed if monitoring facilities available.

## **Internal-External Control**

Health locus of control and depressive symptoms among adolescents in Alexandria, Egypt. Afffi, M.

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Ministry of Health - Department of Research and Studies

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1043-1052 (33 ref.)

Keywords: Depression; Health Education; Behavior; Questionnaires; Culture

**Abstract:** The aim of this work was to investigate the association of health locus of control withdepression among adolescents in Alexandria, Egypt. The tools used were a self-reportquestionnaire covering demographic data and some factors associated with depression, the Multidimensional Health Locus of Control scale and the Child Depression

Inventory. Adolescentswith low internal health locus of control and high chance external health locus of control were morelikely to have depressive symptoms than others in bivariate and multivariate analysis. The studyfindings demonstrated an association between health locus of control and adolescent depression.

# Intervertebral Disk Displacement

#### Spontaneous regression of lumbar disc herniation.

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Neurosciences 2007; 12 (1): 76-78 (10 ref.)

Keywords: Lumbar Vertebrae; Magnetic Resonance Imaging; Remission, Spontaneous

**Abstract:** We present 3 cases of spontaneous regression of lumbar herniated disc. The discregression correlated with clinical improvement documented by MRI studies. Although thephenomenon of spontaneous disappearance of decrease in size of herniated disc fragments iswell known, the exact mechanism underlying this process remains unclear. We discuss 3 possibleexplanations for disc regression: retraction into the vertebral space, dehydration /shrinkage, andresorption due to inflammatory reaction.

#### **Intestinal Perforation**

# Role of proximal Tube Enterostomy in fire management of typhoid enteric perforation.

Cheema, K.M.; Asghar, M.; Choudhary, M.S.

Services Institute of Medical Sciences - Department of Surgery

Annals of King Edward Medical College 2007; 13 (1): 27-28 (20 ref.)

**Keywords:** Typhoid Fever-complications; Surgical Procedures, Operative-methods; PostoperativeComplications; Enterostomy; Ileostomy

**Abstract:** Typhoid perforation continues to have significant morbidity and mortality. A variety of surgical procedures like primary repair, wedge resection, intestinal resection, ileostomy and hemicolectomy reflect lack of consensus among surgeons. Complications like wound dehiscence, burst abdomen, intra-abdominal abscesses and fecal fistula continue to be unacceptably high. Currently for solitary perforation primary repair is the most acceptable technique whereas formultiple perforations ileostomy is used. Tube enterostomy as an adjunct to primary repair in both solitary and multiple perforations is presented in an attempt to reduce above mentioned postopcomplications.

# **Intracranial Hypertension**

## physiopathology

### Idiopathic intracranial hypertension. Atypical presentation.

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Saudi Medical Journal 2007; 28 (5): 762-765 (14 ref.)

**Keywords:** Intracranial Hypertension-diagnosis; Retrospective Studies

**Abstract:** To describe the clinical features of 5 patients with rare atypical presentation of idiopathicintracranial hypertension [IIH], and propose the possible mechanism of this atypical presentation. We carried out a retrospective study of 5 patients admitted at King Khalid National Guard Hospital, Jeddah, Kingdom of Saudi Arabia with IIH during the period from January 2001 to December2005. All were females with their age ranges from 24 to 40 years. The clinical presentations, andthe laboratory and imaging studies were analyzed. The opening pressures of the lumbar puncturetests were documented. All patients were presented with headache. One had typical pain oftrigeminal neuralgia, and one with neck pain and radiculopathy. Facial diplegia was present in onepatient, and 2 patients had bilateral 6th cranial neuropathy. Papilledema was present in all patientsexcept in one patient. Imaging study was normal in all patients, and they had a very high openingpressure during lumbar puncture, except in one patient. All patients achieved full recovery withmedical therapy in 6 to 12 weeks with no relapse during the mean follow up of 2 years. Atypicalfindings in IIH are rare and require a high index of suspicion for early diagnosis.

## **Intrauterine Devices**

### adverse effects

#### Effects of intrauterine device and oral contraceptive on vaginal flora and epithelium.

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Saudi Medical Journal 2007; 28 (5): 727-731 (30 ref.)

**Keywords:** Contraceptives, Oral-adverse effects; Vagina-microbiology; Vaginosis, Bacterial-microbiology; Epithelium-microbiology

**Abstract:** To investigate the microbial and cytopathological changes and genital symptoms in oralcontraceptive pill [OCP] and intrauterine contraceptive device [IUCD] users. Included in the studywere 34 women using OCP and 34 women using IUCD for 24 to 36 months period and 34 womenas control group. We conducted the study between March to September 2005 in AntakyaMaternity Hospital, Turkey. Vaginal discharge was subjected to wet mount examination, gramstaining, and culture. Cervical smears were examined and reported using the Bethesda system asreference. In the IUCD group, women with intermediate score was 20.6%, while those with bacterial vaginosis was 11.7%. In the OCP group however, women with intermediate score was 8.8%, while those with bacterial vaginosis was 5.9%. Compared to the control group, these rateswere 2.9% for those with intermediate score and 2.9% for those with bacterial vaginosis.Escherichia coli vaginal colonization increased by 5-fold in the IUCD users [p<0.05]. Cervicalerosion was found in 14.7% of the women using IUCD as compared to the other groups [p<0.05].Actinomyces like organisms was detected in 11.7% of the IUCD users [p<0.05]. The use of IUCDclearly alter the normal vaginal flora, although OCP appears to have minimal effects on the vaginalmicrobial flora. The data support the hypothesis that IUCD might change cervico vaginalenvironment, and suggests that women with IUCD may be at a higher risk for vulvovaginalinfection.

# **Irritable Bowel Syndrome**

Irritable bowel syndrome in two different socioecnomic groups in Pakistan.

Siddique, T.; Ali, M.; Qadri, S.H.

Punjab Employees Social Security Teaching Hospital - Department of Medicine

Annals of King Edward Medical College 2007; 13 (1): 65-66 (5 ref.)

Keywords: Socioeconomic Factors; Diarrhea-etiology; Abdominal Pain-etiology; Constipation-etiology

Abstract: Irritable bowel syndrome [IBS] in outpatient department in Social Security teachinghospital and Surgimed hospital Lahore and the comparison of the two groups along with theircomparison with the western data. 163 patients in social security hospital [group I] and 44 patientsat Surgimed hospital [group II] were studied for irritable bowel syndrome from October 2005 toJanuary 2007. The patients presented with abdominal distension, pain abdomen along withdiarrhea/constipation were included in this study and used Rome II criteria. Diagnosis confirmedby using exclusion criteria with specific history. Data from group II patients was similar as westerndata while in group- I patients data differed from western data. This was due to repeatedcoexisting gut infections along with IBS due to contaminated water and poor compliance.

## **Isothiocyanates**

Chemopreventive action of benzylisothiocyanate on epithelial changes induced in hamster cheek pouch with DMBA.

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SDJ - Saudi Dental Journal [The] 2007; 19 (1): 37-42 (30 ref.)

Keywords: Chemoprevention; Epithelium; Polyps; Carcinoma in Situ

Abstract: The aim of this study was to assess the effects of benzylisothiocyanate [BIT] onepithelial changes induced by DMBA in the hamster cheek pouch. Eighty male Syrian goldenhamsters were divided into four equal groups. Group I received painting of the right buccal pouchwith mineral oil three times per week. Group II received painting of the right buccal pouch with BITthree times per week. Group III was treated as Group II and the treated site was painted withDMBA twice per week. Group IV received painting of the right buccal pouch with DMBA twice perweek. The findings of this study showed that the most common gross epithelial changes were theformation of polyps. The average number of polyps among Group IV was 7 polyps per animalcompared to 3.9 polyps in Group III. Forty-three percent of all the involved animals showedmicroscopic changes. Forty-two percent of the animals treated with DMBA alone showed invasivecarcinoma compared to 26% in the animals treated with DMBA and BIT. Although the statisticalanalysis did not detect significant difference among the treated groups of animals, the numericalvalues of this study are in support for the chemopreventive action of BIT against thecarcinogenicity of DMBA in the hamster cheek pouch.

## **Kernicterus**

[Risk factors of kernicterus; a study in 312 icteric neonates].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 45-49 (12 ref.)

**Keywords:** Risk Factors; Bilirubin-blood; Questionnaires; Sepsis; Basal Ganglia-pathology;Hypoglycemia; Infant, Premature; Birth Weight; Acidosis

Abstract: Kernicterus, also known as bilirubin encephalopathy, is a neurologic syndrome resultingfrom the deposition of unconjugated bilirubin in the basal ganglia and brainstem nuclei. Indirectbilirubin is toxic for brain. Neurologic dysfunction [BIND] that include acute phase [hyperbilirubinencephalopathy] and chronic phase [Kernicterus] resulting from hyperbilirubinemia and disruptionof blood brain barrier. In this study, the association between bilirubin encephalopathy and riskfactors was evaluated. In this retrospective study, 312 icteric neonates were admitted in theneonatal ward of Children's Hospital, Medical Center, Tehran, and 305 of these cases wereevaluated. Patient histories were taken and physical examinations were performed. For eachpatient, the age, sex, birth weight, time of

discharge from the hospital and risk factors were recorded, and a questionnaire was completed. In this study, of the 305 icteric neonates evaluated,25 cases had kernicterus. Risk factors included acidosis, prematurity, hemolysis, hypoglycemia, sepsis, respiratory distress, low birth weight, ABO incompatibility and G6PD deficiency. The meanlevel of bilirubin in cases of kernicterus was 32 mg/dl and in the others was 20 mg/dl [p=0.001]. Kernicterus was most common among high risk neonates [p<0.001]. Birth weight less than 2,500gm was also an important factor [p=0.04]. High-risk neonates need prompt treatment for hyperbilirubinemia compared to low risk neonates.

## **Kidney**

#### abnormalities

Mayer Rokitansky Kuster Hauser syndrome with urogenital sinus anomaly.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 57-58 (10 ref.)

**Keywords:** Mullerian Ducts-abnormalities; Abnormalities, Multiple-radiography; Syndrome; VesicovaginalFistula-etiology; Vesicovaginal Fistula-radiography; Tomography, X-Ray Computed

**Abstract:** Mayer Rokitansky Kuster Hauser [MRKH] syndrome is a rare disorder, characterized bythe congenital absence of uterus and associated renal tract anomalies. The case presented withprimary amenorrhea and primary infertility, despite development of normal female secondarysexual characteristics. CT scan revealed absent uterus, a solitary left sided pelvic kidney and avesicovaginal communication that, on cystoscopy, revealed urogenital sinus anomaly manifestingas a common channel formed due to absent anterior wall of vagina and posterior wall of urethra. The urogenital sinus anomaly in MRKH syndrome has not been reported earlier.

# **Kidney Transplantation**

Living donor renal transplantation our experience in SIMS/Services Hospital, Lahore.

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SIMS/Services Hospital - Department of Urology and Renal Transplantation

Annals of King Edward Medical College 2007; 13 (1): 21-23 (13 ref.)

Keywords: Living Donors; Kidney Failure, Chronic; Graft Survival; Awareness

**Abstract:** Kidney transplantation is the treatment of choice for end stage renal disease [ESRD]patients. However organ shortage remains the central problem in kidney transplantation. To dealwith the widening gap between supply and demand of organ for renal transplantation, efforts toexpand the organ donor pool have received increased attention. To solve this problem, we haveinitiated a living related and unrelated living donor programe using emotionally related persons, friends and well motivated volunteers as organ donors. A total of 18 patients with live donorunderwent kidney transplantation in Sims /Services Hospital over a period from March 2006 toDecember 2006. The aim of study is to highlight the problems and identification of factors limitingthe number of transplantation and further prospects of renal transplantation in Pakistan. The causeof ESRD was HTN 7 [38.89%], Chronic Glornerulonephritis 4 [22.22%], Calculus Renal failure 4[22.22%], and Diabetic Nephropathy 3[16.67%]. The donor age ranged between 20-55 years[mean 28.39]. The recipient age ranged 17-56 years [mean32.73]. Relationship of donor torecipient was sister 1 [5.56%], 1st degree relatives 3 [16.7%], friends 4[22.22%], unrelated10[55.56%]. In our study graft survival was 88.89%, patient survival 94.45%, mortality 5.56%. Transplanted patient has to be better motivated to take medication regularly and get theinvestigations. It was observed that 1st degree relation are very limited source of donors in thispart of the world and unrelated donors certainly encourage, transplantation.

## Kidney Tubular Necrosis, Acute

# An established rat model of inducing reversible acute tubular necrosis.

Tabibi, Ali; Nouralizadeh, Akbar; Parvin, Mahmoud; Ghoreishian, Mohammad; Sadeghi, Peyman; Nafar, Mohsen Shaheed Beheshti Medical University - Shaheed Labbafinejad Medical Center - Department of Urology

IJKD - Iranian Journal of Kidney Diseases 2007; 1 (1): 16-20 (12 ref.)

**Keywords:** Kidney-pathology; Kidney Function Tests; Kidney-surgery; Nephrectomy; Rats

**Abstract:** Acute tubular necrosis [ATN] is a challenging problem that still requires to be studied inanimal models. Our aim was to prepare an established experimental model of inducing reversibleATN in rats by determining the optimum duration of ischemia induction to the kidney. Twenty-fourhour after nephrectomy of the right kidney and clamping the pedicle of the left kidney for durationsranging from 10 to 55 minutes, the kidney function and the histologic changes were evaluated. Accordingly, the optimum duration of clamping was determined and in the next step, it wasconsidered for induction of reversible ATN in another group of rats. This group was followed up for14 days and the pathologic course and function of the kidney were observed. Reversible ATNdeveloped by 47-minute clamping of the renal pedicle. Blood urea nitrogen and serum creatininelevels were elevated up to threefold within 24 hours after the induction of ischemia and theydecreased to their reference ranges after 12 and 6 days, respectively. In the histologic study of thekidneys, the least extend of injury was noted by the 14th day following the ATN induction. Even onthe 14th day of the follow-up, some signs of ATN remained indicating that the tissue regenerationwas not complete yet. To integrate the experimental models of ATN, a rat model with 47-minuteclamping of the renal pedicle for induction of ischemia seems appropriate. The resultant ATNremains for a long duration, while kidney function is alleviated.

#### Koro

## psychology

[Koro] in a13 years old boy of interior Sindh - a mistreated cultural syndrome.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 60 (9 ref.)

Keywords: Koro-diagnosis; Koro-therapy; Culture

## Labor, Induced

Intravaginal prostaglandin-E2 for cervical priming and induction of labour.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 855-861 (18 ref.)

**Keywords:** Prostaglandins E-therapeutic uses; Prostaglandins E-administration and dosage; ProspectiveStudies; Administration, Intravaginal; Oxytocin

**Abstract:** A prospective study examined the safety, efficacy and labour outcome in 436 womenundergoing labour induction using intravaginal prostaglandin E2. Women with singletonpregnancies [235 nulliparas and 201 multiparas] were recruited if they had a clinically unfavourablecervix, and indications for induction. The mean [standard deviation] interval from initiation todelivery was statistically significantly shorter in multiparas than nulliparas: 13.5 hours [SD 1.8]versus 15.5 hours [SD 2.4]. No more than 2 x 3 mg tablets were needed to achieve a clinicallyfeasible cervix for amniotomy. The overall need for oxytocin augmentation of labour was 42%,significantly higher in nulliparas [47%] than multiparas [35%]. Intrapartum complications,caesarean section and perinatal deaths showed no statistically significant differences between thegroups.

#### Labour induction at term; oral versus intravaginal Misoprostol.

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Annals of King Edward Medical College 2007; 13 (1): 119-121 (14 ref.)

**Keywords:** Misoprostol-administration, dosage; Misoprostol-therapeutic uses; Administration, Oral; Administration, Intravaginal: Treatment Outcome

**Abstract:** To compare oral misoprostol [100 ug] to vaginal misoprostol [25 uA] for cervical ripeningand labor induction. Interventional study. The study was carried out at Lady Willingdon Hospital, Lahore, during August 2006 to January 2007. Fifty nine women with medical or obstetricindications for labor induction with undilated, uneffaced cervices were assigned randomly toreceive 100 ug of oral or 25 ug of vaginal misoprostol every 4 hours for 24 hours. Intravenousoxytocin was then given using a standardized protocol. Among 59 subjects, 29 received oral and30 received vaginal misoprostol. The mean interval from start of induction to delivery was 1240 +845 minutes for orally treated women and 1381+802 minutes for vaginally treated women [P = .06].More orally treated women delivered vaginally in 24 hours than vaginally treated women 17 versus16 P= .14]. Twenty five women [86.2%] who received oral misoprostol delivered vaginally,compared with 26 women [86.7%] who received vaginal misoprostol [P = .07]. Oxytocin was givento 14 [49.6%] orally treated and 16[53.3%] vaginally treated subjects. More women in oral grouphad tachysystole, three compared with one [P = .06] and hyperstimulation. Frequencies ofintrapartum complications and birth outcome were similar between groups. Oral misoprostol 100ug and vaginal misoprostol 25 g were similarly effective for cervical ripening and labor induction.Oral administration was associated with trends toward higher likelihood of vaginal delivery andmore uterine tachysystole.

#### **Lacrimal Duct Obstruction**

## congenital

Late probing for congenital nasolacrimal duct obstruction.

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Department of Ophthalmology

JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 41-43 (19 ref.)

**Keywords:** Lacrimal Duct Obstruction-surgery

**Abstract:** To determine the outcome of late Nasolacrimal Duct [NLD] probing in children 2 yearsand above and to identify the cause of failure in these children. Quasi- experimental. Shri GanapatiNetralaya, Jalna, India, from January 1999 to June 2003. Clinical diagnosis of CongenitalNasolacrimal Duct Obstruction [CNLDO] was defined in a child who presented with history oftearing and/or eye discharge. Probing was performed under general anesthesia.

Intraoperativepatency of probing was determined when fluorescein stained saline was recovered from throatafter syringing. The type of obstruction was noted in each case as simple obstruction where theprobe could bypass the obstruction and post-probing syringing was patent in these cases, andcomplex where the probe was snugly fit and/or could not pass the obstruction and syringing wasnot patent in these patients. Success was the main outcome measure and was defined ascomplete resolution of tearing and discharges in the affected eye. Forty-nine eyes of 42 childrenwere included in the study. The age range was from 2-7 years [average age 3.7 years]. Probingwas successful in 39 eyes [79.60%]. Success rate was 85% in children less than 5 years and55.55% in those older than 5 years. Out of the failed 10 cases, 5 [50%] were above 5 years ofage. All cases with failed probing had complex type obstruction. Probing is a viable option in olderchildren. The success rate for probing depends upon the type of obstruction and children withcomplex obstruction are at high risk for failure of probing.

## Leiomyoma

#### pathology

Outcome of Pregnancies associated with fibroids.

Noor, Juvairia; Nisa, Mehr Un; Hasan, Lubna

Annals of King Edward Medical College 2007; 13 (1): 135-141 (33 ref.)

Keywords: Pregnancy Outcome; Cesarean Section; Delivery, Obstetric; Age Factors; PregnancyComplications;

Parity; Abortion, Spontaneous

Abstract: To evaluate the behaviour of uterine leiomyoma, their frequency and impact on thecourse of pregnancy. It was a descriptive study. Gynaecology and Obstetric Unit, HayatabadMedical Complex, PGMI, Peshawar. All the patients presenting to antenatal clinic or emergencyhaving a pregnancy associated with fibroids from 1st July 2001 to 30th June 2002. Womendiagnosed with leiomyoma during pregnancy were evaluated clinically and the findings wereconfirmed by ultrasound. Detection of leiomyoma during caesarean section also made the patienteligible for the study. In all there were 76 patients in the study. The size of leiomyoma, the type ofleiomyoma, their effect on pregnancy outcome and complications were noted. Patients' obstetricand fertility history was recorded on a questionnaire. The concerned doctors were required to fill aperforma regarding the outcome and complications the delivery of such patients. After datacollection, the data was analyzed using various statistical tests like percentage, relative risk [R.R],ods ratio [O.R], mean, standard deviation [S.D] and confidence interval [C.I], using soft ware SPSSversion 8.0 and Epi-Info 6. Main Outcome Measures: The main outcome measures were noteddown as the frequency of spontaneous pregnancy loss, vaginal delivery or the caesarean section.Out of 76 patients [I.9%], 16 underwent spontaneous pregnancy loss [21%, O.R I.16, R.R 1.13, P0.59], 31 had vaginal delivery [40.8%, O.R 0.21, R.R 0.62, P 0.0000] and 29 had caesareansection [38.2%, O.R 4.71, R.R 2.91, P 0.0000]. The frequency of complicated deliveries was 73.3%. The different complications occurring were antepartum haemorrhage, acute abdomen, laparotomy, preterm labour, dysfunctional labour, retained placenta and retained products of conception. Although abortions, preterm delivery, dysfunctional labour and cesarean sections werecommon, the neonatal outcome in viable pregnancies was fairly good in women with uterineleiomyomas. Because of increased risk of complications all the patients with leiomyomas havingpregnancy should be considered as high-risk cases.

### Leishmaniasis, Cutaneous

## drug therapy

Oral administration of zinc sulphate in treatment of acute cutaneous leishmaniasis.

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IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 205-208 (28 ref.)

**Keywords:** Zinc Sulfate-therapeutic uses; Zinc Sulfate-administration and dosage; Administration, Oral;Treatment Outcome

**Abstract:** Due to increasing unresponsiveness and significant side effects associated withantimonial compounds, alternative therapeutic modalities are suggested. Recently oral zincsulphate has been reported to be effective in the treatment of CL. The aim of this study was toevaluate the efficacy of oral zinc sulphate in the treatment of CL. The present study comprised 31patients with clinical diagnosis of dry type leishmaniasis and parasitologically proven cutaneousleishmaniasis of which 22 patients received a full course of treatment. Patients were treated with10 mg/Kg/day of oral zinc sulphate for 45 days and were followed through 20 and 45 days oftreatment as well as 45 days after cessation of therapy. Only 2 [9%] of 22 patients were cured after45 days of treatment with zinc sulphate. The administration of zinc sulphate for the treatment of CLseemed to be of inadequate therapeutic value.

## epidemiology

Epidemic of cutaneous leishmaniasis: 109 cases in a population of 500.

Anwar, M.; Hussain, M.A.; Ur Rehman, H.; Khan, I.; Sheikh, R.A.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1212-1215 (7 ref.)

**Keywords:** Leishmaniasis, Cutaneous-diagnosis; Leishmaniasis, Cutaneous-diagnosis; Leishmaniasis, Cutaneous-drug therapy; Leishmaniasis, Cutaneous-prevention and control; Disease Outbreaks; HealthSurveys; Biopsy, Fine-Needle

**Abstract:** In February 2004, 4 patients aged 10-15 years presented at the Pakistan Institute ofMedical Sciences with non-healing multiple ulcers on exposed parts. On the basis of history, clinical assessment and fine needle aspiration cytology, they were diagnosed as having cutaneousleishmaniasis. We were informed that several similar cases were present in their village. A team ofdoctors and technicians visited the area. A survey was conducted and another 105 cases withvarious morphological presentations were identified. The area was visited several times to find thevector, reservoirs and source of infection and to advise on controlling the epidemic.

# Leukemia, Myeloid, Philadelphia-Positive

## pathology

Synchronous occurrence of Philadelphia chromosome-positive chronic myelogenous leukemia and breast cancer.

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Saudi Medical Journal 2007; 28 (2): 291-294 (5 ref.)

**Keywords:** Leukemia, Myeloid, Philadelphia-Positive-genetics; Breast Neoplasms-pathology;Philadelphia Chromosome; Comorbidity: Biopsy, Fine-Needle

## Lidocaine

## administration, dosage

Comparison of lidocaine vs lidocaine + ketorolac in intravenous regional anaesthesia [bier's block].

Yousuf, M.; Masood, M.; Tahir, M.S.; Fayyaz, M.A.; Waris, S.

Nishtar Hospital - Department of Anaesthesia

Annals of King Edward Medical College 2007; 13 (1): 94-95 (8 ref.)

**Keywords:** Lidocaine-therapeutic uses; Ketorolac-administration, dosage; Ketorolac-therapeutic uses; Hemodynamic Processes-drug effects; Anesthesia, Local-administration, dosage; Anesthesia andAnalgesia; Injections, Intravenous **Abstract:** To compare the duration of anaesthesia and degree of analgesia during intravenousregional anaesthesia using Lidocaine alone and Lidocaine with Ketorolac. An international quasiexperimental study. This study was carried out in Nishtar Hospital Multan from 01/01/2006 to30/06/2006 [6 Months]. Results: Patients were divided into two groups A and B. In group Ainjection Lidocaine 0.5% 40ml was given whereas in group B injection Ketorolac 30mg was add toLidocaine 0.5% 40ml. The degree of anaesthesia and duration of analgesia were compared inboth groups.

Haemodynamics were also recorded to see any systemic effects of drugs. Weconclude that 30mg Ketorolac added to Lidocaine in IVRA increases degree of anaesthesia andalso provide prolonged postop analgesia.

## Lip

#### abnormalities

Familial labial pits: A report of three cases.

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SDJ - Saudi Dental Journal [The] 2007; 19 (1): 48-50 (9 ref.)

Keywords: Genes, Dominant; Genetic Counseling

**Abstract:** Familial labial pit is an autosomal dominant trait resulting in developmental defectsinvolving the paramedial portion of the vermilion of the lower and upper lip or the labial commissurearea. This deformity of the vermilion border of the lower lip constantly appears symmetrically to themidline in a frontal direction with blind ending ducts and oval openings. Cases of lip pit in a12-year-old girl, her brother and mother are presented.

## Lipids

#### blood

Comparison of patterns of lipid profile in type-2 diabetics and non-diabetics.

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Annals of King Edward Medical College 2007; 13 (1): 84-87 (16 ref.)

**Keywords:** Diabetes Mellitus, Type 2-blood; Cholesterol-blood; Triglycerides-blood;Atherosclerosis-prevention and control; Coronary Disease-prevention and control; Cholesterol, LDL-blood;Cholesterol, HDL-blood; Diabetes Mellitus, Type 2-chemistry

**Abstract:** To determine the commonest pattern of lipid profile in type 2 diabetics presenting inMayo hospital and to compare it with non-diabetics. It was a comparative study. It was conductedin all medical wards, medical OPD and patients seen in emergency. Material and method: Patientswere selected according to inclusion criteria. After sampling for all relevant investigations, resultswere expressed after applying Chi-square test. Serum cholesterol> 240mg/dl seen in 25%diabetics and 11% non-diabetics [p <0.05]. Levels <240 and >200mg/dl seen in 35% diabetics and19% non-diabetics [p <0.05]. Serum cholesterol < 200mg/dl seen in 40% diabetics and 70%non-diabetics [p<0.05].LDL >160mg/dl seen in 21% diabetics and 5% non-diabetics [p<0.01]. LDL< 130 mg/dl seen in 32% diabetics and 42% non-diabetics [p <0.05]. HDL <35 mg/dl seen in 67%diabetics and 43% non-diabetics and 3% non-diabetics. TG >200mg/dlseen in 38% diabetics and 93% non-diabetics [p<0.05]. TG >400 mg/dl seen in 8% diabetics and 3% non-diabetics. TG >200mg/dlseen in 38% diabetics and 93% non-diabetics [p<0.01]. TG <200mg/dl seen in 62% diabetics and 3% non-diabetics [p<0.01]. Diabetes and cardiovascular disease are closely associated . Diabeticdyslipidaemias are a major risk factor for athrosclerosis. The commonest dyslipidaemia found waslow HDL cholesterol followed by high LDL, serum cholesterol and TG levels. The commonest dyslipidaemia found among non-diabetics in this study is high TG and low HDL, which might beassociated with dietary factors and lack of exercise. Correction of dyslipidaemia is important toretard the progression of atherosclerosis.

Loss of body weight and changes of lipid profile.

Jazayeri, Seyed M.H. Mosavi

Saudi Medical Journal 2007; 28 (1): 156 (3 ref.) Keywords: Weight Loss; Cholesterol-blood

# Lipoproteins, LDL

## chemistry

Enhanced susceptibility of low-density lipoprotein to oxidation in wet type age-related macular degeneration in male patients.

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Saudi Medical Journal 2007; 28 (2): 221-224 (38 ref.)

Keywords: Oxidation-Reduction; Macular Degeneration-physiopathology; Age Factors

Abstract: To determine the susceptibility of low-density lipoprotein [LDL] to oxidation in theplasma of male patients with wet type age related macular degeneration [AMD] and in a similarcontrol group, in order to evaluate the LDL oxidative status as risk factor of AMD. We conductedthis study in the Retina Service, Department of Ophthalmology, Nikookari Eye Hospital ' Drug ofApplied Research Center, Tabriz University of Medical Sciences, Tabriz, Iran during the periodbetween October 2004 and December 2005. Sixty male patients with AMD [mean age 67 +/- 16years] with BMI 4.1 +/- 1.3 were selected as the patient group. The control group consisted of 60males, apparently healthy, and without ophthalmologic signs and family history of AMD.Low-density lipoprotein was isolated by gradient ultracentrifugation and susceptibility of LDL to invitro copper-mediated oxidation was assayed by measuring conjugated dienes production [lagphase duration] at 234 nm. Lipid and lipoproteins were determined by standard methods.Comparing with control, significant reduction in the duration of lag phase [p<0.004] and asignificant increase in LDL-C concentrations [p=0.006], were noticed. No significant change incholesterol [p>0.3], triglyceride [p>0.1] levels werefound between control and patient groups. A significant negative correlation between Lag phaseand LDL-C levels [p=0.004, r=-0.364] was found in the patient group. The increased LDLconcentration and enhanced susceptibility of LDL to oxidation may play a roll in the wet type AMDprocess.

## Liver Failure, Acute

# chemically induced

# Spontaneous recovery of propylthiouracil-induced fulminant hepatic failure in an 8-year old child.

Bin Abbas, Bassam S.; Shabib, Souheil M.; Al Dekhail, Wajeeh M.; Al Shanafey, Saud N.; Al Mehaideb, Ali I.; AlAshwal, Abdullah A.

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King Faisal Specialist Hospital and Research Center, MBC 58 - Department of Pediatrics, Section of Pediatric Endocrinology **Saudi Medical Journal** 2007; 28 (5): 804-806 (11 ref.)

Keywords: Antithyroid Agents-adverse effects; Propylthiouracil-adverse effects; Hyperthyroidism-drugtherapy; Child

# Liver Neoplasms

# [Tumors of the liver; a ten year study in Children Medical Center].

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Children Medical Center - Department of Pediatrics

Tehran University Medical Journal [TUMJ] 2007; 65 (2): 52-56 (21 ref.)

**Keywords:** Carcinoma, Hepatocellular; Retrospective Studies; Hepatomegaly; SurvivalRate

Abstract: The aim of this study was to review the frequency, histopathology and outcome inchildren with tumors of the liver. Included in this retrospective/descriptive study were 30 childrentreated for liver tumors from 1375-1384 [ca. 1996-2005], at Children's Hospital Medical Center, Tehran, Iran. We included the clinical, radiologic, and pathologic data of our patients, focusing onthe frequency, etiology and outcome. Patient ages ranged from three months to 12 years [median3.8 years], with 18 males [60%] and 12 females [40%]. Of these, 17 patients had hepatoblastoma[55.66%], including 13 males and four females, with an age range of six months to five years. Fourcases [13.33%] had neuroblastoma. Hepatocellular carcinoma [HCC] was found in three cases[10%], all of whom were carriers of hepatitis B. Two cases [6.66%] were diagnosed withmesenchymal hamartoma, two cases [6.66%] with hemangioendothelioma and two cases [6.66%]with rhabdomyosarcoma and leiomyosarcoma of the biliary tract. Abdominal swelling andhepatomegaly were seen in all of patients. Jaundice was observed in two cases. Serumalphafetoprotein levels greater than 500 ng/ml were seen in 17 cases [56.66%]. All patients were receiving specific treatment. The three-year survival rate was 65% for hepatoblastoma and 2% for HCC With the introduction of specific treatment, the survival rate for children with tumors of the liverhas significantly increased. Further improvement can be achieved using diagnostic biopsy forhepatoblastoma, although it may result in complications, and preoperative chemotherapy followedby complete surgical excision [per International Society of Pediatric Oncology guidelines], yieldingan outstanding survival rate of 80%.

#### Low Back Pain

#### [Postural deviations from chronic low back pain and correction through exercise therapy].

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Tehran University Medical Journal [TUMJ] 2007; 65 (2): 69-77 (30 ref.)

Keywords: Posture; Chronic Disease; Data Collection; Questionnaires; Exercise Therapy

Abstract: It has been shown that five deficits of the proprioceptive system and poor motor skillsare associated with chronic low back pain [CLBP]. However, the exact mechanism is unknown. The objectives of this study were to assess the dynamic postural balance behavior of CLBPpatients, as well as the effects of a specific exercise therapy for the reatment of CLBP and relatedpostural imbalances. Sixteen females with CLBP and 30 healthy females all between 20 and 40years of age, of similar height and weight, voluntarily participated in this study. Patients underwenta three-month therapeutic exercise program. The disability and back pain of the patients weremeasured using the Oswestry and Quebec questionnaires, respectively. A dynamic stabilityplatform system [Biodex] was used to evaluate the postural imbalances in both groups. Allmeasurements of the experimental group were repeated after the therapy. Overall deviation ofcenter of gravity [COG] from COBOS in patients and controls were 3 [+/- 0.3] and 1.3 [+/-0.2], respectively. Thus, postural imbalances were 2.3 times greater in the patients than those of thecontrols. After the treatment, the disability and pain of the patients were diminished by 53% and58%, respectively. Furthermore, with the improvement of the patients COG deviation, both groupshad similar posture. The postural orientation of CLBP patients was significantly improved by thetherapeutic exercise program. The applied exercise therapy significantly reduced both the pain andthe disability of the patients. Based on these conclusions, we recommend that postural correctionbe included in regular therapeutic exercise programs.

#### Lumbar Vertebrae

## injuries

Spontaneous reduction of a traumatic L2-L3 subluxation without fracture in a 14-year-old boy.

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Medical Principles and Practice 2007; 16 (1): 71-74 (11 ref.)

**Keywords:** Lumbar Vertebrae-radiography; Dislocations-pathology; Dislocations-radiography; SpinalInjuries-pathology; Spinal Injuries-radiography

**Abstract:** To report a rare case of lumbar vertebral subluxation associated with spontaneous reduction in an adolescent treated conservatively. A 14-year-old male victim of a snowboardaccident, which caused a lumbar spinal injury, was referred to the emergency room with significantlumbar pain. Neurologic examination was normal. Radiographic assessment at admission showed unilateral left lateral subluxation of the L2-L3 vertebrae without associated fractures. Thesefindings were confirmed by CT scan and a surgical management was decided. The preoperativeMRI performed 24 h after the accident, however, revealed the spontaneous reduction of thesubluxation, and an associated tear of the quadratus lumborum and the psoas muscles on theright side at the level of L2, L3 and L4. Following these findings conservative treatment with aplaster brace for 2 months was carried out. The brace was removed after 2 months. The patienthad no pain and the range of motion of his lumbar spine was normal. Three months after injury, sports activities were resumed. At follow-up of 24 months, the patient was free of pain andradiographs showed a right positional bending without rotational or translation anomaly. To date, this is the first case of subluxation without fracture in a child, presenting without neurological deficitand where spontaneous reduction occurred. In this case, conservative treatment was effective andthe outcome at 2-year follow-up was excellent.

# Lymphangioleiomyomatosis

## diagnosis

Pulmonary lymphangioleiomyomatosis.

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Baghdad University - Faculty of Medicine - Department of Medicine

Saudi Medical Journal 2007; 28 (1): 131-134 (10 ref.)

Keywords: Lung Neoplasms-diagnosis; Tomography, X-Ray Computed

**Abstract:** A 38-year-old Iraqi female, presented with one-year history of exertional dyspnea andexercise intolerance, without systemic or constitutional symptoms. Clinical examination revealedbilateral basal crackles with signs suggestive of left side pleural effusion, chest x-ray showed leftsided pleural effusion, and diffuse bilateral basal pulmonary shadowing. Her biochemical analysis,hematological tests, electrocardiogram and echocardiography were normal, aspiration of the fluidrevealed a chylothorax, the radiological shadowing was proved by computed tomography scan ofthe chest to be diffuse cystic lesions involving mostly the lower lobes. Open lung biopsy showeddilated lymphatic vessels with surrounding inflammatory cells and smooth muscle fibersconsistently with the diagnosis of pulmonary lymphangioleiomyomatosis LAM.

## Lymphoma, Non-Hodgkin

#### drug therapy

Sudden onset of herpes zoster following chemotherapy for orbital lymphoma in a HIV positive patient.

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Saudi Medical Journal 2007; 28 (1): 125-127 (15 ref.)

**Keywords:** Orbital Neoplasms-drug therapy; Herpes Zoster-etiology; HIV Seropositivity-drug therapy; HIVSeropositivity-complications; Antineoplastic Combined Chemotherapy Protocols-therapeutic uses; Antiretroviral Therapy, Highly Active

**Abstract:** We report a 38-year-old HIV positive female, who developed an acute attack of herpeszoster HZ involving the mandibular, C2, C3, C4, T1, and T2 dermatomes, 9 days after thecommencement of the first cycle of chemotherapy regimen for non-Hodgkin's lymphoma NHL. Shehad developed NHL of the ovary approximately 6 months earlier, followed by metastasis to the leftorbit resulting in proptosis of the left eye. A combination of a positive HIV status, lymphoma, andchemotherapy can predispose a patient to an attack of HZ involving many dermatomes.

# Maduromycosis

# diagnosis

Report of two cases of mycetoma in the Report of two cases of mycetoma in the Islamic Republic of Iran.

Shamsadini, S.; Meimandi, S. Shamsi; Eshkavari, S. Sadre; Vahidreza, S.

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**EMHJ - Eastern Mediterranean Health Journal** 2007; 13 (5): 1219-1222 (19 ref.) **Keywords:** Maduromycosis-drug therapy; Maduromycosis-pathology; Diagnosis, Differential

# **Magnesium Sulfate**

## therapeutic uses

[The effect of Magnesium sulfate on reducing Propofol injection pain in elective surgeries].

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Tehran University Medical Journal [TUMJ] 2007; 65 (2): 30-34 (15 ref.)

Keywords: Propofol-adverse effects; Pain-etiology; Pain-etiolofy; Pain-drug thearpy; Injections,Intravenous

Abstract: Propofol, an anesthetic noted to give rapid recovery, causes discomfort at the site ofinjection. A number of methods to reduce propofol-induced pain have been tried, including pretreatment with lidocaine, with varying results. Here, we evaluate the efficacy of magnesium sulfate compared to that of lidocaine and normal saline in mitigating propofol-induced pain. Onehundred ASA I and II adults, aged 20-50 years, scheduled for elective surgery requiring two IVIines with 20-gauge cannulae in the dorsum of each hand, were enrolled in this study. The patientswere randomly placed into two groups of 50 patients. In each patient, one hand was the casestudy and other hand was the control. Group A received 10% magnesium sulfate in one hand andnormal saline in the other hand. Group B received 10% magnesium sulfate in one hand and 1%lidocaine in the other hand. All injections had a volume of 2 ml. After 30 seconds, 2 cc of 1%propofol was injected simultaneously into each hand. Pain was assessed according to the VASrating system, ranging from 0 [no pain] to 10 [the most severe pain], with a minimum interval of 3as significant pain. Data were analyzed by chi-square and independent t tests. A P value <0.05was considered significant. In Group A, the mean pain in the hand premedicated with magnesiumwas 1.46 +/- 1.07, compared to 4.54 +/- 2.15 for that of the other hand that had received normalsaline [P=0.001]. In group B, the mean pain in the hand that had received magnesium was 0.82+/- 1.34, compared to 0.78 +/- 1.07 for that of the other hand, which had received lidocaine[P=0.86]. Intravenous magnesium and lidocaine pretreatments are equally effective in attenuatingpropofolinduced pain, and were better than normal saline in attenuating propofol-induced pain.

## Magnetic Resonance Imaging

[Incidental sinus abnormalities in 256 patients referred for brain MRI].

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Tehran University Medical Journal [TUMJ] 2007; 65 (2): 35-39 (18 ref.)

Keywords: Brain-abnormalities; Brain-radiography; Sinusitis; Cross-Sectional Studies

**Abstract:** Imaging abnormalities in the paranasal sinuses are regularly noted as incidentalfindings on MRI, however, little is known about their prevalence in the Iranian population. Thepurpose of this study was to classify these findings in the paranasal sinuses as seen on MRI andto investigate the prevalence, according to site and type of paranasal abnormality. In this cross-sectional study, the T2-weighted axial MRI of 256 patients with diseases unrelated to theirparanasal sinuses were reviewed between May 2002 and June 2003. The findings were categorized according to the anatomic location and the imaging characteristics of the abnormality. The abnormalities recorded included total sinus opacification, mucoperiosteal thickening >/= 5mm,air fluid levels and retention cysts or polyps. Unilateral or bilateral involvement and septal deviationwere also noted. A sinus was considered normal if it was fully aerated and no soft-tissue densitywas apparent within the cavity. Among our cases, 111 [43.5%] were male and 145 [56.5%] werefemale. Of these patients, abnormalities in one or more of the sinus groups were found in 110subjects [42.9%], 55.5% of which were male and 44.5% were female [P=0.001]. Maxillary sinusabnormalities were observed in 66.4% of the patients, while ethmoid sinus abnormalities werefound in 63.6%. Of the ethmoid abnormalities, 21% were found in the anterior section, 9% in themiddle ethmoid, and 8% in the posterior ethmoid. The most common abnormality found wasmucosal thickening. Among our cases, 23.4% had septal deviation, which was significantly higheramong those with sinusitis [29% versus 19.1%; P<0.01]. Of those patients with sinus involvement,16% were involved in the sphenoid sinus and 5% in the frontal sinus. The results obtained from thepatients with sinus abnormality revealed that 85% suffered from cough, nasal obstruction, runnynose, facial pain and post nasal discharge and 24% had been diagnosed with chronic sinusitis byphysician. Our results showed that there was a high rate of incidental abnormalities in theparanasal sinuses that are unrelated to the patient's presenting problems.

# Mammography

[FORTRANcode for glandular dose calculation in mammography using Sobol-Wu parameters].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 13-16 (7 ref.)

Keywords: Breast-anatomy and histology; Breast-radiation effects

Abstract: Accurate computation of the radiation dose to the breast is essential to mammography. Various the thicknesses of breast, the composition of the breast tissue and other variables affect the optimal breast dose. Furthermore, the glandular fraction, which refers to the composition of thebreasts, as partitioned between radiationsensitive glandular tissue and the adipose tissue, alsohas an effect on this calculation. Fatty or fibrous breasts would have a lower value for theglandular fraction than dense breasts. Breast tissue composed of half glandular and half adiposetissue would have a glandular fraction in between that of fatty and dense breasts. Therefore, theuse of a computational code for average glandular dose calculation in mammography is a moreeffective means of estimating the dose of radiation, and is accurate and fast. In the present work, the Sobol-Wu beam quality parameters are used to write a FORTRAN code for glandular dosecalculation in molybdenum anode-molybdenum filter [Mo-Mo], molybdenum anode-rhodium filter[Mo-Rh] and rhodium anode-rhodium filter [Rh-Rh] target-filter combinations in mammograms. Theinput parameters of code are: tube voltage in kV, half-value layer [HVL] of the incident x-rayspectrum in mm, breast thickness in cm [d], and glandular tissue fraction [g]. The averageglandular dose [AGD] variation against the voltage of the mammogram X-ray tube for d = 4 cm,HVL = 0.34 mm Al and g=0.5 for the three filter-target combinations, as well as its variation againstthe glandular fraction of breast tissue for kV=25, HVL=0.34, and d=4 cm has been calculated. Theresults related to the average glandular absorbed dose variation against HVL for kV = 28, d=4 cmand g= 0.6 are also presented. The results of this code are in good agreement with thosepreviously reported in the literature. The code developed in this study calculates the glandulardose quickly, and it is complete and accurate. Furthermore, it is user friendly and useful for doseoptimizing in mammography imaging.

# **Maternal Mortality**

Maternal death and its causes - a challenge for achieving millennium goals.

Sultana, A.; Saba, N.; Gazala

Annals of King Edward Medical College 2007; 13 (1): 3-6 (19 ref.)

Keywords: Postpartum Hemorrhage; Labor, Obstetric-complications; Infections; Prenatal Care-utilization; Eclampsia Abstract: Maternal death is not the only death of a leady but it is in fact a death of a family, one ofthe millennium goal of WHO is to reduce maternal mortality by three quarters up to 2015. In orderto achieve the role it is essential to have basic figure from worldwide. District head quarter womenand children hospital DHQ [W and C], Dera Ismail Khan situated in southern areas of NWFP isproviding as emergency obstetric care to this area and peripheral areas of Punjab andBulochistan. Maternal mortality ratio and and its causes in Distt Headquarter setting of D.I Khancan serve as a baseline figures for planning the strategies for achieving millennium goals. Thestudy was carried out in District Headquarter for women in Dera Ismail Khan. It was a seven yearstudy starting from 15t January 1999- 31st December 2005. It is a descriptive retrospectivehospital based study. The record was collected from admission Register, Labour Register. andmaternal mortality register. In the seven years period total No of live birth were 11811 and therewere 131 maternal deaths. Maternal mortality ratio was 1109/ 100,000 live births. Direct causes ofmaternal death contributed to 94.5% and indirect causes contributed to 5.35%. Hemorrhage, theleading cause of maternal death was responsible for 57.5% of maternal deaths. Antepartum [APH]and post partum [PPH] contributed equally. Obstructed labour killed 13.9% of the mothers, eclampsia killed 16.74% while infections killed 5.35% of the mothers. Indirect maternal deathswere hepatic coma, sever anaemia and cardiac failure. The challenge for achieving millenniumgoals is very high. The leading cause of death of the mothers is haemorrhage. The three delays i.edelayed decision, delayed transport, and delayed management are the virtual causes. To achieve the millenium goal we need to improve the first level health care facilities. We also need publicawareness, rising the self determination and women's right and women empowerment and her roleand decision maker.

#### Melanoma

#### diagnosis

Acral lentiginous melanoma versus lentigo maligna melanoma among Iraqi patients.

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**Saudi Medical Journal** 2007; 28 (1): 105-107 (12 ref.)

Keywords: Skin Neoplasms-diagnosis; Toes; Fingers

**Abstract:** To report the different clinical aspects of malignant melanoma and their varieties in Iraqipatients. We carried out this study in the Department of Dermatology and Venereology, BaghdadTeaching Hospital, Baghdad, Iraq during the period from 1985-2005. Eighteen patients withmalignant melanoma were enrolled in this work. The different clinical aspects and histopathologicalexamination were determined. The study population consisted of 18 patients [15 females and 3males] with a female to male ratio of 5:1. Their ages ranged from 12-75 years [mean +/- SD, 43.72+/-

14.75 years] while the duration of the disease ranged between 0.25-5 years [1.98 +/- 1.44years]. The duration of acral lentiginous melanoma was 0.5-4 years [2.16 +/- 1.36 years] and innodular type was 0.5-3 years [1.28 +/- 0.90 years], while in lentigo maligna melanoma was 1.5-5years [3.37 +/- 1.49 years]. Regarding the location and gender of the patients affected, 6 cases [allfemales] were on the acral parts of the body [4 on the feet, and 2 on the hands], 5 patients [allfemales] on the face, 5 cases [4 females and one male] on the lower legs, while the remaining 2male cases, was on the interscapular region and the other one on the elbow area. We concludethat malignant melanoma in Iraqi patients is a disease of younger females, which presented mainlyas acral lentiginous melanoma, nodular melanoma and lentigo maligna melanoma and superficialspreading melanoma.

## pathology

#### Melanoma of the oral mucous membrane - A case report.

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Ministry of Health - Al Yamamah Hospital - Oral Medicine and Diagnosis Dental Department

**SDJ - Saudi Dental Journal [The]** 2007; 19 (1): 43-47 (18 ref.)

Keywords: Melanoma-diagnosis; Melanoma-surgery; Early Detection; Biopsy; Gingiva; MucousMembrane

**Abstract:** A case of melanoma in a 45-year-old female is presented. She gave a history ofmultiple extractions which were usually uneventful. On examination, a darkly pigmented tissuegrowth, approximately 9 mm x 5 mm was noticed on the right alveolar ridge at the site of extractedtooth 46. The patient was not aware of the lesion as it was asymptomatic. Patient's consent wasethically obtained to incisionally biopsy the lesion. The histopathologic diagnosis was malignantmelanoma of the gingiva mucosa based on H and E stain and strongly positive S-100immunostain. The lesion was surgically excised in toto with adequate safety borders. Thehistopathology report of the excisional biopsy confirmed the earlier diagnosis. About eighteenmonths after diagnosis and treatment, the patient is free of disease and she continues to bemonitored every three to four months. This case is being reported to alert clinicians on theimportance of according pigmented lesions of the oral mucosa, the importance they deserve forthe good of the natients

## Meningitis, Escherichia coli

# microbiology

#### Community-acquired Escherichia coli meningitis in a diabetic patient.

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Neurosciences 2007; 12 (1): 81-83 (5 ref.)

Keywords: Meningitis, Escherichia coli-cerebrospinal fluid; Community-Acquired Infections;Immunocompetence;

Tomography, X-Ray Computed; Diabetes Mellitus; Culture Media-microbiology

## Meningoencephalitis

## microbiology

#### Unusual presentation of cryptococcal meningoencephalitis in a patient with renal transplant.

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Neurosciences 2007; 12 (1): 84-85 (6 ref.)

**Keywords:** Meningoencephalitis-diagnosis; Meningoencephalitis-cerebrospinal fluid; Cryptococcusneoformans; Kidney

Transplantation; Amphotericin B; Fluconazole; Flucytosine; Tomography, X-RayComputed; Immunocompetence

#### **Menstruation Disturbances**

# Reproduction in women with end-stage renal disease and effect of kidney transplantation.

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IJKD - Iranian Journal of Kidney Diseases 2007; 1 (1): 12-15 (25 ref.)

**Keywords:** Amenorrhea; Kidney Transplantation; Kidney Failure, Chronic; Pregnancy; RenalDialysis; Sexual Dysfunctions, Psychological

**Abstract:** Menstrual problem is common among women with chronic kidney disease, and patientswith end-stage renal disease usually have amenorrhea. The rate of pregnancy in women ondialysis is low. Fetal survival in this population has improved, with half of such pregnancies resulting in delivery of a live infant. However, prematurity remains common and accounts for thelow-birth weight of these infants. Intensifying hemodialysis by increasing the frequency oftreatments is associated with longer gestation and increased likelihood of a successful pregnancy. Intense hemodialysis also improves the control of maternal intravascular volume and reduces therisk of hypotension due to excessive ultrafiltration. Women with chronic kidney disease tend to experience decreased libido and reduced ability to

reach orgasm. Sexual difficulties in uremicpatients are often worsened by hemodialysis, with a lowered frequency of intercourse, reducedsexual desire, and an increased incidence of sexual failure. There have been ongoingimprovements in survival and quality of life after kidney transplantation. In most patients, sexualdesire increases significantly after successful transplantation; however, improvement in thefrequency of sexual activity and the overall sexual satisfaction is not as high as that in sexualdesire. These have been accompanied by an improvement in reproductive function. Pregnancysuccess rate exceeds 90% after the first trimester in women with kidney transplant. Contraceptivecounseling should be provided before transplantation, because ovulatory cycles may begin within1 to 2 months after transplantation in women with functioning grafts. Breastfeeding is discouragedfor patients taking any immunosuppressive drugs.

# Metabolic Syndrome X

## epidemiology

Metabolic syndrome: frequency and gender differences at an out - patient clinic.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 32-35 (28 ref.)

Keywords: Sex Factors; Cross-Sectional Studies; Incidence

Abstract: To determine the frequency of metabolic syndrome among patients attending anout-patient clinic of a teaching hospital and to compare the clinical features regarding metabolicsyndrome among males and females. Cross-sectional study. Aga Khan University Hospital [AKUH], Executive and Family Medicine Clinics, from December 2004 to April 2005. All adults, above 25years, attending the clinics for an executive check-up and giving informed consent were included in the study. Data was collected through a structured questionnaire administered to those eligible participate. Metabolic syndrome was defined according to ATP-III guidelines. There were 250participants in this study. Mean age of study participants was 48.94 [SD10.62] years, whileapproximately two-thirds, 157 [62.8%], were male. Metabolic syndrome [those who had 3 or morerisk factors] was present in 35.2% of adults. Fasting blood sugar level was raised in 36.4% ofstudy participants while significant number of participants [78.8%] had a Body Mass Index [BMI]25 [p = 0.02]. Frequency of metabolic syndrome was significantly high in this study withpreponderance of males and prevalence similar to that observed in developed countries. Majorityof patients had obesity and high fasting blood sugar levels. Males demonstrated higher levels oftriglycerides and low levels of High-density lipoprotein [HDL] compared to females while bloodpressure reading was observed to be the same in both males and females.

## **Methicillin Resistance**

[Prevalence of Methicillin and Vancomycin resistant Staphylococcus aureus colonization in nasopharynx: Amir-Alam hospital. 2005].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 78-81 (8 ref.)

**Keywords:** Staphylococcal Infections; Staphylococcus aureus; Cross Infection; Prevalence; VancomycinResistance; Renal Dialysis; Nasopharynx-microbiology

Abstract: Staphylococcus aureus is one of the most common causes of nosocomial infections withhigh morbidity and mortality rate. Traditionally, methicillin resistant staphylococcus aureus hasbeen considered a major nosocomial pathogen in healthcare facilities, but in the past decade, ithas been observed emerging in the community as well. Informations regarding hospital microbialcolonization could be an important step for prevention of nosocomial infections. Our objective wasclarifying the prevalence of methicillin resistant and vancomycin resistant staphylococcus aureuscolonization in nasopharynx. A descriptive cross sectional study was carried on 106 patients andnursing staff of surgery and hemodialysis wards in Amir-Alam hospital from April 2005 to July2005. The samples were collected from nasal region of cases using cotton swab by two experienced technician and were sent to laboratory for culture and antibiogram. Twenty six [29.5%]out of 106 cases were nasopharyngeal carriers of staphylococcus aureus. Eight cases [7.5%] hadmethicillin resistant staphylococcus aureus. The most frequent colonization rate was seen inhemodialysis nursing staff and in all of them methicillin resistant staphylococcus aureus wasreported. Carrier rates in hemodialysis patients were twice compared to surgery ward patients. Theinteresting point was that no sample of vancomycin resistant staphylococcus aureus was isolated. Prevalence of methicillin resistant staphylococcus aureus colonization seems to be increased; therefore proper management for controlling this problem is mandatory. The results of the presentstudy suggest that the prevalence of methicillin resistant staphylococcus aureus infections ishigher than was expected in Iran and vigorous preventive strategies should therefore be taken tostop the growth of this major health problem.

# Methylphenidate

# administration, dosage

Methylphenidate. An update on extended-release formulations.

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Neurosciences 2007; 12 (1): 3-7 (16 ref.)

Keywords: Methylphenidate-pharmacology; Methylphenidate-therapeutic uses; Attention Deficit Disorderwith

Hyperactivity-drug therapy

**Abstract:** Methylphenidate remains the mainstay of pharmacological management in attentiondeficit hyperactivity disorder [ADHD]. Despite having been available for over half a century, methylphenidate's original formulation has been modified with the main purpose of extending itsduration of action. This article will present a brief review of how these new formulations vary andhow these should be selected, considering the evidence available on their effectiveness and onthe individual needs of the patient.

#### **Mitochondrial Proteins**

## genetics

Screening for hOGG1 S326C variant in normal Saudi population.

Al Anazi, Mohammed S.; Al Amri, Abdullah M.; Al Tassan, Nada A.

King Saud University - College of Science - Department of Biochemistry

Saudi Medical Journal 2007; 28 (5): 802-803 (5 ref.)

**Keywords:** DNA Repair; DNA-[Apurinic or Apyrimidinic Site] Lyase-genetics; Polymorphism, Genetic; N-Glycosyl Hydrolases-genetics; Gene Frequency; Population Groups

# **Myocardial Contraction**

The role of adenosine triphosphate-regulated potassium channels in propofol-induced beneficial effect on contractile function of hypercholesterolemic isolated rabbit hearts.

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Saudi Medical Journal 2007; 28 (5): 701-706 (22 ref.)

Keywords: Hypercholesterolemia; Adenosine Triphosphate; Potassium Channels; Propofol; Rabbits

Abstract: To investigate the role of adenosine triphosphate-regulated potassium [KATP] channelsin the propofol-induced changes in the contractile function of hypercholesterolemic rabbit hearts. This study was carried out in the Department of Pharmacology Laboratory, Faculty of Medicine, Dokuz Eylul University, Izmir, Turkey during the period January to December 2003. Twenty-twoisolated rabbit hearts were grouped into 4. Group I [n=6] were infused with 50 uM propofol duringa 60 minutes perfusion. Group II [n=6] were also infused with 100 uM propofol over the sameperiod. Group III [n=5] was perfused with solutions containing 10 uM glybenclamide and group IV[n=5] 100 uM diazoxide for 5 minutes before and during a 60 minutes infusion with 100 uM propofol. The 50 uM propofol infusion decreased left ventricular pressure [LVP] significantly[p<0.05] but it did not change dP/dtmax and dP/dtmin. The 100 uM propofol infusion resulted in asignificant increase in LVP at 20 minutes. Furthermore, a 100 uM propofol infusion resulted in asignificant increase in maximal positive left ventricular pressure [dP/dtmax] and maximal negativeleft ventricular pressure [dP/dtmin] compared to baseline [p<0.05]. The increase in dP/dtmax anddP/dtmin induced by 100 uM propofol was inhibited by glybenclamide [p<0.05], a KATP channelblocker, but was not affected by diazoxide [p>0.05], a KATP channel opener. The activation ofKATP channels seems to be one of the mechanisms by which propofol induced beneficial effecton contractility of myocardium in hypercholesterolemic rabbit hearts.

# **Myocardial Infarction**

# drug therapy

In hospital outcome of acute myocardial infarction in patients receiving Streptokinase.

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Annals of King Edward Medical College 2007; 13 (1): 73-77 (27 ref.)

**Keywords:** Streptokinase-therapeutic uses; Treatment Outcome; Time Factors; Hospital Mortality; ChestPain; Electrocardiography

Abstract: To study and compare the in-hospital mortality due to acute myocardial infarction inpatients receiving thrombolytic [streptokinase] therapy versus those who were not thrombolysed. This descriptive observational study was conducted at the Coronary care Unit and Cardiologyward of Nishtar Hospital, Multan, from 10 of October 2002 till 30th of April 2003. Four hundred andthirty four patients of acute myocardial infarction who fulfilled WHO criteria of acute myocardialinfarction were included in the study. Patients were divided into two groups: patients receivingstreptokinase [SK] group and patients not receiving streptokinase [Non-SK] group. In-hospitalmortality was our primary endpoint. Mechanical and electrical complications occurring in-hospitalafter acute myocardial infarction were secondary endpoints. Only 47% patients receivedstreptokinase while 53% did not receive it because of delayed presentation or some othercontraindication to streptokinase therapy. Mean age of the SK group was 51.58+11.02 years and Non-SK group was 55.78+10 years. In SK group 170[83.3%] patients were males and 34[16.7%]were females. Only 54[26.5%] diabetics and 150[73.5%] non-diabetics received streptokinase. Streptokinase recipients reached the hospital earlier; mean time of onset of symptoms till arrival atthe hospital was 4 hours and 25 minutes while non recipients took a longer time in reaching to thehospital. There was no significant difference in the infarct territory between the two groups. TheNon-SK group had higher Killip class as compared to SK group on presentation to the hospital.In-hospital mortality was 8.3% in SK group and 24.3% in Non-SK group [p<0.0001]; left ventricularfailure occurred more frequently in Non-SK group and was the most common cause of death inboth the groups [p<0.0001]. Only 4.3% patients in the SK group and 19.6% patients in the Non-SKgroup died in first 24 hours of hospital admission [p<0.0001]. Mechanical complications occurredmore frequently in Non-SK group [p<0.008]. There was a statistically non significant difference[p<0.436] noted in comparison of electrical complications between the two groups. Streptokinaseinfusion given in the early hours of acute myocardial infarction leads to a significant reduction inin-hospital mortality and mechanical complications like left ventricular failure.

# Myocardial Ischemia

## complications

Revascularization in patients with severe left ventricular impairment who have ischemic heart disease.

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Saudi Medical Journal 2007; 28 (1): 54-59 (23 ref.)

**Keywords:** Myocardial Ischemia-surgery; Coronary Artery Bypass; Ventricular Dysfunction,Left-complications; Severity of Illness Index; Retrospective Studies

Abstract: To assess the effect of coronary bypass grafting on left ventricular [LV] function, exercise capacity and symptom profile in patients with LV impairment and retrospectively evaluatethe role of the different factors affecting LV. A total of 45 patients [33 men, 12 women, mean age63.49 +/- 7.38 years] with LV ejection fraction of less than 0.32 were admitted to the IstanbulUniversity, Cardiology Institute, Istanbul, Turkey between January 2001 to June 2003 for coronarybypass operation. Preoperative and postoperative wall motion, functional class [New York HeartAssociation] and risk factors were analyzed. We had one perioperative mortality [2.2%] and 2 earlypostoperative mortality [4.4%] due to poor cardiac function. There was a significant increase in themean LV ejection fraction from 26.64 +/- 5.17 to 32.98 +/- 6.38 [p<0.001] postoperatively. In thisgroup the mean New York Heart Association grade improved from 2.07 +/-0.76 to 1.5+/-0.79[p<0.001]. Preoperative functional class, congestive heart failure, arrhythmia, age, pre/postoperative complications were the main predictors of poor outcome following surgicalrevascularization for ischemic cardiomyopathy. In patients with severe LV impairment withmyocardial hibernation, coronary artery bypass grafting improves both global and regional LVfunction and symptom profile. We therefore, recommend a coronary artery bypass grafting as analternative to orthotopic heart transplantation whenever myocardial viability are documented.

#### surgery

Peculiarity of surgical tactics for management of ischemic heart disease in patients with left main coronary artery stenosis.

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Annals of King Edward Medical College 2007; 13 (1): 126-128 (24 ref.)

**Keywords:** Coronary Stenosis-surgery; Coronary Stenosis-complications; Myocardial Infarction-etiology; Coronary Artery Bypass; Surgical Procedures, Operative; Treatment Outcome; Death, Sudden

**Abstract:** The left main coronary artery disease has poor natural history. Sudden death, massivemyocardial infarction, angina and poor quality of life indicate the ominous nature of the disease. Coronary artery bypass grafting remains the ultimate choice of its management. A relatively highmortality and morbidity of its surgical treatment described in literature leads to the actuality of thisdisease. This work is a part of our continuous effort for refinements in anesthetic and surgicaltechniques to reduce mortality and morbidity in such patients and is in the clinical practice at ourinstitute for the last few years. During the period from February 1998 to October 2005, 74 patientsunderwent coronary artery bypass surgery for left main coronary artery stenoses, at FederalPostgraduate Medical Institute, Shaikh Zayed Hospital, Lahore. All patients presented with angina, unstable in 62.2%. An old myocardial Infarction was present in 52 [70.3%] patients. An emergentsurgery was needed in 5[6.8%], urgent operation was performed in 45[60.8%] patients and electiveprocedure was done in 24[32.4%]. Average stay in the hospital was 9.0+2.7 days. There were 2hospital deaths and one late non cardiac death. The post operative recovery was eventless inmajority of

the patients. The return of patients to their jobs improved significantly [P < 0.005] threemonths after operation. Our current surgical results are certainly improved than many previous studies on coronary artery bypass grafting for left main stem stenoses.

# **Myocardial Stunning**

#### Neurogenic stunned myocardium following hemorrhagic cerebral contusion.

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Saudi Medical Journal 2007; 28 (2): 283-285 (5 ref.)

Keywords: Cerebral Hemorrhage, Traumatic; Brain Edema; Cardiac Output; Echocardiography; Craniotomy

**Abstract:** Neurogenic stunned myocardium NSM is a well-known complication of subarachnoidalhemorrhage, but has been reported rarely in association with other central nervous systemdisorders. A case of NSM is described in a patient with hemorrhagic brain contusion associatedwith cerebral edema. An 18-year-old man was admitted with severe cranial trauma following a carroll-over. Six days after admission, he developed findings suggestive for NSM. The troponin T andcreatine kinase-MB level were elevated and echocardiogram showed apical and inferoposteriorhypokinesis and diffuse left ventricular akinesis with severely reduced ejection fraction 18%.Invasive measurements confirmed low cardiac output. His cardiac function resolved completelywithin 6 days after decompressive craniotomy. This case supports the presumed unifying role ofthe increased intracranial pressure, probably triggering a vigorous sympathetic outflowhyperactivity leading to NSM.

#### Neurogenic stunned myocardium following hemorrhagic cerebral contusion.

Deleu, Dirk; Kettern, Marie Anne; Hanssens, Yolande; Kumar, Suresh; Salim, Khalid; Miyares, Francisco

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Neurosciences 2007; 12 (1): 65-67 (5 ref.)

Keywords: Cerebral Hemorrhage, Traumatic; Brain Edema; Cardiac Output; Echocardiography; Craniotomy

Abstract: Neurogenic stunned myocardium [NSM] is a well-known complication of subarachnoidalhemorrhage, but has been reported rarely in association with other central nervous systemdisorders. A case of NSM is described in a patient with hemorrhagic brain contusion associated with cerebral edema. An 18-year-old man was admitted with severe cranial trauma following a carroll-over. Six days after admission, he developed findings suggestive for NSM. The troponin T andcreatine kinase-MB level were elevated and echocardiogram showed apical and inferoposteriorhypokinesis and diffuse left ventricular akinesis with severely reduced ejection fraction [18%].Invasive measurements confirmed low cardiac output. His cardiac function resolved completelywithin 6 days after decompressive craniotomy. This case supports the presumed unifying role offhe increased intracranial pressure, probably triggering a vigorous sympathetic outflowhyperactivity leading to NSM.

## **Nasal Obstruction**

# radiography

#### Chronic unilateral nasal obstruction in children.

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Saudi Medical Journal 2007; 28 (5): 811-812 (5 ref.)

Keywords: Choanal Atresia-radiography; Tomography, X-Ray Computed; Diagnosis, Differential; Child

# Nasal Polyps

# diagnosis

#### Agreement rate of skin prick test with tissue eosinophil count in patients with nasal polyps.

Eghtedari, Fardin; Cheraghzadeh, Seyed Reza; Kashef, Mohammad Amin; Monabati, Ahmad; Kashef, Sara Shiraz University of Medical Sciences - School of Medicine - Department of Otorhinolaryngology

Iranian Journal of Allergy, Asthma and Immunology 2007; 6 (2): 89-92 (14 ref.)

Keywords: Nasal Polyps-immunology; Nasal Polyps-surgery; Skin Tests; Eosinophils; Rhinitis, Allergic, Seasonal

**Abstract:** The pathogenetic mechanism of nasal polyps remains unknown, although allergy hasbeen cited as an important factor in the etiology of nasal polyposis. Currently there is no definitehistological criterion for differentiation of allergic from inflammatory nasal polyp. However, in a fewstudies, tissue eosinophil count has been used for this. This study aimed to find out the agreementrate of skin prick test and tissue eosinophil count in patients with nasal polyposis. Twenty fivepatients [18 males, 7 females] with nasal polyp were enrolled in this study. For each patient tissuesample from polyp material was taken for histopathological investigation. Moreover, skin prick testwas performed for each patient using eleven common aeroallergens. Skin prick test was positivein 48% of the patients. Tissue eosinophil count of more than 50% was found in 75% of skin prickpositive and in 69.2% of skin prick negative patients. Also tissue

eosinophil count of more than 50% was found in 69.2% of patients with typical allergic symptoms as well as 75% of patients without allergic symptoms. No agreement was found between skin prick tests and tissueeosinophil counts in patients with nasal polyp. Also no difference was found between the tissueeosinophil counts in allergic and non allergic patients. Considering these results, it can be concluded that having a high tissue eosinophil count in patients with nasal polyp does not indicate that the polyp is allergic.

#### Nausea

## therapy

The efficacy of transcutaneous electrical nerve stimulation in control of nausea and vomiting in patients undergoing chemotherapy.

Rivaz, M.; Asadizaker, M.; Elahi, N.; Ramzi, M. Firouzabad Azad University - Faculty of Nursing

IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 182-184 (13 ref.)

**Keywords:** Nausea-prevention and control; Vomiting-therapy; Vomiting-prevention and control; ElectricStimulation Therapy; Drug Therapy-complications

Abstract: Despite advances in antiemetic treatment, complications are still problematic for asignificant number of patients after chemotherapy. This study was performed to determine theefficacy of transcutaneous electrical nerve stimulation [TENS] in the control of nausea andvomiting in patients undergoing chemotherapy at Nemazee Hospital affiliated to ShirazUniversity of Medical Sciences, in Shiraz, southern Iran.32subjects with cancer from Outpatients Depatment in Nemazee Hospital affiliated to ShirazUniversity of Medical Sciences, in Shiraz, southern Iran were enrolled. The patients were randomlydivided into two equal groups of TENS and placebo. Patients in both groups were matched forage, severity of nausea and vomiting and type of malignancy. Cisplatin or cyclophosphamide wasused for chemotherapy and granistron along with dexametasone were used as antiemetic agents.In the test group, the p6 acupuncture point [acupoint] was stimulated by TENS when the antiemeticagent was administered and continued during wakening every 2 hours for 72 hours afterchemotherapy. The placebo group was similarly treated but with an off mode stimulator. In regardto the severity of nausea, no statistically significant difference was observed between the twogroups in the first 24 hours of chemotherapy but the intensity of nausea in the TENS group wassignificantly lower than those of the placebo group during 48 and 72 hours of chemotherapy. Themean frequency of vomiting during first, second and third 24 hours was significantly lower in thecontrol group. TENS can be used as an adjunct with antiemetics for controlling nausea andvomiting induced by chemotherapy.

# **Neoplasm Metastasis**

Detection of micrometastatic tumor cells in head and neck squamous cell carcinoma. A possible predictor of recurrences?.

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Saudi Medical Journal 2007; 28 (2): 216-220 (16 ref.)

**Keywords:** Carcinoma, Squamous Cell; Recurrence; Prognosis; Neoplasm Staging; Head and NeckNeoplasms-pathology

Abstract: To evaluate the presence of micrometastatic tumor cells in the peripheral bloodsamples of the patients with head and neck squamous cell carcinoma [HNSCC] and to determinewhether the presence of micrometastatic cells had any biological relevance in terms of localrecurrences or metastasis during a follow-up period of 3 years. We included 21 consecutivepatients with untreated primary HNSCC admitted to the Ear Nose and Throat Department ofAkdeniz University Medical School, Antalya, Turkey between February and October 2002. Squamous carcinoma cells in peripheral blood samples of these patients prior to surgery weredetected via a magnetic cell separation technique using anti-epithelial cell adhesion moleculeantibody, and thereafter evaluated by light microscopy with hematoxylin and eosin staining. Sevenout of 21 patients showed squamous carcinoma cells in peripheral blood samples. Patients withstage III and IV tumors were nearly 5 times more likely to show micrometastatic cells comparedwith those with stage I and II tumors [6/12 versus 1/9]. During the follow-up, 2 patients out of 7with micrometastasis had recurrences. None in the micrometastasis negative group relapsed. Wesuggest that HNSCC patients with detectable tumor cells in peripheral blood represent a subset ofpatients who should be followed up more closely for possible recurrences.

# Neoplasms, Multiple Primary

# pathology

Collision tumor-concurrent involvement of Virchow's lymph node by Hodgkin's disease and metastatic gastric adenocarcinoma. ATroisiers sign and more?.

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Saudi Medical Journal 2007; 28 (5): 778-782 (17 ref.)

**Keywords:** Hodgkin Disease-pathology; Stomach Neoplasms-pathology; Adenocarcinoma-pathology; Lymph Nodespathology; Clavicle

**Abstract:** We describe the case of a 59-year-old Caucasian male who presented to the outpatientclinic with intractable hiccups, upper abdominal pain, repeated bouts of vomiting, and stiff neck. Physical examination revealed a cachectic male with pallor, with enlarged left supraclavicular Virchow's lymph node and hepatosplenomegaly. Histologic examination of the excised lymph noderevealed simultaneous presence of 2 malignant processes, nodular sclerosing classical Hodgkin'slymphoma and metastatic adenocarcinoma. Subsequent investigations of the patient, revealed thepresence of gastric adenocarcinoma. Although factors governing the coexistence and the possibleorder of appearance of the 2 pathologies in the present case remain unknown, attempts are madeto elucidate the pathogenetic mechanisms that led to their existence.

# Nephrostomy, Percutaneous

#### methods

Ultrasound as a reliable guidance system for percutaneous nephrostomy.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 15-18 (23 ref.)

**Keywords:** Kidney-ultrasonography; Fluoroscopy

Abstract: To determine the effectiveness and safety of ultrasound as a reliable guidance systemfor percutaneous nephrostomy [PCN]. Quasi-experimental. Jinnah Postgraduate Medical Center, Karachi, Pakistan, from January 1997 to July 2005. One hundred and fifty-three PCN wereperformed in 140 patients, referred from the Department of Urology and Transplantation, JPMC.Out of 140 patients, 137 had obstructive uropathy [>1 cm dilated pelvicalyceal system] of differentetiologies. Three patients with ureteral rupture [non dilated pelvicalyceal system] underwent PCNfor urinary diversion in the surgical ICU. The technique involved a pre procedural scan, initial renalpuncture, placement of a guide wire, tract dilation and placement of 8-12 F Nephrostomy tube, entirely under ultrasound guidance. The machine used was "Just vision" or "Eccocee" with 3.5MHz variable frequency convex transducer. Effectiveness in terms of successful tube placementand safety in terms of complications were observed. Out of 153 patients there were 78 males and62 females. The minimum age of patient was 13 years while maximum age was 68 years, all[100%] patients had successful placement of PCN. Minor complications like transient grosshematuria and small perinephric collection occurred in 13 cases [8.5%] but was dealt witheffectively by conservative measures. No major complications like hemorrhage, sepsis orperiorgan damage were encountered in any of the patients. Ultrasound was found to be a rapid,effective, radiation-free, portable and safe imaging modality with minimum rate of complicationsthat could be used as a reliable guidance system for critical interventions like percutaneousnephrostomies without using fluoroscopic units.

#### **Nitrates**

# toxicity

Relation of nitrate contamination of groundwater with methaemoglobin level among infants in Gaza.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 994-1004 (19 ref.)

**Keywords:** Nitrates-adverse effects; Mathemoglobin-analysis; Cross-Sectional Studies; Water Pollution, Chemical; Breast Feeding; Bottle Feeding

**Abstract:** A descriptive, cross-sectional and analytical study was carried out in 3 areas of theGaza Strip, Palestine, in 2002, to determine the factors associated with high methaemoglobin[Met-Hb] levels in infants and the relationship with nitrate concentration in drinking water wells. Drinking water sources were likely to be the main factor for high levels of Met-Hb. Out of 338infants attending for vaccination, having supplemental feeding, use of boiled water and age 3-fondths were associated with high Met-Hb levels. The highest mean Met-Hb level was inKhan-Younis, where the highest mean nitrate concentration was recorded in drinking water. Theresults emphasize the importance of exclusive breastfeeding for infants < 6 months old, and thechoice of a suitable source of water for these infants.

#### **Nitric Oxide**

#### blood

Assessment of nitrosative oxidative stress in patients with middle cerebral artery occlusion.

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Neurosciences 2007; 12 (1): 31-34 (32 ref.)

**Keywords:** Peroxynitrous Acid-blood; Infarction, Middle Cerebral Artery; Cerebrovascular Accident;Oxidative Stress **Abstract:** To assess serum levels of nitric oxide and peroxynitrite in patients presenting withcerebral infarction resulting from middle cerebral artery occlusion, at 48 hours from stroke onset.We conducted the study in the Department of Pharmacology and in cooperation with Al-YarmoukTeaching Hospital and the Department of Medicine, College of Medicine, Al-MustansiriyaUniversity, Baghdad, Iraq from October 2003 to May 2004. Twenty patients presented withneurological deficits of middle cerebral artery occlusion, and we also enrolled 20 healthyindividuals to serve as a control group. We obtained venous blood samples from each patient after48 hours of stroke onset and each healthy individual. We determined the serum level of nitric oxideas well as peroxynitrite. Serum nitric oxide and peroxynitrite were significantly [p<0.001] higher inpatients [103.9 +/- 40.2 micro mol and 2.7 +/- 0.6 micro mol] than in healthy individuals [53.3 +/-20.7 micro mol and 2.3 +/- 0.2 micro mol]. The formation of peroxynitrite directly correlated withnitric oxide in healthy individuals [r=0.84], and patients [r=0.514]. Serum intermediate nitrogenspecies; nitric oxide and peroxynitrite were significantly increased after 48 hours of stroke onset inpatients with middle cerebral artery occlusion. The rate of peroxynitrite formation from nitric oxidewas slightly increased.

#### **Nutritional Status**

[Correlation of elderly nutritional status with cardio-vascular disease and diabetes].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 68-71 (9 ref.)

**Keywords:** Prevalence; Cross-Sectional Studies; Aged; Diabetes Mellitus-epidemiology; Body MassIndex; Heart Diseases-epidemiology; Overweight

Abstract: The effects of population aging are becoming apparent throughout the world. Diseases, such as cardiovascular disease [CVD] and diabetes, are among the most important factorsaffecting morbidity and mortality, especially in the elderly. These diseases not only result in hugeeconomic costs for treatment and care, but also results in hardship and time lost for relatives of theafflicted individuals. The association between nutritional status and disease is well known. In thepresent study, the effects of both under-nutrition and over-nutrition on the prevalence of diseaseare monitored in an urban Iranian elderly population. Thus far, no similar study has beenperformed in the Iran. This crosssectional study was conducted in Isfahan, Iran, during late 2003on 1694 elderly people [731 males, 963 females], aged 60 years and older. Subjects were randomly chosen from all urban elderly people during a door-to-door and weight and height survey. They were selected using a cluster sampling method, each containing 30 clusters. From each cluster, 58 elderly were selected at random. Using each subjects body mass index [BMI], thenutritional status was categorized as overweight [BMI greater than 25], underweight [BMI less than19] and normal [having a BMI equal to or more than 19 and equal to or less than 25]. Any illnessesknown to each subject were also recorded. Results showed that 4.7% of the subjects wereunderweight and 61.2% overweight. Women were more likely to be overweight and long periods ofwatching television increased the risk of overweight in all subjects. Being overweight wasassociated with diabetes and coronary vascular diseases, and lean people were less likely tosuffer from such diseases. This study indicates a high prevalence of overweight among the Iranianelderly population, indicating the need for improvement in nutritional status in order to reduce theprevalence of diabetes and CVD.

## Occupational Exposure

Free radical and antioxidant enzyme levels at exposure of volatile organic compounds in workers.

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Saudi Medical Journal 2007; 28 (2): 290-291 (5 ref.)

**Keywords:** Environmental Exposure; Inhalation Exposure; Organic Chemicals-adverse effects; Volatization; Antioxidants; Free Radicals

#### **Oral Health**

The effect of socio-demographic factors on the oral health knowledge, attitude and behavior in a female population.

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SDJ - Saudi Dental Journal [The] 2007; 19 (1): 27-36 (28 ref.)

**Keywords:** Health Knowledge, Attitudes, Practice; Socioeconomic Factors; Demography; Questionnaires; Pregnancy **Abstract:** The aim of this study was to examine the effect of socio-demographic variables andsmoking habits on oral health knowledge, attitude and behavior in a female population. Fivehundred twenty-eight mothers responded to a self-administered questionnaire. The results showedthat 80.6 % of the mothers believed that pregnancy had an effect on their teeth and gums, andmore than one-third believed that they lost a tooth for every pregnancy. Working women of olderage group and higher education, as well as larger parity and gravidity, indicated the latter attitudemore frequently. About 72% of the women believed that pregnancy removed calcium from theirteeth and this was a common belief among Saudi women with higher socio-economic status. Two-thirds of the respondents were aware that during pregnancy, their oral health could affect thefetal health and growth, but more than half did not know that tetracycline could affect their baby'steeth particularly among women with low education. In addition, more than half believed thatdental visit was needed only when in pain, while 17.3% considered such visit not a necessityparticularly those with low education but high parity and gravidity. Relative to mothers' behavior,65.6% of the respondents took calcium and milk and 65.8% did not change their oral hygienehabits during pregnancy. Most of the women believed that there were "negative effects" ofpregnancy on their oral health but nevertheless did not demonstrate adequate and properconcomitant oral hygiene practice and positive attitudes toward dental visits.

# **Oral Hygiene**

#### methods

#### Self-reported oral hygiene habits and oral health problems of Kuwaiti adults.

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Medical Principles and Practice 2007; 16 (1): 15-21 (34 ref.)

**Keywords:** Toothbrushing-methods; Mouth Diseases-epidemiology; Questionnaires; Cross-SectionalStudies; Sex Characteristics; Adult

**Abstract:** The aims of this study were to examine self-reported oral hygiene habits and oral healthproblems of a sample of adult Kuwaitis. A self-administered, anonymous, structured questionnairewas distributed to 2,400 adult Kuwaiti nationals from all 6 governates of Kuwait assessingsocio-demographic variables, oral hygiene habits, and oral health problems. Of the 2,400questionnaires, 1,925 [80.25%] responded. Of these, 62% reported brushing their teeth at leasttwice daily, while daily use of dental floss was uncommon [11.8%]. Adequate toothbrushing habitswere significantly associated with female gender, educational level, non-smoking status, andhistory of recent preventive dental visits [p = 0.001]. The majority of subjects reported multiple oralhealth problems [64.7% with 2 or more and 41.8% with 3 or more]. Factors associated withmultiple oral health complaints included younger age, smoking, not having a recent preventivedental visit, and brushing the teeth less than twice daily. Less than two-thirds of the sampled adultKuwaitis followed the recommended toothbrushing frequency of twice daily or more, and themajority of subjects have not had a preventive dental visit in the previous 6 months. Furthermore,most subjects reported multiple oral health problems that are mostly preventable through adequateoral hygiene habits and regular preventive dental visits.

# **Orbital Neoplasms**

#### Orbital tumor presented systemic sarcoidosis.

Aktas, Hafize; Ozsoy, Arzu; Tokoglu, Figen; Toprak, Ugur

E-mail:ugur.toprak@superonline.com

Neurosciences 2007; 12 (1): 71-72 (6 ref.)

Keywords: Sarcoidosis; Comorbidity; Tomography, X-Ray Computed; Magnetic ResonanceImaging

**Abstract:** Sarcoidosis is a granulomatous, multisystemic disorder of unknown origin usuallyaffecting young Black-American adults. Bilateral hilar lymphadenopathy and skin or eyelid lesionsare the most common symptoms noted. Except for lacrimal gland enlargement, orbital involvementwith sarcoidosis is rare and is usually unilateral when it occurs. The aim of this article is to reportan isolated case of sarcoidosis that initially presented as an orbital tumor, and to document the CTand MR appearance of the lesions.

## complications

Invasive squamous cell carcinoma of the eyes in patients with epidermodysplasia verruciformis.

Sharquie, Khalifa E.; Al Meshhadani, Sabeeh A.; Al Nuaimy, Adil A.

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Iraqi Board for Medical Specializations - Department of Dermatology and Venereology

**Saudi Medical Journal** 2007; 28 (5): 787-790 (14 ref.)

**Keywords:** Carcinoma, Squamous Cell-complications; Epidermodysplasia Verruciformis-complications; Carcinoma, Squamous Cell-surgery; Carcinoma, Basal Cell-complications; Eye Enucleation

**Abstract:** We described 3 male patients with epidermodysplasia verruciformis seen in theDepartment of Dermatology and Venereology, Baghdad Teaching Hospital; their ages were 25, 30 and 34 years subsequently. They developed frequent multiple basal and squamous cellcarcinoma, all of them had periorbital squamous cell carcinoma that invaded the orbit and endedwith enucleation of their eyes. All available therapeutic measures failed to inhibit the progressiveness of these tumors. Great awareness and early management must be performedregarding any periorbital lesion in epidermodysplasia verruciformis patients.

## Organ Transplantation

# psychology

Current status of organ transplantation [Cultural, Ethical, Psychological and Trading Dimensions].

Akram, M.

King Edward Medical University - Department of Physiology

Annals of King Edward Medical College 2007; 13 (1): 142-144 (12 ref.)

Keywords: Organ Transplantation-ethics; Organ Transplantation-economics; Cadaver; Brain Death; Heart Arrest; Islam

## **Orthodontics**

#### instrumentation

Simple orthodontic tooth aligner.

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King Saud University - College of Dentistry - Department of Preventive Dental Sciences

SDJ - Saudi Dental Journal [The] 2007; 19 (1): 15-20 (5 ref.)

Keywords: Tooth Abnormalities; Dental Arch; Treatment Outcome; Crowding; Malocclusion

**Abstract:** The aim of this article was to introduce a simple and fast method for creating teethalignment in the anterior segment of dental arch. Biolon transparent hard plate material of 1 mmthickness was used. The description and the outcome of the two treated cases with Biolon plateare reported in this article. The use of the present method proved to be effective in creating minortooth movement and teeth alignment in a rather short treatment time.

# **Osteoporosis**

#### epidemiology

High prevalence of osteoporosis in Saudi men.

El Desouki, Mahmoud I.; Sulimani, Riad A.

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King Saud University - King Khalid University Hospital - Nuclear Medicine

**Saudi Medical Journal** 2007; 28 (5): 774-777 (40 ref.)

Keywords: Prevalence

**Abstract:** To determine the prevalence of osteoporosis in healthy Saudi men. We randomlyrecruited 429 Saudi men from the community. The recruited Saudi men were subjected to aninterview to reveal their lifestyle parameters, calcium intake and level of activity. Bone densitometrywas assessed at lumbar spine [L1-4] and the femoral neck. The dual x-ray absorptiometry [DXA]scan was carried out in the Nuclear Medicine at King Khalid University Hospital, Riyadh, SaudiArabia from September 2002 to December 2004. The World Health Organization definition of lowbone mineral density was used. Poor oral calcium intake and low level of daily activity were noted. The overall prevalence of osteopenia for the lumbar spine in the whole group was 35.7% whileosteoporosis was present in 21.4% of the subjects. In the femoral neck, osteopenia was noted in38% and osteoporosis in 11.4%. When either lumbar spine or femoral neck osteoporosis is usedfor diagnosis, the prevalence of osteoporosis rises to 23.5%. Within the whole group, osteopeniaand osteoporosis were more common in individuals above the age of 50 than those below 50years old. Low bone mineral density occurs with high frequency in Saudi men. Lumbar spineappears to be affected to a higher degree. The reason for the high prevalence of osteoporosis inSaudi men is unclear. Possible underlying causes include nutritional, life style and geneticfactors.

#### **Oxidative Stress**

Relation of antioxidants and acute-phase reactants in patients receiving hemodialysis.

Samadian, Fariba; Lessan Pezeshki, Mahboob; Mahdavi Mazdeh, Mitra; Kadkhodaie, Mehri; Seifi, Sepideh; Ahmadi,Farrokhlagha

Shaheed Beheshti Medical University - Shaheed Labbafinejad Medical Center - Department of Nephrology

IJKD - Iranian Journal of Kidney Diseases 2007; 1 (1): 38-42 (24 ref.)

**Keywords:** Renal Dialysis; Cross-Sectional Studies; C-Reactive Protein; Acute-Phase Proteins; Ferritins; Glutathione; Antioxidants

**Abstract:** To investigate the oxidative stress and its association with antioxidants in patients onhemodialysis, we evaluated the levels of albumin, C-reactive protein [CRP], ferritin, vitamin E, glutathione, and total antioxidant capacity in these patients. In a cross-sectional study, we enrolled25 patients on maintenance hemodialysis and measured the inflammatory and oxidative stressindicators consisting of the plasma concentrations of glutathione, vitamin E, and total antioxidantcapacity. The acute-phase inflammatory response was assessed by determining the serum levelsof CRP and albumin as well as the plasma level of ferritin. Antioxidants and acute-phase reactantsin men and women and their association with age and their correlations with each other wereanalyzed. The mean age of the patients was 53.6 +/-14.1 years [range, 29 to 70 years]. They hadbeen on hemodialysis for a mean duration of 4.66 +/- 5.08 years. There were no association of sexor age with the levels of antioxidants and acute-phase reactants. Plasma level of glutathionesignificantly correlated with CRP [r = 0.48; P = .01] and serum albumin [r = 0.42; P = .04]. Durationof dialysis did not correlate with the antioxidants or acute-phase reactants. Although it isreasonable to see an association between acute-phase reactants and levels of antioxidants inpatients on hemodialysis, we failed to show such a relation. It is recommended that otherbiomarkers of oxidative stress and their relation in patients with kidney failure be investigated.

# Panniculitis, Peritoneal

# radiography

Mesenteric panniculitis. Imaging of a rare cause of chronic abdominal pain.

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King Khalid University Hospital - Department of Radiology

Saudi Medical Journal 2007; 28 (2): 276-278 (9 ref.)

**Keywords:** Panniculitis, Peritoneal-diagnosis; Tomography, X-Ray Computed; Magnetic ResonanceImaging; Mesentry

**Abstract:** We report a case of mesenteric panniculitis. This rare and poorly-known disease ischaracterized by a nonspecific inflammatory process involving the adipose tissue of the mesentery. This case illustrates its computerized tomographic and magnetic resonance imaging features and the value of imaging in differentiating it from other mesenteric diseases and thus, avoidingunnecessary surgery.

## Parathyroid Hormone

## blood

Does parathyroid hormone affect erythropoietin therapy in dialysis patients?.

Al Hilali, Nabieh; Al Humoud, Hani; Ninan, Vadakethu T.; Nampoory, Mangalathillam R.N.; Puliyclil, Mini A.; Johny.Kaivilavil V.

Mubarak Al-Kabeer Hospital - Department of Medicine

Medical Principles and Practice 2007; 16 (1): 63-67 (22 ref.)

**Keywords:** Hyperparathyroidism; Anemia-drug therapy; Erythropoietin-therapeutic uses; Renal Dialysis; Peritoneal Dialysis. Continuous Ambulatory

Abstract: The objective of this study was to assess the response to recombinant humanerythropoietin [rHuEPO] during treatment of anemia in dialysis patients with hyperparathyroidism. A total of 118 patients with stage 5 renal failure on dialysis therapy were selected for this study. Anemia was treated with rHuEPO. Laboratory data for each patient included intact parathyroidhormone [iPTH], hemoglobin [Hb], hematocrit [Hct], blood urea nitrogen, serum creatinine, calcium, phosphate, and alkaline phosphatase. Patients with iPTH >32 consideredhyperparathyroid. Erythropoietin resistance index [ERI] was expressed as the ratio of weeklyrHuEPO dose/Hct level. Of the 118 patients, 83 [70.3%] were on hemodialysis [HD] and 35[29.7%] were on continuous ambulatory peritoneal dialysis [CAPD]. Sixty-three patients [64.3%] with iPTH >32 pmol/l had Hb <11 g/dl, while 34 [54.8%] with iPTH <32 had Hb >11 g/dl [p = 04]. Thirty-three [56%] patients with iPTH >32 pmol/l had hemocrit <33%, while 38 [61.3%] with iPTH<32 had hemocrit <33% [p = 0.4]. The median value of weekly rHuEPO dose in HD patients[12,000 units] was significantly higher in comparison with CAPD patients [6,000 units; p < 0.0001].ERI was significantly higher in HD than CAPD patients with iPTH <16 pmol/l [p = 0002] as well aswith patients with 16-32 pmol/l [p = 0.012]. CAPD patients showed a reduced requirement forrHuEPO and better control of anemia compared with HD patients. ERI was also lower in CAPDthan in HD patients. Hyperparathyroidism is a parameter predictive of rHuEPOhyporesponsiveness in dialysis patients.

#### **Patients**

## psychology

The new subjective medicine: understanding the patient's worry improves shared decision making and increases compliance.

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Medical Principles and Practice 2007; 16 (1): 79-80 (7 ref.)

Keywords: Patient Compliance-psychology; Anxiety-psychology; Decision Making

#### **Penicillin Resistance**

### Penicillin-resistant Streptococcus pneumoniae in Iran.

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Shiraz University of Medical Sciences - School of Medicine - Department of Medical Microbiology

Medical Principles and Practice 2007; 16 (1): 29-33 (28 ref.)

**Keywords:** Anti-Bacterial Agents-pharmacology; Pneumococcal Infections-microbiology; StreptococcalPneumoniae-drug effects

Abstract: To determine the prevalence of penicillin-resistant Streptococcus pneumoniae isolatedfrom patients with community-acquired pneumococcal infections. A broth dilution method was used to determine the minimum inhibitory concentration [MIC] of penicillin and other commonly usedantibiotics. 115 heavy growth or pure culture of S. pneumoniae strains were isolated from: blood10, cerebrospinal fluid [CSF] 15, ear 5, eye 12, purulent rhinosinusitis 48, sputum 22, and pleuralfluid 3. Of the 115 pneumococcoal isolates, 76 [66.1%] were sensitive to penicillin while theremaining 39 [33.9%] were nonsusceptible [15.6% resistant and 18.3% intermediately resistant].Among the 25 pneumococcal isolates from sterile sites [blood 15, CSF 10], 15 [60%] werepenicillin-resistant whereas among the 90 isolates from nonsterile sites, 24 [26.7%] were resistantto penicillin [<0.004]. The MIC values of antibiotics tested for S. pneumoniae were: penicillin0.008-4 micro g/ml, chloramphenicol 0.25-32 micro g/ml, erythromycin 0.008-128 micro g/ml, tetracycline 0.06-64 micro g/ml, vancomycin 0.03-0.5 micro g/ml, azithromycin 0.016-128 microg/ml, ciprofloxacin 0.006-8 micro g/ml, cefotaxime 0.007-2 micro g/ml, and ceftriaxone 0.016-12micro g/ml. Approximately one third of S. pneumoniae isolated from the clinical specimens werenonsusceptible to penicillin in this region.

# **Peritoneal Dialysis**

## adverse effects

## Fungal peritonitis in Iranian children on continuous ambulatory peritoneal dialysis.

Hooman, Nakysa; Madani, Abbas; Dorcheh, Mostafa Sharifian; Mahdavi, Ali; Derakhshan, Ali; Gheisari, Alaleh;Esfahani, Seyed Taher; Otoukesh, Hassan; Mohkam, Masoumeh; Falahzadeh, Mohammad Hossein; Al Hashemi,Ghamar Hosseini; Azir, Afshin; Merikhi, Alireza; Gholikhani, Fatemeh; Latif, Elahe; Karimi, Shirin; Zakavat, Talieh;Mohseni, Parvin; Ataei, Neamatollah; Nickavar, Azar; Basiratnia, Mitra

Iran University of Medical Sciences - Ali Asghar Children Hospital - Division of Pediatric Nephrology

IJKD - Iranian Journal of Kidney Diseases 2007; 1 (1): 29-33 (27 ref.)

Keywords: Risk Factors; Peritonitis-etiology; Peritonitis-microbiology; Retrospective Studies

**Abstract:** Fungal peritonitis [FP], causing catheter obstruction, dialysis failure, and peritonealdysfunction, is a rare but serious complication of peritoneal dialysis. In this study, the frequencyand risk factors of FP are evaluated in children who underwent peritoneal dialysis. A retrospectivemulticenter study was performed at the 5 pediatric peritoneal dialysis centers in Iran from 1971 to2006, and FP episodes among 93 children were reviewed. Risk ratios were calculated for theclinical and demographic variables to determine the risk factors of FP. Ninety-three children aged39 months on average were included in study. Sixteen out of 155 episodes of peritonitis were fungiinfections, all by Candida albicans. The risk of FP was higher in those with relapsing bacterialperitonitis [P = .009]. Also, all of the patients had received antibiotics within the 1 month prior to thedevelopment of FP. Catheters were removed in all patients after 1 to 7 days of developing FP. Sixout of 12 patients had catheter obstruction and peritoneal loss after the treatment and 5 died due toinfection. Fungal peritonitis, accompanied by high morbidity and mortality in children should bereduced by prevention of bacterial peritonitis. Early removal of catheter after recognition of FPshould be considered.

#### **Peritonitis**

# etiology

## Acute lupus peritonitis associated with massive ascites.

Habib Agahi, Z.; Nazarinia, M.A.; Aflaki, E.; Zahedi, K.L.; Shenavandeh, S.; Jahanbani, M.R.; Rajaee, A. Shiraz University of Medical Sciences - School of Medicine - Department of Internal Medicine

IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 217-219 (11 ref.)

**Keywords:** Peritonitis-drug therapy; Lupus Erythematosus, Systemic-complications; Ascites-etiology; Prednisolone-therapeutic uses

**Abstract:** Systemic lupus erythematosus [SLE] is an autoimmune disease with multiple organinvolvements and abdominal pain as the most common gastrointestinal symptom. Herein, wedescribe a case of SLE presented with abdominal pain and massive ascites that had a goodresponse to the high dose of prednisolone.

#### Personal Satisfaction

# Students' satisfaction with their health and social care educational programmes: qualitative findings from the UK.

El Ansari, W.; Davis, T.; Pearson, D.

University of Gloucestershire - Faculty of Sport, Health and Social Care

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 925-938 (57 ref.)

Keywords: Delivery of Health Care; Students; Health Surveys; Questionnaires; School HealthServices

**Abstract:** This article reports a qualitative assessment of students' satisfaction with their healthand social care educational programmes. The responses of 66 students who completed anopen-ended "comments" section at the end of a survey to assess students' satisfaction were codedand analysed using the constant comparative method. Respondents commented on: courseorganization, module organization, workload, module content, course delivery, personneldelivering modules, course workload and assessment, and resources available. The findingssuggest that 3 interrelated factors are imperative for "educationally effective" modules: 1] moduleadministration, content and assessment; 2] module teams and university resources; and 3] modulerelevance.

#### **Pilonidal Sinus**

## surgery

# Surgical treatment of chronic sacrococcygeal pilonidal sinus. Open method versus primary closure.

Bhushan, Theophilus V.; Kareem, Tayeb S.

J.N. Medical College

Saudi Medical Journal 2007; 28 (5): 815 (3 ref.)

Keywords: Surgical Procedures, Operative-methods; Chronic Disease

# **Pituitary Gland**

#### radiography

#### HRCT of pituitary fossa correlation of clinical and CT findings.

Shahid, K.B.; Iqbal, N.; Siddiqui, K.J.; Yaqoob, J.; Aslam, I.; Rafiq, Z.

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Fatima Memorial Hospital - Radiology department

Annals of King Edward Medical College 2007; 13 (1): 48-50 (7 ref.)

**Keywords:** Pituitary Neoplasms-radiography; Tomography, X-Ray Computed; Signs and Symptoms; Adenoma-radiography

**Abstract:** Purpose of the study was to correlate the clinical features with HRCT [High ResolutionComputed Tomography] findings of pituitary fossa. Findings in a series of 30 patients, [22 femaleand 8 male] who underwent CT scanning of the pituitary fossa are reported majority of them hadclinical suspicion of prolactinoma rest have other clinical signs of pituitary disease. Results showed13 [out of 22] female patients with positive scan and 4 [out of 8] male patients with positive scan. Inconclusion, this study conforms the usefulness of high resolution CT scanning of the sellar regionin a specific settings.

## Placenta Accreta

## diagnosis

## Placenta percreta with bladder invasion. A plea for multidisciplinary approach.

Shawish, Fahmy M.I.; Hammad, Fayez T.; Kazim, Essa M.

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Dubai Hospital - Department of Urology, Level 9 West Saudi Medical Journal 2007; 28 (1): 139-141 (8 ref.)

Keywords: Urinary Bladder Diseases-diagnosis; Urinary Bladder Diseases-etiology; Magnetic ResonanceImaging;

Pregnancy

**Abstract:** Placenta previa percreta with the urinary bladder invasion is a rare but potentially lethalcondition. It has an increasing clinical significance due to its association with previous cesareansections and uterine curettage. Herein, we report on a patient with placenta percreta and bladderinvasion, who presented with hematuria and in whom delivery

was delayed to almost full termhighlighting the potential catastrophic results and the need for a multidisciplinary approach with theneed to involve surgeons who are familiar with vascular and urologic surgery. We also present anelegant MRI of placenta percreta invading the urinary bladder, which shows that MRI is potentiallyan excellent diagnostic modality in this difficult condition.

## **Plasmacytoma**

#### metabolism

Amyloid-depositing plasmacytoma of cervical spine masquerades as a granulomatous inflammatory reaction.

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Saudi Medical Journal 2007; 28 (1): 147-149 (5 ref.)

**Keywords:** Plasmacytoma-diagnosis; Amyloid-metabolism; Cervical Vertebrae; Granuloma-diagnosis; Spinal Neoplasms-metabolism; Spinal Neoplasms-diagnosis

#### Pleural Effusion

## diagnosis

Exudative pleural effusion: effectiveness of pleural fluid analysis and pleural biopsy.

Heidari, B.; Bijani, K.; Eissazadeh, M.; Heidari, P.

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Babol University of Medical Sciences - Shahid Beheshti Hospital - Department of Medicine

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 765-773 (25 ref.)

**Keywords:** Pleural Effusion-etiology; Pleural Effusion-analysis; Sensitivity and Specificity; Biopsy-utilization; Bronchoalveolar Lavage Fluid-analysis

**Abstract:** The study compared pleural fluid analysis and pleural biopsy in the diagnosis of 100patients with exudative pleural effusion [PE] in Babol, Islamic Republic of Iran. Tuberculouspleurisy and malignant pleural effusion were confirmed by the identification of acid-fast bacilli frombody fluids or tumour cells from tissue specimens. Malignant diseases and tuberculosis were thecauses of exudative PE in 43% and 33% of patients respectively. The diagnostic sensitivity ofpleural biopsy in patients with tuberculous PE and malignant PE was 70% and 54%, and thediagnostic sensitivity of pleural fluid analysis was 33% and 70% respectively. Combined pleuralbiopsy and pleural fluid analysis were positive in 97% of tuberculous PE cases and 91% ofmalignant PE.

## Pregnancy

# immunology

Number, maturity and phagocytic activity of neutrophils in the three trimesters of pregnancy.

Pramanik, S.S.; Pramanik, T.; Mondal, S.C.; Chanda, R.

Jadavpur University - Department of Pharmaceutical Technology

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 862-867 (26 ref.)

**Keywords:** Neutrophils; Phagocytosis; Hydrocortisone; Estrogens; Pregnancy Trimesters

**Abstract:** Specific immunity decreases markedly in pregnancy. This study was designed todetermine whether the non-specific immunity mediated by neutrophils plays any role in coping withthis immunosuppressed condition. The number of leukocytes and neutrophils, especially thenumber of young band neutrophils, increased gradually with the advancement of pregnancy. Thephagocytic activity of neutrophils increased in the 2nd and 3rd trimesters. Neutrophils maycompensate in part for the weakened specific immunity of pregnant womena.

## **Pregnancy Outcome**

Maternal and fetal outcome of prelabor rupture of membranes at term [PROM] - a trial of 24 hours of expectant management.

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Services Institute of Medical Sciences - Shalamar Hospital - Department of Obstetrics and Gynaecology

Annals of King Edward Medical College 2007; 13 (1): 98-100 (14 ref.)

**Keywords:** Fetal Membranes, Premature Rupture; Prospective Studies; Chorioamnionitis; Delivery, Obstetric; Cesarean Section; Time Factors; Apgar Score; Intensive Care Units, Neonatal; Labor Induced

**Abstract:** To find out the maternal and fetal outcome of 24 hours of expectant management. Prospective descriptive study. Labor room of obstetrics and gynae unit 1, services hospital Lahore. Participants were 100 women presenting with prelabor rupture of membranes at term, 50 nulliparaand 50 multipara with cephalic presentation and no

contraindication to vaginal delivery. All theparticipants of the study group were subjected to conservative management for 24 hours underantibiotic cover of inj cefataxime followed by induction if labor did not start spontaneously in 24hours or if signs of chorioamnionitis developed at any stage. Data was collected on a Performa, which was then entered on attabase IV and analyzed in percentages on spss statistical package. The magnitude of PROM in gynae unit 1 services hospital in the year 2002 was 7.008%. 84%patients went into spontaneous labor, 2% patients developed signs of chorioamnionitis, and 14%patient did not enter into spontaneous labor after 24 hours of PROM. 94% patients with PROMdelivered vaginally total of 6 c/s were carried out, 2% c/s due to fetal distress, 2% for failedinduction and 2% for fetal distress after induction. Postnatal complications included chorioamnionitis 2%, PPH 7%, puerperal pyrexia 4%, wound infection 3%. and DVT in 1%patients. Neonatal complications included admission to ICU in 8% babies and neonatal infection inl%. There was no fetal mortality. Conservative approach did not negatively affect fetal or maternaloutcomes.

#### Neonatal outcome in preterm Cesarean section vs preterm Vaginal delivery.

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FMH College of Medicine and Dentistry - Department of Obstetrics and Gynecolog

Annals of King Edward Medical College 2007; 13 (1): 62-64 (24 ref.)

**Keywords:** Premature Birth; Cesarean Section; Infant, Premature; Apgar Score; Delivery, Obstetric; Respiratory Distress Syndrome, Newborn

**Abstract:** To compare neonatal outcome in preterm caesarean section vs. preterm vaginaldelivery. Retrospective comparative study from January 2006 to December 2006 at FatimaMemorial Hospital, Lahore All booked and unbooked patients who delivered from January 2006 to December 2006 were included in the study. The decision of spontaneous vaginal delivery orcaesarean section made based on obstetric indications. All the data recorded and subsequentlyanalyzed. Out of 6570 total deliveries during one year, 673 [10.2%] patients delivered pre-term,265 by C-Sections and 408 by Spontaneous vaginal deliveries. Preterm deliveries done, at 34-37,32-34, 28-32 gestational weeks were 47.1%, 28.9% and 23.9% respectively. The commonestindications of pre-term Caesarean Sections were tetal distress [6.7%], intra-uterine growthrestriction [27.1%] and severe pre-eclampsia / eclampsia [26.4]. Neonatal outcome in terms ofbaby weight and APGAR scores were not significantly different between the two groups. Neonatalsurvival was 81.1% who delivered by pre-term Caesarean section compared to 77.9% whodelivered by pre-term vaginal deliveries. Sepsis was the main cause of neonatal mortality. Thisstudy shows that the neonatal outcome of pre-term infants when delivered by Caesarean sections hows no significant difference as compared to the preterm infants delivered by vaginal route. Decision of caesarean sections should be based on obstetric indication only.

# Pregnancy, Ectopic

#### etiology

#### Ectopic pregnancy after bilateral salpingectomy.

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McGill University Women's Pavilion - Department of Obstetrics and Gynecology

Saudi Medical Journal 2007; 28 (5): 794-797 (17 ref.)

Keywords: Fallopian Tubes-surgery; Postoperative Complications; Pregnancy; Recurrence

**Abstract:** Ectopic pregnancy is a life threatening condition and is a major event in a woman'sreproductive life. We report herein an unusual case of repeated ectopic pregnancy even after theexcision of both fallopian tubes with a deleterious consequences and a near miss. This caseteaches us a lesson not to forget ectopic pregnancy. The lady in this report underwent in vitrofertilization treatment cycle due to absence of both fallopian tubes as consequence of previousectopic pregnancy and a hydrosalpinx; she conceived successfully but unfortunately the pregnancywas another ectopic pregnancy.

# ultrasonography

#### Sonographic evaluation of ectopic Pregnancies.

Asghar, M.

Gomal Medical College - Radiology Department

Annals of King Edward Medical College 2007; 13 (1): 129-132 (22 ref.)

**Keywords:** Pregnancy, Ectopic-diagnosis; Ultrasonography; Pregnancy, Ectopic-etiology; Age Factors; Pregnancy Complications

**Abstract:** This study was carried out in the Radiology Department, District Head Quarter TeachingHospital [D. H. Qr] and Dera X-Rays / Ultrasound Clinic, Dera Ismail Khan, NWFP, by performingabdominal and pelvic ultrasonography of all the suspected patients and endo-vaginal of selectedcases by comparing with other modalities used for the diagnosis of pregnancy especially theectopic. Eighty-five percent cases of ectopic pregnancies were diagnosed by abdominal / pelvicultrasonography, while this ratio was increased up to 95% by endo-vaginal ultrasonography inthose cases where the abdominal sonography was not helpful for accurate diagnosis. The studyconcluded that increased availability of ultrasonography leads to improve quality in the detection ofectopic pregnancy. It is necessary to screen all the patients with first trimester cramping andbleeding by ultrasonography.

# Pregnancy, Tubal

Spontaneous ruptured and intact bilateral tubal ectopic pregnancy.

Al Quraan, G.A.; Al Taani, M.I.; Nusair, B.M.; El Masri, A.; Arafat, M.R.; Khateeb, M.M. Royal Medical Services

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 972-974 (15 ref.)

Keywords: Pregnancy, Ectopic; Pregnancy Complications

## **Premature Birth**

[Risk factors for recurrent preterm delivery in three university hospitals].

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Tehran University of Medical Sciences - Department of Obstetrics and Gynacology **Tehran University Medical Journal [TUMJ]** 2007; 65 (2): 24-29 (17 ref.)

Keywords: Risk Factors; Prospective Studies; Uterus-abnormalities; Uterus-blood supply; Recurrence

Abstract: Preterm labor is defined as delivery before 37 weeks of gestation. Recurrence ofpreterm labor in future pregnancies is 6-8%. History of preterm labor is a strong risk factor forfuture preterm labor. Preterm labor is the leading cause of neonatal mortality in developedcountries, but permanent morbidity in these premature neonates has many side effects for thenewborn as well as their family members and society. For this reason we conducted a survey toidentify risk factors for recurrent preterm delivery among primiparous women with previous pretermdelivery. This prospective case-control study included patients from three university hospitals,namely Imam Khomeini, Shariati and Mirza Koochakkhan Hospitals, all in Tehran, Iran. Subjects including 539 primiparous women who delivered preterm [22-36 weeks], were divided into twogroups: 47 had a second preterm delivery [study group] and 492 had first preterm delivery [controlgroup]. Exclusion criteria were induced preterm delivery due to medical indications in mother andprimigravid. Data collection and analysis was performed using SPSS 10 and t-test and chi[2] testwere used to analyze the significance of the results. From a total of 6,537 deliveries, we found 539cases of preterm delivery, among which 47 cases were identified as recurrent preterm delivery. The control group was composed of 492 deliveries. The recurrence of preterm delivery was 8.7%. Uterine anomaly, cardiovascular, renal and thyroid disease in mother and blood group A had asignificant correlation with recurrent preterm delivery. Expectant mothers with uterine anomalies, cardiovascular, renal or thyroid diseases or group A blood type should receive extra care, observation and instructions in order to limit the risk of preterm delivery and its subsequenteffects.

## etiology

Risk factors associated with preterm birth in the Gaza Strip: hospital-based case-control study.

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Ministry of Health

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1132-1141 (23 ref.)

Keywords: Risk Factors; Case-Control Studies; Age Factors; Questionnaires

**Abstract:** This study aimed to assess the main maternal risk factors associated with preterm birthin the Gaza Strip. A hospital-based case-control study was carried out at El-Shifa and Khan-Younishospitals with 200 women with preterm births and 200 control women. Significant risk factors forpreterm birth were: maternal age >/= 35 years, being a refugee, inadequate antenatal care, failureto gain adequate weight during pregnancy and previous history of preterm birth. Other significantrisk factors included: short stature, short interval between the last 2 pregnancies, presence ofcongenital gynaecological abnormalities, previous history of caesarean delivery and previoushistory of stillbirth.

#### **Prenatal Care**

#### utilization

Utilization of antenatal care services by Sudanese women in their reproductive age.

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Saudi Medical Journal 2007; 28 (5): 737-743 (42 ref.)

Keywords: Rural Population; Urban Population; Vaccination; Tetanus Toxoid; Women

Abstract: To describe the current antenatal care situation in Sudan with regard to routineutilization of antenatal health care services and application of tetanus toxoid [TT] vaccination inurban and rural areas. The study was conducted in Khartoum State, Sudan, between August andDecember 2002. Interviews were held among a representative sample of 400 married women aged15-49 years from both urban and rural localities. Utilization of antenatal care and TT vaccine forpregnant women were used as dependent variables while socio-economic status, place ofresident, women's education, quality of care and walk-time were applied as independent variables. Utilization of routine antenatal health care services was approximately 5 times and application of TT-vaccination was 3.7 times higher in urban women as compared to women in rural areas. Ahigher quality of care [odds-ratio 5.8] and shorter walk-

time [odds-ratio 3.1] were significantlyassociated with more utilization of routine antenatal care services. Mother's education showed anearly significant positive relationship both with the use of routine antenatal health care service[odds-ratio 2.1]. Results suggest that public health care policy should focus on 1. developing morehigh quality primary health care facilities for routine antenatal care and TT-vaccination in ruralareas, and 2. development and implementation of mass-media and community education forpregnant women on the need for routine antenatal care and TT-vaccination.

# **Priapism**

## etiology

Outcome of Priapism after early and late management.

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Annals of King Edward Medical College 2007; 13 (1): 105-107 (19 ref.)

Keywords: Priapism-complications; Priapism-therapy; Time Factors; Outcome Assessment [Health Care]

**Abstract:** To assess the outcome of patients presenting with priapism during the last six years.Record of the patients presenting with priapism was evaluated retrospectively. Followingparameters were assessed; etiology, duration, management, complications and final outcome.Fifteen patients with mean age of twenty seven years presented from Jan 2000 to Dec. 2006.Etiological factors were intracavernosal injection of papavarine 6 [40%]. hakeem medication 4[26.7%], thalasemia 2 [13.3%] and idiopathic in 3[20%] patients. Mean duration of priapism was80.8 hours. Initial conservative management was successful in 7 [46.7%] patients. Non responderswere treated with distal cavernosospongiousus shunt. Out of eight, three [37.5%] patientsresponded and remaining four ended up with corporeal fibrosis and erectile dysfunction[ED]. Onepatient develop urethrocutaneous fistula. Intracavernosal injection of papaverine and hakeemmedicines are common etiological factors. Patient usually present late because of embarrassment.Outcome of management depends upon duration of priapism.

# **Prostate-Specific Antigen**

#### blood

Normal serum prostate specific antigen levels in men in Yasuj province, Islamic Republic of Iran. Mehrabi, S.; Shirhzi, H.R. Ghafarian; Rasti, M.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1190-1194 (14 ref.)

**Keywords:** Prostate-Specific Antigen-analysis; Prostatic Hyperplasia-blood; Cross-Sectional Studies; Prostatic Neoplasms

**Abstract:** We assessed serum prostate specific antigen [PSA] levels in 650 men over 40 yearsreferred to 3 Yasuj hospitals for blood cell count in 2003/2004. Men affected by prostate cancer, prostatitis or transurethral instrumentation were excluded. PSA was determined by animmunoassay technique. PSA levels in different age groups were: 40-49-year-olds-mean = 0.7ng/dL, normal = 0-1.35 ng/dL; 50-59-year-olds-mean = 0.9 ng/dL, normal = 0-1.85 ng/dL;60-69-year-olds-mean = 1.6 ng/dL, normal = 0-3.2 ng/dL; >/= 70-years-olds-mean = 2.3 ng/dL, normal = 0-4.4 ng/dL. Normal PSA levels in our society were lower than those in the UnitedStates, Europe and Japan.

#### Serum prostate-specific antigen levels in Middle Eastern men with subclinical prostatitis.

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Medical Principles and Practice 2007; 16 (1): 53-58 (22 ref.)

Keywords: Prostatitis-blood; Prostati Neoplasms

Abstract: To investigate the influence of subclinical or histologically diagnosed prostatitis onserum prostate-specific antigen [PSA] in patients investigated for prostatic disease in Kuwait.Serum PSA was assayed in patients investigated for prostatic disease in Mubarak Al-KabeerHospital, Kuwait, between December 2002 and December 2004. These included patientsundergoing transrectal ultrasound with needle biopsy of the prostate gland and those who weretreated with transurethral resection of the prostate or retropubic prostatectomy. The tissue wasevaluated for prostatitis as well as the underlying disease, and the type and severity of prostatitiswere compared with levels of serum PSA. Of the 331 tissue specimens, 18 [5.4%] did not showprostatitis, while 233 [70.4%] with benign prostate and 80 [24.2%] with malignant prostate diseasesehowed prostatitis. Of 270 men with known serum PSA levels, 198 and 72 had benign andmalignant prostate disease, respectively. Of the 198, 77 [41%] with benign prostate disease andprostatitis and of the 72, 52 [76%] with malignant prostate disease and prostatitis had serum PSAlevels >10 ng/ml. The data showed that although raised serum PSA is more commonly associated with prostate cancer, subclinical prostatitis is a significant source of high serum PSA in over 40% of men in Kuwait. That local factors may obscure the usefulness of serum PSA as a screening toolsuggests the need for a locally applicable paradigm to identify prostate cancer.

# Prostatic Hyperplasia

## surgery

Laser prostatectomy versus transurethral resection of prostate in the treatment of benign prostatic hyperplasia.

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Saudi Medical Journal 2007; 28 (1): 68-72 (21 ref.)

Keywords: Transurethral Resection of Prostate; Laser Surgery

**Abstract:** To assess the effectiveness of laser-prostatectomy compared with transurethralresection of prostate [TURP]. This randomized clinical trial with one year follow-up, was conductedon 87 patients with benign prostatic hyperplasia [BPH] at Shohada-e-Tajrish Hospital, Tehran,Iran, from 1999 to 2003. Fifty-two patients underwent TURP and 35 patients were treated bynon-contact laser prostatectomy using ND: YAG laser at 40-60 watt power and 13000-29000 julesenergy settings. Comparing variables of urinary maximum flow and residue, changes of urinevolume and severity of symptoms during consequent periods of 3, 6 and 12 months after theoperation in 3 groups revealed that differences in maximum urinary flow changes were significantonly in the sixth month [p<0.05]. Also, changes in the severity of symptoms before and after theoperation showed more decrease in the TURP group during all 3 periods of follow-up [p=0.01]. Inthe laser prostatectomy group duration of operation [p=0.01], amount of fluid used during theoperation [p<0.001] and duration of bed rest [p<0.001] were less than those of the TURP group.Laser prostatectomy can decrease duration of operation, duration of bed rest and pathogenesisfollowing the operation in patients. Although changes in the severity of symptoms are morepronounced in TURP patients, changes in urodynamic indexes are similar in both groups.

# **Protein-Energy Malnutrition**

# epidemiology

Protein-energy malnutrition among preschool children in Oman: results of a national survey.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1022-1030 (12 ref.)

Keywords: Prevalence; Health Surveys; Anthropometry; Age Distribution; Body Weight; BodyHeight

**Abstract:** We assessed the prevalence of underweight, wasting and stunting among preschoolchildren in Oman from March to December 1999. Within each region, samples of males andfemales in the age groups 0-5, 6-11, 12-23, 24-35, 36-47 and 48-60 months were drawn from theregisters of health institutions and the weight and height/length of the children were measured. Thetotal sample comprised 19 440 children; 9911 males and 9529 females. Data were analysedaccording to the World Health Organization protocols. The prevalence rates of wasting, stuntingand underweight were 7.0%, 10.6% and 17.9% respectively at the national level. There were nosex differences.

# **Protozoan Infections**

#### physiopathology

Protozoa infection and its associated factors among urban babies 6 to 24 months age, in Semnan, Iran.

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Saudi Medical Journal 2007; 28 (2): 299-301 (5 ref.)

**Keywords:** Protozoa; Diarrhea; Antiprotozoal Agents-therapeutic uses; Feces-parasitology; IntestinalDiseases, Parasitic

#### **Pruritis**

# drug therapy

Low dose doxepin for treatment of pruritus in patients on hemodialysis.

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IJKD - Iranian Journal of Kidney Diseases 2007; 1 (1): 34-36 (10 ref.)

Keywords: Doxepin-therapeutic uses; Renal Dialysis-adverse effects; Kidney Failure, Chronic; Randomized Controlled Trials

Abstract: Pruritus is one of the frequent discomforting complications in patients with end-stagerenal disease. We prospectively evaluated the effectiveness of doxepin, an H1-receptor antagonistof histamine, in patients with pruritus resistant to conventional treatment. A randomized controlledtrial with a crossover design was performed on 24 patients in whom other etiologic factors ofpruritus had been ruled out. They were assigned into 2 groups and received either placebo or oraldoxepin, 10 mg, twice a day for 1 week. After a 1-week washout period, the 2 groups were treatedconversely. Subjective outcome was determined by asking the patients described their pruritis ascompletely improved, relatively improved, or remained unchanged/worsened. Complete resolutionof pruritus was reported in 14 patients [58.3%] with doxepin and 2 [8.3%] with placebo [P < .001].Relative improvement was observed in 7 [29.2%] and 4 [16.7%], respectively. Overall, theimproving effect of doxepin on pruritus was seen in 87.5% of the patients. Twelve patients [50.0%]complained of drowsiness that alleviated in all cases after 2 days in average. One patient refusedto continue the treatment due to its sedative effect. We suggest that doxepin, a tricyclicantidepressant with anti-H1 receptor effect, can help improve pruritus resistant to antihistamines inend-stage renal disease patients who undergo hemodialysis. A low dose of doxepin is safe whileeffective and its main adverse effect, drowsiness, is temporary and can be easily tolerated by thepatients.

# Pseudomyxoma Peritonei

Pseudomyxoma Peritonei - a rare abdominal tumor.

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Annals of King Edward Medical College 2007; 13 (1): 148-149 (9 ref.)

**Keywords:** Peritoneal Neoplasms-pathology; Abdominal Neoplasms; Rare Diseases; Tomography,X-Ray Computed; Tumor Markers, Biological; Mitomycin-therapeutic uses; Fluorouracil-therapeutic uses; Ascites

**Abstract:** Pseudomyxoma peritonei is a rare abdominal tumor with a reported incidence ofapproximately 1 per million per year. It is invariably fatal as the space within the abdomen iseventually replaced by mucinous tumor. We report one case of Pseudomyxoma peritonei.

# Radiation, Ionizing

## adverse effects

Effect of high dose natural lonizing radiation on the immune system of the exposed residents of Ramsar town, Iran.

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Iranian Journal of Allergy, Asthma and Immunology 2007; 6 (2): 73-78 (37 ref.)

Keywords: Antioxidants; Radium-radiation effects; Intertenkins; Cytokines; Phagocytosis

Abstract: Iran is one of several countries that has regions of high dose natural ionizing radiation. Two wellknown villages in the suburb of Ramsar Town in the Caspian Sea strip, Taleshmahalehand Chaparsar, have background radiation that is 13 times higher than normal. This radiation is the result of Radium 226 and Radon gas both of which are highly water soluble. While peopleliving in these regions do not suffer from any major health problems, we decided to study theirimmune responses to infection and inflammation in order to determine if their habitat affects theirimmune defense mechanisms as a way of compensating for their exposure to high doseenvironmental ionizing radiation. Our results showed that the total serum antioxidant level in theexposed people was significantly lower than the individuals not exposed to high dose naturalionizing radiation. The exposed individuals also had higher lymphocyte-induced IL-4 and IL-10 production, and lower IL-2 and IFN-gamma production. In addition, neutrophil NBT, phagocytosis, and locomotion were higher in the exposed group. In contrast, lymphocyte proliferation in response to PHA was unaffected. We conclude that the immune system of individuals exposed to high doseionizing radiation has adapted to its environment by shifting from a Type 1 to a Type 2 response topromote antiinflammation. This may be because inflammatory Type 1 responses generate morefree radicals than Type 2 responses, in addition to the free radicals generated as a result of highenvironmental radiation. Thus, the serum total antioxidant level in the exposed residents waslower than the unexposed group.

#### Radiodermatitis

## prevention and control

[Topical Calendula and Betamethasone Valerate in the prevention of acute radiation dermatitis: a randomized prospective trial].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 23-29 (21 ref.)

**Keywords:** Radiodermatitis-etiology; Radiodermatitis-therapy; Radiation Injuries; Questionnaires;Treatment Outcome; Administration, Topical; Betamethasone-therapeutic uses; Calendula-therapeuticuses; Breast Neoplasms

Abstract: Acute radiation dermatitis is a very common side effect of radiation therapy for manycancers, including breast cancer. Despite the high prevalence of acute radiation dermatitis as wellas wet desquamation, only a few trials studying the prophylaxis of this complication using topicaltreatment have been conducted. In spite of these studies, some controversy still exists aboutregarding treatments for acute radiation dermatitis, as does some concern about their long-termcomplications. For this reason, we conducted a clinical trial for a new treatment with the sameeffectiveness as corticosteroids, but fewer complications. This trial included 60 patients withpathologic diagnoses of breast cancer for whom radiotherapy had been planned. Patients were 30-73 years old. Patients with radical mastectomy received 5000 cGy over five weeks, and thosewith conservative surgery received 6000 cGy over six weeks divided in 200 cGy fractions. Patientswere divided randomly into two groups: one group received a moderatelypotent glucocorticoidsteroid, 0.1% betamethasone ointment [30], and the other received the new treatment, 0.1%calendula ointment [30]. All patients applied their respective drugs twice daily within the tangentialfield from the first day of radiation treatment until one month after treatment was completed. Starting one week after radiation therapy commenced, patients were monitored weekly forsymptoms of dermatitis and the degree of severity as well as possible adverse drug effects, inaddition to such monitoring on the days of their appointments. Four weeks after termination oftherapy, patients were again examined, at which time they completed a questionnaire aboutdermatologic complications. The mean time to develop dermatitis was 3.7 weeks for thebetamethasone group and 3.87 weeks for the calendula group. Maximal dermatitis intensity duringtreatment in the betamethasone group was: 0, 6.7%; I, 73.3%; II, 16.7%; III, 0%; IV, 3.3%. Dermatitis intensity in the calendula group was: 0, 13.3%; I, 67%; III, 16.7%; III, 0%; IV, 3.3%. Nosignificant differences were observed in the incidence of symptoms such as burning, pruritus andpain between the two groups [p=0.762]. Calendula ointment is as effective as betamethasone inreducing acute radiation dermatitis.

# **Recovery Room**

A prospective study of postanaesthesia recovery room complications. incidence and treatment.

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Annals of King Edward Medical College 2007; 13 (1): 88-93 (10 ref.)

Keywords: Postanesthesia Nursing; Prospective Studies; Medical Audit; NeurologicManifestations; Incidence; Hemodynamic Processes; Postoperative Complications; PostoperativeNausea and Vomiting; Monitoring, Physiologic Abstract: To audit the incidence and nature of post-anesthesia recovery room complications, theirtreatment and review the role of recovery room in modern anesthetic practice. 3151 patients whoreceived general or regional anaesthesia were admitted to the recovery room during six monthsperiod [August 01, 1995 to January 31, 1996]. Information noted on forms by recovery nurse byencircling the pre coded complication. Out of 3151 patients, 2716 patient's data forms could becollected. Therefore results reflect 86% of the patients passing through the recovery. The overallincidence of complications in our population was 36.26%. Complications referable to CNS were52.29%, the commonest of which was pain[51.26%], agitation [0.18%] and excessive drowsiness[1.01%]. The second commonest system was GIT[25.07%] nausea [14.31%] and vomiting [12.18%]. The third system was CVS [21.52%], bradycardia [5.48%], tachycardia [7.61%],hypertension[4.26%],hypotension [2.53%],myocardial ischaemia [0.81%] myocardia infarction [0.10%] and newarrhythmias [1.41%]. The fourth system was Respiratory system [5.58%], hypoventilation [I.42%],bronchospasm [0.81%], laryngospasm [0.1%] and desaturation [Sp02 < 90%] in [0.1%].0.6%patients had to be reintubated. Two patients had oliguria. Miscellaneous complications were[9.94%]. More than one complication was observed in some patients. The incidence of mortality inour study during this period was 0.10%. Every third patient is susceptible to get some form of complications in the immediate post-anesthesia recovery period. It reflects the importance andneed of a specialized designated area called recovery room with qualified staff.

# Red-Cell Aplasia, Pure

#### complications

Pure red cell aplasia associated with thymic follicular hyperplasia.

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Saudi Medical Journal 2007; 28 (5): 798-799 (5 ref.)

Keywords: Thymus Hyperplasia-complications

#### Referral and Consultation

Quality of psychiatric referrals in Saudi Arabia. A structural equation modeling approach.

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Ministry of Health - Administration for Mental Health and Social Services

Neurosciences 2007; 12 (1): 53-61 (30 ref.)

Keywords: Mentally III Persons; Clinical Competence

**Abstract:** This study seeks to model proposed causal relationships between the quality ofpsychiatric referral letters, and its indicators, linked to the features of the referred patient, referringphysician, and practice setting. This study was executed at Buraidah Mental Health Hospital, SaudiArabia, in the year 2000-2002. Data regarding 18 independent variables underlying 3 latentoonstructs and one dependent variable represented by quality of psychiatric referral letter score[outcome] was derived from patient files, physician training records, and 540 psychiatric referrals.Structural equation modeling was used to analyze the data for examining proposed causalrelationships between the quality of psychiatric referral letters, and its potential predictors. Thestructural equation modeling analysis revealed a reasonably good fit of the proposed model to thedata based on various fit indices. The tested model explained 67% of the variance in the quality ofpsychiatric referral letters. The referring physician characteristics [experience, education, andpsychiatric training] and features of the referral setting [nature of setting and referralletters-administrative information] were highly significant indicators of quality of psychiatric referralletters, which in turn was negatively predicted by patient features including severity of the mentalillness. Despite some caveats, the quality of psychiatric referral letters is accurately predicted by 3latent constructs represented by referring physician skills, nature of the setting, and patientsocio-clinical features.

## **Refractive Errors**

## etiology

Environmental risk factors for refractive error among Egyptian schoolchildren.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 819-828 (27 ref.)

**Keywords:** Refractive Errors-prevention and control; Risk Factors; Prevalence; Students; Questionnaires; Health Surveys; Environmental Pollution-adverse effects; Socioeconomic Factors

Abstract: This study evaluated the preventable environmental risk factors of refractive error [RE]among 1292 Egyptian schoolchildren aged 7-15 years, chosen from 12 schools using multistagerandom sampling. A questionnaire was completed, covering personal, medical, social andenvironmental data. Statistical analysis revealed that living in an area with many sources ofenvironmental pollution, age, sex, family history of RE, socioeconomic status, ocular problems, school level and amount of near-work [hours/day] were significantly associated with RE. Logisticregression, after adjustment for sex, found that school level, near-work, socioeconomic status andfamily history were associated with RE.

# **Renal Dialysis**

#### adverse effects

Nasal and skin colonization of staphylococcus aureus in hemodialysis patients in northeast of

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IJKD - Iranian Journal of Kidney Diseases 2007; 1 (1): 21-24 (22 ref.)

**Keywords:** Staphylococcal Infections; Staphylococcal Skin Infections; Staphylococcus aureus; Catheterization-adverse effects

**Abstract:** Staphylococcal infections are a major cause of morbidity and mortality in patients onhemodialysis. We conducted a study of nasal and skin colonization in patients receivingmaintenance hemodialysis. From September 2003 through June 2004, we evaluated 69 patientswho were receiving maintenance hemodialysis via an internal fistula or graft. Four samples wereobtained for culture from both nares and needle insertion sites on the skin by standard methods. The growth of Staphylococcus aureus was recorded during the study. Of the 69 patients, 28[40.5%] had S aureus present in the nose and 9 [13.0%] had it present on the skin around theaccess site at some times during the study period. The presence of S aureus on the skin of theaccess site was significantly related to the simultaneous presence of this organism in the nose [P= .03]. From our observations, it can be concluded that the nose provides an environment in whichS aureus can propagate and maintain itself for prolonged periods. As skin colonization with Saureus is a risk factor for the development of staphylococcal infection, it could be recommendedthat effective removal of S aureus from the nose would be critical for prevention of vascular accesssite infection.

# **Renal Replacement Therapy**

Level of health awareness of Saudi patients on renal replacement therapy.

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Saudi Medical Journal 2007; 28 (5): 747-751 (14 ref.)

Keywords: Health Knowledge, Attitudes, Practice; Health Education; Questionnaires

**Abstract:** To assess health awareness in patients on renal replacement therapy [RRT] in SaudiArabia. This is a cross-sectional survey using a 22-item questionnaire in 143 randomly selectedadult RRT patients [40 on hemodialysis [HD], 61 on peritoneal dialysis [PD] and 42 with renaltransplant [TX]]. The study was carried out at King Abdul-Aziz Medical City, Riyadh in April 2006. The questionnaire was designed to evaluate patients' knowledge in 5 areas: 1 causes of renalfailure, 2. biology of the kidneys, 3. symptoms of kidney disease, 4. therapeutic options available, 5. national kidney patients support facilities. The association between the level of awareness [thepercentage of correct answers] to different demographic factors was assessed. Three fifths of thepatients had less than secondary education. The average mark for correct responses of allpatients was 45.9% with a highest [58%] for the category on biology of the kidney and lowest[36.8%] for national kidney patients support facilities. The PD group had the highest score [54.4%]followed by HD [44.3%] and finally TX [35.1%]. The level of our patients' health awareness is lowerthan satisfactory. Level of education seems to be a contributory factor.

# Respiration, Artificial

Difficult ventilation in a patient after Endotracheal intubation: an unusual manufacturing defect in E.T.T. connecter.

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Annals of King Edward Medical College 2007; 13 (1): 145-147 (18 ref.)

Keywords: Intubation, Intratracheal; Manufactured Materials-adverse effects; Airway Resistance

**Abstract:** Airway resistance depends upon the diameter of endotracheal tube [E.T.T] and otherrespiratory organs. Actually resistance to flow through a tube increases up to sixteen times ifdiameter is reduced to half of the original size. Disposable E.T.T which are currently used inanaesthesia practice are made up of P.V.0 with a connecter which is fitted on proximal end of endotracheal tube and proximal end of connector is attached with breathing circuit. Usually theinternal diameter of connector should be equal to internal diameter of endotracheal tube. In themarket, tubes of different manufacturers and of different sizes are available for all age groups. Indeveloping countries like Pakistan, hospital administration usually purchases the endotrachealtubes and other equipments which are relatively cheaper because of lack of funds. Here wepresent a case where there was a manufacturing defect in E.T.T connector with a very narrowinternal diameter that was causing severe respiratory obstruction in a child undergoing laparotomy. We conclude that the anaesthetists must keep in their mind the possibility of E.T.T connectormanufacturing defect if they face problem of increased airway resistance in an intubated patientafter excluding other possibilities of high airway resistance

#### Resuscitation

#### methods

Continuous infusion of small-volume fluid resuscitation in the treatment of combined uncontrolled hemorrhagic shock and head injury.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 19-22 (27 ref.)

**Keywords:** Shock, Hemorrhagic-therapy; Craniocerebral Trauma-complications; Blood Pressure; FluidTherapy; Heart Rate; Hematocrit; Spleen-injuries; Disease Models, Animal

Abstract: To determine the effect of continuous limited fluid resuscitation on the hemodynamicresponse and survival in rats in a model of uncontrolled hemorrhage shock due to Massive SplenicInjury [MSI] and Head Injury [HI]. An experimental study. Dicle University Animal ResearchLaboratory, Turkey, between January and February 2005. Seventy Sprague-Dawley rats wereused in this study. Group 1 rats [n=10] was sham-operated. In group 2 [n=10], only MassiveSplenic Injury [MSI] was performed and untreated. In group 3 [n=10], only head injury [HI] wasperformed and untreated. In group 4 [n=10], HI and MSI were performed and were untreated. Ingroup 5 [n=10], HI and MSI were performed and 15 minutes later treated with 7.5% NaCl. In group6 [n=10], HI and MSI were performed, and rats were treated with Ringer's Lactate [RL] solution. Ingroup 7 [n=10], HI and MSI were performed, rats were treated with 0.9 % NaCl. In groups 2, 4, 5, 6and 7 midline incision was reopened and splenectomy was performed at 45 minutes. In group 4rats, Mean Arterial Pressure [MAP] was decreased from 104 +/- 6.1 mmHg to 75 +/- 19.5 mmHg at15 minutes; heart rate decreased from 357 +/- 24.9 beats/min to 321 +/- 62.1 beats/min andhematocrit decreased from 46 +/- 1.3 % to 43 +/- 2.5 % [p<0.01]. Similar early changes in MAP, heart rate and hematocrit were observed in groups 5, 6, and 7, at 15 minutes. At 45.60 and 120minutes, in fluid resuscitated rats [group 5.6.7] MAP, heart rate and hematocrit values weremeasured higher than group 2 and 4 [p<0.01 for all]. At 120 min. in group 6, hematocrit was higherthan group 4, 5 and 7, in group 6, total blood loss after splenectomy was calculated at 20 +/- 2.4% of blood volume and was the best value compared to other fluid resuscitated group 5 and 7 [28%and 27% of blood volume] [p<0.01]. Mortality was lower in all fluid resuscitated groups whencompared to group 3 and 4 [p< 0.05]. The median survival time was again higher in fluidresuscitated groups. Continuous infusion of 7.5% NaCl, RL and 0.9 % NaCl following uncontrolledhemorrhagic shock with massive splenic injury and combined head injury resulted in better survivaland RL did not increase abdominal bleeding before splenectomy was performed.

#### **Rheumatic Heart Disease**

## epidemiology

Pattern of rheumatic heart disease in Southern Yemen.

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Saudi Medical Journal 2007; 28 (1): 108-113 (28 ref.)

Keywords: Rheumatic Heart Disease-diagnosis; Rheumatic Heart Disease-complications; Severity ofIllness Index;

Retrospective Studies

**Abstract:** To determine the pattern of rheumatic heart disease in Aden city and surrounding areasby assessing its frequency distribution, severity and complications. We conducted this research ina sole regional echocardiographic department for Southern Yemen governorates at a referralhospital located in Aden city, from January 1999 to December 2003. It was a retrospective studyfocused on echocardiographic findings in 805 patients affected by rheumatic heart disease. Out of805 patients, 383 [47.6%] were male and 422 [52.4%] were female [age range, 4-70 years; meanage, 28.6 +/- 14.5]. Heart valve damage was distributed among patients as follow: mitral 459[57.1%], aorta 70 [8.7%] and both valves 276 [34.2%]; isolated lesions 55.2% and multiple 44.8%; mitral regurgitation 464 [57.6%], mitral stenosis 405 [50.3%], aortic regurgitation 327 [40.6%] andaortic stenosis 54 [6.7%]. All children aged less than 10 years had regurgitation. Stenosis andmultiple valve lesions predominated in adolescents and young adults. Complications weredetected in 20.8% of cases. Pulmonary hypertension was the most common complication [80.4%]. Lesions with moderate and severe degree were detected in 51% cases. Only 34.8% of patients atsevere stage were operated. Rheumatic heart disease takes an aggressive course in SouthernYemen. Children, adolescents and young adults of both gender are the victims. Complicationsappear early with scanty opportunity to reach advanced age. There is a little chance for palliativetreatment.

# **Riboflavin Deficiency**

[Prevalence of childhood Riboflavin deficiency and nutritional status; a study in rural area in Kerman province].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 62-67 (21 ref.)

Keywords: Nutritional Status; Cross-Sectional Studies; Questionnaires; Students; RuralPopulation

Abstract: The incidence of riboflavin deficiency is high in women and children in developing countries and the deficiency almost invariably occurs in combination with deficiencies of otherwater soluble vitamins. The objective of this study was the assessment of riboflavin status of ruralschool children in Kerman province and its relationship with riboflavin, protein and energy intake. In this cross-sectional study, 327 primary school children were randomly selected by the stratifiedmultistage cluster sampling method. Variables for classifications were sex and socio-economicstatus [according to the educational level]. This study was conducted by the Department of Nutrition and Biochemistry of School of Public Health in Tehran University in the winter of 2001. Atwenty-four hour recall questionnaire was completed by and 5 cc of venous blood was taken fromeach student. Riboflavin status was assessed by measuring the glutathione reductase activitycoefficient [EGR - AC] of the red blood cells. Chi-Square and Pearson's correlation coefficient testswere used to determine correlations. Student's t-test was used to show the differences in the meanof EGR - AC between the classifications of independent factors. The relationship betweenriboflavin status and its independent variables including the status of riboflavin, protein and calorieintake were assessed. Outputs of the study indicated that 39.7% of the boys and 43.6% of the girls[41.8% together] were marginally riboflavin deficient. Furthermore, 37.7% of the boys, 33.4% of thegirls [35.4% together] were frankly riboflavin deficient. An average of 67.2% of the children [70.1%boys, 63.7% girls] had enough intake of riboflavin, and 76.2% of the children [79.9%, boys, 72.5%girls] had adequate intake of protein. However, only 22% of the children [24.5% boys, 19.3% girls]had sufficient caloric intake. Outputs of this dietary evaluation reveal that there is a relationshipbetween riboflavin status and protein intake status [P<0.05]. This study shows that riboflavindeficiency is an important problem for the rural school children of Kerman province and the level of protein intake is an important factor affecting riboflavin status in these children.

# Sarcoma, Ewing's

# diagnosis

Juvenile Ewing sarcoma presenting as a pelvic mass.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 53-54 (9 ref.)

**Keywords:** Bone Neoplasms-diagnosis; Sarcoma, Ewing's-therapy; Combined Modality Therapy; Antineoplastic Combined Chemotherapy Protocols; Magnetic Resonance Imaging

**Abstract:** A teen aged girl with rapidly developing pelvic mass, associated with weight loss andleft leg weakness, was evaluated and found to have Ewing's sarcoma of non-osseous origin frompelvis, which is a rare situation. She was treated by a multidisciplinary approach by surgery, chemotherapy and rehabilitation by physiotherapy to effective response.

# Sarcoma, Kaposi

# epidemiology

Kaposi sarcoma after kidney transplantation.

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IJKD - Iranian Journal of Kidney Diseases 2007; 1 (1): 2-11 (94 ref.)

**Keywords:** Sarcoma, Kaposi-diagnosis; Kidney Transplantation; Skin Neoplasms; Interferons-therapeuticuses;

Prevalence

**Abstract:** Skin cancers are the most common tumors among transplant recipients who receiveimmunosuppressive agents. Kaposi sarcoma [KS] is one of the most common malignancies tooccur in kidney transplant recipients, especially in the Middle East countries. Its prevalence incomparison with other neoplasms is also relatively higher in ran [> 35%]. The KS-associatedherpesvirus or human herpesvirus 8 is a newly discovered herpesvirus found in all forms of the KSincluding those among immunosuppressed transplant recipients. Kaposi sarcoma usuallyregresses after withdrawal or reduction of immunosuppressive agents. A wide variety of therapieshave been used for KS, including radiotherapy and administration of interferon and differentchemotherapeutic regimens. Sirolimus exhibits antiangiogenic activity related to impairedproduction of vascular endothelial growth factor and limited proliferative response of endothelialcells to the stimulation by vascular endothelial growth factor. Therefore, it can inhibit theprogression of KS. Accordingly, replacement of calcineurin inhibitors by a sirolimus can showpromising results in the prevention of KS.

## **Scaphoid Bone**

## injuries

Fenton syndrome in an adolescent.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 55-56 (10 ref.)

Keywords: Capitate Bone-injuries; Wrist Injuries-surgery; Fracture Fixation, Internal

**Abstract:** Scapho-capitate fracture [Fenton syndrome] is a rare lesion and is even lesswell-documented in adolescents. The most frequent mechanism is possible forced extension andhyperextension of the wrist. We report a case of 15 years old boy with hyperextension injury to thewrist. The true diagnosis was made 2 weeks later. Treatment involved open reduction and internalfixation with K-wires and Herbert screws. It went on to heal well and at 6 months follow-up, therewas no infection or avascular necrosis and wrist function was good.

# Schizophrenia

Sensation seeking behavior among schizophrenics.

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Neurosciences 2007; 12 (1): 62-64 (18 ref.)

Keywords: Behavior; Questionnaires; Early Detection; Sensation; Temperament

Abstract: To compare sensation seeking between schizophrenic patients [and clinical subtypes ofschizophrenia] according to criteria of DSM-IV-TR; and a healthy control group. Two hypotheseswere assumed: 1. Sensation seeking in the control group is higher than schizophrenic patients. 2. The levels of sensation seeking are different among clinical subtypes of schizophrenia. Thesample comprised a study group of 69 schizophrenic inpatients at Raazy Psychiatric Center, Tehran, Iran in 2005 [10 males and 10 females for each of paranoid, undifferentiated and residual subtypes, and 9 males from disorganized subtype], and 50 randomly selected healthy people, thecontrol group. To measure sensation seeking, the Zuckermann Sensation Seeking Scale, a41-item questionnaire form, was used after evaluating its validity and reliability. After obtaining aweak or negative correlation, we omitted 9 questions, so that finally a 32-item questionnaire withhighest reliability [Crunbach's alpha = 0.64], remained and was utilized. We used descriptivestatistical methods and calculation of statistical indices, and Student t-test for independent groupsto evaluate the research hypotheses. The first hypothesis was confirmed at a 99% significancelevel. The second hypothesis was rejected at a 95% significance level. We found a definite correlation between schizophrenia and a low level of sensation seeking. Accordingly, and sincesensation seeking [as a part of temperament] has a strong genetic component, a low level ofsensation seeking is probably an existing feature of schizophrenia. Assessing sensation seekingin high-risk populations [children or the siblings of schizophrenics] could be a practical attempt atprevention or immediate treatment of schizophrenia.

#### Senna Plant

## chemistry

Quantitative analysis of barakol content in Senna siamea leaves and flowers by TLC-densitometry.

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Medical Principles and Practice 2007; 16 (1): 47-52 (17 ref.)

**Keywords:** Plant Leaves-chemistry; Phenalenes-analysis; Flowers-chemistry; Densitometry-methods; Benzopyrans-analysis; Chromatography, Thin Layer-methods

**Abstract:** To develop a TLC-densitometric method for the determination of barakol content in Senna siamea leaf and flower extracts, and to compare the barakol content in mature leaves, young leaves and young flowers of the plant which are consumed as a vegetable in curry. Theextraction of pure barakol was performed by boiling the fresh young leaves of S. siamea with 0.5%sulfuric acid followed by chloroform extraction. The extract was further purified and recrystallizedfrom absolute ethanol. Authentic sample of barakol was used for the validation of theTLC-densitometric method. Chromatography was performed on a TLC aluminium plate precoatedwith silica gel 60 F[254] as a stationary phase and chloroform-methanol [85:15 v/v] as a solventsystem. Fifteen percent ethanolic extracts of mature leaves, young leaves and flowers of S. siameawere analyzed and compared for barakol content using the validated TLC-densitometric method.Both the validation and analysis of barakol by TLC-densitometry were carried out at theabsorbance mode of 366 nm. Barakol was extracted as pure lemon-yellow crystals from young S.siamea leaves with 0.1% yield. Linearity was found over the range of 200-900 ng/spot [r2 = 0.997].The developed method gave high precision [%RSD < 0.50] and accuracy [average 101.12%]. Thelimit of detection and limit of quantitation were 8 and 50 ng, respectively. Barakol content in youngleaves, mature leaves and young flowers were 1.67, 0.78 and 1.43% dry weight, respectively. R[f]value of the barakol in young leaves, young flowers and authentic sample was the same: 0.45 +/-0.03. The TLC-densitometric method was simple, precise and convenient; hence it is an effective procedure for the simultaneous determination of barakol in plant extracts.

## Sepsis

#### blood

Bacterial isolates from fatal cases of bloodstream infections at a university hospital in Central, Saudi Arabia.

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Saudi Medical Journal 2007; 28 (2): 231-235 (30 ref.)

**Keywords:** Blood-microbiology; Infections-blood; Risk Factors; Cross Infection-microbiology; Staphylococcus; Pseudomonas Aeruginosa; Escherichia coli; Mortality; Intensive Care Units

Abstract: To describe the microbiology, underlying medical conditions and risk factors contributing to bloodstream infection [BSI] and mortality at a University Hospital in Riyadh, Kingdom of SaudiArabia. We conducted this study at King Khalid University Hospital, Riyadh, Saudi Arabia, whereinclinical data from patients who died with BSI were collected. All isolates from these patients, from January to 31 December 2004, were identified and antimicrobial susceptibilities were determined. Of the total 778 patients with BSI, 82 [10.5%] died. Among which 34 [41.5%] were elderly. Half ofthe patients were from the intensive care units [ICUs]. Cardiovascular diseases were the mostcommon diagnosis in 14 [17.1%] patient, followed by malignancy 13 [15.9%], and respiratorydiseases 12 [14.6%]. Eleven [13.4%] had chronic liver diseases, 6 [7.3%] with renal diseases, sepsis in 5 [6.1%], 4 [4.8%] were post- surgical cases, 3 [3.7%] cases had systemic lupuserythematosus [SLE] and 3 premature infants. The majority of BSI episodes were monobacterial, 71[86.5%]. Over 90% of the isolates were hospital acquired. Coagulase negative Staphylococci[CoNS] were the most common organisms representing 25 [30.5%] of all organisms isolated, whileGram positive as a whole represented 50 [61%]. Thirty one [38%] were Gram negative bacteriaamong which Pseudomonas species 6 [7.3%] and Escherichia coli [E. coli] 5 [6%] were the mostcommon. Two [2.4%] of isolates were Candida glabrata. Mortality in our patients with BSI wasattributed to old age and underlying medical conditions. The risk factors for nosocomial BSI wereICU admission, intravascular catheterization and respiratory tract infections.

# Evaluation of CD11b expression on peripheral blood neutrophils for early detection of neonatal sepsis.

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Iranian Journal of Allergy, Asthma and Immunology 2007; 6 (2): 93-96 (17 ref.)

Keywords: Sepsis-diagnosis; C-Reactive Protein; Neutrophils; Early Detection; Apgar Score; Antigens, CD11

**Abstract:** Neonatal sepsis is a disease of infants who are less than 1 month of age. These infantsare clinically ill, and their blood culture are positive for bacteria. The reported incidence of neonatalsepsis for allinfants is 1 to 10 per 1000

live births. The mortality rate is 4.2-26%. The clinical signsare not specific and diagnosis of neonatal sepsis is one of the most difficult tasks in clinicalmedicine. The aim of this work was determination of CD11b sensitivity and specificity for earlydetection of neonatal sepsis. We studied 65 neonates with gestational age of 27 to 38 weeks whowere suspected for sepsis within the 28 days of life. Whole blood was obtained from neonates todetermine CD11b expression on peripheral blood neutrophils by flow cytometry. C-Reactiveprotein [CRP] was measured qualitatively. Neonates were divided into two groups. Classificationwas based on the result of the blood culture. In the sepsis group all of the neonates [n = 8] showedpositive blood culture and clinical symptoms. In the suspected group [n = 57] the neonates showedclinical signs but blood cultures were negative. Sensitivity and specificity of CD11b were 75%,100% respectively. Also positive and negative predictive values of CD11b were 100% and 86%respectively. Results of present study and previous studies showed that measurement of neutrophil surface markers can be useful for diagnosis of infection in the early phases. Also, thequantitative measurement of CRP in addition to CD11b further enhances the ability to diagnoseinfections and improves sensitivity and negative predictive value by 100%.

## immunology

# [Detection of intracytoplasmic Th1/Th2 cytokine profiles in patients with sepsis and severe sepsis].

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Tehran University Medical Journal [TUMJ] 2007; 65 (2): 12-17 (13 ref.)

**Keywords:** Sepsis-diagnosis; Cytokines; Interleukins; Incidence; Enzyme-Linked Immunosorbent Assay; Cross-Sectional Studies

Abstract: Sepsis is the leading cause of death in critically ill patients throughout the world. Theincidence is increasing despite the major advances in the development of antimicrobial agents andother supportive treatments. Based on multiple studies, it has been shown that patient outcomedepends on Th1 and Th2 cytokine response. Moreover, whenever the Th2 response ispredominant, the sepsis is more severe. The aim of this study was to evaluate the correlation between cytokine levels and the severity of sepsis in patients. A cross-sectional study on the cellular levels of several pro-inflammatory cytokines was carried out in patients with sepsis andsevere sepsis. The study included 37 patients [24 men and 13 women], 26 of them had sepsis and 11 had the severe form of sepsis Thirty-seven healthy volunteers served as controls. The averageage of the patients was 57 years [+/- 23.3 years], with a range of 21 to 92 years. From the wholeblood of the subjects, we separated the monocytes and leukocytes, which were then cultured. Using an ELISA method, we measured levels and IL-12 [associated with Th1], and IL-4 and IL-10[associated with gamma of IFN- Th2] in the cultured cells with and without cell stimulation. Nogamma production in the cells of patients with sepsis gamma correlation was found for IFN- andsevere sepsis, regardless of whether the patients had died or survived. However, IL-12 levels were significantly decreased in severe sepsis compared with those of sepsis patients [P=0.048]. Furthermore, the cells of expired patients also had significantly decreased IL-12 levels compared with those of , IL-4, and surviving patients [P=0.028]. We also found that the levels of IFN- IL-10were decreased in patients compared with those of controls, which correlated to their production. However, there was no correlation for IL-12 production between the cells of the patients comparedwith those of the controls. There was also no correlation for cytokine production between men andwomen with sepsis and in adults compared with that of elderly patients [>55 years old]. We have shown that the predominating T helper cell subset in patients with severe sepsis, as well asexpired patients, is Th2. In conclusion, the correlation of Th1 cytokine production and progressionof sepsis was demonstrated. Most probably IL-12 levels would be significantly lower in patientswith severe sepsis and those who expired.

# mortality

[Clinical Manifestations and mortality in neonatal septicemia; Children Medical Center].

Tehran University of Medical Sciences - Department of Neonatology

Tehran University Medical Journal [TUMJ] 2007; 65 (2): 46-51 (28 ref.)

Keywords: Janndice; Infant, Low Birth Weight; Sepsis-diagnosis; Retrospective Studies

Abstract: To identify the clinical manifestations and mortality rate among neonates with early- andlate-onset sepsis. We retrospectively reviewed the hospital records in Children's Hospital MedicalCenter, Tehran University of Medical Sciences of 104 neonates [50 females and 54 males]diagnosed with septicemia and treated from September 1994 to August 1995. Diagnosis ofsepticemia was based on standard criteria. According to the time of onset of disease, there were50 neonate with early-onset and 54 with late-onset septicemia. Of the clinical signs in the 104patients, respiratory signs were found in 31 patients, poor feeding in 57, jaundice in 42, apnea in 25 and hyporeflexia in 25. Blood cultures were positive in 31 [34.8%] of the neonates: the mostcommon species isolated was Staphylococcus aureus with eight cases, while five hadStaphylococcus epidermidis, all of whom had a single species of bacterium isolated. Seventythree[70%] had normal birth weights [equal to or heavier than 2500 g] and 31 [30%] were classified aslow birth weight [birth weight less than 2500 g]. Cerebrospinal fluid culture was positive in four[6%] of the patients, including one case of Escherichia coli, one Salmonella typhi, one Klebsiella, and one Staphylococcus aureus. The frequency of infection in male and female infants was 53% and 47%, respectively. Among the infants with early-onset sepsis, 16 [32%] were low birth weight. Overall, the mortality rate among these patients was 30%, including 18 out of the 50 with earlyonset and 14 out of the 54 with late onset sepsis. Of these infants, 23 had meningitis, including 13[26%] with early-onset sepsis and 10 [9.6%] with late-onset sepsis. Among the low birth weightinfants, the mortality rate was higher [42%] than that of the infants with normal birth weight [26%]. Because of the high mortality rate among low birth weight neonates with

sepsis, we suggest thatthis group of patients should receive more care and there should be greater effort to ensure thatthey are treated with the appropriate antibiotics. Furthermore, all healthcare givers responsible forthe management of neonates with sepsis should receive additional continuing education coursesto ensure that they are aware of the risks, complications and mortality rate among these patients.

#### **Sinusitis**

## diagnosis

#### Presentation and management of allergic fungal sinusitis.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 23-27 (28 ref.)

**Keywords:** Sinusitis-microbiology; Sinusitis-therapy; Aspergillosis-diagnosis; Aspergillosis-therapy; Tomography, X-Ray Computed; Social Class

Abstract: To assess the presentation of allergic fungal sinusitis and describe the line ofmanagement in our setup. Descriptive study. Study was conducted in OtorhinolaryngologyDepartment, Dow Medical College and Civil Hospital, Karachi, from January 2004 to January 2005. Culture and sensitivity / fungal stain proven 20 cases of allergic fungal sinusitis were selected forthe study, irrespective of age and gender. Data including age, gender, socioeconomic status, signs, symptoms, laboratory findings [especially Immunoglobulin E and eosinophil count] and imaging studies [Computed Tomography and /or Magnetic Resonance Imaging] were noted for thestudy. Pre and postoperative medical treatment, surgery performed, follow-up; residual/recurrencedisease and revised surgery performed were also recorded. In this series, allergic fungal sinusitiswas a disease of younger age group with an average age of 20.75 years with male dominance[70%]. Poor socioeconomic status [80%], allergic rhinitis [100%] and nasal polyposis [100%] wereimportant associated factors. Nasal obstruction [100%], nasal discharge [90%], postnasal drip[90%] and unilateral nasal and paranasal sinuses involvement [60%] were the commonestpresenting features. Aspergillus [60%] was the most common etiological agent. In all cases [100%], increased eosinophil count and IgE levels were present. Orbital [20%] and intracranial [10%]involvement were also seen. Surgical management was preferred in all cases. Functionalendoscopic sinus surgery in 90% cases and lateral rhinotomy in 10% cases were performed. Recurrence / residual disease was seen in 20% cases. In this series, allergic fungal sinusitis wasseen in immunocompetent, young males, belonging to poor socioeconomic status, suffering fromallergic rhinitis and nasal polyposis, presenting with nasal obstruction, nasal discharge andpostnasal drip. Functional endoscopic sinus surgery was the most important problem solvingprocedure while lateral rhinotomy was reserved for extensive disease.

#### Skin Ulcer

## etiology

#### Superficial skin ulcers.

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Saudi Medical Journal 2007; 28 (1): 46-48 (19 ref.)

**Keywords:** Retrospective Studies

Abstract: To determine the underlying cause of superficial skin ulcers over a 15-year period. Aretrospective histopathological analysis of 670 cases of superficial skin ulcers diagnosed in theDepartment of Pathology, Ahmadu Bello University Teaching Hospital, Zaria, Nigeria from January1991 to December 2005. A total of 670 superficial skin ulcers were analyzed. The male to femalegender ratio was 409:261[1.5:1.0] and a peak age frequency of 44.3% [297] in the 5th and 6thdecades. Spectrum of lesions encountered was categorized into inflammatory, infections, benignand malignant diseases. The malignant lesions were 309 [46.1%], non-specific inflammation 302[45.1%], granulation tissue 25 [3.7%] and pseudoepitheliomatous hyperplasia 14 [2.1%]. A total of18 [2.7%] specific infections were encountered, which included bacterial, fungal and viral infection.Benign lesions were 2 [0.3%], comprising of neurofibroma and Bowen's disease. The mostcommon malignant lesion was squamous cell carcinoma 203 [30.3%] with a male to female ratio of128:75 [1.7:1.0]. Of these, 161 were well-differentiated tumors. The lower limb was the prevalentsite distribution of all the ulcers. Superficial ulcers may be harbinger of malignant diseases. Squamous cell carcinoma remains the most common malignant lesion arising from chronicsuperficial ulcers in our setting. Adequate tissue biopsy and early diagnosis may reduce theattendant morbidity of these ulcers.

#### Smoking

## complications

Passive or active smoking, which is more relevant to breast cancer.

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Saudi Medical Journal 2007; 28 (2): 254-258 (36 ref.)

Keywords: Breast Neoplasms; Risk Factors

**Abstract:** To examine the risk of breast cancer associated with passive and active smoking and toexplore risk heterogeneity among studies. We conducted this study in Iran during the year 2006. Fifteen published studies on smoking and breast cancer met the defined criteria. Pooled odds ratio[OR] estimates for female breast cancer were calculated. The active and passive smokers werecompared with women categorized as never regularly exposed to tobacco smoke. The pooled riskestimate for breast cancer associated with passive smoking among non-smokers was 1.38 [95%confidence interval [CI]; 1.16-1.65]. The pooled OR for active smokers was 1.25 [95% CI;1.11-1.41]. Also, the combined OR for passive and active smokers related to breast cancer was 1.30 [95% CI; 1.17-1.45]. Based on the results of the pooled analysis, it can be concluded bothpassive and active smoking equally increase the risk of female breast cancer.

# epidemiology

## Prevalence of smoking among high-school students of Tehran in 2003.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1017-1021 (16 ref.)

Keywords: Smoking-prevention and control; Prevalence; Risk Factors; Cross-Sectional Studies; Students

**Abstract:** This study in 2003 determined the prevalence of smoking and its associated factorsamong high-school students in Tehran, Islamic Republic of Iran. Out of 1095 students aged 14-18years, 29% [31% boys, 26% girls] were occasional and 5% [6% boys and 2% girls] daily smokers. Among occasional smokers, 21% had family members who also smoked, whereas for studentswho had never tried smoking, no family members smoked. Of 316 occasional smokers, 12% livedwith a single parent compared with only 5% of never smokers. Regression analysis showed that significant risk factors for daily smoking were: having a brother or sister who smokes [OR = 8.58] and having more than 1 family member who smokes [OR = 6.33].

## psychology

## [Attitudes of teachers to tobacco smoking].

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 907-915 (29 ref.)

Keywords: Smoking-epidemiology; Teaching; Questionnaires; Prevalence; Health Knowledge, Attitudes, Practice

**Abstract:** We aimed to evaluate the attitudes of teachers to tobacco smoking in Kalaa Kebira [asemi-urban region in the Tunisian Sahel]. Data from 358 of 402 teachers surveyed were obtained using a self-completed questionnaire. The mean age of the teachers was 35.7 [SD 7.9] years. The prevalence of smoking was 29.3% [51.6% of men and 3.6% of women], and 79% of smokers wereaddicted to nicotine according to the Fagerstrom test. About 50% of the teachers werebadly-informed about the dangers of smoking and 75.2% of smoking teachers did not refrain from smoking in front of their pupils. The lack of knowledge of teachers limits their role as a model and information source in the anti-tobacco struggle. It is essential to draw up an education programme for the teaching staff.

## **Smoking Cessation**

## Smoking cessation programs in Middle Eastern dental schools.

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SDJ - Saudi Dental Journal [The] 2007; 19 (1): 21-26 (27 ref.)

**Keywords:** Schools, Dental; Questionnaires; Health Surveys; Smoking-complications; Mouth Neoplasms; Periodontal Diseases; Health Education

Abstract: This study aimed to explore current policies and practices concerning smokingcessation programs adopted by dental schools across the Middle East and to determine the extentof smoking cessation teaching in dental schools. A survey questionnaire was e-mailed to thedeans of twenty-five dental schools that were identified from the Arab Association of DentalFaculties website. The response rate was 80%. Fifty-five percent had written tobacco policies,85% banned smoking in non-clinical teaching facilities, 90% banned smoking in clinical areas and55% in public access areas. Fifty-five percent taught students appropriate patient smokingcessation techniques. All schools taught the role of tobacco in oral cancer and periodontal diseaseaetiology and 75% in osseointegrated implant failure. With respect to barriers limiting the teachingof smoking cessation, 35% had not encountered any obstacles. However, 20% cited social, peerpressure, overloaded curriculum and lack of training and interest. Forty- five percent ofrespondents stated that there were no planned initiatives to develop smoking cessation techniqueswithin their curricula. It is concluded that Middle Eastern dental schools have identified the role ofeducation in the anti-smoking campaign. However, much still needs to be done on improvedapproach to policy implementation.

# Soft Tissue Injuries

## therapy

Morel-Lavallee lesion. Results of surgical drainage with the use of synthetic glue.

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**Saudi Medical Journal** 2007; 28 (1): 65-67 (11 ref.)

Keywords: Subcutaneous Tissue-injuries; Drainage; Cyanoacrylates; Combined Modality Therapy

Abstract: To evaluate the results of surgical drainage and use of synthetic glue in Morel-Lavalleelesions. We treated 7 Morel-Lavallee lesions in Ankara Bayindir Hospital, Ankara, Turkey between April 2003 and June 2004. These lesions developed in 5 male patients due to crush under avehicle or a traffic accident. The mean age was 32.8 years; range 16-55. All lesions were localized in thigh. One patient had surgery due to acetabulum fracture and one had an urological operationfor urethral rupture. All patients were operated 6-48 hours after the injury. After surgical drainage soft tissues were attached with the use of synthetic glue and compressive bandage was applied. We defined healing as the loss of fluctuation and elicitation of the normal mobility of the injuredskin on manual examination. The mean follow-up was 11.6 months [range 8-20 months]. One patient was operated for acetabulum fracture and had a bilateral Morel-Lavallee lesion 2 days afterthe operation. This patient was reoperated for drainage. All lesions were healed with a mean of 5weeks [range 3-8 weeks]. No infection, necrosis or recurrences were detected during thefollow-up. Results of the treatment with the use of synthetic glue and surgical drainage inMorel-Lavallee lesion are satisfactory with early healing time without recurrence.

# Spina Bifida Cystica

## epidemiology

Spina bifida aperta in southern Iran, 15 years experience.

Rakei, S.M.; Taghipour, M.; Safarian, A.; Rahmanian, A.

Shiraz University of Medical Sciences - School of Medicine - Department of Neurosurgery

IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 191-196 (34 ref.)

**Keywords:** Spina Bifida Cystica-diagnosis; Spina Bifida Cystica-surgery; Distribution; Sex Comorbidity; Meningomyelocele; Meningocele; Ventriculoperitoneal Shunt-adverse effects; Hydrocephalus

Abstract: Spina bifida aperta is a lesion that communicates with the external environment: and includes meningomyelocele and meningocele. We investigated all clinical presentations inmeningomyelocele and meningocele patients in Shiraz, southern Iran. Patients' files of spina bifidaaperta who were admitted from 1989 through 2005 to Nemazee Hospital were reviewed formeningomyelocele and meningocele in Shiraz, southern Iran. CSF shunting by ventriculoperitoneal[VP] shunt was also performed. Out of 580000 patients, 100 cases of spina bifida aperta were registered. In 67 patients with meningomyelocele and 33 with meningocele with male and lumbarand lumbosacral areas predominance, cystic mass was more common. 35% of patients showedcongenital anomalies including talipes equinovarus and congenital hip dislocation that were morein meningomyelocele patients. 10% of the patients were operated in the first 72 hours and theothers 1 month to 1 year after birth. CSF shunt insertion was more in meningomyelocele patients. Among meningomyelocele patients, mortality occurred in 3 patients [meningitis in 2 andpost-operative pneumonia in one case]. It seems that water-thigh dural closure and use of duralpatch could decrease the rate of postoperative CSF leakage. Our results resembled the pattern inother series, except the low prevalence of hydrocephalus and a male predominance. Earlierreferral of spina bifida aperta patients should be encouraged, because it could lower thecomplications and lead to better outcomes.

# Stomach Neoplasms

## diagnosis

Primary gastric lymphoma.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 36-40 (30 ref.)

Keywords: Stomach Neoplasms-therapy; Lymphoma, Non-Hodgkin-diagnosis; Lymphoma, Non-Hodgkin-therapy; Combined Modality Therapy; Antineoplastic Combined Chemotherapy Protocols

Abstract: To evaluate the clinico-pathological status of Primary Gastric Lymphoma [PGL] atpresentation in King Fahad Hospital, Madina Munawra, Kingdom of Saudi Arabia [KSA]. A caseseries. Oncology Department of King Fahad Hospital, Madina Munawra, KSA, from 1990 to 1998. Case records of 22 patients with a histologically-confirmed diagnosis of PGL were analyzed. Tumors were staged according to the Ann Arbor Classification and divided according to the Rappaport working formulation. According to the treatment modality, different groups were established. Any other histopathological type was excluded from the study. Data were analyzed byfrequency calculations. Survival was calculated from the date of surgery. All cases wereNon-Hodgkin Lymphoma [NHL]. The peak age was in the sixth

decades with a slight malepreponderance. Most common presenting symptoms were epigastric or upper abdominal pain withor without mass. There were 10 [45%] patients with stage II, and 6 [27%] patients each with stageIII and IV diseases. Diffuse large cell lymphoma was found in 12 [55%], poorly differentiatedlymphoma in 3 [14%] and diffuse mixed in 7 [32%]. Helicobacter pylori infection was found in 2[9%]. Sixteen [73%] patients underwent chemotherapy with some surgical resection, in 5 [23%]surgical procedure was palliative bypass and 11 [50%] had partial gastrectomy. Three [14%] hadonly chemotherapy after endoscopic biopsy. Two [9%] patients needed urgent surgicalintervention. One [5%] patient had total gastrectomy followed by radiotherapy. Eleven [50%] hadmore than 3 years survival. PGL is usually of NHL type, presenting in the sixth decade, and can besuccessfully treated with both surgery and chemotherapy when patients presented at stage II.Chemotherapy after sub-total gastrectomy or biopsy was the best treatment option.

# **Substance Withdrawal Syndrome**

# drug therapy

[The effects of intra-locus coeruleus injection of dopamine D2 receptor agents on Naloxone withdrawal signs in Morphine-dependent rats].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 7-12 (29 ref.)

Keywords: Receptors, Dopamine D2; Locus Coeruleus; Rats, Wistar; Morphine; Naloxone

Abstract: Opiate-induced addiction is a main social problem in Iran. As treatment of this problem a health priority among the medical community, studies on this topic are very crucial. The exactmechanism of dependence on opiates and their withdrawal syndrome remain unclear. It seemsthat dopaminergic system and locus coeruleus [LC] have an important role in the expression of somatic signs during opioids withdrawal. The LC has been shown to contain significant levels ofdopamine [DA]. In the present study, the effects of different D2 dopaminergic receptor agonist andantagonist administration in the LC on withdrawal sign expression in morphine dependence isinvestigated in rats. Adult male Wistar rats, weighing 220-280 g were divided into eight groups[n=8]. Two cannulae were stereotaxically implanted bilaterally into the LC of each rat. After aone-week recovery, seven groups were rendered dependent on morphine by subcutaneousinjection during a seven-day period. Non-dependent control animals received saline according to the same protocol. Animals received bilateral intra-LC injections of saline [1 micro q/site] and quinpirole [0.1, 0.3 and 0.5 micro g/site, a D2 agonist] 15 min and sulpiride [5, 15 and 30 micro g/site, a D2 antagonist] 30 min prior to naloxone injection about 24 hours after the last dose of morphine or salineaccording to their respective group. To calculate the total withdrawal score, as an index of withdrawal syndrome, 20 different withdrawal signs were assessed and the scores of the intensityof these withdrawal signs were added. Total withdrawal scores were significantly decreased byquinpirole [0.1micro g/site] and sulpiride [15 and 30 micro g/site]. The D2 dopaminergic system in the LCmay be involved in the morphine-induced dependency in rats. Further studies are needed to define the mechanism of this dependency in order to improve methods for the rehabilitation of addicts.

## **Substance-Related Disorders**

Students' attitudes and practices towards drug and alcohol use at Tabriz University of Medical Sciences.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 967-971 (10 ref.)

**Keywords:** Alcohol-Related Disorders; Attitude; Students; Questionnaires; Health Surveys

**Abstract:** This questionnaire survey examined attitudes and practices towards alcohol and druguse among male university students living in a dormitory at Tabriz University of Medical Sciences, Islamic Republic of Iran. Of 173 students, about one third [32%] had tried alcohol or drugs at leastonce in the last 6 months: 16% had tried alcohol, 6% cannabis, 6% opium and 2% heroin. Sixteenstudents [9%] reported they were abusing alcohol and 16 [9%] other illicit drugs, with 2 using drugsby injection. Many students believed that smoking and drug and alcohol use in the dormitorycreated disruption and an unpleasant atmosphere.

#### Suicide

#### epidemiology

Age and sex suicide rates in the Eastern Mediterranean Region based on global burden of disease estimates for 2000.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 953-960 (32 ref.)

Keywords: Age Distribution; Sex Distribution; Risk Factors; International Classification of Diseases

Abstract: Suicide was estimated to be the 25th leading cause of death in the WHO EasternMediterranean Region in the year 2000. Using data from the WHO global burden of diseaseproject, estimated rates of suicidal deaths were plotted for different sex and age groups. Overallrates of suicide were higher in females than males in age groups 5-14 and 15-29 years. The peakage for suicides among females was 15-29 years [8.6 per 100 000] and for males 60+ years [10.8per 100 000]. As a proportion of all deaths due to injury, suicides were substantially higher infemales than males. Females in high-income countries had the lowest rates of suicide in all agegroups and males in high-income countries had a lower rate than males in low- and middle-incomecountries.

# Surgical Flaps

#### Medial perforator flap for coverage of defects around the ankle.

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Jinnah Hospital - Allama Igbal Medical College - Department of Plastic Surgery

Annals of King Edward Medical College 2007; 13 (1): 17-20 (16 ref.)

Keywords: Reconstructive Surgical Procedures; Treatment Outcome; Ankle Injuries-surgery

Abstract: Wounds around the ankle with exposed bones, tendons and nerves are very common inour practice and their reconstruction remains a challenge for the plastic surgeons. They often leadto infection and mal-union if early vascularized cover is not provided. To evaluate efficacy ofmedial perforator flap for reconstruction of this difficult area. A total number of 40 patients withinjuries around the ankle were studied between December 2004 to December 2006 and all of themunderwent reconstruction with medial perforator flaps. The Medial perforator flap is a quick, versatile, reliable reconstructive option and has minimal donor site morbidity.

## Supraclavicular artery flap "its weightage in reconstructing burn neck contracture".

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Annals of King Edward Medical College 2007; 13 (1): 81-83 (9 ref.)

Keywords: Reconstructive Surgical Procedures; Vascular Surgical Procedures; Treatment Outcome; Contracturesurgery; Neck Injuries-surgery; Burns-surgery

Abstract: Flexion contractures of neck are a common sequel of deep burns. Severity varies fromdiscrete linear bands to severe labiomentosternal contractures leading to functional and cosmeticimpairment. Use of local flaps can produce best restoration of form and function. This study wasmeant to analyze clinical utility, advantages and any complications specific to islandedsupraclavicular artery flap. This was a descriptive study carried out at department of plastic andreconstructive surgery Mayo hospital Lahore between January 2005 and November 2006. Tenpatients presenting with neck contractures with out evidence of trauma in supraclavicular fossae, shoulder and deltoid region were included in the study. History and physical examination detailsincluding extent of contracture and cosmetic impairment were endorsed. Essential preoperativeworkup was done accordingly including assessment by anesthetist. Ten patients with varyingseverity of neck contractures were included in the study. Age range was 15-35 years. Averagehospital stay was 10 days. Five patients had severe labiomentosternal contractures. Eight patientsreported neck wound appearing excellent at 6 months postoperatively. In contrast donor areaappearance was reported satisfactory by 7 and poor by 3 patients at 6 months. Functionalconsequences were most with 6 patients having full range of motion [ROM] and 4 patients havinglimited but satisfactory ROM. There is no reported recurrence so far. Supraclavicular artery basedislanded fasciocutaneous flap is a reliable reconstructive tool ideally suited to cover defects in theregion of neck to restore form and function.

# **Syphilis**

# epidemiology

#### [Prevalence of syphilis and HIV infection in female prisoners in Morocco].

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 774-779 (9 ref.)

**Keywords:** HIV Infections-epidemiology; Prevalence; Prisoners; Risk Factors

Abstract: We studied the prevalence of syphilis and HIV infection in 217 female prisoners atOukacha prison, Casablanca and associated risk factors. The mean age was 32.0 years and meanlength of imprisonment 22.8 months. As regards risk factors, 9% of the women said they usedcondoms, homosexuality was not admitted, 1.8% were intravenous drug users and the averagenumber of sexual partners was 5.17. Fifty-one women [23%] were positive for syphilis and 4 [2%]were HIV-positive. Multivariate analysis found that being married was protective [OR = 0.75, 95%CI: 0.57-0.97], while high number of partners was a positive risk factor [OR = 2, 95% CI: 1.2-3.51].

# **T-Lymphocytes**

## analysis

T-lymphocyte subsets and thymic size in malnourished infants in Egypt: a hospital-based study .

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Ain Shams University - Faculty of Medicine - Department of Paediatrics

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1031-1042 (36 ref.)

**Keywords:** CD4-Positive T-Lymphocytes; CD8-Positive T-Lymphocytes; Thymus Gland-anatomy and histology; Thymus Gland-ultrasonography; Malnutrition-immunology; Flow Cytometry-utilization

**Abstract:** Thymus size was assessed ultrasonographically and correlated to the percentage of CD4 and CD8 T-lymphocytes in peripheral blood in 32 infants with protein-energy malnutrition[PEM] and compared with 14 healthy control infants. The study revealed thymus atrophy inpatients with PEM, especially the oedematous type, accompanied by changes in the peripherallymphocyte subsets. These changes were reversible after nutritional rehabilitation. However, theymay affect the immune status of PEM patients and may require a longer duration of nutritionrehabilitation than required for recovery of anthropometric measures. We recommend properassessment of the immune functions of PEM patients during nutritional rehabilitation until fullrecovery.

## Takayasu's Arteritis

## diagnosis

Takayasu arteritis diagnosed by 16-row multidetector CT angiography.

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Tripoli Central Hospital - Department of Radiology **Neurosciences** 2007; 12 (1): 73-75 (10 ref.)

Keywords: Takayasu's Arteritis-pathology; Angiography; Aorta

**Abstract:** Takayasu's arteritis is a well-known systemic disease that involves the aorta, majoraortic branches, and pulmonary arteries. Conventional catheter angiography remains the 'goldstandard' for disease diagnosis, in correlation with clinical data and laboratory findings. Multislicecomputed tomography angiography [MSCTA] has the advantage of non-invasively providing theangiographic data and combining morphological mural assessment with luminal evaluation. Wepresent 2 such cases diagnosed by 16-slice MSCTA.

# Telangiectasia, Hereditary Hemorrhagic

## diagnosis

Osler-Weber-Rendu disease: report of 3 cases in a family.

Shamsadini, S.; Abbasi, M.H.; Varesvazirian, M.; Shamsadini, A.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1216-1218 (7 ref.)

Keywords: Telangiectasia, Hereditary Hemorrhagic-pathology

#### therapy

Hereditary hemorrhagic telangiectasia Genetics, pathogenesis, clinical manifestation and management.

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Saudi Medical Journal 2007; 28 (1): 11-21 (118 ref.)

**Keywords:** Telangiectasia, Hereditary Hemorrhagic-genetics; Telangiectasia, HereditaryHemorrhagic-etiology; Telangiectasia, HereditaryHemorrhagic-diagnosis; Telangiectasia, HereditaryHemorrhagic-complications

**Abstract:** Hereditary hemorrhagic telangiectasia HHT, Morbus Osler or Osler-Weber-Rendusyndrome OMIM 187300, is an autosomal dominant disorder characterized by epistaxis, telangiectasia, multi-systemic vascular dysplasia and clinical presentation of wide variation. Thepathogenesis involves dilated post-capillary venules or telangiectases in the mucus membrane ofvarious organs as well as larger arteriovenous malformations. Genetic heterogeneity of HHT isconfirmed; 2 disease loci, ACVRL1 and ENG genes, have been identified and characterized. The 2major types of the disease, HHT1 and HHT2, are attributed to mutations in the ENG and ACVRL1genes. ENG and ACVRL1 genes code for proteins, namely endoglin and activin-receptor-likekinase 1 ALK-1, which are members of the TGF-beta receptor family, are essential for maintainingvascular integrity. Another gene has been implicated in

HHT; the HHT3 locus linked tochromosome 5. In the last 2 decades, the genetics, pathogenesis, clinical manifestations andmanagement of HHT have been extensively researched. At this stage, it is deemed appropriate toreview the wealth of information accumulated on the topic. Better understanding of the functions ofendoglin, ALK-1, and other proteins involved in the pathogenesis of HHT should facilitate bettermanagement of patients with this disorder.

#### Terazoles

#### therapeutic uses

Role of cilostazole and aspirin in peripheral vascular disease in Diabetics.

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Annals of King Edward Medical College 2007; 13 (1): 11-15 (26 ref.)

**Keywords:** Peripheral Vascular Diseases-drug therapy; Aspirin-therapeutic uses; Diabetes Mellitus; Treatment Outcome: Risk Factors

Abstract: Comparison of Cilostazole and Aspirin in treatment of peripheral vascular disease indiabetics. Comparative study. Fatima Memorial Hospital, Shadman, Lahore from October 2005 toJuly 2006. Fifty five diabetics patients were included in the study, regardless of presence or absence of symptoms and signs of peripheral vascular diseases. Complications of diabetes suchas neuropathy, retinopathy, diabetic amytrophy and foot deformities were assessed in detail. Patients who had peripheral vascular diseases with [Doppler] ankle brachial index measurementwere divided randomly given cilostazole, [pletaal] and aspirin. Ankle brachial index measurementwas again done after three months of therapy. One way Anova was used to test the efficacy ofaspirin and cilestazole. The F ratio [P<0.05] showed a significant difference between three groupsand post HOC test showed cilostazole is more effective. Cilostazole, phosphodiestrase III inhibitorimproves symptoms, signs and ABI measurements in diabetic patients when given for threemonths. However aspirin had no significant effect on improvement of such parameters.

#### **Testis**

#### pathology

The effect of melatonin on ductus epididymis. Unilateral testicular torsion in rats.

Yildirim, Ayse; Akkus, Murat; Ersay, Ahmet R.; Nergiz, Yusuf; Baran, Ozlem P. Dicle University - Faculty of Medicine - Department of Histology and Embryology

Saudi Medical Journal 2007; 28 (2): 288-289 (7 ref.)

Keywords: Epididymis-pathology; Testis-blood supply; Testis-drug effects; Spermatic Cord Torsion; Melatonin; Rats

#### **Tetanus Toxoid**

Causes of low tetanus toxoid vaccination coverage in pregnant women in Lahore district, Pakistan.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1142-1152 (12 ref.)

**Keywords:** Pregnancy-immunology; Immunization-utilization; Health Knowledge, Attitudes, Practice; Questionnaires; Prenatal Care; Primary Health Care; Awareness

**Abstract:** To assess the causes of low tetanus toxoid [TT] vaccination coverage in pregnantwomen a mixture of quantitative and qualitative methods were adopted at the community, primaryhealth care delivery and management levels in Lahore district, Pakistan. Out of a random sampleof 362 women who had delivered during the previous 3 months, 87% recalled receiving 2 doses of TT. The main reasons for non-vaccination were poor knowledge about the importance of TT [32% of women] or the place and time to get vaccinated [18%]. According to the managers and primaryhealth care medical officers, the main reasons for low coverage were lack of awareness about theimportance of vaccination among the public and misconceptions about TT vaccination [e.g. that itwas a contraceptive].

#### **Thyroid Function Tests**

[Clinical and laboratory evaluation of thyroid function following total laryngectomy in laryngeal cancer].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 55-61 (28 ref.)

**Keywords:** Laryngeal Neoplasms-surgery; Laryngectomy-adverse effects; Cross-Sectional Studies; Thyroxine; Follow-Up Studies; Hypothyroidism

Abstract: Hypothyroidism is a well-documented complication after treatment of laryngeal cancerand is particularly significant among patients undergoing laryngectomy. We investigated thefrequency of hypothyroidism in patients treated with total laryngectomy for laryngeal cancer. Wealso evaluated the effect of neck radiotherapy on thyroid function after total laryngectomy forlaryngeal cancer. In a cross-sectional study, we evaluated 31 patients with laryngeal squamouscell carcinoma [mean age 53.6 years]. Among these patients, 14 were treated with surgery onlyand 17 were treated with surgery plus radiotherapy. Laboratory evaluation included levels ofthyroid stimulating hormone [TSH], free T4, free T3, and antithyroid antibodies both preoperatively and postoperatively at the first day, as well as one and six months after surgery. All patients hadnormal thyroid function before treatment; however, after 6 months, five patients [16.1%] werehypothyroid. Of these, three patients [9.6%] had subclinical symptoms, including elevatedthyroid-stimulating hormone with normal free T4, and two patients [6.5%] showed clinicalsymptoms of hypothyroidism. Radiotherapy and neck dissection were significantly associated withhigher incidences of hypothyroidism. Our data suggest that hypothyroidism occurs in a substantial proportion of patients undergoing surgery for laryngeal cancer. The results indicate that thyroidfunction studies should be routinely performed in the follow-up care of laryngeal cancer patients, especially if radiotherapy and neck dissection were part of the treatment. We suggest that thisapproach will improve the patient's quality of life and diminish the co-morbidity associated with thiskind of surgery.

#### **Thyroid Gland**

#### surgery

A histopathological audit of thyroid surgical specimens.

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Annals of King Edward Medical College 2007; 13 (1): 51-56 (41 ref.)

**Keywords:** Medical Audit; Cross-Sectional Studies; Thyroid Neoplasms-pathology; ThyroidGland-pathology; Goiter-epidemiology; Adenoma-epidemiology; Carcinoma, Papillary-epidemiology

Abstract: This study was conducted to see the frequency of different morphological lesionsencountered in surgically excised thyroid glands. Descriptive cross sectional study. The study was conducted at the Department of Pathology, King Edward Medical University, Lahore during a2-year period commencing from 1st January 2005 to 31st December 2006. All thyroid surgicalspecimens referred from the four major Surgical Units of Mayo Hospital, Lahore, to the Department of Pathology, King Edward Medical University, Lahore, during a 2-year period [2005-2006]. Specimens from both sexes and all age groups were included in this study. Results: A total of 662thyroid specimens were examined histologically. They constituted of 588 specimens [88.82%] fromfemales and 74 specimens [11.17%] from males. The commonest lesion was Colloid Goiter[diffuse and multinodular] constituting 434 cases [65.55%]. Next in frequency were tumours[benign and malignant] constituting 151 cases [22.80%]. Benign tumours comprised of 113 cases[74.83%] and malignant constituted 38 cases [25.16%] out of 151 thyroid tumours. Follicularadenoma was the commonest tumour constituting of 108 cases [71.52%] followed by Papillarycarcinoma constituting 27 cases [17.88%]. Other non-neoplastic thyroid lesions included diffusehyperplasia [3.62%], thyroiditis [2.26%], hyperplastic nodules [1.35%], colloid nodules [1.20%],completion thyroidectomy specimens [1.05%], colloid cysts [0.90%], colloid aoiters with associatedhyperplastic changes [0.60%], goiters with thyroiditis [0.45%] and a single case of dyshormonogenetic goiter [0.15%]. Colloid goiter is the commonest lesion of the thyroid gland inboth sexes and is the commonest cause of an enlarged thyroid gland. This is followed by Follicularadenoma which is the commonest benign tumour of the thyroid. Papillary carcinoma is the commonest malignant tumour seen in all age groups with a predominance in females.

#### **Thyroid Neoplasms**

#### epidemiology

[Demographic charectrestics and risk factors in 320 thyroid cancer patients].

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Tehran University Medical Journal [TUMJ] 2007; 65 (2): 78-81 (8 ref.)

Keywords: Thyroid Neoplasms-diagnosis; Thyroid Nodule; Retrospective Studies; Risk Factors

**Abstract:** Thyroid cancer is a rare disease which includes less than 1% percent of all humancancers. The aim of this study is to evaluate the demographic characteristics and risk factorsamong patients with thyroid malignancy at the Cancer institute and mam Khomeini hospital inTehran Iran. This is a retrospective descriptive study of the charts of 320 patients admitted with thediagnosis of thyroid malignancy based on pathologic reports in the above- mentioned hospitalsfrom 1992 to 2002. From the 320 patients diagnosed with thyroid malignancy 68.1% were papillarycancer, 10.9% were follicular cancer, 10.6% were anaplastic cancer, 9.06% were medullary cancerand 1.2% were lymphoma. The average of the patients was 50.2 years, ranging from 12 to 98years; 60.6% were female and 39.4 %were male; 22.8% of the patients had histories of thyroidnodule and 5% had received radiation therapy. From the anatomic point of view 57.5% of thecancers were in the right lobe of thyroid, 38.1% were in left lobe and 4.4% in the isthmus. None ofthe patients had positive family history of thyroid malignancy. Thyroid malignancy is more prevalent in the fifth decade of life and more common among females. Therefore, among patients in this group, alarming symptoms, such as anterior neck mass, thyroid nodule and voice change, should be evaluated more seriously.

#### pathology

Anaplastic thyroid carcinoma, a report on 10 cases.

Safarpor, F.; Hedayati Omami, M.H.; Aghajanzadeh, M.; Mohammadi, F.; Najafi,B.; Hoda,S.; Mehrdad, M.

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IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 220-223 (22 ref.)

**Keywords:** Thyroid Neoplasms-mortality; Thyroid Neoplasms-surgery; Thyroid Neoplasms-therapy; Carcinoma-pathology; Prognosis

**Abstract:** Anaplastic thyroid carcinomas are undifferentiated and highly aggressive tumors of thethyroid follicular epithelium, with a disease-specific mortality approaching 100 percent. This studyreports ten cases with advanced anaplastic thyroid carcinoma with ineffective surgicalinterventions. Between 2001-2006, we treated 10 patients with anaplastic carcinoma of thethyroid. All patients presented with advanced phase and were documented by pathological study. The surgical intervention was thyroidectomy in 3 cases, debunking surgery in other three, justtracheostomy in three cases, and only biopsy in one patient. All of our patients died in 4 days to 8months after surgery. Surgical intervention had no benefit in treatment of advanced anaplasticcarcinoma of the thyroid and the suitable surgical intervention was to maintain an open airway. Early recognition of the disease is essential to allow prompt initiation of thetrapy. There is no curefor advanced situations, and surgery, radiotherapy, and chemotherapy play no important role in thetreatment.

#### **Thyrotropin**

#### blood

Maternal and fetal thyroid stimulating hormones and the fetal indices of maturation, growth, and development.

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King Abdullah Hospital - Department of Pathology Saudi Medical Journal 2007; 28 (1): 149-152 (5 ref.) Keywords: Fetal Blood-chemistry; Fetal Development

#### **Tobacco Use Disorder**

Prevalence and predictors of smokeless tobacco use among high-school males in Karachi, Pakistan.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 916-924 (24 ref.)

Keywords: Prevalence; Cross-Sectional Studies; Questionnaires; Students; Tobacco, Smokeless

**Abstract:** A cross-sectional study was conducted in 3 towns in Karachi, Pakistan to investigatethe prevalence of and factors associated with the use of smokeless tobacco among 772high-school adolescent males. A structured questionnaire collected data on sociodemographicfactors and history of cigarette and smokeless tobacco use. Prevalence of smokeless tobacco use[gutka, snuff, niswar] was 16.1% [95% CI: 13.5%-18.9%]. On multiple logistic regression analysis, the factors significantly related to smokeless tobacco use among the sample were: attendinggovernment school [adjusted odds ratio [OR] 6.3], smoking cigarettes [OR 3.2], not seeinganti-tobacco advertisements [OR 1.5], family history of tobacco use [OR 3.9], use of betel quid[OR 2.9] and use of areca nut [OR 3.2].

#### Tomography, Emission-Computed, Single-Photon

A comparison of myocardial perfusion gated SPECT studies obtained at rest and after stress.

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Medical Principles and Practice 2007; 16 (1): 34-39 (23 ref.)

**Keywords:** Stress-physiopathology; Rest-physiology; Heart Diseases-diagnosis; Exercise Test;Dipyridamole; Prospective Studies

**Abstract:** To perform a comparison between post-stress and rest gated single-photon emissioncomputer tomography [SPECT] myocardial perfusion imaging [MPI] studies to assess post-stressstunning and the variables underlying this phenomenon. This was a prospective study of 318consecutive adult patients undergoing stress and rest gated SPECT using a 2-day99mTc-tetrofosmin protocol. Bruce protocol treadmill stress [n = 93] or i.v. dipyridamolepharmacologic stress [n = 225] were used as stressors. Ejection fractions [EF] and left ventricular[LV] end-diastolic [EDV] and end-systolic volumes [ESV] were calculated using the Cedars SinaiQuantitative Gated SPECT software. Perfusion defects were visually scored using a 20-segmentmodel to obtain summed stress scores. Statistical analysis was performed by applying paired t testand multi-regression. Statistically significant [p < 0.05] paired differences between post-stress

andrest EF and ESV and type of stressing were noted. Results: Analysis of patient groups based onthe type of stress showed significantly low EF on post-stress studies for both treadmill anddipyridamole stressing and also significantly high ESV on post-stress studies for dipyridamole. Multi-regression analysis using differences in post-stress and rest EF, EDV and ESV as dependentand summed stress scores, type of stress, delay time, previous myocardial infarction and size ofLV as independent variables showed statistically significant associations between high summedstress scores [>13] and size of post-stress LV for EDV and ESV differences. High volumes werenoted on post-stress studies. The magnitudes of the observed differences were well within thereproducibility of LV volume calculations. Patients showing stunning had significant ischemia or adilated LV. The stunning manifested as high EDV and ESV differences. The magnitude of the differences observed in EF and LV volumes were not clinically significant.

#### **Toxocariasis**

#### epidemiology

Seroprevalence of toxocariasis in children aged 1-9 years in western Islamic Republic of Iran, 2003.

Fallah, M.; Azimi, A.; Taherkhani, H.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1073-1077 (18 ref.)

Keywords: Toxocariasis-immunology; Questionnaires; Prevalence; Enzyme-Linked ImmunosorbentAssay

**Abstract:** We determined the seroprevalence of Toxocara canis infection in 544 children under 10years randomly selected from urban and rural areas of Hamadan. An enzyme-linkedimmunosorbent assay was used for detection of antibodies to T. canis excretion-secretionantigens. Using a questionnaire, epidemiological factors associated with infection were examined, including age, sex, residence. Antibodies to T. canis were detected in 29 children [5.3%] and 19children [3.5%] were categorized as borderline positive; thus together this gave a prevalence oftoxocariasis of 8.8%. No significant differences were found in terms of sex, age and residence..

#### **Triazines**

#### adverse effects

Potentially serious Lamotrigine-related skin rash.

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Neurosciences 2007; 12 (1): 17-20 (19 ref.)

Keywords: Epilepsy-drug therapy; Exanthema; Stevens-Johnson Syndrome

Abstract: To report our experience with lamotrigine [LTG]-related skin rash in children withepilepsy. We identified a series of consecutive children with epilepsy treated with LTGprospectively over a 5-year period ending 1st October 2005 at King Abdul-Aziz University Hospitaland King Faisal Specialist Hospital and Research Center, Jeddah, Kingdom of Saudi Arabia. Of207 children on LTG, 15 [7.2%] developed a skin rash with ages ranging between 3-12 years[mean 7.5]. We used LTG as monotherapy in 3/15 and as add on in 12/15, mostly [10/15] inaddition to valproic acid [VPA]. The rash was mild with complete recovery in 7 children [47%]. Theremaining 8 [3.9% of the total] had severe rash that necessitated admission to hospital. Seven outof these 8 children were also receiving VPA. One child had superimposed secondary bacterialinfection and admitted for intravenous antibiotics. Two children recovered slowly with extensivepost-inflammatory hyperpigmentation. We diagnosed Stevens-Johnson syndrome in 5 children[2.4% of the total]. One of these 5 children had progressive symptoms that evolved to toxicepidermal necrolysis. He required prolonged intensive care admission and developed sepsis withdisseminated intravascular coagulopathy. He deteriorated despite supportive therapy, and died 5weeks after the initiation of LTG therapy. Lamotrigine is a novel antiepileptic drug with a favorabletherapeutic profile and good tolerability. However, LTG-related skin rash is a potentially seriousadverse event that should be carefully monitored. Although the risk is small, one should weigh thisagainst the potential benefits, particularly in children on VPA.

#### Trypanosomiasis, African

#### diagnosis

Evaluation of serodiagnostic tests for T.b. gambiense human African trypanosomiasis in southern Sudan.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1098-1107 (12 ref.)

Keywords: Seroepidemiologic Studies; Sensitivity and Specificity; Health Surveys; Enzyme-Linked Immunosorbent Assay

**Abstract:** A survey was conducted in a low-endemic and in a non-endemic area of Sudan toevaluate the specificity and efficiency of different serological antibody detection techniques forTrypanosoma brucei gambiense. Comparisons were made of the card agglutination test fortrypanosomiasis [CATT] on diluted blood, on diluted plasma and on eluates from blood dried onfilter paper, the LATEX test on diluted plasma and an ELISA on diluted plasma and filter paper. The specificities of all the serological tests were not significantly different from CATT on dilutedblood [99.5%]. The specificity of CATT on diluted blood was similar [99.3%]. The highestsensitivities [100%] were observed with CATT on diluted blood and with CATT and LATEX ondiluted plasma. CATT on diluted blood was more cost-efficient than the classic test, CATT onwhole blood.

#### **Tuberculosis**

#### epidemiology

## Epidemiology of tuberculosis among Afghan immigrants in Fars province, southern Islamic Republic of Iran.

M.R. Kadivar, M.R.; Ghaneh Shirazi, R.; Khavandegaran, F.; Karimi, M.

Research and Study Centre - Office of the Vice-Chancellor for Public Health

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 758-764 (11 ref.)

**Keywords:** Tuberculosis-diagnosis; Emigration and Immigration; Questionnaires; Sex Distribution; AgeDistribution **Abstract:** Rates of tuberculosis are high among migrants from high-incidence countries. Thisstudy determined the epidemiology of tuberculosis among Afghan immigrants in Fars province, southern Islamic Republic of Iran. From April 2000 to April 2002, all records were examined for newtuberculosis patients of Afghan origin registered at Shiraz University of Medical Sciences. A total of371 patients [208 males, 163 females] were found: 74.9% pulmonary number cutoristic extrapulmonarycases. Of the 278 new cases of pulmonary tuberculosis, 157 [56.5%] were sputum smear-positive and 121 [43.5%] were sputum smear-negative. The incidence of tuberculosis per 100 000 Afghanpopulation in

#### statistics and numerical data

## Assessment of the implementation of DOTS strategy in two chest facilities in Alexandria, Egypt. Elmahalli, A.A.; Abdel Aziz, B.F.

Alexandria University - High Institute of Public Health - Department of Health Administration and Planning

EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1085-1097 (43 ref.)

Fars province was estimated at 96.2, 88.2 and 63.5 in 2000, 2001 and 2002 respectively.

Keywords: Medical Audit; Cohort Studies; Treatment Outcome; Quality Indicators, HealthCare

**Abstract:** We conducted a cohort analysis of all patients with tuberculosis [TB] attending 2 chestfacilities in Alexandria, Egypt for the year 2003. A pre-coded checklist was used for auditingmedical records. Conformity to the DOTS drug regimen during the continuation phase of therapy,conformity to the recommended schedule of sputum smear microscopy, and quality of registrationof medical records were the 3 variables that significantly predicted treatment success. About halfthe patients received poor quality care. Strict adherence to standardized DOTS strategy isessential to bring TB under control. The overall quality index devised in this study may be used toassess and improve overall quality of antituberculosis care.

#### transmission

## Usefulness of molecular techniques to identify ongoing tuberculosis transmission in Saudi Arabia.

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Saudi Medical Journal 2007; 28 (2): 268-270 (9 ref.)

**Keywords:** Molecular Diagnostic Techniques; Travel; Health Education; Incidence; CrossInfection; Laboratories; Polymerase Chain Reaction

Abstract: This study represents the first time that molecular tracing techniques have been used toidentify patterns of tuberculosis TB infection in Saudi Arabia. The 2 strains were isolated from asocio-economically advantaged family who share a number of common facilities including a carand a driver. There are several factors that may play vital roles in on-going transmission of TB inSaudi Arabia including a high number of expatriates, the Hajj pilgrimage, and the social habits ofSaudi citizens. Our sibling case series is believed to be a frequent pattern of disease transmissionin this country. Control measures such as health education, active case finding, and prompt and supervised medical treatment are needed. More studies using molecular techniques arerecommended to find the incidence of cross infection in Saudi Arabia. In addition, moleculartechniques have to be established in all reference laboratories to help the detection of ongoingactive transmission, molecular epidemiology and detect sources of infection.

#### **Tumor Necrosis Factor-alpha**

#### blood

Tumor necrosis factor alpha serum levels and inflammatory response in acute ischemic stroke.

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Haydarpasa Numune Educational and Research Hospital - Department of 1st Neurology

Neurosciences 2007; 12 (1): 25-30 (58 ref.)

Keywords: Interleukin-6; Cerebrovascular Accident; Inflammation; Risk Factors; NeurologicManifestations; Infection Abstract: To assess the implication of tumor necrosis factor alpha [TNF-alpha] and interleukine-6[IL-6] in acute ischemic stroke and to correlate this with lesion size, vascular risk factors, and neurological impairment. We included 70 patients consecutively admitted to the Department of 1stNeurology, Haydarpasa Numune Educational and Research Hospital, Istanbul, Turkey, between September 2001 and April 2002, with first-ever ischemic cerebral infarction within the first 24 hoursfrom onset. The TNF-alpha, IL-6, fibrinogen, C-reactive protein, erythrocyte sedimentation rate[ESR] and leukocytes were determined in plasma on admission. Neurological impairment was evaluated with the modified Rankin Scale. We found higher baseline levels of TNF-alpha and IL-6in the plasma of patients with acute ischemic stroke and neurological impairment in comparison tocontrol subjects. In the large infarct group, TNF-alpha, IL-6, lowdensity lipoprotein-cholesterol andfibrinogen were found significantly higher compared to the small infarct group. While an association between TNF-alpha and IL-6 values and lesion size were determined, no relation was found between localization and etiology. The TNF-alpha level was found to be in positive correlation withIL-6, fibrinogen, and ESR. The IL-6 level was found to be in positive correlation with ESRfibringen, and leukocytes. Inflammatory findings are associated with the early stage of ischemicstroke. The TNF-alpha and IL-6 were also higher in patients with clinical worsening. The release ofproinflammatory cytokines after focal cerebral ischemia indicates a step leading to tissue necrosisor reflects the amount of ischemic brain injury, since the higher concentrations of TNF-alpha and IL-6 are found in patients with large infarctions.

#### **Turbinates**

#### surgery

Post turbinectomy hemorrhage - a study of 50 cases.

Yaqoob, M.; Pal, M.B.; Ghauri, S.; Nazir, I.

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Annals of King Edward Medical College 2007; 13 (1): 45-47 (28 ref.)

Keywords: Randomized Controlled Trials; Treatment Outcome; Nasal Obstruction; PostoperativeHemorrhage Abstract: The aim of the study is to know clearly about the major complications of a commonlyperformed nasal operation i.e. partial inferior turbinectomy. The current study is a randomized control trial and retrospective research work regarding 50 cases that underwent partial inferiorturbinectomy and its major complication i.e., hemorrhage. The said operation is performed to openup the nasal cavities that were previously blocked due to the hypertrophied inferior turbinates. Thestudy was conducted in ENT Unit II, Mayo Hospital, Lahore. The patients were randomly selectedbelonging to all age groups and to both sexes and to rural and urban areas. They got admitted inthe wards. Base line investigations were done for all the patients e.g. HBs-Ag, Anti HCV, HIV, Bleeding Time, Clotting Time, Blood and Urine C/E. The patients were made fit for generalanesthesia. Other investigations such as X- rays paranasal sinuses and CT scan were done tolook for associated disease processes in the neighborhood. The occurrence of bleeding is dividedinto per operative, primary just after the surgery, reactionary during pack period and at the time ofremoval of nasal packs and secondary when the patients are sent home and got post operative infections. With careful surgical interference, effective nasal packing, gradual removal of packs andregular suction clearance in postoperative follow up, only one patient created nuisance and neededreadmission and revised nasal packing and blood transfusion. 5 cases [10 %] got noticeable peroperative bleeding, while one patient [2%] got primary bleeding, 3 cases [6%] got reactionary, while one patient [2%] got secondary bleeding. The conclusion drawn from the study is thatalthough the operation of partial inferior turbinectomy gives immediate relief regarding nasalobstruction but it has the hazards of hemorrhage.

#### **Tympanic Membrane Perforation**

[Assessment of spontaneous healing rate of traumatic tympanic membrane perforations and three months follow up; Yazd ForensicMedicine].

Mirvakili, S.A.; Baradaranfar, M.H.; Karimi, GH.; Labibi, M.

Yazd University of Medical Sciences - Department of Otolaryngolgy Head and Neck Surgery

Tehran University Medical Journal [TUMJ] 2007; 65 (2): 57-61 (10 ref.)

Keywords: Wound Healing; Follow-Up Studies

**Abstract:** Traumatic tympanic membrane [TM] perforation is a common injury of the ear with ahigh rate of spontaneous healing if the patients strictly adhere to water precautions. The purposeof this study was to determine the factors involved in the spontaneous healing of traumatic TMperforations in order to ascertain the best treatment plan including observation, paper patch andfinally surgery. In this correlative-descriptive study, we recorded the outcome of

each patient withthree-month follow up. Included in this study were a total of 202 forensic medicine patients from theDept. of Otolaryngology Head and Neck Surgery at the Yazd University of Medical Sciences, Yazd,Iran. All patients included in this study had traumatic TM perforation. Based on otoscopicexamination, the perforations were classified as pinpoint or large. All patients received anaudiometry exam and were followed for three months. The data was collected using a special formand analyzed by chi-square test, Fisher exact test and ANOVA. This study consisted of 118 maleand 84 female patients with a mean age of 23.6 years [6-48 years]. The types of trauma included compression injury [104 patients], instrumental injury [59 patients], burn-slag injury [2 patients] andblast injury [1 patient]. One hundred and eighty patients had pinpoint TM perforations, 99.4% of which healed spontaneously by the second month, and 32 patients had large TM perforations,50% of which healed spontaneously by the second month. During the first month, 87.3% of thepatients observing water precautions had healed, however the healing rate was only 5.6% inpatients not adhering to water precautions, who suffered from otorrhea. Therefore, during this study, 185 [91.58%] patients had spontaneous healing by two months and only 6 patients ofremaining 17 patients healed with paper patch. The mean hearing loss at 500, 1000 and 2000 Hzwas 10.55 dB [5-30 dB]. In our experience, patients with traumatic TM perforations have higherspontaneous healing rate when observing water precautions. Furthermore, we recommendobservation and paper patching for three months before attempting any surgical intervention insuch patients.

#### **Typhoid Fever**

#### complications

#### Infarction of spleen in typhoid fever.

Mehta, Lalit K.; Arya, Subhash C.; Mathai, George Sant Parmanand Hospital - Department of Internal Medicine

Saudi Medical Journal 2007; 28 (2): 271-272 (6 ref.)

**Keywords:** Splenic Diseases-etiology; Splenic Diseases-diagnosis; Splenic Diseases-microbiology; Splenic Infarction **Abstract:** Ultrasonography and computed tomography scan with hypo echoic areas diagnosed asplenic infarction in a Salmonella typhi infected 30-year-old man with painful hypochondrium andepigastrium. An antibiotic recipe of eftriaxone and amikacin resulted in recovery. Imagingtechniques contribute remarkably to a rapid diagnosis and rational management of the extraintestinal lesions attributable to the Salmonella typhi/paratyphi group of organisms.

#### **Ureter**

#### injuries

Ureteral injury in an incidental vaginal incision during cesarean section.

Nasouhi, J.; Mahdavi, A.; Gity, S.

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IRCMJ - Iranian Red Crescent Medical Journal 2007; 9 (4): 215-216 (11 ref.)

Keywords: Cesarean Section-complications; Colpotomy

**Abstract:** Incidental vaginotomy, a potentially severe complication, has occasionally beenreported in cesarean sections performed after prolonged second stage labor. There is controversyon the significance of vaginotomy and its consequences in cesarean section. Ureteral injury hasbeen reported as a possible complication of cesarean section. Herein, we present a case ofanterior vaginal incision instead of lower uterine segment, where the right ureter had beenobstructed by sutures. The injury was detected and corrected during the operation. Thus incidentalvaginotomy in cesarean section must be taken seriously and avoided as far as possible. It is alsocrucial to inspect and preserve the integrity of ureters in such cases.

#### **Urinary Bladder**

#### injuries

#### latrogenic bladder injuries during obstetric and gynecological procedures.

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Saudi Medical Journal 2007; 28 (1): 73-76 (17 ref.)

**Keywords:** Intraoperative Complications-etiology; Intraoperative Complications-epidemiology; ObstetricSurgical Procedures; latrogenic Disease-epidemiology; Gynecologic Surgical Procedures; RetrospectiveStudies

**Abstract:** To review the frequency of iatrogenic bladder injuries [IBI] occurring during obstetric andgynecological [OBG] procedures and we report a single center experience with these emergencyurological consultations and interventions and analyze their outcomes and correlate them with thepresent day trends. We reviewed retrospectively the relevant data of all IBI during various OBGprocedures from the Medical Records of Abha Maternity Hospital, the OBG wing of Assir CentralHospital, Abha, Saudi Arabia over a period of 4.5 years [September 2000 to February 2005]. Various relevant factors of the injuries were studied with their final outcome. Out of the 8.684 OBGprocedures

carried out during this period there were 20 occasions of IBI directly related, with anoverall incidence of 0.23%. The majority of injuries were seen during obstetric procedures [85%]and 15% during gynecological procedures. Notably 90% of them were recognized intraoperativelyand managed. Concomitant ureteric injury was noticed in 20% of the cases. Endourological andsurgical options were both used in the management. Overall outcomes were very satisfactory,unrelated to the site, type or other associated injuries. The bladder is the most commonly injuredorgan during OBG interventions. Prompt recognition and repair of injuries should be the main goal. Gynecologists should be able to do at least a minimum diagnostic cystoscopy in emergencysituations. It is well established that this can lessen, missing iatrogenic urinary tract injuries in thisera of increasing gamut of gynecologic surgical and laparoscopic procedures.

#### **Uterine Cervical Neoplasms**

#### diagnosis

[Role of cervical smear in the diagnosis of cervical cancer in Fes-Boulemane region of Morocco].

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1153-1159 (10 ref.)

Keywords: Vaginal Smears; Early Detection; Mass Screening

**Abstract:** A retrospective study was conducted between 2000 and 2003 on 1620 women [meanage 39.6 years] in northern Morocco to determine the incidence of cervical cancer and assess thevalue of cervical smear in the diagnosis. Patients were interviewed using a questionnaire beforecarrying out a gynaecological examination and taking a cervical smear sample. Of the totalsample, 23.1% had an abnormal cervical smear, of whom 5.6% showed intraepithelial lesions,both low and high grade. The women presenting with cervicitis represented the highest percentagewith suspect smears [30.8%]; 90.9% of the smears showing high grade lesions were histologicallyconfirmed as cervical cancer. A screening programme is a matter of urgency in northernMorocco.

#### **Vaginal Smears**

#### utilization

[Significant pathologic findings in 41 Atypical Glandular Cell pap smears].

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Tehran University Medical Journal [TUMJ] 2007; 65 (3): 50-54 (27 ref.)

**Keywords:** Vaginal Smears-methods; Uterine Cervical Neoplasms-diagnosis; Uterine CervicalNeoplasms-pathology; Endometrial Hyperplasia; Curettage-utilization

Abstract: The aim of this study was to evaluate the association between atypical glandular cell[AGC] on Pap smear and significant pathologic finding to tailor management protocols. Between 2002 and 2005, Among 26893 Pap smears 122 women with AGC Pap smears[prevalence=0.45%] were referred to our colposcopy clinic. Forty one women underwentcolposcopy directed biopsy, endocervical curettage, endometrial sampling and cervical conizationto determine the cytologic and histologic correlations of AGC on pap smears. A total of 122 womenwith AGC Pap smear were found. Only 41 women accepted to participate in the study andfollowed the workup procedures. The mean age of the patients was 46.92 +/- 11.48 years [range,23-80 years]. Of these patients 13 patients [31.7%] were post menopause and 28 patients [68.2%]were in reproductive age. We found 13 [31.7%] significant pathologic findings including 4 [9.7%] high grade squamous intraepithelial lesion [HG-SIL], 3[7.3%] low grade squamous intraepitheliallesion [LG-SIL], 2[4.8%] Endometrial hyperplasia, 1[2.4%] Endometrial adenocarci-noma, 1[2.4%] adenocarcinoma of cervix, 1[2.4%] squamous cell carcinoma of cervix and 1[2.4%] papillaryserous tumor of ovary. There was not any significant difference in the prevalence of significant pathologic findings and subtype of squamous or adenomatous lesions between pre andpostmenopausal group. AGC on Pap smear was associated with a clinically significant diagnosisin approximately one third of our cases. The women with a diagnosis of AGC on cervicovaginalsmear are needed to be evaluated at least with colposcopy, endocervical and endometrialcurettage. Clinicians should be careful about the significance of AGC in pap smears.

#### Vaginosis, Bacterial

#### drug therapy

Metronidazole for bacterial vaginosis - a comparison between vaginal gel and oral therapy.

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Annals of King Edward Medical College 2007; 13 (1): 96-97 (7 ref.)

**Keywords:** Vaginosis, Bacterial-microbiology; Metronidazole-therapeutic uses; Administration, Topical;Gels; Metronidazole-administration, dosage; Treatment Outcome; Administration, Oral

**Abstract:** To compare the efficacy of 0.75% metronidazole vaginal gel with oral metronidazole forthe treatment of bacterial vaginosis. Comparative study, conducted in the Department of Obstetricsand Gynaecology at Ghurki Trust Teaching Hospital attached with Lahore Medical and DentalCollege, Lahore. The total number of patients included were 290. They were divided into twogroups, by random selection. Group A [150 patients] and Group B [140 patients]. 150 patientsreceived metronidazole vaginal gel for 5 days. 98 [85%] patients were free of signs of infection. 11[9.5%] patients showed partial response and the dose was repeated, while 6 [5.2%] patientsshowed no response to treatment. 140 patients received metronidazole 400 mg x BD orally for 5days. In which 80 [77%] patients were free of discharge while 14 [13%] patients and 10 [9.6%]patients showed partial or no response respectively and it was mainly because of gastro-intestinalcomplaints. Vaginal metronidazole is effective for the treatment of bacterial vaginosis and isassociated with better compliance and less side effects as compared to oral metronidazole.

#### Vancomycin

#### therapeutic uses

Vancomycin use in a large teaching hospital in Shiraz, Islamic Republic of Iran, 2003.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (5): 1195-1201 (20 ref.)

**Keywords:** Vancomycin-blood; Guideline Adherence; Infection Control; Hospitals, Teaching; Questionnaires; Cross-Sectional Studies

**Abstract:** We investigated adherence to the Hospital Infection Control Practice AdvisoryCommittee [HICPAC] guidelines on vancomycin prescription in a large university-affiliated hospitalin Shiraz. From August to December 2003, 200 hospitalized patients received vancomycin. Foronly 12 [6%] of these patients was vancomycin prescribed appropriately according to HICPACguidelines. The main reasons why vancomycin use did not comply with HICPAC recommendations were: surgical prophylaxis in patients with negative cultures for resistantGram-positive organisms, no investigation of vancomycin serum levels in patients receiving > 48hours of vancomycin, vancomycin serum levels not repeated in patients receiving > 1 week ofvancomycin, no appropriate adjustment of dosage with respect to serum levels in patients receiving vancomycin.

#### Varicose Veins

#### therapy

Role of descending venography and endovenous embolization in treatment of females with lower extremity varicose veins, vulvar and posterior thigh varices.

Ashour, Majed A.; Soliman, Hisham E.T.; Khougeer, Ghaith A.

Saudi Aramco Medical Services Organization - Dhahran Health Center - Surgical Services Division

Saudi Medical Journal 2007; 28 (2): 206-212 (18 ref.)

**Keywords:** Embolization, Therapeutic; Phlebography; Questionnaires; Treatment Outcome; Vulva-pathology; Thighpathology

Abstract: To evaluate the prevalence of refluxing pelvic veins among female patients with lowerextremity varicose veins and the role of embolization treatment in these cases. Of 158 femalepatients suffering from primary varicose veins of the lower extremities presented to the VenousDisease Clinic at Dhahran Health Center between January 2002 and December 2004, 25 patients[15.8%] were noted to have vulvar or postero-medial thigh varices or both. Those were referred fortrans-jugular descending pelvic venography with or without subsequent embolization of thecontributing refluxing veins. Venous reflux contributing to the vulvoperineal or posterior thighvarices was detected in 23 patients [92%] on catheter venography. Left ovarian venous reflux wasresponsible for 60% of all cases. Embolization, using multiple coils, was successful in 18 patientswith positive reflux [78.3%]. One patient had primary vulvar venous malformation that requiredadditional percutaneous sclerotherapy using dehydrated ethanol. Four patients hadfemoro-saphenous reflux contributing to the varices and required subsequent surgical ligationexcision. All treated cases showed significant improvement of their symptoms without anyprocedure related complications. In patients with vulvar or postero-medial thigh varicose veins, radiological study of ovarian and hypogastric venous reflux should be considered. Trans-jugulardescending venography and embolization is a feasible, effective and safe diagnostic andtherapeutic modality.

#### **Venous Thrombosis**

A patient with recurrent deep vein thromboses and seizures.

Bahou, Yacoub; Hadidi, Azmi

Jordan University Hospital - Department of Neurosciences

Neurosciences 2007; 12 (1): 88-89 (2 ref.)

**Keywords:** Recurrence; Seizures; Tomography, X-Ray Computed; Magnetic Resonance Imaging;Infarction; Heparin; Antiphospholipid Syndrome

#### diagnosis

An unusual presentation of postpartum ovarian vein thrombosis.

Hakim, fayaz A.; Khan, Nadra N.; Qushmaq, Khalid A.; Al Shami, Sadiq Y.

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King Fahd Medical City - Main Hospital - Department of Internal Medicine

Saudi Medical Journal 2007; 28 (2): 273-275 (10 ref.)

Keywords: Ovarian Diseases-diagnosis; Ovarian Diseases-etiology; Puerperal Disorders; Ovary-bloodsupply;

Tomography, X-Ray Computed

**Abstract:** Ovarian vein thrombosis is a rare but potentially serious complication followingchildbirth. The majority of patients present during the first week postpartum, with fever and rightlower quadrant abdominal pain. We report an unusual case of postpartum ovarian vein thrombosiswho presented with fever, low backache, and painful thighs. A high index of suspicion is crucial todiagnose and treat this condition in order to avoid serious consequences.

#### Vesicovaginal Fistula

#### surgery

#### Management of vesicovaginal fistulae in urological context.

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JCPSP - Journal of the College of Physicians and Surgeons Pakistan 2007; 17 (1): 28-31 (27 ref.)

**Keywords:** Vesicovaginal Fistula-diagnosis; Obstetric Labor Complications-surgery; Prospective Studies; Retrospective Studies

Abstract: To find out the commonest cause of vesicovaginal fistula [VVF] and describe thesurgical management. A descriptive study. The Department of Urology and Transplantation, Pakistan Institute of Medical Sciences [P.I.M.S.] Islamabad, from January 1995 to April 2002. Thesubjects were presenting with vesicovaginal fistulae. Symptomatology and demographic causeswere noted. Investigation included IVU, cystoscopy, vaginoscopy and examination underanesthesia. Repair and outcome was noted. Patients presented with genitourinary fistulae otherthan VVF were excluded from the study. Most of the patients were young women of childbearingage. The causative factor of VVF in 27 [84.3%] out of 32[100%] patients was obstetrical trauma. Surgical repair proved to be successful through transabdominal route in all 24 [100%] cases of VVF and in 4 [80%] out of 5 [100%] cases through transvaginal route. Repair failed in the 2[100%]attempted through abdominovaginal route and 1[100%] through endoscopic fulguration. Todescribe an overall result, 28 [87.5%] vesicovaginal fistulae were successfully repaired at firstattempt. Obstetrical trauma was the commonest cause of VVF in this series. Transabdominalrepair was the most successful method of repair in this series. Despite the good results of surgical repair, attempt should be focused on the prevention of VVF.

#### Wandering Spleen

#### complications

#### Wandering spleen with torsion of the pedicle.

Safioleas, Michael C.; Stamatakos, Michael C.; Diab, Ahmad I.; Safioleas, Panayotis M.

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Saudi Medical Journal 2007; 28 (1): 135-136 (6 ref.)

Keywords: Wandering Spleen-diagnosis; Wandering Spleen-surgery; Torsion; SplenicDiseases-complications

**Abstract:** Wandering spleen is a rare medical entity. It usually occurs at 20-40 years of age, andmost cases are seen in women. Clinical diagnosis is difficult due to lack of symptoms, unlesssplenic torsion has occurred and clinical symptomatology of acute abdomen develops. Thediagnosis can be confirmed by imaging techniques. Treatment is operative due to complications ofsplenic infarction. Splenopexy is the usual treatment, except for cases of splenic infarction. Splenectomy should be carried out when there is no evidence of splenic blood flow after detorsion of the spleen and in cases of excessive splenomegaly.

#### Yoga

Effects of hatha yoga on well-being in healthy adults in Shiraz, Islamic Republic of Iran.

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EMHJ - Eastern Mediterranean Health Journal 2007; 13 (4): 829-837 (35 ref.)

Keywords: Questionnaires; Mental Health; Complementary Therapies

**Abstract:** There have been many studies on yoga and its effects on physical function, but lessattention has been paid to self assessment of improvement in physical and mental health andwell-being by yoga practitioners. This study was designed with that purpose using the SF-36questionnaire in 107 volunteers [44 males and 63 females, mean age 34 [standard deviation 7]years] who attended yoga classes for 6 months. They completed the questionnaire before and afterthe yoga practice. There was significant improvement in scores for all health items. The differences according to age, sex and education level were not significant. It is concluded that yogacan improve physical and mental health, and promotes well-being.

## Appendix I

## **Author Index**

Abban, Gulcin

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Mousavi, A.S.

ENDOMETRIAL NEOPLASMS (complications)

Mousavi, M.
DIABETIC RETINOPATHY (diagnosis)

Moustafa, A.

BETA-THALASSEMIA (diagnosis)

Movahed, M.R.

VANCOMYCIN (therapeutic uses)

Movahedian, A.H.

ABNORMALITIES (congenital)

Mowlavi, A.A. MAMMOGRAPHY

Mubeen, Rana Muhammad

VESICOVAGINAL FISTULA (surgery)

Muhammad, O.F.

FISSURE IN ANO (drug therapy)

Muhammed, Shakir M.

LYMPHANGIOLEIOMYOMATOSIS (diagnosis)

Muneer. M.

THYROID GLAND (surgery)

Murthy, Sabita K.

DOWN SYNDROME (epidemiology)

Musawa, Eman S.

DROWNING (prevention and control)

Nabavi, Mohammad

AUTOIMMUNE DISEASES

Naderi Nasab, Mahbobeh BACTERIAL INFECTIONS (microbiology)

Nadi, Ebrahim

ASTHMA (etiology)

Naeem. M. DECOMPRESSION, SURGICAL (adverse

effects)

Nafar, Mohsen

KIDNEY TUBULAR NECROSIS, ACUTE

Naguib, K.K.

ABNORMALITIES, MULTIPLE

Naheed, Farhat

VESICOVAGINAL FISTULA (surgery)

Najafi,B.

THYROID NEOPLASMS (pathology)

Namazi, S.

VANCOMYCIN (therapeutic uses)

Nampoory, Mangalathillam R.N. PARATHYROID HORMONE (blood)

Nanjappa, Leelavathy

AMENORRHEA (genetics)

Nagvi, A.H.

CORONARY ARTERY BYPASS

Naru, Tahira

SARCOMA, EWING'S (diagnosis)

Nasiri, Jafar ANEMIA (epidemiology) Nasouhi, J. **URETER** (injuries)

Nasrollahi, Alireza PRURITIS (drug therapy) Nassar, M.F.

T-LYMPHOCYTES (analysis)

Navabi, M.A. FONTAN PROCEDURE Navaei, Fakhri

SEPSIS (blood) Naveed, Sehba DOWN SYNDROME (epidemiology) Nawaz, Fauzia Haq

SARCOMA, EWING'S (diagnosis) Naz. F.

HERNIA, INGUINAL (surgery) Nazari, M.

SUBSTANCE-RELATED DISORDERS

Nazarinia, M.A.
PERITONITIS (etiology)

Nazir, I.

TURBINATES (surgery) Nemati, Eghlim

ENDOCARDITIS, BACTERIAL (therapy)

Nergiz, Yusuf TESTIS (pathology) Neyestani, Tirang R.

DIABETES MELLITUS, TYPE 2 (immunology)

Niamat, Ullah BREAST FEEDING

Niaz, Z. HERNIA, INGUINAL (surgery)

Niazi, S. THYROID GLAND (surgery)

Nickavar, Azar PERITONEAL DIALYSIS (adverse effects)

Nikkhah, A. KERNICTÉRUS Nikvash, S.

HELICOBACTER INFECTIONS (diagnosis)

Ninan, Vadakethu T.

PARATHYROID HORMONE (blood)

Nisa, M.U. FASTING (physiology) Nisa, Mehr Un LEIOMYOMA (pathology) Noor, Juvairia

LEIOMYOMA (pathology)

Norain, Ahmed

EMERGENCY SERVICE, HOSPITAL (trends) Norouzi, Shahram

CALCIUM (blood) Nouh. Mohammed S. HYPERTENSION (epidemiology) Nouralizadeh, Akbar KIDNEY TUBULAR NECROSIS, ACUTE

Nourizadeh, Maryam **AGAMMAGLOBULINEMIA** 

Nozari, Y.

CATHETERIZATION, PERIPHERAL (adverse effects)

Nusair, B.M. PREGNÁNCY, TUBAL Obeid, Tahir H.

INTRACRANIAL HYPERTENSION

(physiopathology) Ocak, Sabahattin

INTRAUTERINE DEVICES (adverse effects)

Oguz, Emin O.

ALUM COMPOUNDS (toxicity) Oluwole, Olabode P. SKIN ULCER (etiology)

Olyaei, G.R.

ANTERIOR CRUCIATE LIGAMENT (surgery)

Omay, Serdar B.

HEPATOCYTE GROWTH FACTOR (physiology)

Omeish, Abdallah F.

CARDIOVASCULAR DISEASES (therapy)

Omeroglu, Hakan

CONTRAST MEDIA (adverse effects) Omoti, Afekhide E.

LYMPHOMA, NON-HODGKIN (drug therapy)

Omoti, Caroline E. LYMPHOMA, NON-HODGKIN (drug therapy)

Omotoso, A.B.O.

HYPERTENSION (physiopathology)

Onlen, Yusuf

CROSS INFECTION (epidemiology)

Opadijo, O.G.

HYPERTENSION (physiopathology)

Orak, Murat

RESUSCITATION (methods)

Oreizi, Farzad SEPSIS (blood) Ortendahl, Monica PATIENTS (psychology)

Osisanya, Wemimo P.

AUDITORY THRESHOLD (physiology) Osman, Rasha R.

ANTIBODIES, ANTICARDIOLIPIN Osoba, Abimbola O.

**BK VIRÚS** 

Ostadi, Vajiheh SEPSIS (blood) Otoukesh, Hassan

PERITONEAL DIALYSIS (adverse effects)

Ovali, Ercument

HEPATOCYTE GROWTH FACTOR (physiology)

Oyakhire, George K. THYROTROPIN (blood)

Ozbek, Ayda

CYTOMEGALOVIRUS INFECTIONS (congenital)

Ozbilim, Gulay

NEOPLASM METASTASIS Ozdemir, Mehmet B.

DYSKERATOSIS CONGENITA (pathology)

Ozesmi, Cigdem BEHCET SYNDROME Ozogul, Candan

DIABETES MELLITUS, EXPERIMENTAL

(pathology) Ozsoy, Arzu

ORBITAL NEOPLASMS

Oztop, Ilhan

CARCINOMA, RENAL CELL (secondary)

Ozturk, Ali

SOFT TISSUE INJURIES (therapy)

Ozturk, Hayrettin RESUSCITATION (methods) Padumanonda, Tanit

SENNA PLANT (chemistry)

Pajouhi, M.

DIABETIC NEUROPATHIES (prevention and

control) Pal, M.B.

TURBINATES (surgery)

Palanivelu, Chinnusamy DEGLUTITION DISORDERS (etiology) Pandyan, G.V. Soundra

URINARY BLADDER (injuries)

Parvez, Tariq STOMACH NEOPLASMS (diagnosis) Parvez, Z.

CORONARY ARTERY BYPASS

Parvin, Mahmoud

KIDNEY TUBULAR NECROSIS, ACUTE

Parvizi, Rezayat

APROTININ (administration, dosage) ANEURYSM, DISSECTING (surgery)
CORONARY ARTERY BYPASS

Pathan, Shahed K.

INFERTILITY, MALE (etiology) Pazooki, Ramin

PROTOZOAN INFECTIONS (physiopathology)

Pearson, D.

PERSONAL SATISFACTION

Pervez, Z.

MYOCARDIAL ISCHEMIA (surgery)

Peyvandi, A.A.

AUDIOMETRY, EVOKED RESPONSE

Pour Reza Gholi, Fatemeh

PRURITIS (drug therapy) ENDOCARDITIS, BACTERIAL (therapy)

Pourfathollah, A.A. **BLOOD DONORS** 

Prakash, N.

PROTEIN-ENERGY MALNUTRITION

(epidemiology)

Pramanik, S.S.

PREGNANCY (immunology)

Pramanik, T.

PREGNANCY (immunology)

Prasad, A.

PROSTATE-SPECIFIC ANTIGEN (blood)

Puliyclil, Mini A.

PARATHYROID HORMONE (blood)

Qadan, Laila R.

INFERTILITY, MALE (etiology)

Qadeer, R.
HEPATITIS B (epidemiology)

Qadri, S.H.

IRRITABLE BOWEL SYNDROME

Qannam, Ahmed MELANOMA (pathology)

Qureshi, Abid L.

ANGIOTENSIN-CONVERTING ENZYME

INHIBITORS (adverse effects)

Qureshi, Irfan Z.

ANGIOTENSIN-CONVERTING ENZYME INHIBITORS (adverse effects)

Qureshi, Naseem A. GENITALÍA, MALE (injuries)

REFERRAL AND CONSULTATION

Qureshi, Riaz

METABOLIC SYNDROME X (epidemiology)

Qureshi, S.S.

CEREBROVASCULAR ACCIDENT (diagnosis)

Qureshi, S.S.B.

HELICOBACTER PYLORI (drug effects)

Qushmaq, Khalid A.

VENOUS THROMBOSIS (diagnosis)

Rabbani, A.

ARTERIOVENOUS FISTULA (surgery)

Rabbi, Fazle

CORONARY ARTERY BYPASS

Rabie, M.E.

GALLSTONES (epidemiology)

Radmehr, H.

FONTAN PROCEDURE

Rafay, Akbar M.

BETA-LACTAMASES (biosynthesis)

Rafeey, M.

HELICOBACTER INFECTIONS (diagnosis)

Rafeey, Mandana

LIPOPROTEINS, LDL (chemistry)

Rafiei, Alireza

ASTHMA (etiology)

Rafindadi, Abdul Mumini H.

SKIN ULCER (etiology)

Rafiq, Z.

PITUITARY GLAND (radiography)

Rahimi Rad, M.H.

ASTHMA (epidemiology)

Rahmanian, A.

SPINA BIFIDA CYSTICA (epidemiology)

Rajabi, M.

MAGNESIUM SULFATE (therapeutic uses)

Rajaee, A. PERITONITIS (etiology)

Rajangam, Sayee AMENORRHEA (genetics)

Rakei, S.M.
SPINA BIFIDA CYSTICA (epidemiology)

Ramzi, M.

NAUSEA (therapy)
Rangarajan, Muthukumaran

DEGLUTITION DISORDERS (etiology)

Rasa, S.N.I.
EXUDATES AND TRANSUDATES (analysis)

Rasheed, P.

BIRTH INTERVALS

Rashtchizadeh, Nadereb LIPOPROTEINS, LDL (chemistry)

Rasouli, Mohammad R. ARTERIOVENOUS FISTULA

Rasti, M.

PROSTATE-SPECIFIC ANTIGEN (blood)

Rasul, Shahid

CHOLELITHIASIS (epidemiology)

Rathore, R. HELICOBACTER PYLORI (drug effects)

Raufie, M.B.

SUBSTÂNCE-RELATED DISORDERS

Rayatzadeh, Hussein ARTERIOVENOUS FISTULA

Razavi, Alireza ASTHMA (etiology)

Razmpa, E.

THYROID NEOPLASMS (epidemiology)

Razzaghi, Mohammad Reza PROSTATIC HYPERPLASIA (surgery)

Reda, Amal N.

LYMPHANGIOLEIOMYOMATOSIS (diagnosis)

Rehmani, Rifat

EMERGENCY SERVICE, HOSPITAL (trends)

Rezaei, Nima

**AGAMMAGLOBULINEMIA** Rezaeian, M.

SUICIDE (epidemiology)

Rhaman, M.A.

TRYPANOSOMIASIS, AFRICAN (diagnosis)

Riaz, A.

SURGICAL FLAPS

Riazi, Kiarash

FERTILIZATION IN VITRO (drug effects)

Rivaz, M. NAUSÉA (therapy)

Rizvi, Javed

SARCOMA, EWING'S (diagnosis)

Rizvi, S. LABOR, INDUCED

Rouchi, Alireza Heidary

CALCIUM (blood)

Roudbari, M.

INFANT, LOW BIRTH WEIGHT

Roushan, M.R.H.

HEPATITIS A (epidemiology)

Rozi, S. TOBÁCCO USE DISORDER

Saad, A.
REFRACTIVE ERRORS (etiology)

Saad, S. FASTING (physiology)

Saaqib, S.

PREGNANCY OUTCOME

Saba, N.

MATERNAL MORTALITY Sabban, Mostafa A. **CORONARY ARTERY BYPASS** 

Saberi Firoozi, M.

COLORECTAL NEOPLASMS (diagnosis)

Sabir, Mubasher S.

ELAEAGNUS UMBELLATA EXTRACT [SUBSTANCE NAME]

Sadat Hashemi, Seyed M.

PROTOZOAN INFECTIONS (physiopathology)

Sadeghi Hasanabadi, M.

THYROID NEOPLASMS (epidemiology)

Sadeghi, Esmaeel
PENICILLIN RESISTANCE

Sadeghi, Peyman

KIDNEY TUBULAR NECROSIS, ACUTE

Sadeghimehr, R. BURNS (mortality)

Sadeh, M.

HELICOBACTER INFECTIONS Sadri, Gholamhossein SMOKING (complications)

Saeed, Gulzar SCAPHOID BONE (injuries)

Safaee, GhR.

VANCOMYCIN (therapeutic uses)

Safaei, Naser

ANEURYSM, DISSECTING (surgery)

Safaiyan, Abdol Rasool CORONARY ARTERY BYPASS

Safarian, A.

SPINA BIFIDA CYSTICA (epidemiology)

Safarpor, F.
THYROID NEOPLASMS (pathology)

Safarpour, Gh. FONTAN PROCEDURE

Safavi, A.

ANTITUBERCULAR AGENTS

Safioleas, Michael C.

WANDERING SPLEEN (complications) Safioleas, Panayotis M.

WANDERING SPLEEN (complications)

Sagheb, R.

HEPATITIS A (epidemiology)

Said, Z.N.

HEPATITIS B (immunology)

Sakeni, Riyadh A. BURSITIS (drug therapy) NITRIC OXIDE (blood)

Salako, Babatunde L.

AUDITORY THRESHOLD (physiology)

Salama, S.I.

HEPATITIS B (immunology)

Salami, T.A.T.

HYPERTENSION (physiopathology)

Salati, M.I.

GALLSTONES (epidemiology)

Saleh, A.

HEPATIC ENCEPHALOPATHY (blood)

Saleh, Hussein K.

RHEUMATIC HEART DISEASE (epidemiology)

Salehi, M.

FONTAN PROCEDURE Salehianzandi, N.

MAGNETIC RESONANCE IMAGING

Salim, Khalid

MYOCARDIAL STUNNING

Samad, A.

FASTING (physiology) Samadian, Fariba **OXIDATIVE STRESS** 

Samaila, Modupeola O.

SKIN ULCER (etiology)

Saman, Igbal

KORO (psychology)

Samee, F.

RADIODERMATITIS (prevention and control)

Samy, S.M.

HEPATITIS B (immunology) Sanatkarfar, M.

FONTAN PROCEDURE

Sanya, E.O.

HYPERTENSION (physiopathology)

Sardar, Khurram P.

BICUSPID (anatomy and histology)

Sarihan, Sule

NEOPLASM METASTASIS

Sarwi, Muna F.

DROWNING (prevention and control)

Sattar, Irfan

CHOLELITHIASIS (epidemiology)

Savas, Lutfu

CROSS INFECTION (epidemiology)

Savas, Nazan

CROSS INFECTION (epidemiology)

Scheutz, Flemming TOMOGRAPHY, EMISSION-COMPUTED, SINGLE-PHOTON

Schmidt, Henk G.

REFERRAL AND CONSULTATION

Seber, Sinan

CONTRAST MEDIA (adverse effects)

Sedaghat, M.

KERNICTERUS Sehirlioglu, Ali

BACK PAIN (etiology)

Seifi, Sepideh OXIDATIVE STRESS

Selvan, J.P.

HYPERLIPOPROTEINEMIA TYPE II (diagnosis)

Senel, Emrah

FIBROADENOMA (pathology)

Senemar, A.
THYROID FUNCTION TESTS

Senthilkumar, Saravanan DEGLUTITION DISORDERS (etiology)

Separham, KH.

CORONARY ARTERIOSCLEROSIS (etiology)

Sepehri, Houri

FIBROBLAST GROWTH FACTORS

Shaaban, F.A.

HEPATITIS B (immunology)

Shabbir, B.

HELICOBACTER PYLORI (drug effects)

CEREBROVASCULAR ACCIDENT (diagnosis)

Shabib, Souheil M.

LIVER FAILURE, ACUTE (chemically induced)

Shaeri, H.

THYROID FUNCTION TESTS

Shafi, T.

CORONARY ARTERY BYPASS

Shafiei, M.

CREUTZFELDT-JAKOB SYNDROME (diagnosis)

Shafiq, F.

HEPATITIS B (epidemiology)

Shafiq, M.

FASTING (physiology) Shafique, Mobeen

KIDNEY (abnormalities)

Shah, A.

FISSURE IN ANO (drug therapy)

Shahbaz, A.

MYOCARDIAL INFARCTION (drug therapy)

Shahid, k.
PSEUDOMYXOMA PERITONEI

Shahid, K.B.

PITUITARY GLAND (radiography)

Shahin, Amr A.

DROWNING (prevention and control)

Shahrjerdi, Sh.

ARRHYTHMÍA

Shaikh, Awais Ahmed

SCAPHOID BONE (injuries)

Shakeri, R.

CELIAC DISEASE

Shakiba, M.

MAGNETIC RESONANCE IMAGING

Shakir, H.

FISSURE IN ANO (drug therapy)

Shakurie, S.K. SUBSTANCE-RELATED DISORDERS

Shami, N.

VAGINOSIS, BACTERIAL (drug therapy)

Shamo'on, H.I.

BODY TEMPERATURE (methods)

Shamsadini, A.

TELANGIECTASIA, HEREDITARY

HEMORRHAGIC (diagnosis)

Shamsadini, S.

TELANGIECTASIA, HEREDITARY

HEMORRHAGIC (diagnosis)

MADUROMYCOSIS (diagnosis)

Shara, Maryam Essa A.

DOWN SYNDROME (epidemiology)

Sharbaji, Amer A.

HYPERPARATHYROIDISM, PRIMARY

(complications)

Shariat Zadeh, Nastaran

DIABETES MELLITUS, TYPE 2 (immunology)

Sharifi Yazdi, M.K.

HELICOBACTER INFECTIONS

Sharifi, H.

SMOKING (epidemiology)

Sharma, Adesh **BONE WIRES** 

Sharquie, Khalifa E.

MELANOMA (diagnosis)

ORBITAL NEOPLASMS (complications)

Shawish, Fahmy M.I.

PLACENTA ACCRETA (diagnosis)

Shawki, Hilal B.

LYMPHANGIOLEIOMYOMATOSIS (diagnosis)

Sheikh, M.A.

PROSTATE-SPECIFIC ANTIGEN (blood)

Sheikh, N.H.

TETANUS TOXOID

Sheikh, R.A.

LEISHMANIASIS, CUTANEOUS (epidemiology)

Shemirani, H.

CORONARY ARTERIOSCLEROSIS (etiology)

Shenavandeh, S.

PERITONITIS (etiology)

Sherwani, Mohammad Khalid A.

**BONE WIRES** 

Sheth, M.

PROTEIN-ENERGY MALNUTRITION

(epidemiology)

Shirhzi, H.R. Ghafarian

PROSTATE-SPECIFIC ANTIGEN (blood)

Shirkhoda, Zahra

**AUTOIMMUNE DISEASES** 

Shirodkar, Samir S.

GENITALIA, MALE (injuries)

Shoaib, M.

PSEUDÓMYXOMA PERITONEI

Shoaybi, G.

MAGNESIUM SULFATE (therapeutic uses)

Shokouhi, Raheleh

SEPSIS (blood)

Shooshtari, M.M.
BLOOD DONORS

Siassi, F.

RIBOFLAVIN DEFICIENCY

Siddiqi, K.

INJECTIONS, EPIDURAL (adverse effects)

Siddigi, K.J.

PREGNANCY OUTCOME

RECOVERY ROOM

HYSTEROSCOPY

Siddiqi, Naim KORO (psychology)

Siddiqi, Tariq A.

CORONARY ARTERY BYPASS

Siddique, K.

PSEUDOMYXOMA PERITONEI

Siddique, T.

IRRITABLE BOWEL SYNDROME

Siddiqui, K.J.
PITUITARY GLAND (radiography)

Siddigui, M. Irfanullah

BICUSPID (anatomy and histology)

Siddiqui, Tauqeer A.

MENINGITIS, ESCHERICHIA COLI (microbiology)

Smolenski, A.V.

ARRHYTHMIA

Sohail, K.M.

FISSURE IN ANO (drug therapy)

Sohail, M.

HEMATOMA (diagnosis)

Sohanaki, H.

SUBSTANCE WITHDRAWAL SYNDROME (drug

therapy)

Soheili, M.

INFANT, LOW BIRTH WEIGHT

Sokrab, Tag El Din O.

ANTIBODIES, ANTICARDIOLIPIN

Soleimani, A.A.

FONTAN PROCEDURE

Soleimani, M.

LEISHMANIASIS, CUTANEOUS (drug therapy)

Soliman, Hisham E.T.

VARICOSE VEINS (therapy)

Solmaz, Dilek

CARCINOMA, RENAL CELL (secondary)

Soltane, I. SMOKING (psychology)

Soltanimohammadi, S.

MAGNESIUM SULFATE (therapeutic uses)

Somay, Goksel
TUMOR NECROSIS FACTOR-ALPHA (blood)

Sonmez, Bircan

HEPATOCYTE GROWTH FACTOR (physiology) Sonmez, Mehmet

HEPATOCYTE GROWTH FACTOR (physiology)

Sourosh, Setareh

BACTERIAL INFECTIONS (microbiology)

Stamatakos, Michael C.

WANDERING SPLEEN (complications) Stuhrmann, Manfred

TELANGIECTASIA, HEREDITARY HEMORRHAGIC (therapy)

Suer, Cem

BEHCET SYNDROME

Sulimani, Riad A.

GRAVES' DISEASE OSTEOPOROSIS (epidemiology)

Sultan, T.

SURGICAL FLAPS

Sultana, A.

MATERNAL MORTALITY

Suntornsuk, Leena

SENNA PLANT (chemistry)

Syed, Ghulam M. TOMOGRAPHY, EMISSION-COMPUTED,

SINGLE-PHOTON

Sylvestre, Camille

PREGNANCY, ECTOPIC (etiology)

Tabatabai, Sh.

RIBOFLAVIN DEFICIENCY

Tabibi, Ali

KIDNEY TUBULAR NECROSIS, ACUTE

Taghipour, M.

SPINA BIFIDA CYSTICA (epidemiology)

Taher, Saadi M.

RENAL REPLACEMENT THERAPY

Taherkhani, H.

TOXOCARIASIS (epidemiology)

Tahir, Kaleem M.

ELAEÁGNUS UMBELLATA EXTRACT

[SUBSTANCE NAME]

Tahir, M.S.

LIDOCAINE (administration, dosage)

RESPIRATION, ARTIFICIAL

Tajammul, A.

HYSTRECTOMY Tajzadeh, Parasto

BACTERIAL INFECTIONS (microbiology)

Take, Gulnur

DIABÉTES MELLITUS, EXPERIMENTAL

(pathology)

Talebian, S.

ANTERIOR CRUCIATE LIGAMENT (surgery)

Tamim, Hani

RENAL REPLACEMENT THERAPY

Taneri, Ferit

HYPERPARATHYROIDISM, PRIMARY (etiology)

Tarakcioglu, Mehmet

OCCUPATIONAL EXPOSURE

Tarar, M.N.

SURGÍCAL FLAPS

Tareen, M.K.

COATED MATERIALS, BIOCOMPATIBLE

DENTAL LEAKAGE

Tariq, M.

FOREIGN BODIES EAR (abnormalities)

DENTAL LEAKAGE

Tariq, S.

FASTING (physiology)

Tarzamni, Mohammad K.

CORONARY ARTERY BYPASS

Tas, Askin

RESUSCITATION (methods)

Tasneem, Habiba

CORONARY ARTERY BYPASS

Tasneem, R.A.

KIDNEY TRANSPLANTATION
CIRCUMCISION, MALE (complications)

PRIAPISM (etiology)

Tastepe, irfan

ECHINOCOCCOSIS (complications)

Tatar, Ilkan

DYSKERATOSIS CONGENITA (pathology)

Tavana, Sasan

ASTHMA (etiology)

Tehrani, M.R. Mohajeri

DIABETIC NEUROPATHIES (prevention and

control)

Terrab, Z.

SYPHILIS (epidemiology)

Thabet, H.

SMOKING (psychology)

Thahim, Kalimullah

SINUSITIS (diagnosis)

Theumann, N.

LUMBAR VERTEBRAE (injuries)

Thotathil, Ziad

BREAST NEOPLASMS (pathology)

Tillawi, Ibrahim S.

LEUKEMIA. MYELOID.

PHILADELPHIA-POSITIVE (pathology)

PLASMACYTOMA (metabolism)
NEOPLASMS, MULTIPLE PRIMARY (pathology)

Tirvaki. Betul

RED-CELL APLASIA, PURE (complications)

Tiryaki, Tugrul

FIBROADENOMA (pathology)

Tohamy, A.G.

T-LYMPHOCYTES (analysis) Toke, Satyawan P. ABDOMEN (abnormalities)

Toki, Robert

BETA-LACTAMASES (biosynthesis)

Tokoglu, Figen

ORBITAL NEOPLASMS

Toosi, N.A.

HEPATITIS B (epidemiology)

Topcu, Soykan

RESUSCITATION (methods)

Toprak, Ugur

ORBITAL NEOPLASMS

Torkabadi, E.

SEPSIS (immunology)

Triggle, David J. DRUG DELIVERY SYSTEMS

Tuncok, Yesim

MYOCARDIAL CONTRACTION

Turgut, Sebahat
ALUM COMPOUNDS (toxicity)

Turhan, Egemen

SOFT TISSUE INJURIES (therapy)

Ucmak, Hasan

CYTOMEGALOVIRUS INFECTIONS (congenital)

Umber, A.
INFANT. LOW BIRTH WEIGHT

Umber, F. LABOR, INDUCED

Ur Rehman, H.

LEISHMANIASIS, CUTANEOUS (epidemiology)

Uraigat, Ahmad

HEMORRHOIDS (surgery)

Uthaman, B.

HYPERLIPOPROTEINEMIA TYPE II (diagnosis) Vahidreza, S. MADUROMYCOSIS (diagnosis)

Valadan, M.

PREMATÚRE BIRTH

Valojerdi, Mojtaba R.

FIBROBLAST GROWTH FACTORS

Varesvazirian, M.

TELANGIECTASÍA, HEREDITARY

HEMORRHAGIC (diagnosis)

Velayati, A.A.

ANTITUBERCULAR AGENTS

Wahla, M.Z.

HEMATOMA (diagnosis)

Wandroo, Abdul Khaliq MENINGITIS, ESCHERICHIA COLI

(microbiology)

Waris, S.

LIDOCAINE (administration, dosage) RESPIRATION, ARTIFICIAL

Wettstein, M.

LUMBAR VÉRTEBRAE (injuries)

Yaghmaei, M.

INFANT, LOW BIRTH WEIGHT

Yagmur, Yusuf

RESUSCITATION (methods)

Yalda, A.

SEPSIS (immunology)

Yaqoob, J.

PITUITARY GLAND (radiography)

Yaqoob, M.

TURBINATES (surgery)

Yassin, Mohammed A.

**HOOKWORM INFECTIONS (complications)** 

MENINGOENCEPHALITIS (microbiology)

Yassin, Yassin A.

NASAL OBSTRUCTION (radiography) Yazar, Tarik

SOFT TISSUE INJURIES (therapy)

Yazdanpanah, M.J.

LEISHMANIASIS, CUTANEOUS (drug therapy)

Yildirim, Ayse TESTIS (pathology)

Yildiz, Cenk E.
MYOCARDIAL ISCHEMIA (complications)

Yildizhan, Ahmet

INTERVERTEBRAL DISK DISPLACEMENT Yilmaz, Mustafa

HEPATOCYTE GROWTH FACTOR (physiology)

Yilmaz, Ugur

CARCINOMA, RENAL CELL (secondary)

Yoldas, Burcak

**NEOPLASM METASTASIS** 

Yosafzai, Wahab

KORO (psychology)

Younis, N.T.
T-LYMPHOCYTES (analysis)

Younus, Raza

NEPHROSTOMY, PERCUTANEOUS (methods)

Yousefi, M.

COLORECTAL NEOPLASMS (diagnosis)

Yousefi, N.

CREUTZFELDT-JAKOB SYNDROME (diagnosis)

Youssry, I.

BETA-THALASSEMIA (diagnosis)

Yousuf, M.

LIDOCAINE (administration, dosage) RESPIRATION, ARTIFICIAL

Yu, Nansheng

CALCITONIN (therapeutic uses)

Yusuf, A.W.

LABOR, INDUCED

Zafarani, Fatemeh FERTILIZATION IN VITRO (drug effects)

Zahedi, K.L.

PERITONITIS (etiology)

Zahrani, Ahmed B.

URINARY BLADDER (injuries)

Zakavat, Talieh

PERITONEAL DIALYSIS (adverse effects)

Zaki, Sajida

EDUCATION, MEDICAL

Zakria, I.

FISSURE IN ANO (drug therapy)

Zamyadi, Mahnaz

CALCIUM (blood)

Zangana, A.M.

DUODENAL ULCER (complications)

Zarandy, M. Motasaddi

THYROID FUNCTION TESTS

Zarrindast, M.R.

SUBSTANCE WITHDRAWAL SYNDROME (drug

therapy)

Zeng, Bingfang

CALCITONIN (therapeutic uses)

Zeraati, Fatemeh

ASTHMA (etiology)

Ziadeh, Moroug T.

CYCLIN-DEPENDENT KINASE INHIBITOR P21

(analysis)

Zolezzi, Monica

METHYLPHENIDATE (administration, dosage)

Zubair, S.

COATED MATERIALS, BIOCOMPATIBLE

### Appendix II

# List of EMR Journals Indexed in IMEMR Current Contents June 2008

IMEMR Current Contents EMR Journals List

#### **Egypt [57]**

EMHJ - Eastern Mediterranean Health Journal [57]

#### Islamic Republic of Iran [46]

IJKD - Iranian Journal of Kidney Diseases [9] Iranian Journal of Allergy, Asthma and Immunology [8] Tehran University Medical Journal [TUMJ] [29]

#### Kuwait [15]

Medical Principles and Practice [15]

#### Pakistan [66]

Annals of King Edward Medical College [47] JCPSP - Journal of the College of Physicians and Surgeons Pakistan [19]

#### Saudi Arabia [136]

Neurosciences [22] Saudi Medical Journal [106] SDJ - Saudi Dental Journal [The] [8]

#### **United Arab Emirates [13]**

IRCMJ - Iranian Red Crescent Medical Journal [13]

## Appendix III

## List of EMR Journals Indexed in IMEMR

(by country)

#### BAHRAIN (3)

	Arch Journal for Food and Nutrition *	1600 0252
	Arab Journal for Food and Nutrition *	1608-8352
	Bahrain Medical Bulletin	1012-8298
	JBMS - Journal of the Bahrain Medical Society	1015-6321
E	GYPT (117)	
	AAMJ - Al-Azhar Assiut Medical Journal *	1687-1693
	Afro - Arab Liver Journal	1687-224X
	Ain-Shams Journal of Forensic Medicine and Clinical Toxicology *	1687-1030
	Ain-Shams Medical Journal	0002-2144
	AJAIC - Alexandria Journal of Anaesthesia and Insentive Care *	N/A
	Al Azhar Medical Journal	1110-0400
	Al-Azhar Journal of Dental Science *	N/A
	Alexandria Dental Journal *	1110-015X
	Alexandria Journal of Food Science and Technology	N/A
	Alexandria Journal of Pediatrics	N/A
	Alexandria Journal of Pharmaceutical Sciences *	1110-1792
	Alexandria Journal of Veterinary Science *	1110-2047
	Alexandria Medical Journal [The] *	0516-5849
	Annals of Pediatric Surgery	1687-4137
	Arab Journal of Biotechnology	1110-6875
	Arab Journal of Laboratory Medicine [The] *	1110-1822
	ASJOG - Ain Shams Journal of Obstetrics and Gynecology *	1687-2193
	ASNJ - Alexandria Scientific Nursing Journal *	N/A
	Assiut Medical Journal	1110-0494
	Benha Medical Journal *	1110-208X
	Bulletin of Alexandria Faculty of Medicine	1110-0834
	Bulletin of Alexandria Thoracic Association *	N/A
	Bulletin of Faculty of Pharmacy - Cairo University	1110-0931
	Bulletin of Faculty of Physical Therapy - Cairo University *	1110-6611
	Bulletin of High Institute of Public Health	1110-0036
	Bulletin of Pharmaceutical Sciences - Assiut University	1110-0052
	Bulletin of the Faculty of Science - University of Alexandria *	0568-9619
	Bulletin of the National Nutrition Institute of the Arab Republic of Egypt	N/A
	Bulletin of the National Research Centre	1110-0591
	Bulletin of the Ophthalmological Society of Egypt *	1110-0982
	Childhood and Development Quarterly *	1110-8681
	Clinical Diabetes	0891-8929
	Eastern Mediterranean Region Drugs Digest	1040-2312

Eastern Mediterranean Region Epidemiological Bulletin	1014-2347
EDJ - Egyptian Dental Journal	0070-9484
Egyptian Journal of Anatomy [The] *	1110-2144
Egyptian Journal of Biomedical Engineering *	1012-5558
Egyptian Journal of Biophysics and Biomedical Engineering	1110-8525
Egyptian Journal of Chemistry	0449-2285
Egyptian Journal of Community Medicine *	1110-1865
Egyptian Journal of Dermatology and Andrology *	1110-7650
Egyptian Journal of Diabetes [The]	N/A
Egyptian Journal of Food Science	1110-0613
Egyptian Journal of Genetics and Cytology *	N/A
Egyptian Journal of Histology [The]	1110-0559
Egyptian Journal of Hospital Medicine [The]	1687-2002
Egyptian Journal of Medical Human Genetics [The]	1110-8630
Egyptian Journal of Medical Laboratory Sciences	1110-5593
Egyptian Journal of Medical Microbiology *	1110-2179
Egyptian Journal of Microbiology	0022-2704
Egyptian Journal of Neonatology [The] *	N/A
Egyptian Journal of Nutrition	N/A
Egyptian Journal of Nutrition and Health New	N/A
Egyptian Journal of Occupational Medicine *	1110-1881
Egyptian Journal of Pharmaceutical Sciences [The]	0301-5068
Egyptian Journal of Physiological Sciences *	0301-8660
Egyptian Journal of Psychiatry [The] *	1110-1105
Egyptian Journal of Schistosomiasis and Infectious and Endemic Diseases *	1110-7278
Egyptian Journal of Surgery [The] *	1110-1121
Egyptian Journal of Urology *	1110-5712
Egyptian Journal of Veterinary Science	1110-0222
Egyptian Medical Journal of the National Research Center *	1687-1278
Egyptian Orthodontic Journal *	N/A
Egyptian Orthopaedic Journal [The] *	1110-1148
Egyptian Pharmaceutical Journal [National Research Center]	1687-4315
Egyptian Population and Family Planning Review [The]	N/A
Egyptian Rheumatology and Rehabilitation	1110-161X
Egyptian Science Magazine [The]	1687-3815
EJB - Egyptian Journal of Biochemistry and Molecular Biology [The]	1687-1502
EJENTAS - Egyptian Journal of ENT and Allied Sciences *	N/A
El-Minia Medical Bulletin *	1110-2446
EMHJ - Eastern Mediterranean Health Journal	1020-3397

EMJ - Egyptian Medical Journal [The]	1110-0095
Gazette of the Egyptian Paediatric Association [The] *	1110-6638
Health Services Journal of the Eastern Mediterranean Region *	1014-9899
Journal of Childhood Studies	N/A
Journal of Drug Research of Egypt	0085-2406
Journal of Hepatology, Gastroenterology and Infectious Diseases *	1110-0796
Journal of Legal Medicine and Forensic Sciences[The]	1110-6468
Journal of the Arab Society for Medical Research	1687-4293
Journal of the Egyptian Medical Association [The] *	0013-2411
Journal of the Egyptian National Cancer Institute	1110-0362
Journal of the Egyptian Public Health Association [The]	N/A
Journal of the Egyptian Society of Endocrinology, Metabolism and Diabetes [The] *	N/A
Journal of the Egyptian Society of Obstetrics and Gynecology [The] *	0258-3216
Journal of the Egyptian Society of Parasitology	1110-0583
Journal of the Egyptian Society of Pharmacology and Experimental Therapeutics [The] *	N/A
Journal of the Egyptian Society of Toxicology *	1110-127X
Journal of the Medical Research Institute - Alexandria University *	1110-0133
JPC - Journal of Pediatric Club	N/A
Kasr El Aini Journal of Surgery *	N/A
Kidney Forum *	1369-3050
Mansoura Journal of Pharmaceutical Sciences	1110-1318
Mansoura Medical Journal	1110-211X
Medical Journal of Ahmed Maher Teaching Hospital [The] *	N/A
Medical Journal of Cairo University [The]	0045-3803
Medical Journal of Teaching Hospitals and Institutes [The] *	1110-2039
Minoufiya Medical Journal	1110-2098
MJFCT - Mansoura Journal of Forensic Medicine and Clinical Toxicology *	1110-5437
National Cancer Institute Journal	0027-8874
Neonatology *	1687-0492
New Egyptian Journal of Medicine [The]	1110-1946
Pan Arab Journal of Orthopaedic and Trauma [The] *	1607-4912
Population Researches and Studies	N/A
Population Sciences *	N/A
Population Studies *	1110-1342
Scientific Journal of Al-Azhar Medical Faculty [Girls] [The] *	1110-2381
Scientific Medical Journal	1110-5607
South Valley Medical Journal	1110-7529
Suez Canal University Medical Journal	1110-6999
Tanta Medical Journal *	1110-1415

	Tanta Medical Sciences Journal	1687-5788
	Veterinary Medical Journal	1110-1423
	Zagazig Journal of Forensic Medicine and Toxicology	1687-160X
	Zagazig Journal of Pharmaceutical Sciences *	1110-5089
	Zagazig Medical Association Journal *	1110-2322
	Zagazig University Medical Journal *	1110-1431
IR	AQ (28)	
	Al-Kindy College Medical Journal *	1810-9543
	Almustansiriya Journal of Pharmaceutical Sciences *	1815-0993
	Annals of the College of Medicine – Mosul *	0027-1446
	Basrah Journal of Surgery *	N/A
	Bulletin of Endemic Diseases – Baghdad *	0007-4845
	IMJ - Iraqi Medical Journal *	0304-4564
	IOJ - Iraqi Orthodontic Journal	1816-0581
	IPMJ - Iraqi Postgraduate Medical Journal *	1608-8360
	Iraqi Army Medical Journal *	N/A
	Iraqi Journal of Biotechnology *	N/A
	Iraqi Journal of Community Medicine *	1684-5382
	Iraqi Journal of Medical Sciences *	1681-6579
	Iraqi Journal of Microbiology *	N/A
	Iraqi Journal of Pharmaceutical Sciences *	N/A
	Iraqi Journal of Tropical Disease Researches *	1814-0823
	Journal of Basic and Medical Sciences *	1608-6015
	Journal of Community Medicine *	N/A
	Journal of Dohuk University *	1812-7568
	Journal of Karbala University *	1813-0410
	Journal of the College of Dentistry – Baghdad *	N/A
	Journal of the Faculty of Medicine - Baghdad	0041-9419
	Kufa Medical Journal *	N/A
	Medical Journal of Basrah University [The]	0253-0759
	Medical Journal of Tikrit University [The] *	N/A
	New Iraqi Journal of Medicine [The]	1917-5562
	Risafa Medical Journal *	N/A
	Scientific Nursing Journal *	N/A
	Zanco Journal for Medical Sciences *	N/A

### ISLAMIC REPUBLIC OF IRAN (105)

Acta Medica Iranica	0044-6025
Advances in Cognitives Sciences *	1561-4174
Archives of Iranian Medicine	1029-2977
Armaghane-danesh	1728-6506
ARYA Therosclerosis	1735-3955
Audiology	1735-1936
Bina Journal of Ophthalmology	1026-6399
Blood	1027-9520
DARU - Journal of Faculty of Pharmacy Tehran University of Medical Sciences	1560-8115
DRJ - Dental Research Journal	1735-3327
Govaresh *	1560-7186
HAKIM Research Journal	1561-252X
HAYAT - The Journal of Faculty of Nursing and Midwifery	1735-2215
Health Information Management	1735-1847
Hepatitis Monthly	1735-143X
IBJ - Iranian Biomedical Journal	1028-852X
IJCN - Iranian Journal of Child Neurology	1735-4668
IJEM - Iranian Journal of Endocrinology and Metabolism	1683-4844
IJHOBMT-International Journal of Hematology-Oncology and Bone Marrow Transplantation*	1735-1243
IJI – Iranian Journal of Immunology	1735-1383
IJKD – Iranian Journal of Kidney Diseases	1735-8582
IJME - Iranian Journal of Medical Education *	1608-9359
IJMS - Iranian Journal of Medical Sciences	0253-0716
IJO - Iranian Journal of Orthodontics	1735-5087
IJPR - Iranian Journal of Pharmaceutical Research *	1735-0328
International Journal of Endocrinology and Metabolism	1726-9148
International Journal of Environmental Research	1735-6865
International Journal of Environmental Science and Technology	1735-1472
Iran Journal of Nursing	1025-0581
Iranian Journal of Allergy, Asthma and Immunology	1735-1502
Iranian Journal of Arthropod-Borne Diseases	1735-7179
Iranian Journal of Basic Medical Sciences	1608-6015
Iranian Journal of Biotechnology	1728-3043
Iranian Journal of Clinical Infectious Diseases	N/A
Iranian Journal of Dermatology	0021-082X
Iranian Journal of Diabetes and Lipid Disorders	1726-7544
Iranian Journal of Environmental Health Science and Engineering	1735-1979
Iranian Journal of Epidemiology	N/A

Iranian Journal of Fertility and Sterility	1735-8094
Iranian Journal of Medical Microbiology	1735-8612
Iranian Journal of Nuclear Medicine	1681-2824
Iranian Journal of Nursing and Midwifery Research [IJNMR]	1735-9066
Iranian Journal of Nutrition Sciences and Food Technology New	1735-7756
Iranian Journal of Obstetric, Gynecology and Infertility [The]	N/A
Iranian Journal of Ophthalmic Research	N/A
Iranian Journal of Otorhinolaryngology *	1560-1293
Iranian Journal of Parasitology	1735-7020
Iranian Journal of Pediatrics	1018-4406
Iranian Journal of Psychiatry	1735-4587
Iranian Journal of Psychiatry and Clinical Psychology (ANDEESHEH VA RAFTAR)	1024-0047
Iranian Journal of Public Health	0304-4556
Iranian Journal of Radiation Research	1728-4554
Iranian Journal of Radiology	1735-1065
Iranian Journal of Reproductive Medicine	N/A
Iranian Journal of Veterinary Research	1728-1997
Iranian Rehabilitation Journal *	N/A
JDT - Journal of Dentistry Tehran University of Medical Sciences *	1735-2150
JMR - Journal of Medical Research *	1728-1962
Journal of Arak University of Medical Sciences - Rahavard Danesh	N/A
Journal of Army University of Medical Sciences – J.A.U.M.S	1727-1789
Journal of Babol University of Medical Sciences	1561-4107
Journal of Dentistry - Tehran University of Medical Sciences *	1024-641X
Journal of Dentistry, Shiraz University of Medical Sciences	1728-3426
Journal of Gorgan University of Medical Sciences	1562-4765
Journal of Hygiene and Health	1735-2363
Journal of Isfahan Dental School	1735-255X
Journal of Isfahan Medical School	1027-7595
Journal of Islamic Dental Association of Iran [The]	1024-6428
Journal of Kerman University of Medical Sciences	1023-9510
Journal of Mashad Dental School *	1560-9286
Journal of Mazandaran University of Medical Sciences	1561-4123
Journal of Medical Council of Islamic Republic of Iran	1562-1073
Journal of Medical Education	N/A
Journal of Medicinal Plants	1684-0240
Journal of Qazvin University of Medical Sciences and Health Services [The]	1561-3666
Journal of Shaheed Sadoughi University of Medical Sciences and Health Services	1562-272X
Journal of Shahrekord University of Medical Sciences	1735-1448

	Journal of Tehran University Heart Center [The]	1735-5370
	Journal of the Faculty of Medicine - Shaheed Beheshti University of Medical Sciences and Health Services	N/A
	Journal of the Faculty of Veterinary Medicine - University of Tehran *	1022-646X
	Journal of Zanjan University of Medical Sciences and Health Services *	1606-9366
	JRMS - Journal of Research in Medical Sciences	1735-1995
	KOOMESH - Journal of the Samman University of Medical Sciences *	1608-7046
	Medical Journal of Mashad University of Medical Sciences	N/A
	Medical Journal of Reproduction and Infertility	1726-7536
	Medical Journal of Tabriz University of Medical Sciences and Health Services	1608-5671
	Medical Journal of the Islamic Republic of Iran *	1016-1430
	Medical Sciences Journal of Islamic Azad University *	1023-5922
	Nursing and Midwifery Research *	1753-5001
	Pejouhandeh: Bimonthly Research Journal	1735-1022
	Quarterly Journal of Fundamentals of Mental Health [The]	1028-6918
	Salmand: Iranian Journal of Aging	1735-806X
	Scientific Journal of Forensic Medicine	1027-1457
	Scientific Journal of Kurdistan University of Medical Sciences	1560-652X
	Scientific Journal of School of Public Health and Institute of Public Health Research	1735-7586
	Shaheed Beheshti University Dental Journal	1735-7683
	Shaheed Beheshti University of Medical Sciences and Health Services	1605-8941
	SHAMS - Journal of Medical Sciences New	N/A
	Social Welfare Quarterly	N/A
	Strides in Development of Medical Education	1735-4242
	Tanaffos *	1735-0344
	Tehran University Medical Journal [TUMJ]	N/A
	Toloo-e-Behdasht	1728-5127
	Urology Journal	1735-1308
	Yakhteh Medical Journal	1561-4921
JC	PRDAN (7)	
	Arab Journal of Psychiatry [The]	1016-8923
	Dirasat	1026-3772
	Jordan Medical Journal	0446-9283
	Journal of the Royal Medical Services	N/A
	Medical Journal of Islamic World Academy of Sciences	1016-3360
	Pan Arab Medical Journal *	N/A
	Population Bulletin of ESCWA *	0258-1914

# KUWAIT (4)

Bulletin of the Kuwait Institute for Medical Specialization	N/A
KMJ - Kuwait Medical Journal	0023-5776
Medical Arabization	N/A
Medical Principles and Practice	1011-7571

# LEBANON (8)

ACES - Actualites Cliniques et Scientifiques	1683-8068
Arab Dental Journal *	N/A
JLDA - Journal of the Lebanese Dental Association *	1810-9632
Journal of the Arab Neonatology Forum *	1812-1756
Lebanese Science Journal	1561-3410
LMJ - Lebanese Medical Journal	0023-9852
Middle East Journal of Anesthesiology	0544-0440
Middle East Journal of Family Medicine	N/A

#### LIBYAN ARAB JAMAHIRYA (5)

Garyounis Medical Journal *	0254-7198
JMJ - Jamahiriya Medical Journal	N/A
Libyan Journal of Infectious Diseases [The]	N/A
LJM - Libyan Journal of Medicine	1819-6357
Tabib Attifil Alarabi *	N/A

#### MOROCCO (6)

Bulletin Epidemiologique *	0851-8238
Journal du Practicien *	1113-5667
Maroc Medical	0025-4053
Revue Marocaine de Chirurgie Orthopedique et Traumatologique *	N/A
Revue Marocaine de Medecine et de Sante	0251-0758
Revue Marocaine des Maladies de L'Enfant	N/A

### OMAN (2)

Oman Medical Journal	N/A
SQUMJ - Sultan Qaboos University Medical Journal	1029-4066

### PAKISTAN (63)

Annals Abbassi Shaheed Hospital and Karachi Medical and Dental College	
Annals of Jinnah Postgraduate Medical Centre – Karachi *	
Annals of King Edward Medical College	1684-6680
Biomedica	N/A
Challenge - Quarterly [The] *	0528-7944

Community Medicine *	0301-7265
Diabetes Digest	1369-7501
GJMS – Gomal Journal of Medical Sciences	1819-7973
Hamdard Medicus	0250-7188
Infectious Disease Journal of Pakistan	1027-0299
International Journal of Pathology	1810-0155
JAMC - Journal of Ayub Medical College - Abbotabad - Pakistan	1025-9589
JCPSP - Journal of the College of Physicians and Surgeons Pakistan	1022-386X
JDUHS - Journal of the Dow University of Health Sciences	N/A
JLUMHS - Journal of the Liaquat University of Medical Health Sciences	1729-0341
JMS - Journal of Medical Sciences	N/A
JOPDAK - Journal of the Pakistan Dental Association Karachi *	N/A
Journal of Basic and Applied Sciences	N/A
Journal of Medical Sciences	1682-4474
Journal of Nephrology Urology and Transplantation *	N/A
Journal of Surgery [The] *	1681-4517
JPAD - Journal of Pakistan Association of Dermatologists	1560-9014
JPDA - Journal of the Pakistan Dental Association	1680-2292
JPIMS - Journal of Pakistan Institute of Medical Sciences *	1683-6928
JPMA - Journal of Pakistan Medical Association	0030-9982
JPMI - Journal of Postgraduate Medicale Institute	1013-5472
JPPS - Journal of Pakistan Psychiatric Society	1726-8710
JSP - Journal of Surgery Pakistan International	1817-0242
Lahore Journal of Public Health *	N/A
Medical Channel	1681-5491
Medical Forum	1029-385X
Medical Spectrum [The] *	0254-8534
Medicine Today	1813-9876
Mother and Child *	0379-2617
PAFMJ - Pakistan Armed Forces Medical Journal	0030-9648
Pakistan Heart Journal *	0048-2706
Pakistan Journal of Biochemistry *	0300-8185
Pakistan Journal of Chest Medicine	N/A
Pakistan Journal of Clinical Psychology	1019-438X
Pakistan Journal of Community Medicine [The] *	N/A
Pakistan Journal of Health *	N/A
Pakistan Journal of Medical and Health Services	1996-7195
Pakistan Journal of Medical Sciences	1682-024X
Pakistan Journal of Neurology *	N/A

Pakistan Journal of Obstetrics and Gynaecology *	N/A
Pakistan Journal of Orthodontics, Pediatric and Community Dentistry *	1608-134X
Pakistan Journal of Otolaryngology - Head and Neck Surgery	0257-4985
Pakistan Journal of Pathology	N/A
Pakistan Journal of Pharmaceutical Sciences	1011-601X
Pakistan Journal of Pharmacology *	0255-7088
Pakistan Journal of Physiology	1819-270X
Pakistan Journal of Psychology	0030-9869
Pakistan Journal of Scientific and Industrial Research *	0030-9885
Pakistan Medical Journal *	0031-000X
Pakistan Ophthalmology *	0259-3661
Pakistan Oral and Dental Journal	1012-8700
Pakistan Paediatric Journal	0304-4904
PJC - Pakistan Journal of Cardiology	1016-1244
PJMR - Pakistan Journal of Medical Research	0030-9842
PJS - Pakistan Journal of Surgery	0258-8552
Proceedings	N/A
Professional Medical Journal - Quarterly [The]	1024-8919
RMJ - Rawal Medical Journal	0303-5212
DAL FOTING (O)	
PALESTINE (3)	
Al-Quds Medical Journal *	N/A
Annals of Alquds Medicine	1815-2643
PMJ - Palestinian Medical Journal	N/A
QATAR (4)	
Gulf Journal of Dermatology and Venereology [The] *	N/A
Heart Views	1995-705X
Middle East Journal of Emergency Medicine [The]	1729-6455
Qatar Medical Journal	0253-8253
SAUDI ARABIA (23)	
Annals of Saudi Medicine	0256-4947
Annals of Thoracic Medicine	1817-1737
Hematology, Oncology and stem Cell Therapy New	1658-3876
Joint Centre for Research in Prosthetics and Orthotics [The] *	N/A
Journal of Family and Community Medicine	1319-1683
Journal of King Abdulaziz University - Medical Sciences *	1319-1004
Journal of the Saudi Heart Association	1319-9218
MEJO - Middle East Journal of Ophthalmolgy *	N/A

	Neurosciences	N/A
	Pan Arab Journal of Neurosurgery	1319-6995
	Rehabilitation International *	N/A
	Research Centre Bulletin *	1019-5335
	Saudi Epidemiology Bulletin *	1319-3965
	Saudi Heart Journal *	1018-077X
		1319-6499
	Saudi Journal of Disability and Rehabilitation *	1319-6499
	Saudi Journal of Gastroenterology [The] *	1319-3767
	Saudi Journal of Oto Phina Lawrence and Neel Surgery [The] *	1319-4554
	Saudi Journal of Oto-Rhino-Laryngology Head and Neck Surgery [The] *	
	Saudi Journal of Sports Medicine [The] * Saudi Medical Journal	1319-6308
		0379-5284
	SDJ - Saudi Dental Journal [The]	1013-9052 1658-2489
	SGH Wedicai Journal	
	SPJ - Saudi Pharmaceutical Journal	1319-0164
SL	JDAN (9)	
	Gezira Journal of Health Sciences *	N/A
	JMJ - Juba Medical Journal *	N/A
	Khartoum Pharmacy Journal *	N/A
	Omdurman Journal of Pharmaceutical Sciences *	N/A
	Sudan Journal of Medical Sciences	N/A
	Sudan Medical Journal *	0491-4481
	Sudan Medical Monitor	1585-5000
	Sudanese Journal of Dermatology *	N/A
	Sudanese Journal of Public Health	N/A
SY	RIAN ARAB REPUBLIC (9)	
	Al-Majallah Al-Tibbiya Al-Arabiayh	N/A
	Arab Journal of Pharmaceutical Sciences	1683-0369
	Arabic Journal of Forensic Medicine and Criminal Science	N/A
	Damascus University Journal for Health Sciences	N/A
	JISHIM - Journal of the International Society for the History of Islamic Medicine *	1303-667X
	Journal of Clinical Laboratory [The] *	N/A
	Journal of the Arab Board of Medical Specializations	1561-0217
	Journal of the Arab Dentist *	N/A
	Research Journal of Aleppo University - Medical Sciences Series *	N/A

#### TUNISIA (8)

Archives de l'Institut Pasteur de Tunis *	0020-2509
Cahier Medicaux de Tunisie *	0300-5291
IDEES - Revue de Perfectionnement Medical et Paramedical *	N/A
Maghreb Medical	0330-258X
Revue Maghrebine de Pediatrie [La]	0330-7611
Revue Maghrebine d'Endocrinologie - Diabete et de Reproduction [La] *	N/A
SST - Sante et Securite au Travail	N/A
Tunisie Medicale [La]	0041-4131

#### UNITED ARAB EMIRATES (3)

Emirates Medical Journal	0250-6882
International Journal of Diabetes and Metabolism *	1606-7754
IRCMJ - Iranian Red Crescent Medical Journal	1561-4395

#### YEMEN (7)

Journal of Tropical Nephro-Orology ^	N/A
Sana'a University Medical Journal *	N/A
University of Aden Journal of Natural and Applied Sciences	1606-8947
Yemeni Journal for Medical Sciences [The] *	N/A
YHMRJ - Yemeni Health and Medical Research Journal	N/A
YJMHR-Yemeni Journal of Medical and Health Research *	N/A
YMJ - Yemen Medical Journal *	N/A

<sup>\*</sup> No issues received since 2006 Last update June 2008

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# Appendix IV

# List of EMR Journals Indexed in IMEMR

(by title)

No.	Journal Title	ISSN
1	AAMJ - Al-Azhar Assiut Medical Journal *	1687-1693
2	ACES - Actualites Cliniques et Scientifiques	1683-8068
3	Acta Medica Iranica	0044-6025
4	Advances in Cognitives Sciences *	1561-4174
5	Afro - Arab Liver Journal	1687-224X
6	Ain-Shams Journal of Forensic Medicine and Clinical Toxicology*	1687-1030
7	Ain-Shams Medical Journal	0002-2144
8	AJAIC - Alexandria Journal of Anaesthesia and Insentive Care *	N/A
9	Al Azhar Medical Journal	1110-0400
10	Al-Azhar Journal of Dental Science *	N/A
11	Alexandria Dental Journal *	1110-015X
12	Alexandria Journal of Food Science and Technology	N/A
13	Alexandria Journal of Pediatrics	N/A
14	Alexandria Journal of Pharmaceutical Sciences *	1110-1792
15	Alexandria Journal of Veterinary Science *	1110-2047
16	Alexandria Medical Journal [The] *	0516-5849
17	Al-Kindy College Medical Journal *	1810-9543
18	Al-Majallah Al-Tibbiya Al-Arabiayh	N/A
19	Almustansiriya Journal of Pharmaceutical Sciences *	1815-0993
20	Al-Quds Medical Journal *	N/A
21	Annals Abbassi Shaheed Hospital and Karachi Medical and Dental College	1563-3241
22	Annals of Alquds Medicine	1815-2643
23	Annals of Jinnah Postgraduate Medical Centre – Karachi *	N/A
24	Annals of King Edward Medical College	1684-6680
25	Annals of Pediatric Surgery	1687-4137
26	Annals of Saudi Medicine	0256-4947
27	Annals of the College of Medicine – Mosul *	0027-1446
28	Annals of Thoracic Medicine	1817-1737
29	Arab Dental Journal *	N/A
30	Arab Journal for Food and Nutrition *	1608-8352
31	Arab Journal of Biotechnology	1110-6875
32	Arab Journal of Laboratory Medicine [The] *	1110-1822
33	Arab Journal of Pharmaceutical Sciences	1683-0369
34	Arab Journal of Psychiatry [The]	1016-8923
35	Arabic Journal of Forensic Medicine and Criminal Science	N/A
36	Archives de l'Institut Pasteur de Tunis *	0020-2509
37	Archives of Iranian Medicine	1029-2977
38	Armaghane-danesh	1728-6506

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39	ARYA Therosclerosis	1735-3955
40	ASJOG - Ain Shams Journal of Obstetrics and Gynecology *	1687-2193
41	ASNJ - Alexandria Scientific Nursing Journal *	N/A
42	Assiut Medical Journal	1110-0494
43	Audiology	1735-1936
44	Bahrain Medical Bulletin	1012-8298
45	Basrah Journal of Surgery *	N/A
46	Benha Medical Journal *	1110-208X
47	Bina Journal of Ophthalmology	1026-6399
48	Biomedica	N/A
49	Blood	1027-9520
50	Bulletin Epidemiologique *	0851-8238
51	Bulletin of Alexandria Faculty of Medicine	1110-0834
52	Bulletin of Alexandria Thoracic Association *	N/A
53	Bulletin of Endemic Diseases – Baghdad *	0007-4845
54	Bulletin of Faculty of Pharmacy - Cairo University	1110-0931
55	Bulletin of Faculty of Physical Therapy - Cairo University *	1110-6611
56	Bulletin of High Institute of Public Health	1110-0036
57	Bulletin of Pharmaceutical Sciences - Assiut University	1110-0052
58	Bulletin of the Faculty of Science - University of Alexandria *	0568-9619
59	Bulletin of the Kuwait Institute for Medical Specialization	N/A
60	Bulletin of the National Nutrition Institute of the Arab Republic of Egypt	N/A
61	Bulletin of the National Research Centre	1110-0591
62	Bulletin of the Ophthalmological Society of Egypt *	1110-0982
63	Cahier Medicaux de Tunisie *	0300-5291
64	Challenge - Quarterly [The] *	0528-7944
65	Childhood and Development Quarterly *	1110-8681
66	Clinical Diabetes	0891-8929
67	Community Medicine *	0301-7265
68	Damascus University Journal for Health Sciences	N/A
69	DARU - Journal of Faculty of Pharmacy Tehran University of Medical Sciences	1560-8115
70	Diabetes Digest	1369-7501
71	Dirasat	1026-3772
72	DRJ - Dental Research Journal	1735-3327
73	Eastern Mediterranean Region Drugs Digest	1040-2312
74	Eastern Mediterranean Region Epidemiological Bulletin	1014-2347
75	EDJ - Egyptian Dental Journal	0070-9484
76	Egyptian Journal of Anatomy [The] *	1110-2144

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77	Egyptian Journal of Biomedical Engineering *	1012-5558
78	Egyptian Journal of Biophysics and Biomedical Engineering	1110-8525
79	Egyptian Journal of Chemistry	0449-2285
80	Egyptian Journal of Community Medicine *	1110-1865
81	Egyptian Journal of Dermatology and Andrology *	1110-7650
82	Egyptian Journal of Diabetes [The]	N/A
83	Egyptian Journal of Food Science	1110-0613
84	Egyptian Journal of Genetics and Cytology *	N/A
85	Egyptian Journal of Histology [The]	1110-0559
86	Egyptian Journal of Hospital Medicine [The]	1687-2002
87	Egyptian Journal of Medical Human Genetics [The]	1110-8630
88	Egyptian Journal of Medical Laboratory Sciences	1110-5593
89	Egyptian Journal of Medical Microbiology *	1110-2179
90	Egyptian Journal of Microbiology	0022-2704
91	Egyptian Journal of Neonatology [The] *	N/A
92	Egyptian Journal of Nutrition	N/A
93	Egyptian Journal of Nutrition and Health New	N/A
94	Egyptian Journal of Occupational Medicine *	1110-1881
95	Egyptian Journal of Pharmaceutical Sciences [The]	0301-5068
96	Egyptian Journal of Physiological Sciences *	0301-8660
97	Egyptian Journal of Psychiatry [The] *	1110-1105
98	Egyptian Journal of Schistosomiasis and Infectious and Endemic Diseases *	1110-7278
99	Egyptian Journal of Surgery [The] *	1110-1121
100	Egyptian Journal of Urology *	1110-5712
101	Egyptian Journal of Veterinary Science	1110-0222
102	Egyptian Medical Journal of the National Research Center *	1687-1278
103	Egyptian Orthodontic Journal *	N/A
104	Egyptian Orthopaedic Journal [The] *	1110-1148
105	Egyptian Pharmaceutical Journal [National Research Center]	1687-4315
106	Egyptian Population and Family Planning Review [The]	N/A
107	Egyptian Rheumatology and Rehabilitation	1110-161X
108	Egyptian Science Magazine [The]	1687-3815
109	EJB - Egyptian Journal of Biochemistry and Molecular Biology [The]	1687-1502
110	EJENTAS - Egyptian Journal of ENT and Allied Sciences *	N/A
111	El-Minia Medical Bulletin *	1110-2446
112	EMHJ - Eastern Mediterranean Health Journal	1020-3397
113	Emirates Medical Journal	0250-6882
114	EMJ - Egyptian Medical Journal [The]	1110-0095

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115	Garyounis Medical Journal *	0254-7198
116	Gazette of the Egyptian Paediatric Association [The] *	1110-6638
117	Gezira Journal of Health Sciences *	N/A
118	GJMS – Gomal Journal of Medical Sciences	1819-7973
119	Govaresh *	1560-7186
120	Gulf Journal of Dermatology and Venereology [The] *	N/A
121	HAKIM Research Journal	1561-252X
122	Hamdard Medicus	0250-7188
123	HAYAT - The Journal of Faculty of Nursing and Midwifery	1735-2215
124	Health Information Management	1735-1847
125	Health Services Journal of the Eastern Mediterranean Region *	1014-9899
126	Heart Views	1995-705X
127	Hematology, Oncology and stem Cell Therapy New	1658-3876
128	Hepatitis Monthly	1735-143X
129	IBJ - Iranian Biomedical Journal	1028-852X
130	IDEES - Revue de Perfectionnement Medical et Paramedical *	N/A
131	IJCN - Iranian Journal of Child Neurology	1735-4668
132	IJEM - Iranian Journal of Endocrinology and Metabolism	1683-4844
133	IJHOBMT - International Journal of Hematology-Oncology and Bone Marrow Transplantation *	1735-1243
134	IJI - Iranian Journal of Immunology	1735-1383
135	IJKD – Iranian Journal of Kidney Diseases	1735-8582
136	IJME - Iranian Journal of Medical Education *	1608-9359
137	IJMS - Iranian Journal of Medical Sciences	0253-0716
138	IJO - Iranian Journal of Orthodontics	1735-5087
139	IJPR - Iranian Journal of Pharmaceutical Research *	1735-0328
140	IMJ - Iraqi Medical Journal *	0304-4564
141	Infectious Disease Journal of Pakistan	1027-0299
142	International Journal of Diabetes and Metabolism *	1606-7754
143	International Journal of Endocrinology and Metabolism	1726-9148
144	International Journal of Environmental Research	1735-6865
145	International Journal of Environmental Science and Technolgy	1735-1472
146	International Journal of Pathology	1810-0155
147	IOJ - Iraqi Orthodontic Journal	1816-0581
148	IPMJ - Iraqi Postgraduate Medical Journal *	1608-8360
149	Iran Journal of Nursing	1025-0581
150	Iranian Journal of Allergy, Asthma and Immunology	1735-1502
151	Iranian Journal of Arthropod-Borne Diseases	1735-7179
152	Iranian Journal of Basic Medical Sciences	1608-6015

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153	Iranian Journal of Biotechnology	1728-3043
154	Iranian Journal of Clinical Infectious Diseases	N/A
155	Iranian Journal of Dermatology	0021-082X
156	Iranian Journal of Diabetes and Lipid Disorders	1726-7544
157	Iranian Journal of Environmental Health Science and Engineering	1735-1979
158	Iranian Journal of Epidemiology	N/A
159	Iranian Journal of Fertility and Sterility	1735-8094
160	Iranian Journal of Medical Microbiology	1735-8612
161	Iranian Journal of Nuclear Medicine	1681-2824
162	Iranian Journal of Nursing and Midwifery Research [IJNMR] New	1735-9066
163	Iranian Journal of Nutrition Sciences and Food Technology New	1735-7756
164	Iranian Journal of Obstetric, Gynecology and Infertility [The]	N/A
165	Iranian Journal of Ophthalmic Research	N/A
166	Iranian Journal of Otorhinolaryngology *	1560-1293
167	Iranian Journal of Parasitology	1735-7020
168	Iranian Journal of Pediatrics	1018-4406
169	Iranian Journal of Psychiatry	1735-4587
170	Iranian Journal of Psychiatry and Clinical Psychology (ANDEESHEH VA RAFTAR)	1024-0047
171	Iranian Journal of Public Health	0304-4556
172	Iranian Journal of Radiation Research	1728-4554
173	Iranian Journal of Radiology	1735-1065
174	Iranian Journal of Reproductive Medicine	N/A
175	Iranian Journal of Veterinary Research	1728-1997
176	Iranian Rehabilitation Journal *	N/A
177	Iraqi Army Medical Journal *	N/A
178	Iraqi Journal of Biotechnology *	N/A
179	Iraqi Journal of Community Medicine *	1684-5382
180	Iraqi Journal of Medical Sciences *	1681-6579
181	Iraqi Journal of Microbiology *	N/A
182	Iraqi Journal of Pharmaceutical Sciences *	N/A
183	Iraqi Journal of Tropical Disease Researches *	1814-0823
184	IRCMJ - Iranian Red Crescent Medical Journal	1561-4395
185	JAMC - Journal of Ayub Medical College - Abbotabad - Pakistan	1025-9589
186	JBMS - Journal of the Bahrain Medical Society	1015-6321
187	JCPSP - Journal of the College of Physicians and Surgeons Pakistan	1022-386X
188	JDT - Journal of Dentistry Tehran University of Medical Sciences *	1735-2150
189	JDUHS - Journal of the Dow University of Health Sciences	N/A
190	JISHIM - Journal of the International Society for the History of Islamic Medicine *	1303-667X

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191	JLDA - Journal of the Lebanese Dental Association *	1810-9632
192	JLUMHS - Journal of the Liaquat University of Medical Health Sciences	1729-0341
193	JMJ - Jamahiriya Medical Journal	N/A
194	JMJ - Juba Medical Journal *	N/A
195	JMR - Journal of Medical Research *	1728-1962
196	JMS - Journal of Medical Sciences	N/A
197	Joint Centre for Research in Prosthetics and Orthotics [The] *	N/A
198	JOPDAK - Journal of the Pakistan Dental Association Karachi *	N/A
199	Jordan Medical Journal	0446-9283
200	Journal du Practicien *	1113-5667
201	Journal of Arak University of Medical Sciences - Rahavard Danesh	N/A
202	Journal of Army University of Medical Sciences – J.A.U.M.S	1727-1789
203	Journal of Babol University of Medical Sciences	1561-4107
204	Journal of Basic and Applied Sciences *	N/A
205	Journal of Basic and Medical Sciences	1608-6015
206	Journal of Childhood Studies	N/A
207	Journal of Clinical Laboratory [The] *	N/A
208	Journal of Community Medicine *	N/A
209	Journal of Dentistry - Tehran University of Medical Sciences *	1024-641X
210	Journal of Dentistry, Shiraz University of Medical Sciences	1728-3426
211	Journal of Dohuk University *	1812-7568
212	Journal of Drug Research of Egypt	0085-2406
213	Journal of Family and Community Medicine	1319-1683
214	Journal of Gorgan University of Medical Sciences	1562-4765
215	Journal of Hepatology, Gastroenterology and Infectious Diseases *	1110-0796
216	Journal of Hygiene and Health	1735-2363
217	Journal of Isfahan Dental School	1735-255X
218	Journal of Isfahan Medical School	1027-7595
219	Journal of Islamic Dental Association of Iran [The]	1024-6428
220	Journal of Karbala University *	1813-0410
221	Journal of Kerman University of Medical Sciences	1023-9510
222	Journal of King Abdulaziz University - Medical Sciences *	1319-1004
223	Journal of Legal Medicine and Forensic Sciences[The]	1110-6468
224	Journal of Mashad Dental School *	1560-9286
225	Journal of Mazandaran University of Medical Sciences	1561-4123
226	Journal of Medical Council of Islamic Republic of Iran	1562-1073
227	Journal of Medical Education	N/A
228	Journal of Medical Sciences	1682-4474

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229	Journal of Medicinal Plants	1684-0240
230	Journal of Nephrology Urology and Transplantation *	N/A
231	Journal of Qazvin University of Medical Sciences and Health Services [The]	1561-3666
232	Journal of Shaheed Sadoughi University of Medical Sciences and Health Services	1562-272X
233	Journal of Shahrekord University of Medical Sciences	1735-1448
234	Journal of Surgery [The] *	1681-4517
235	Journal of Tehran University Heart Center [The]	1735-5370
236	Journal of the Arab Board of Medical Specializations	1561-0217
237	Journal of the Arab Dentist *	N/A
238	Journal of the Arab Neonatology Forum *	1812-1756
239	Journal of the Arab Society for Medical Research	1687-4293
240	Journal of the College of Dentistry – Baghdad *	N/A
241	Journal of the Egyptian Medical Association [The] *	0013-2411
242	Journal of the Egyptian National Cancer Institute	1110-0362
243	Journal of the Egyptian Public Health Association [The]	N/A
244	Journal of the Egyptian Society of Endocrinology, Metabolism and Diabetes [The] *	N/A
245	Journal of the Egyptian Society of Obstetrics and Gynecology [The] *	0258-3216
246	Journal of the Egyptian Society of Parasitology	1110-0583
247	Journal of the Egyptian Society of Pharmacology and Experimental Therapeutics [The] $^{\star}$	N/A
248	Journal of the Egyptian Society of Toxicology *	1110-127X
249	Journal of the Faculty of Medicine - Baghdad	0041-9419
250	Journal of the Faculty of Medicine - Shaheed Beheshti University of Medical Sciences and Health Services	N/A
251	Journal of the Faculty of Veterinary Medicine - University of Tehran *	1022-646X
252	Journal of the Medical Research Institute - Alexandria University *	1110-0133
253	Journal of the Royal Medical Services	N/A
254	Journal of the Saudi Heart Association	1319-9218
255	Journal of Tropical Nephro-Urology *	N/A
256	Journal of Zanjan University of Medical Sciences and Health Services *	1606-9366
257	JPAD - Journal of Pakistan Association of Dermatologists	1560-9014
258	JPC - Journal of Pediatric Club	N/A
259	JPDA - Journal of the Pakistan Dental Association	1680-2292
260	JPIMS - Journal of Pakistan Institute of Medical Sciences *	1683-6928
261	JPMA - Journal of Pakistan Medical Association	0030-9982
262	JPMI - Journal of Postgraduate Medicale Institute	1013-5472
263	JPPS - Journal of Pakistan Psychiatric Society	1726-8710
264	JRMS - Journal of Research in Medical Sciences	1735-1995
265	JSP - Journal of Surgery Pakistan International	1817-0242
266	Kasr El Aini Journal of Surgery *	N/A

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267	Khartoum Pharmacy Journal *	N/A
268	Kidney Forum *	1369-3050
269	KMJ - Kuwait Medical Journal	0023-5776
270	KOOMESH - Journal of the Samman University of Medical Sciences *	1608-7046
271	Kufa Medical Journal *	N/A
272	Lahore Journal of Public Health *	N/A
273	Lebanese Science Journal	1561-3410
274	Libyan Journal of Infectious Diseases [The]	N/A
275	LJM - Libyan Journal of Medicine	1819-6357
276	LMJ - Lebanese Medical Journal	0023-9852
277	Maghreb Medical	0330-258X
278	Mansoura Journal of Pharmaceutical Sciences	1110-1318
279	Mansoura Medical Journal	1110-211X
280	Maroc Medical	0025-4053
281	Medical Arabization	N/A
282	Medical Channel	1681-5491
283	Medical Forum	1029-385X
284	Medical Journal of Ahmed Maher Teaching Hospital [The] *	N/A
285	Medical Journal of Basrah University [The]	0253-0759
286	Medical Journal of Cairo University [The]	0045-3803
287	Medical Journal of Islamic World Academy of Sciences	1016-3360
288	Medical Journal of Mashad University of Medical Sciences	N/A
289	Medical Journal of Reproduction and Infertility	1726-7536
290	Medical Journal of Tabriz University of Medical Sciences and Health Services New	1608-5671
291	Medical Journal of Teaching Hospitals and Institutes [The] *	1110-2039
292	Medical Journal of the Islamic Republic of Iran *	1016-1430
293	Medical Journal of Tikrit University [The] *	N/A
294	Medical Principles and Practice	1011-7571
295	Medical Sciences Journal of Islamic Azad University *	1023-5922
296	Medical Spectrum [The] *	0254-8534
297	Medicine Today	1813-9876
298	MEJO - Middle East Journal of Ophthalmolgy *	N/A
299	Middle East Journal of Anesthesiology	0544-0440
300	Middle East Journal of Emergency Medicine [The]	1729-6455
301	Middle East Journal of Family Medicine	N/A
302	Minoufiya Medical Journal	1110-2098
303	MJFCT - Mansoura Journal of Forensic Medicine and Clinical Toxicology *	1110-5437
304	Mother and Child *	0379-2617

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305	National Cancer Institute Journal	0027-8874
306	Neonatology *	1687-0492
307	Neurosciences	N/A
308	New Egyptian Journal of Medicine [The]	1110-1946
309	New Iraqi Journal of Medicine [The]	1917-5562
310	Nursing and Midwifery Research *	1753-5001
311	Oman Medical Journal	N/A
312	Omdurman Journal of Pharmaceutical Sciences *	N/A
313	PAFMJ - Pakistan Armed Forces Medical Journal	0030-9648
314	Pakistan Heart Journal *	0048-2706
315	Pakistan Journal of Biochemistry *	0300-8185
316	Pakistan Journal of Chest Medicine	N/A
317	Pakistan Journal of Clinical Psychology	1019-438X
318	Pakistan Journal of Community Medicine [The] *	N/A
319	Pakistan Journal of Health *	N/A
320	Pakistan Journal of Medical and Health Services	1996-7195
321	Pakistan Journal of Medical Sciences	1682-024X
322	Pakistan Journal of Neurology *	N/A
323	Pakistan Journal of Obstetrics and Gynaecology *	N/A
324	Pakistan Journal of Orthodontics, Pediatric and Community Dentistry *	1608-134X
325	Pakistan Journal of Otolaryngology - Head and Neck Surgery	0257-4985
326	Pakistan Journal of Pathology	N/A
327	Pakistan Journal of Pharmaceutical Sciences	1011-601X
328	Pakistan Journal of Pharmacology *	0255-7088
329	Pakistan Journal of Physiology	1819-270X
330	Pakistan Journal of Psychology	0030-9869
331	Pakistan Journal of Scientific and Industrial Research *	0030-9885
332	Pakistan Medical Journal *	0031-000X
333	Pakistan Ophthalmology *	0259-3661
334	Pakistan Oral and Dental Journal	1012-8700
335	Pakistan Paediatric Journal	0304-4904
336	Pan Arab Journal of Neurosurgery	1319-6995
337	Pan Arab Journal of Orthopaedic and Trauma [The] *	1607-4912
338	Pan Arab Medical Journal *	N/A
339	Pejouhandeh: Bimonthly Research Journal	1735-1022
340	PJC - Pakistan Journal of Cardiology	1016-1244
341	PJMR - Pakistan Journal of Medical Research	0030-9842
342	PJS - Pakistan Journal of Surgery	0258-8552

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343	PMJ - Palestinian Medical Journal	N/A
344	Population Bulletin of ESCWA *	0258-1914
345	Population Researches and Studies	N/A
346	Population Sciences *	N/A
347	Population Studies *	1110-1342
348	Proceedings	N/A
349	Professional Medical Journal - Quarterly [The]	1024-8919
350	Qatar Medical Journal	0253-8253
351	Quarterly Journal of Fundamentals of Mental Health [The]	1028-6918
352	Rehabilitation International *	N/A
353	Research Centre Bulletin *	1019-5335
354	Research Journal of Aleppo University - Medical Sciences Series *	N/A
355	Revue Maghrebine de Pediatrie [La]	0330-7611
356	Revue Maghrebine d'Endocrinologie - Diabete et de Reproduction [La] *	N/A
357	Revue Marocaine de Chirurgie Orthopedique et Traumatologique	N/A
358	Revue Marocaine de Medecine et de Sante	0251-0758
359	Revue Marocaine des Maladies de L'Enfant *	N/A
360	Risafa Medical Journal *	N/A
361	RMJ - Rawal Medical Journal	0303-5212
362	Salmand: Iranian Journal of Aging	1735-806X
363	Sana'a University Medical Journal *	N/A
364	Saudi Epidemiology Bulletin *	1319-3965
365	Saudi Heart Journal *	1018-077X
366	Saudi Journal of Disability and Rehabilitation *	1319-6499
367	Saudi Journal of Gastroenterology [The] *	1319-3767
368	Saudi Journal of Ophthalmology	1319-4534
369	Saudi Journal of Oto-Rhino-Laryngology Head and Neck Surgery [The] *	1319-8491
370	Saudi Journal of Sports Medicine [The] *	1319-6308
371	Saudi Medical Journal	0379-5284
372	Scientific Journal of Al-Azhar Medical Faculty [Girls] [The] *	1110-2381
373	Scientific Journal of Forensic Medicine	1027-1457
374	Scientific Journal of Kurdistan University of Medical Sciences	1560-652X
375	Scientific Journal of School of Public Health and Institute of Public Health Research	1735-7586
376	Scientific Medical Journal	1110-5607
377	Scientific Nursing Journal *	N/A
378	SDJ - Saudi Dental Journal [The]	1013-9052
379	SGH Medical Journal New	1658-2489
380	Shaheed Beheshti University Dental Journal	1735-7683

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381	Shaheed Beheshti University of Medical Sciences and Health Services	1605-8941
382	SHAMS - Journal of Medical Sciences New	N/A
383	Social Welfare Quarterly	N/A
384	South Valley Medical Journal	1110-7529
385	SPJ - Saudi Pharmaceutical Journal	1319-0164
386	SQUMJ - Sultan Qaboos University Medical Journal	1029-4066
387	SST - Sante et Securite au Travail	N/A
388	Strides in Development of Medical Education	1735-4242
389	Sudan Journal of Medical Sciences	N/A
390	Sudan Medical Journal *	0491-4481
391	Sudan Medical Monitor	1585-5000
392	Sudanese Journal of Dermatology *	N/A
393	Sudanese Journal of Public Health	N/A
394	Suez Canal University Medical Journal	1110-6999
395	Tabib Attifil Alarabi *	N/A
396	Tanaffos *	1735-0344
397	Tanta Medical Journal *	1110-1415
398	Tanta Medical Sciences Journal	1687-5788
399	Tehran University Medical Journal [TUMJ]	N/A
400	Toloo-e-Behdasht	1728-5127
401	Tunisie Medicale [La]	0041-4131
402	University of Aden Journal of Natural and Applied Sciences	1606-8947
403	Urology Journal	1735-1308
404	Veterinary Medical Journal	1110-1423
405	Yakhteh Medical Journal	1561-4921
406	Yemeni Journal for Medical Sciences [The] *	N/A
407	YHMRJ - Yemeni Health and Medical Research Journal	N/A
408	YJMHR-Yemeni Journal of Medical and Health Research *	N/A
409	YMJ - Yemen Medical Journal *	N/A
410	Zagazig Journal of Forensic Medicine and Toxicology	1687-160X
411	Zagazig Journal of Pharmaceutical Sciences *	1110-5089
412	Zagazig Medical Association Journal *	1110-2322
413	Zagazig University Medical Journal *	1110-1431
414	Zanco Journal for Medical Sciences *	N/A

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