



Under the patronage of His Highness
Sheikh Humaid Bin Rashid Al Nuaimi
Member of UAE Supreme Council,
Ruler of Ajman



**Arab Medical Union in
Europe (ArabMed)**
UN Member (NGO)

**Ajman University of
Science & Technology
Network UAE**



Scientific Programm & Abstracts

**The 22nd Annual Conference of ARABMED
The Conference of
Innovative Medical Environment Commission
(Technosphere 2005/first)**

25 – 31 March 2005
Multipurpose Hall, Ajman Al Jurf
AUST Network, Ajman – UAE

Ladies and gentlemen

It gives me great pleasure to welcome you to this the 22nd Conference of Arab-Med and the Innovative Medical Environment Authority of Ajman University of Science & Technology Network (AUSTN): Technosphere 2005/first.

I would like to start the proceedings of your conference by thanking *His Highness Sheikh Humaid Bin Rashid Al Nuaimi* for his Patronage of this great event, which is a step forward towards an Innovative Medical Environment.

In the name of all staff at this University I also extend a warm greeting to you from Ajman: *Ajman the Emirate* and *Ajman the University*: a leading and pioneering institution of higher education in the UAE and the Arabian Gulf.

AUSTN is an Institution born in 1988 as a University College. Within two decades of this modest beginning we moved on to be a University and then a University Network. The concept of a University Network is based on a 3 dimension comprehensive vision of Education, Information and Investment.

On its way to full and complete realization this vision has produced three distinctive mechanisms, Reference Authorities and an educational philosophy which underpins standards and work areas within the University Network.

These are: Teaching, Research, Training, Expertise & Practice.

This University and its Network embody this comprehensive vision and its 3 dimensions together with its philosophy. The vision and philosophy are the precursor for the "University of the Future".

The University of the Future reflects the vision of an open system university network. In such an open system both the traditional university environment and elements of a virtual university Environment combine and interact for a noble objective, that noble objective is:

the realization of an Innovative and Creative Environment. *This is how the nation will rise, this is how the nation will develop.*

Our Institution believes firmly in breaking barriers between the academic community on the one hand and the business world and activities community on the other.

Our institution is also committed to breaking barriers between traditional approaches to teaching and the interactive and proactive nature of cyber space. Our firm belief and our commitment lead the way towards the establishment of the Comprehensive Innovative Environment.

The foundation of the Comprehensive Innovative Environment is now established. As a result we now have a real life Medical Innovation Authority. This Referential Authority also has real life programmes that contribute to the work of this University's Network.

Ladies & Gentlemen

The geographical barrier between our select scientists, all innovators, within and outside the Arab Nation is today bridged. In this Conference we join ranks

Welcome

الكلمات الترحيبية

with the Arab-Med. We do that in the framework of the Medical Innovation Environment.

This bond is in itself an embodiment of our other major project:

The House of the Wise and the Elite which will define on aims and objectives for the future.

Once more I extend a warm welcome to all of you.

Your proven expertise will, InshaAllah, contribute positively and fruitfully to this the 22nd Conference of ArabMed.

Thank you and God bless you

Dr. Saeed Abdullah Salman

President

AUST-N

President Technosphere 2005/first

Joint Welcome Remarks from AUST Network and the ARABMED

Dear Colleagues / Ladies and Gentlemen,

It is our utmost pleasure to invite you to attend and contribute to both the 22nd Annual Conference and the planned workshop training programme that the ARABMED is jointly organising with Ajman University of Science and Technology, March 25th-31st, 2005, UAE.

The past two years have witnessed strong cooperation and coordination between us on several scientific fronts. This was mainly due to the assimilation of both our missions and views concerning scientific cooperation. This planned vision on our joint cooperation was first orchestrated by HE Dr Saeed Abdullah Salman during the 20th Annual Conference of the ARABMED which was held in Bonn, Germany, September 2003. Indeed, during that particular conference the vision concerning the House of Wise & Elites was declared and consequently provided the foundation for further cooperation between the ARABMED and the AUST Network.

Thus, we are today celebrating some of the achievements which were implemented in the mission statements of both our institutions. Hence, our mutual and fundamental views are characterised by continuation of scientific cooperation on projects of mutual interests; investment in science, technology, training and development. As well as engaging the elites and/or the regional scientists and their counterparts in a scientific debate and cooperation to enhance regional development.

Focusing on the conference and the main workshop training programme, both of the planned programmes will be running in parallel to each others and with those activities of 2005 AUST Technosphere one.

However, overwhelming responses have been received following our first and second announcements for participation. Over 130 scientific submissions were made. The scientific committee had the difficult task of selecting only 110 papers. Half of which will be oral presentations divided into 12 symposia and the other half will be made to poster presentations. It worth noting at this stage that there will be around 10 workshop training programmes planned to discuss several issues, i.e. paediatric medicine, child psychiatry, food intolerance, accident and emergency, stroke, pain therapy, ozone therapy, intensive care and orthopaedic. It should be also indicated that submissions were made from several universities and hospitals representing the following countries, e.g. Germany, France, the UK, Switzerland, Belgium, Canada, USA, Australia, New Zealand, Iraq, Jordan, Egypt, UAE, Yemen, Kuwait, Qatar and Palestine.

We are extremely honoured by the Patronage of His Highness Sheikh Humaid Bin Rashid Al Nuaimi, member of the UAE Supreme Council, Ruler of Ajman. Our sincere appreciation and gratitude to our host and partner, the AUST Network President H.E. Dr. Saeed Abdullah Salman

Chair of the Joint Consultative Conference Committee. Many thanks also due to all members of the scientific committee; members of the organising committee particularly our colleagues at the Innovative Medical Environment Commission, AUST Network. Last but not least a big thank you to all the participants who submitted their work, and to all our delegates who are behind the success of this scientific gathering. A warm welcome to you all at AUST and best wishes for a professionally rewarding conference.

Dr Hassan Naggar
President of
ArabMed

Dr Amer Hosin
22nd ArbMed Conference
Chair

Dr Faidi Mahmoud
Programme & Scientific
Committee Chair

Organising Bodies & Main Conference Partners

The Arab Medical Union in Europe (ARABMED) in Partnership with Ajman University of Science & Technology Network, Innovative Medical Environment (AUST Network).

Under the Patronage of

His Highness Sheikh Humeid Bin Rashid Al Nuaimi
Member of the Supreme Council of the United Arab Emirates, Ruler of Ajman

Consultative Joint Conference Committee Members

Dr. Said Abdullah Salman, President AUST Network Chair of the Joint Consultative Conference Committee

Dr. Hassan Naggar, President of the Arab Medical Union in Europe (ARABMED)

Dr. Basheer Shehadeh, Vice President AUST Network, Chair of the Technosphere Conference and Exhibition 2005/first

Dr. Amer Hosin, Conference Chair, the 22nd Annual Conference of the Arab Medical Union in Europe, Ajman, UAE

Conference Chair

Dr. Amer Hosin

Deputy Chair /Vice President of the Conference

Dr. Med. Faidi Omar Mahmoud, Scientific Committee and Programme Chair ARABMED

Conference Theme

Arab Doctors in Europe and Arab World: Coordination and Integration towards Innovative Medical Environment

Members of the Scientific Committee

Prof. Dr. Abdul Azim Ahmed, General Director of Innovative Medical Environment Commission (AUST Network)

Dr. Faidi O. Mahmoud (ARABMED, GER)

Prof. Dr. Suliaman Al Sharif (AUST) Prof. Z. Fahmy (ARABMED GER)

Dr. Amer Hosin (ARABMED, UK) Dr. N. Y. Haboubi (ARABMED, UK)

Dr. Mustafa Abdulrahman Bassatini (ARABMED, France)

Dr. Ossama Al-Babbili (ARABMED, UAE), Prof. A. Martini (ARABMED, GER)

Dr. Munther Aldoori (ARABMED, UK), Dr. Majeed Jawad (ARABMED, UK)

Organising Committee

AUST Technosphere Conference and Exhibition 2005/first

Mr. Ahmed Said Salman (Director of the Technosphere Centre of Excellence),

Mr. Thamer Said Salman (Vice President AUST Network for Administration and Finances)

Mr. Osama Saeed Salman (Vice President AUST Network for Information, Media and Promotion)

Dr. Mohamed Al-Sharbaty (Manager of Technosphere Conference and Exhibition 2005/first)

Dr. Ahmed Babeker (Documentation)

Dr. Mohamed Al Shami (Business Bureau Technosphere 2005/first)
Dr. Samir Bloukh (Halls Organization)
Dr. Nashwan Soleiman (Legal Committee)
Dr. Hasan Samrai (Reception and Training)
Dr. Ali Abou Elnour (Exhibition)
Mr. Mohamed Saeed Salman (IT)
Mr. Amro Abou Al Mal (Social Programme)
Mr. Obeid Al Shamsi (Public Relations)

II-ARABMED

Dr. Mahmoud Sultan (GER) Dr. Mazen Kabbani (GER)
Dr. Nadim Habubi (UK) Dr. Naif Shynyien (UK)
Dipl-Ing. Mahmoud Zain (GER) Dr Anas Shaker (France)
Dr Mustafa Abdul Rahman (France) Dr Usame Al Sibai (GER)
Dr. Ossama Al-Babbili (ARABMED, UAE), Dr Ahmed Hawi (GER)

Associated Partners

- World Health organisation (WHO) , Eastern Mediterranean Regional Office (EMORO), Egypt
- The Egyptian Medical Association
- Al Andolus Medical University

Guests of Honour

Prof. Dr. Karl Dieter Gröske President of Friedrich Alexander University Erlangen – Nuremberg

Conference Venue

Ajman University, Congress Centre, Al Jurf, UAE

Participating Countries

Germany, France, Great Britain, Belgium, Switzerland, USA, Canada, New Zealand, Australia , Jordan, Egypt, UAE, Iraq, Poland, Qatar, Syria, Palestine, Kuwait, Yemen and Saudi Arabia

Participating Universities

Germany: University of Erlangen- Nuremberg, Heart Surgery, University of Heidelberg, Hand Surgery, University of Tübingen, Department of Laboratory

United Kingdom: London Metropolitan University & University of Ulster

UAE: Ajman University of Science & Technology Network

Iraq: Ministry of Health and High Education in Iraq ,University of Mosul, University of Baghdad, University of Kufa, Babylon University, Al-Mustansriya University, University of Basra, University of Tikrit

USA: University of Missouri, Columbia

Australia: University of Melbourne- Department of General Practice

France: University Hospital La Pitie Paris

Belgium Academic hospitals Vrij universitet Brussels.

Egypt Zagazig University, Suez Canal University

Fees

Registration Fees: 100 \$ (1\$ =0, 75 €=0, 52 UKP)

Workshop Fees: 200\$

Price for Accommodation and flight from Europe (1 Person for 6 days)

- Registration covers six nights bed and breakfast accommodation in hotel, duration 25th-31st March 2005. Your Airline Ticket(s) from major European Capitals to United Arab Emirates

Hotel Rate+Flight (Adult)	4 stars	5 stars
1 Person Rate	\$ 1000	\$ 1400
Couple Rate	\$ 2000	£ 2400

- Accommodation and flight for Children under two year-old pay \$150, while children who are beyond 15 years of age pay \$ 600 only.
- Delegates who arrive to the conference and arrange their own transport (flights etc.) to UAE (eg, from the Arab World) will pay accommodation and registration fee, see below. Though they will be entitled to attend and take part in all social and the scientific programmes and activities.
- Here are the rates:

Hotel Rate (Adult)	4 stars	5 stars
1 Person Rate	\$750	\$ 950
Couple Rate	\$ 1500	\$ 1700

Registration fees will cover

- Airport services on arrival and departure. .
- Registration fees will cover also a banquet which will be hosted by H E Dr Saeed Abdullah Salman, President of Ajman University of Science and Technology Network.
- All handouts of relevant papers presented at the conference will be provided to delegates on CD and in a briefcase
- The social programme which include various trips and social activities. The planned social programme includes visits to museums, the old towns, and market places. Other social activities may include visits to Al-Ain in Abu Dhabi, Oman, the Arabian horse's Stables and Barns as well as visiting the diving village in Dubai and taking a boat trip where dinner is served to delegates on board.

Bank Transfer

Dresdner Bank Ludwigsburg, Germany

Konto Nr 0503738400, BLZ 60480008

OR

ARAB Bank Ltd, Ajman Branch, United Arab Emirates

Account Number: 3005 – 0020410 – 500, Swift Code No: ARABAEBAJMJM

NOTE: Please note that all registration, flight and accommodation fees should be sent to the below indicated bank account in UAE:

Mail Address for Registration and Accommodation

• **ARABMED, Permanent Office of the Society**

Dr. Hassan Naggar, Myliusstr. 2, D-71638 Ludwigsburg, Germany
Tel.: + 49 7141 708013, 6481212, Fax: + 49 7141 708027, 6481214
Mobil: +49 1726501238, E-Mail: mail@arabmed.de, Homepage:
<http://www.arabmed.de>

• **ARABMED, UK Branch**

Dr. Amer Hosin, President of the Meeting, London Metropolitan University
(North Campus), Ladbroke House, 62-66 Highbury Grove, London N5 2AD
Tel.: 0044 207 2265899, Fax: 0044 207 6881556, Amerhosin@aol.com

• **Ajman University of Science & Technology Network (AUST Network)**

Dr. Moh'd Al-Sharbaty, businessbureau@ajman.ac.ae
Dean of Adm. & Registration – AUST Network – UAE
Manager, Business Bureau, Fax 009714/22777226
Tel.: 009712-6266664, Fax: 009712-6272399, Mobile: 0097150-5673727
malsharbaty@yahoo.com

Programm Editor & Designer

Dr Faidi Omar Mahmoud Chair of the Scientific Committee

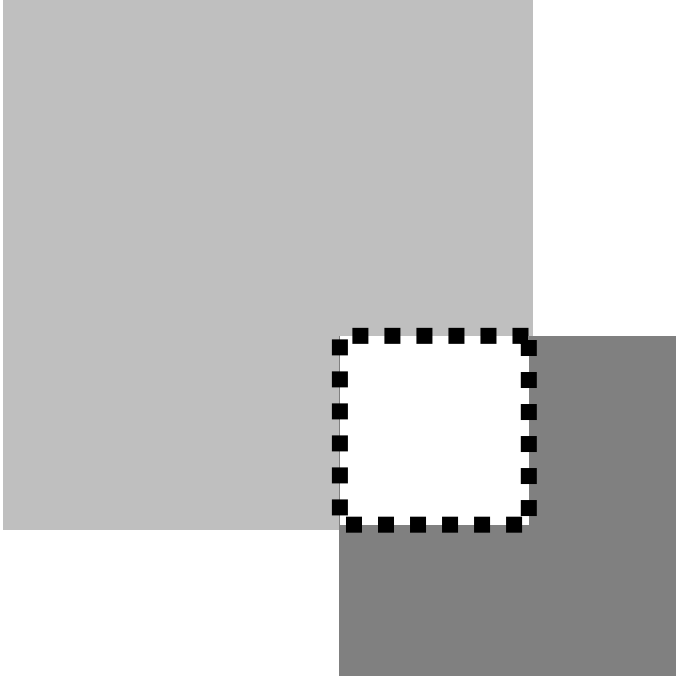
Information for presenters and main speakers

- Presenters are allowed 10 minutes for each presentation followed by a discussion of 5 minutes. Discussants should introduce themselves by name and institute. All speakers are responsible for the content of their presentations.
- Language of conference is either Arabic or English or perhaps German and Turkish (However, most of our delegates prefer their presentation in English)
- Slides and Video tapes may not be possible. However, an Overhead can be provided on request.
- PowerPoint presentations: please bring your presentation to the secretarial room a night before the presentation is due for early set-up arrangements.
- Only presentation on CD-ROMs, Floppy Disks or USB sticks can be processed. Please note that the use of your own laptop will not be possible.
- The date and room of your presentation can be found in the conference program which will be available on ARABMED's homepage (www.arabmed.de or <http://www.herzchirurgie.med.uni-erlangen.de/arab/meetings/meeting.htm>) soon.

Information for the Poster Exhibition

- Poster will be exhibited at the Poster Hall
- You will have 3 minutes for the presentation and 2 minutes for discussion of your poster
- Poster-Size: 120x90 cm
- Please clearly put the indicated number of your poster on the upper right of the poster

NOTE: As indicated earlier all speakers and presenters are responsible for the content of their presentations.



Scientific Programme

البرنامج العلمي

ArabMed Conference, Main Scientific Programme 26-29 March 2005

The 22nd Annual Conference of the Arab Medical Union in Europe
Technosphere -1 2005

Ajman University of Science & Technology Network (AUST)
Congress Centre Al Jurf in Ajman

Friday, 25 March 2005 الجمعة

16.00-19.00	التسجيل للمؤتمر اجتماع الهيئة التنظيمية	
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Saturday, 26 March 2005 السبت

10.00-13.00	افتتاح المؤتمر	Main Auditorium
15.00-18.00	الندوات التقاربية	Main Auditorium
15.00-17.00	جلسة الأمراض الأذنية	Hall A
15.00-17.00	جلسة أمراض الأطفال	Hall B
17.00-19.00	جلسة امراض الأسنان	Hall B
15.00-17.00	جلسة الأمراض النفسية	Hall C
	اجتماع الهيئة التنظيمية	

Sunday, 27 March 2005 الأحد

09.00-11.00	جلسة الأمراض الداخلية	Main Auditorium
11.30-13.30	جلسة الأمراض القلبية	Main Auditorium
09.30-11.30	جلسة البوستر I	Poster Hall
	اجتماع الهيئة التنظيمية	

Monday, 28 March 2005 الاثنين

09.00-11.00	جلسة السكري	Main Auditorium
11.30-13.30	جلسة الأمراض النسائية والتذي	Main Auditorium
09.30-11.30	جلسة البوستر II	Poster Hall
	اجتماع الهيئة التنظيمية	

Teusday, 29 March 2005 الثلاثاء

09.00-11.00	جلسة الجراحة	Main Auditorium
11.30-13.30	Orthopedics & Traumatology جلسة العظمية والحوادث	Main Auditorium
14.30-.16.30	Pharmacology & Biomedical Sciences جلسة العلوم الدوائية	Mian Auditorium
17.00-19.00	Medical Science & Curriculum Development جلسة المناهج التطويرية والعلاقات الأكاديمية	Main Auditorium
09.30-11.30	جلسة البوستر III	Poster Hall
	اجتماع الهيئة التنظيمية	
19.30-21.00	Conference Resolutions and Closing Speech الجلسة الختامية	Main Auditorium

Main Workshop Programmes 26-29 March 2005

The 22nd Annual Conference of ARABMED

Technosphere -1 2005

Ajman University of Science & Technology Network (AUST)

Congress centre Al Jurf in Ajman

Saturday, 26 March 2005 السبت

09.00 Transfer from Hotel **مغادرة الفندق**

Hall A	Hall B	Hall C	Mian Auditorium القاعة الرئيسية Al Jurf
			Opening Ceremony 10.00-13.00 Technosphere 15.00-18.00

Sunday, 27 March 2005 الأحد

08.00 Transfer from Hotel **مغادرة الفندق**

Hall A	Hall B	Hall C	Mian Auditorium القاعة الرئيسية Al Jurf
1-Cardiac disease 08.30- 11.00 2- Asthma 11.00-13.30	Child Psychiatry I 08.30-17.30	1-Paediatric 08.30- 13.30 2-Pat.-doctor communication 15.00-18.00	Papers activities 8.30 – 14.00

Monday, 28 March 2005 الاثنين

08.00 Transfer from Hotel **مغادرة الفندق**

Hall A	Hall B	Hall C	Mian Auditorium القاعة الرئيسية Al Jurf
Pain Management 08.30- 13.30	Child Psychiatry II 08.30-17.30	Accident & Emergency 08.30- 13.30	Papers activities 8.30 – 14.00

Teusday, 29 March 2005 الثلاثاء

08.00 Transfer from Hotel **مغادرة الفندق**

Hall A	Hall B	Hall C	Mian Auditorium القاعة الرئيسية Al Jurf
1- Neurology 08.30- 13.30 2- Orthopedics 15.00-18.30	Child Psychiatry III 08.30-17.30	1-Gastroentmology 08.30- 13.30 2-Evidence based 15.00-18.30	Papers activities 8.30 – 18.30 Conference Resolutions and Closing Speech 19.30-21.00

Ajman University of Science & Technology Network (AUST)
The Wise and Elite House
Congress Centre, Al Jurf , Ajman, UAE
افتتاح المؤتمر

10.00-13.00 Mian Auditorium

قاعة المؤتمرات الرئيسية في الجرف

- 09:00 مغادرة الفندق
- 10:00 وصول موكب صاحب السمو والوفد المرافق له
- 10:00-13:00 تدشين القاعة متعددة الأغراض بمقر شبكة الجامعة بالجرف
وافتتاح الرسمي للمعرض المصاحب

حفل الافتتاح:

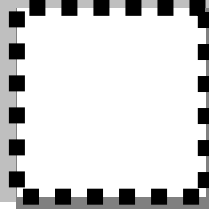
- القرآن الكريم
- النطق السامي
- كلمة معالي الدكتور/ سعيد عبدالله سلمان
(رئيس شبكة جامعة عجمان للعلوم والتكنولوجيا ورئيس رابطة مؤسسات التعليم العالي الخاصة بالوطن العربي ورئيس الشبكة العربية الأوروبية للبحوث)
- كلمة سعادة الاستاذ الدكتور/ حسان النجار
(رئيس إتحاد الأطباء العرب في أوروبا)
- كلمة سعادة الأستاذ الدكتور/ عامر حسين
(رئيس المؤتمر الثاني والعشرين لاتحاد الأطباء العرب في أوروبا)
- كلمات كبار الضيوف

ARBMED

2005

Lectures

المحاضرات العلمية



Scientific Programme

البرنامج العلمي

الندوات التقاربية لبيئة الإبداع الطبية
Approach Seminars
Innovative Medical Environment Commission, AUST

15.00-18.00 Mian Auditorium

The Wise and Elite House in the Innovative Medical Environment Commission

بيت الحكماء والنخب في بيئة الإبداع الطبية

Druges and Medical Ethics

الدواء وأخلاقيات المهنة

Academic Hospital for Innovative Medical Environment

مستشفى بيئة الإبداع الطبية التعليمي

Service Planning and Care for Diabetic Patients

العناية بمرضى السكري

The Institute of Enviornment, Water& Energy

معهد البيئة والمياه والطاقة

New Trends for Nursing: Hope and Challenges

واقع مهنة التمريض: الآمال والتحديات

Otolaryngology جلسة الأمراض الأذنية
15.00-17.00 Hall A

Chair: Dr Aziz Ali Galeb UAE
Dr. Daoud S. Allos Iraq

1. Malignant Tumors of Nasal Cavity and Paranasal Sinuses in Northern Iraq: A fifteen years retrospective study

خبرة المشفى الجامعي في الموصل في معالجة الأورام الخبيثة في الأنف والجيوب الأنفية

Dr. Daoud S. Allos

Dept. of Surgery, Mosul College of Medicine, Iraq

2. Is Bilateral Choanal Atresia Compatable With Life ? (Case Report of 35 y.Old patient with Bilateral Choanal Atresia)

هل أسداد فتحات الأنف الخلفية يتلائم مع الحياة

Dr.Nashat AL-Khayat E.N.T Specialist D.L.O

Alzehrave Teaching Hospital Mosul Iraq

3. Deafness in children and the need for cochlear implants

الصمم عند الأطفال والحاجة إلى زرع الحلزون

Abdul Muhsen Y. Al Allaf, Ajib Ali, *Muna Muneer

Department of Otolaryngology, Al Rahma Hospital & Mosul General Hospital Mosu, *Mosul Medical College, Iraq

4. Effect of ionizing radiation on some microorganisms causing chronic suppurative otitis media

فعالية المعالجات الشعاعية في إصابات الأذن الوسطى الإتهابية

Dr.Hayffa Hashim Mohamed, A. Al-Muhson, Y. S. Allaf, Nadia A. Al-Derzi , Mohammed F. Kashmoola, Muna Muneer -

Albatool teaching Hospital, Mosul, Iraq

5. Occupational Hearing Loss in State Company for Textile Industries , Hilla

فقد السمع عند العاملين في الحرف النسيجية

Dr. Safa Sahib Najji Sultan.

College of Medicine / Babylon University

6. Noise pollution

محاظير الضجيج

Dr. Radhi Jawad Bakir

Otolaryngologist Al Zahraa General Hospital Kut, Wasit, Iraq

7. 14 th National and 5th International course on Parotid and Facial Nerve Surgery

Abdul Muhsen Yonis

ENT Dept. University of Cologne Cologne, Germany

Paediatric Medicine جلسة أمراض الأطفال

15.00-17.00 Hall B

Chair: Dr Mustafa Abdulrahman France
Dr Majeed Jawad UK

8. Atypical Phenotype in Huntington's Disease: Presentation of Clinical and Molecular Data.

النمط الظاهري غير النموذجي لمرض هنتغتون، دراسه و تقديم البيانات السريرية والوراثية للحاله المرضية.

Shatha Janabi*, Elzbieta Zdzienicka*, Dorota Hoffman*, Teresa Jakubowska* Danuta Gołębiewska^, and Jacek Zaremba*.
Department of Genetics, Institute Of psychiatry and Neurology Warsaw ,Poland

9. Modern Prevention of Diarrhea in Iraq Malnourished Children using an Infant Formula Containing Anti-escherichia Coli-cloistral Antibodies from Hyper Immunized Cows.

وقاية معاصرة غير تقليدية لحالات الإسهال عند الأطفال العراقيين المصابين بسوء التغذية باستخدام حليب مدعم بمضادات الاشيرشيا القولونية الممرضة من أبقار ممنعة

Dr Haifa Tawfeek
College of Health and Medcial technology, Baghdad, Iraq

10. History of Paediatric Medicine in the Arab and Islamic World

طب الاطفال عند العرب والمسلمين

Dr Mahmoud Al Hadj Kaasem Mohamed
Mousul, Iraq

11. Childhood Solid Cancer : 12 Years Experience in Ninevah Province

دراسة وبائية عن الأورام الخبيثة عند الأطفال، خبرة ١٢ سنة

Shuaib H S Al-Talib*, Rafah S Al-Saddon** & Bedoor A Al-Irhayim*
* Department of Pathology, College of Medicine** Department of Oral and Maxillofacial Surgery, College of Dentistry, University of Mosul

12. Criteria for Referral to Ultrtrasound Hip Examination in Clinically Doutful Cases of Developmental Dysplasi of the HIP (DDH)

نتائج تشخيص خلع الورك الولادي بالامواج الصوتية

Dr. NABEEL.M. AL-SABBAGH
Al-salam General Hospital in Mosul, Iraq

13. Neonatal and Infantile Erythrodermas: A Clinical Study of 42 Cases.

المشاكل الجلدية عند الخدج وحديثي الولادة

Muhsin A. Al-Dhalimi

Saturday, 26. March 2005

College of Medicine, Kufa university, Najaf, Iraq.

14. Management of Anorectal Malformation: A study of 100 Cases

التشوه الخلقي للمستقيم والشرج - دراسة لمائة حالة

BASSAM KHALIL AL-ABBASI , ABDUL RAHMAN ABDUL AZIZ AL-SHAHWANI Dr.Mohammad Hazim., Prof. A. Sulaiman.

College of Medicine, Mosul University, Iraq

Dentistry جلسة أمراض الأسنان
17.00-19.00 Hall B

Chair: Dr. Abu Fanas Salem UAE
Dr Sadiqu al-Mousllie Germany

15. The Biology of Bone Remodeling

العوامل المؤثرة في إعادة ترميم عظم الفك

Sausan Al Kawas,

Head of Basic and Medical Sciences Department, Faculty of Dentistry,
AUST, UAE

16. Dental caries prevalence in relation to socioeconomic status of preschool children in Ajman, United Arab Emirates.

دراسة عن تسوس الأسنان في الطبقات الاجتماعية المختلفة في أطفال عجمان

Hashim, R Thomson, M., Ayer, K., Lewsely, J., Awad, M.

17. Pregnancy outcome in patient with dental interference

التداخلات الجراحية لأسنان الأم الحامل وتأثيرها على نتائج الحمل النهائية

Dr. Muhsin Al-Sabbak, Dr. Suzan Sadik Ali

Medical College, Basra University, Iraq

18. The edentulous lower jaw: treatment and a case presentation

Dr Sadiqu al-Mousllie

University Hospital of Wuerzburg , Germany

19. Effect of Lignin Additives on Some Physical and Mechanical Properties of PMMA Denture base Material

تأثير اضافات اللكنين على بعض الخواص الفيزيائية والميكانيكية لمتعدد مثيل مكريليت مواد طقوم الاسنان

Kabal Abd El Hamid Brikae Al Hyti

Baghdad , Iraq

Psychiatry جلسة الأمراض النفسية
15.00-17.00 Hall C

Chair: Prof. Ed Cairns UK
Dr Saad Al Khalaf, UK

20. Young People's Mental Health in Northern Ireland: The Legacy of Violence

اسباب وخلفيات العنف في شباب ايرلندا الشمالية

Prof. Ed Cairns

School of Psychology, University of Ulster, Coleraine, N. Ireland, UK

21. Study of the Psychological Profile of Street Children and the Services Rendered to them

Prof. Amira Gamal Seif El Din

Professor of Mental Health Chairperson of Community Medicine
Department, Faculty of Medicine, Alexandria University President of
the Child Mental Health Association President of the EMACAPAP

22. SUICIDE AND DEPRESSION IN THE ELDERLY

اسباب الإنتحار والإكتئاب عند المسنين

Dr Saad Khalaf

23. Challenges Bipolar Disorders

Dr Najem Al-Falahe Neurophysiologist

St. Georges University & South West London MHT, UK

**24. Psychotropic drugs and Intimacy dysfunction, Myth or Reality ?
A Clinical-Psycho-Pharmacologist View.**

*Mohamed Toutoungi, **Sophie Rochet, MD

*1, Rue Monnier, CP 313, CH-1211 Genève 12 and **Laboratoire de
Biologie de la Reproduction et du Developpement, Université de Lyon.-
1, Lyon, FRANCE

25. Epidemiological Features of Legionnaires disease in 16 patients.

Dr Lina Naime Toutoungi, Faculte de Medecine, University de Geneva,
Geneva, Switzerland

**26. First Episode Psychos: Factors associated with delayed access
to care in a rural Egyptian setting**

نوبة الذهان الاولى: العوامل المصاحبة لتأخر بلوغ المريض رعاية الطب النفسي في منطقة من
الريف المصرى

Dr Mamdouh EL-Adl, Northamptonshire Healthcare Trust NHS, UK; Dr
Mohammed EL-Mahdy, AL-Azhar University, Egypt and Dr Musheera
Anis, Mansoura General Hospital, Egypt.

Internal Medicine جلسة الأمراض الداخلية
09.00-11.00 Mian Auditorium

Chair: Dr. Nadim Haboubi UK
Prof. Ziad Fahmy Germany

27. Advances in the Gastroenterology Endoscopy

Prof Dr. med Eckart G. Hahn
Director of Gastroenterology Department of the University Hospital in
Erlangen, Germany

**28. Pathogenesis of Intestinal Carcinoma: Effect of diet and
chemicals: Experimental and Clinical Evaluation**

Prof. Majid Amin Alousi, Past president of Iraqi Medical Sciences
Association (USA)

29. Helicobacter Pylori Center a luxury or Necessity

Dr. Tarik Al-Zubaidy
Diagnostic bacteriology & Immunology. Faculty of Pharmacy & Health
Sciences. / Fujairah AUST, UAE

**30. Evaluation of Serum IgG Antibodies to H.Pylori , Pepsinogen -1
and Gastrin-17 in Patients with Some of Upper Gastrointestinal
Tract diseases**

تقييم مستوى الغلوبولين المناعي G المضاد لبكتيريا الهيليكوباكتريا بايلوري والبيسنوجين-
١ والكاسترين-١٧ لدى المرضى المصابين ببعض أمراض الجهاز الهضمي العلوي
Dr.Adnan F.Ahmad Al-Najjar, Dr.Hazzim Hussein Edan, Sa'ad Saeed
Salihe* Dr. Salah Abd-Alnabi*
Department of Medical Biochemistry, College of Medicine, Al-
Mustansiriya University. Ministry of Health *, Iraq

31. A State of the Art Review Hematology.

عرض عام عن الوضع الحالي والراهن في الأمراض الدموية
Hamid Al-Mondhiry MD
The M. S. Hershey Medical Center, USA

32. AGEMENT OF TUBERCULOSIS

التدبير المثالي لمرض السل
Dr Thamer Kadum Yousif, Dr Qassim Abdul jabbar Saleh
College of Medicine, Tikriet University, Iraq

33. Nutritional anaemia in Yemen

فقر الدم الغذائي المنشأ في اليمن
Dr. Basaharaheel , Sanaa, Yemen

Heart Diseases جلسة الأمراض القلبية
11.30-13.30 Main Auditorium

Chair: Dr M. Aldoori UK
Dr Nuha Haboubi UK

34. The Future Of Cardiology

Dr Rasha Al-Lamee
SHO in Cardiology, St Bartholomew's Hospital, London.

35. Biochemical Markers for Acute Coronary Syndrome

العلامات المخبرية لتناثر الداء الإكليلي الحاد
Nuha Haboubi
Wales General Hospital, Carmarthen, U.K

36. Guidelines For Treating Hypertension in 2004: What's New?

الجديد في معالجة ارتفاع التوتر الشرياني والتصنيف العالمي لها
Dr Baha Al-Wakeel
North Middlesex University Hospital, London, UK

37. Carotid Endarterectomy under Local Anaesthesia: Effects of Control Ateral Carotid disease on Blood Pressure Instability

استئصال العصيدة من الشريان السباتي بالتخدير الموضعي في مرضى ارتفاع الضغط الغير المستقر
OK M. Aldoori, H Aw Yeang
Huddersfield Royal Infirmary, UK

38. Interaction between isoleucine intake and the content of cardiac arginine in the rats

Abdulrahim Abujayyab
Pharmacology & Therapeutics Department, Al - Fujairah Campus
College of Pharmacy and Medical Sciences, AUST, UAE

39. Evaluation of serum myoglobin in patients with acute myocardial infarction

Amal R. Al-Zubaidy,
Clinical Biochemist, Medical Technical Institute/ Al-Mansur, Baghdad ,
Iraq.

40. Hyperglycemia following Acute Myocardial Infarction: The Contribution of Stress and Diabetes Mellitus and Their relation to Outcomes.

تزايد مستوى السكر بعد الاحتشاء الحاد دليل على سير المرض
Dr. Jasim Mohamed T Al-Hayal

41. Effects of ARBs on regression of left ventricular hypertrophy in patients with essential HYPERTENSION.

تأثير التيلمستان او الكاتستران في تراجع ضخامة البطن الأيسر في مرضى ارتفاع التوتر الأساسي
Prof. Dr. Najah R. Hadi
Kufa College of Medicine , Iraq

Poster Session I جلسة البوستر
09.30-11.30 Poster Hall

Chair: Dr Niaf Shnyien UK
Prof Dr Abdalh Salem Al Hoaigi UAE
Dr Kassem Sara (WHO, Regional Office of Eastern
Mediterranean, EMRO)

42. Establishment of base level concentration of inorganic chemical in domestic water in UAE as compared to the WHO drinking water standards

Dr Zeinelabidin S Rizk
Institute of Environment, Water and Energy, AUST Network.

43. Prevalence of Mitral Valve Prolapse among Patients with Sickle Cell Anemia

احتمالية الإصابة بتهدل الصمام التاجي في مرضى فقر الدم المنجلي
Dr. Abdul Raheem Hassen Al-Humrani, Dr. Mohammed R. Farhan*
Medical college Basrah University, Iraq

44. THE METABOLIC SYNDROME – A POSTPRANDIAL DISEASE

التنادر الاستقلابي
Dr. Mahmoud Sultan
Department of Medicine and Endocrinology, Schlosspark Clinic –
University of Berlin Charité, Germany

45. THE SIGNIFICANCE OF MODIFIED LATEX AGGLUTINATION WITH 2-MERCAPTO-ETHANOL (2ME) TEST IN DIFFERENTIATION BETWEEN ACUTE AND CHRONIC TOXOPLASMOSIS

MOHAMMED ABDUL-AZIZ KADIR, AYL KHEDEHER GHALIB.
NAZAKAT FAKHRADDIN OTHMAN,
UNIVERSITY, KIRKUK., HEALTH, KIRKUK., Iraq

46. Serum Creatinine and Microalbuminuria:as Sensors of Cardiovascular Risk

زيادة الكرياتينين في مصل الدم وظهور البيلة الالبومينية فحصان منذران للاصابة بالنوبات القلبية الوعائية
Dr.Mohammed Jamil Al-Habbal (Consultant Physician and
Nephrologist), Mosul-Iraq

47. THE EFFECT OF SOME SOCIAL AND BIOLOGICAL FACTORS ON THE VALUES OF SERUM GLUCOSE, CHOLESTROL AND URIC ACID.

Dr. Razak J. AL-Essa

48. EFFECT OF IRON DEFICIENCY ANEMIA ON SOME LIVER ENZYMES LEVELS IN THE ADULT MALES

دراسة تأثيرات مرض فقر الدم التغذوي بسبب نقص الحديد على مستويات بعض الإنزيمات الكبدية
Yesar M.H. Al-Shamma, Heider H.A. Al-Heidery
Department of Physiology, College of Medicine, Kufa University.

49. Assessment of Metforman on Lipid profile in included hyperlipidimic rats

Dr.Jabbar Yassir Al-Mayah

50. Cancer Treatment.

مستجدات علاج السرطان
Dr Layth Yahya Ibrahim Al-Hussainie
Mosul University Medical College, Iraq

51. Mono polar diathermy versus ligaclips for cystic artery occlusion during laparoscopic Cholecystectomy

مقارنة ما بين استعمال المشروط الكهربائي الوحيد القطب مع الكلبس المعدني في إغلاق الشريان المراري في عمليات التنظير
Dr. Muzahim Al-Khyatt Dr. Samir I. Al-Saffar Hesham Al-Attrakchi
Mosul Hospitals, Iraq

52. Diagnosis and theurapeutic implications of the cranio-cervical arterial dissection, dural sinus thrombosis and pituitary apoplexy.

T. Stadnik & W. Shabana
Department of Radiology, AZ VUB Brussels, Belgium

53. Establishment of base level concentration of inorganic chemical in domestic water in UAE as compared to the WHO drinking water standards

Dr Zeinelabidin S Rizk
Institute of Environment, Water and Energy, AUST Network. UAE

54. ARTHRITIS RHEUMATOID AND HOMEOPATHY TREATMENT

التهاب المفاصل والعلاج بالطب المثيل
Dr Ossame Yosef

55. Mono polar diathermy versus ligaclips for cystic artery occlusion during laparoscopic Cholecystectomy

مقارنة ما بين استعمال المشرط الكهربائي الوحيد القطب مع الكليس المعدني في إغلاق الشريان المراري في عمليات التنظير

Dr. Muzahim Al-Khyatt Dr. Samir I. Al-Saffar Hesham Al-Attrakchi
Mosul Hospitals, Iraq

56. HYDATID DISEASE OF THE HEART, A REPORT OF THREE CASES AND REVUIW OF LITERATURES

عرض ٣ حالات عن إصابة القلب بالأيستينو كوكين

Abdul Raheem H. Alhumrani, Hussein Ali Alchalbi
Medical College Basrah University, Iraq

57. A clinical evaluation of automated blood pressure measurement using Eagle 4000 patient monitor

Dr Yesar Al-Shamma; Safaa Ali Khudhiar; Zehraa Al-Mudhafar
Kufa College of Medicine, Iraq

58. Hyperhomocysteinemia as an independent risk factor for coronary Artery disease:

الهوموسيستينين يعتبر كعامل مستقل للخطر في حدوث أمراض الشرايين التاجية

Dr Omar Al-Kubaissi (FRCP), Aouff Al-Azzawi (FRCM) &
Waleed M.S. Al-Mashhadani (PhD), Iraq

59. Bone lengthening in patients with poliomeylitis

نتائج تطويل العظم في مرضى شلل الاطفال

Dr. Yamman w.Zain Alabideen.
Al Jamhury Teaching Hospital , Mosul - Iraq.

60. THE EFFECT OF CONTRACEPTIVE PILLS ON PLASMA LIPIDS AND BLOOD PRESSURE

تأثير استخدام حبوب منع الحمل على مستوى الدهون في الدم وضغط الدم

Dr. Sajeda S. D. H. Al-Chalabi & Dr. Baybeen K. Al-Selevany,
Department of Medical Physiology, College of Medicine, University of
Mosul, Iraq

61. Pseudouridine as tumor marker for breast tumors

التقصي عن النيوكليوسيد المحورة (السيديوريدين) كمؤشر سريري لمرضى أورام الثدي

Amal R. Al-Zubaidy,
Clinical Biochemist, Medical Technical Institute/ Al-Mansur, Baghdad ,
Iraq .

62. Childhood Anaemia in Mosul: A clinicohaematological study

دراسة سريرية عن فقر الدم عند الأطفال في الموصل

Dr.Muna Abdulbast Kshmoola, Consultant Haematologist

Mosul Medical College, Iraq

63. MEGALOBlastic ANAMIA IN CHILDREN

فقر الدم بسبب نقص حامض الفوليك وشدته في الاطفال

Nada A. Al-Ali

Department of Pediatrics, College of Medicine, University of Mosul

64. THE DEMONSTRATION OF HELIOBACTERPYLORI IN THE GASTRODUDENAL ENDOSOOPIC BIOPSIES BY USING DIFFERENT STAINS

دراسة عن إصابة المرضى بالتهاب المعدة المزمن بالهريلوباكتري بالتنظير

Dr. BASI IAR ABDUL-JABBAR, Dr. M. Y. AL-MUKI1TAR

DEPARTMENT OF PATHOLOGY.MOSUL MEDICAL COLLEGE, IRAQ

65. Lipid Profile in Polycystic Ovarian Syndrome

دراسة نسبة الدهون في دم المرضى المصابين بمتلازمة تكيس المبيض

Dr. Fouad H. Al-Dahhan

Obstet. & Gynaecol. Depatment, College of Medicine, Basra Iraq

66. Effect of Maternal Iron Deficiency Anaemia on Fetal Outcome

MAIDA Y.SHAMDEEN, RABIHA A. HUSSEIN

Department of Obstetric and Gynecology Mousl Medical College, Al-

Batool Maternity Teaching Hospital, Mousl ,Iraq

67. Response to Clomiphen Citrate in PCOS Patients with Abnormal Lipid Profile and impaired Glucose Tolerance Test

M.Y.SHAMDEEN, L.A.MOHAMMAD

Department of Obstetric & Gynecology, Mosul medical college/Mosul

university, Albatool Maternity Teaching Hospital, Mousl, Iraq

68. Breast Cancer and Genetic Testing

Dr Abdul Mujib Cadili

Sturgeon Hospital, Alberta, Canada

69. POST-SURGICAL LOCO REGIONAL RECURRENCE OF BREAST CARCINOMA IN IRAQ

دراسة عن الحالات الناكسة بعد استئصال الثدي

Dr. Ali M. Al-Saiegh

Department of Surgery, College of Medicine, Kufa University, Iraq

70. Evaluation Of trace metals in serum and hair of Female Patients with Breast Tumor

(تقييم العناصر المعدنية في المصل والشعر عند النساء المصابات باورام الثدي)

Dr. Adnan F.A. Al-Najjar, Nahla M. Al-Sakkal, Amal Rasheed* Farhan,

Department of Medical Biochemistry, College of Medicine, Al-

Mustansiriya University, Medical Technicology Institute/ Al-Mansur*,

Iraq

71. NON – SELECTIVE APPROACH TO LAPAROSCOPIC CHOLECYSTECTOMY: A PROSPECTIVE STUDY IN MOSUL

اللايتفانية في عمليات استئصال المرارة بالمنظار

Dr. Samir I. Hasan Al-Saffar

Department of Surgery, Mosul Medical College, Iraq

Diabetes جلسة السكري

09.00-11.00 Mian Auditorium

Chair: Prof Dr Aly Mishal Jordan
Dr Eckard Salzsieder Germany

72. PREVALENCE OF DIABETES MELLITUS IN MOSUL CITY COMPARISON OF 1997 AMERICAN DIABETES ASSOCIATION CLASSIFICATION WITH 1985 WORLD HEALTH ORGANIZATION CLASSIFICATION

الإجراءات الوقائية للداء السكري على حسب المعايير الدولية الجديدة

Waad-Allah Shareef Mula-Abed, Amjad Hazem Al-Naemi
Department of Biochemistry, College of Medicine,
University of Mosul, Mosul, Iraq

73. Advances in tratement of diabetes

العلاجات المفضلة للداء السكري

Dr Aly Mishal
Islamic Hospital, Amman Jordan
Mishal Dr Aly , Islamic Hospital, Chief of Medical Staff,P.O. Box 925693 Amman
11190 Jordan, info@Islamic-hospital.org

74. Ajman/German Co-Operation in Diabetes Care and Management:the Pilot Study

Dr Eckard Salzsieder , AUST Network Team
Institut f[r Diabetes Gerhardt Katsch Karlsburg GmbH Germany

75. THE METABOLIC SYNDROME – A POSTPRANDIAL DISEASE

التنأدر الإستهقلابي

Dr. Mahmoud Sultan
Department of Medicine and Endocrinilogy,Schlosspark Clinic –
University of Berlin Charité, Germany

76. Functional properties of the minor hemoglobin fractions A1a and A1b

Dr. Hedef Dhafir El-Yassin, Professor Dr. Dhafir El-Yassin
Department of Physiological Chemistry, College of Medicine,
University of Baghdad, Baghdad, Iraq.

77. SIALIC ACID PROFILE IN DIABETIC PATIENTS

عبار حمض السيلاليك في السكريين

Dr.Hazzim Hussein Edan, Dr.Adnan F.Ahmad Al-najjar, * Jeian Lateef
Hussein
Department of Medical Biochemistry,College of Medicine,Al-
Mustansirya University.,*Tikrit University, Iraq

78. Prevalence of cutaneous manifestations in diabetic patients in Najaf city

Dr. Mohammed A. Abed Al-Hussein
Department of medicine , Kufa College of Medicine , Kufa University,
Iraq

79. Erythrocyte glutathion and uric acid in type II diabetes mellitus.

كلوتاتايون كريات الدم الحمراء وحمض اليوريك عند مرضى السكر من النوع الثاني
Dr.Abdul Hameed A.AL Kassir

Gynaecology جلسة الأمراض النسائية والثدي
11.30-13.30 Mian Auditorium

Chair: Dr Ali Kubba UK
Dr Samir Sawalhe Germany

80. Urethrocystopexy with fibrin sealant and suture of the vaginal to the abdominal fascia

العلاج الجراحي لسلس البول عند النساء

Dr Samir Sawalhe

Department for Obst. & Gyn, Dingolfing, Germany

81. Women's Health and Gynaecology Healthy forever: Lessons on the preservation of women's Health

Dr Ali Kubba MB ChB FRCOG MFFP

Consultant Community Gynaecologist and Honorary Senior Lecturer
Guy's, Kings and St Thomas' School of Medicine, London, UK

82. Urinary Stress Incontinence

معالجة سلس البول عند النساء

Dr. Suhil Abdulla

Rhauderfehn, Germany

83. Diltiazemas compared with oxybunin for yriinary incotinenec in women

Dr. Jonaya M Sarsam,

Department Pharmacology, College of Medicine, University of Mosul,
Iraq

84. THE ROLE OF TUMOR MARKER CA 15-3 IMMUNOCYTOCHEMISTRY AS PROGNOSTIC PARAMETER , IN FINE NEEDLE ASPIRATION CYTOLOGY SMEARS OF BREAST CANCER PATIENTS

الفحص الخلوي بطريقة الوخز الدقيق بالاشترارك مع الفحص الكيمياتي المناعي باستخدام المعلم في مرضى عقد الثدي (CA15-3) الوراثي

Dr. Maitham M. Al-Khateeb & Dr.Nidhal K. Al-Rahal

Kufa Medical College , Iraq

85. The kinetic and thermodynamic studies on the binding of 125I-progesterone to its receptors in ovarian tumors homogenates

التغيرات الحركية والحرارية في معالجة أورام المبيض الهرمونية

Sami A. Al-Mudhaffar, Saba Z. Al-Qadi

Chemistry Dept., College of Science, University of Baghdad, Iraq

86. Pharmacological and pathological role of taurine on female reproductive system

Monday, 28 2005

Abdulrahim Abu Jayyab
Department of Pharmacology & Therapeutics, Faculty of Pharmacy
and Health Sciences, AUST, Al-Fujairaha Campus, UAE

87. GESTATIONAL TROPHOBLASTIC DISEASE:REVIEW OF SEVENTEEN CASES

حدوث الحمل العنقودي الكامل والناقص وسرطان السخند

Dr.Yosra Tahir Jarjees, Dr.Aasem Al-Chalaby*, Dr.Haifa Zeki Beker
Department of Obstetrics and Gynecology, College of Medicine,
University of Mosul, Neinavah Private Hospital*, Mosul, Iraq

Poster Session II جلسة البوستر
09.30-11.30 Poster Hall

Chair: Dr. Ossama Al-Babbili UAE
Prof. A. Martini Germany
Professor Akeel Yassen UK

88. LEAD TOXICITY AMONG WORKING IRAQI CHILDREN (recycling lead from old batteries)

تأثير الرصاص على الاطفال العاملين في معامل استخلاص الرصاص من البطاريات
Fatma H Al-Mulla *, Saad S Al-Ani** and Nada K Al_Tae***
Al-Kindy Medical College, Baghdad University, Iraq

89. The prognostic factors of congenital diaphragmatic hernia in Mosul

العوامل المؤثرة في سير مرض فتاق الحجاب الحاجز الولادي دراسة تحليلية لثلاثين حالة
BASSAM KHALIL AL-ABBASI - ABDUL RAHMAN ABDUL AZIZ AL-SHAHWANI Dr.Mohammad Hazim., Prof. A. Sulaiman.
College of Medicine, Mosul University, Iraq

90. Cooperation exercises' pre-clinic

التحضير الجيد للمرضى قبل القبول في المشافي
Dr Sadiqu Al-Mousllie
Germany

91. Prevalence of H.pylor. Infection in patients with gasTrosophageal reflux disease.

الإجراءات الوقائية في حالات القلس المعدي
Dr. Sadiq Jabbar AL-Mahana
Kufa College Medicine , Iraq

92. Comparative Effects of Ciprofloxacin, Cotrimoxazole and Amoxycillin in Patients with UTIs in Mosul Population

مقارنة لفعاليات ٣ مضادات حيوية في معالجة التهابات الطرق البولية
Dr Isam Hamo Mahmood
College of Medicine Department of Pharmacology, University of Mosul.
Mosul, Iraq

93. Study of the relationship between trace elements values in patients with different types of brain tumors

دراسة عن التغيرات الكيميائية المختلفة بين ورمين دماغيين
Manal Ezat Aziz
Clinical Biochemistry, Medical Technical Institute, Ministry of Higher Education

94. Immunohistochemical Study of CA-125 tumor marker expression in Endometrial hyperplasia in correlation to grade and progressive endometrial carcinoma in Iraq.

Asad Al-Janabi

Pathology Department, College of Medicine, Kufa University, Iraq

95. SEROPREVALENCE OF TOXOPLASMA GONDII AMONG PREGNANT WOMEN IN KIRKUK / IRAQ.

MOHAMMED AB.-A. KADIR, A. K. GHALIB, N. F. OTHMAN*,

KIRKUK UNIVERSITY, KIRKUK. DIRECTORY OF HEALTH, KIRKUK.* Iraq

96. PREVALENCE OF ASTHMA AMONG PEOPLE WITH ENVIRONMENTALY POLLUTED AREAS

انتشار الربو في المناطق الموبوءة

Dr Thamer kadum Yousif

Department of Community Medicine /Tikrit College of Medicine, Iraq

97. Contacts infection in Smear-Positive Pulmonary Tuberculosis (PTB)

عدوى الملامسة عند التدرن الرئوي المفتوح الموجب العصيات

Dr AM AL- Abbasi

College of Medicine, Baghdad University, Baghdad, Iraq.

98. Imparid glucose tolerance (IGT)in patient with renal impairment

تحمل السكر في مرضى قصور الكلية

Dr. Mohammed A. Abed Al-Hussein

Department of medicine , Kufa College of Medicine, Kufa University, Iraq

99. Tetracycline Therapy Associated Hyperkalaemia

ارتفاع البوتاسيوم المترافق بمعالجة التتراسكلين

Dr. Jabbar YH.AL-ayah , Dr. Hussain SM. AL-Janabi.

College of Medicine, Babylon University , Babil, Iraq.

100. Systemic Lupus Erythematosus Disease Activity Index its Application to Retinopathy

اعتلال الشبكية الناجمة عن الذئبة الحمامية

Dr. A.Kareem Shehab

Ministry of Health

101. ISOLATION OF CLASSICAL Vibrio cholerae FROM KUFA RIVER OF EUPHRATES, IRAQ

عزل ضمات الهيضة الكلاسيكية من نهر الكوفة (من الفرات) في العراق

DR.ABDUL-KAREEM ABDULLA MAHMOOD, NUHA A. DOSH DR.

Jaafer K . Ne'ama

Dept. of community medicine, College of Medicine,

M Sc. Dept. of microbiology, College of medicine,
Dept. microbiology, Kufa University Iraq

102. EFFECTS OF FLUVASTATIN ON SELECTED COAGULATION PARAMETERS IN NORMOCHOLESTEROLEMIA AND HYPERCHOLESTEROLEMIA

Dr.Bassim Irheim Mohammad,
Kufa College of Medicine, Iraq

103. A New Rapid Spectrophotometric Method For Detection Of Xanthinuria:

Elham Hamed Al Dabbagh

104. Transfer of a Small Plasmid (Coding Multi-drug Resistance) Between Different Gram-negative Urinary Bacterial Organisms

Aseel R About 1, Amal R Alaabi , Rajih A Alkaabi 2 , and Reem F Taleb
1 Master on Genetic Engineering and Biotechnology, Lecturer at Department of Anatomy, Baghdad College of Medicine, 2 Consultant Physician and Cardiologist, Baghdad University, Iraq

105. OZONE HEALING PROPERTIES

خصائص المعالجة بالأوزون

Dr. Adel S. Wasfe
Faculty of pharmacy and Health Sciences, Al-Fujairah
AUST Network, UAE

106. The influence of cholesterol intake in glutamine metabolism by inducing a renal acidosis in rats

Abdulrahim Abu Jayyab
Pharmacology & Therapeutics Department, College of Pharmacy and Medical Sciences, AUST, Al- Fujairah Campus U.A.E.

107. Stump problems associated with Partial Foot amputations in Iraq.

Ghassan Husni Al- Alousi.
Al- Mansour Institute of Medical Technology,
Al Mansour, Baghdad, IRAQ.

108. Selenium level in viral warts among Iraqi patients

الثاليل الجلدية المستعصية

Hala.G.AL-Geboori,Ahsan.K.Abbas*Adil.A.AL-Nuaimy,*Makram.M.AL-Waiz.

Department of physiological Chemistry,*Department of Dermatology& Venerology,College of Medicine,University of Baghdad Iraq

109. Contribution of functional MRI to the localization of language areas prior to neurosurgery: normative data and case studies

1A Khateb, 2M. Seghier, 2F Lazeyras, 1J.M. Annoni. Neurology1 and Radiology2 departments, Geneva University Hospital, Geneva, Switzerland.

110. Pyloric Reconstructive Surgery For Postoperative Reflux Gastritis

جراحة بواب المعدة الترميمية لعلاج التهاب المعدة الارتجاعي
Prof .Hisham A. Al-Atrakchi,
Department of Surgery, University of Mosul. Mosul Surgical Teaching Hospital, Mosul, Iraq

111. dumping and diarrhoea. And to assess the safety, efficacy, and clinical results of this procedure.

Prof .Hisham A. Al-Atrakchi,
Department of Surgery, University of Mosul. Mosul Surgical Teaching Hospital, Mosul, Iraq

112. Diagnostic Delays of Gastric Cancer A Prospective Study in Mosul

Prof .Hisham A. Al-Atrakchi,
Department of Surgery, University of Mosul. Mosul Surgical Teaching Hospital, Mosul, Iraq

113. INTERSTITIAL PHOTOCOAGULATION OF LOW ANAL FISTULA USING 810nm DIODE LASER, Prospective study

Mohammed Kamil Mohammed
Al – Kindy teaching Hospital
Department of Surgery-Al kindy College of Medicine, University of Baghdad

114. Effect of Eerobics and Ozone on Physical fitness and anti oxidant level in mentally retarded children

رفع الكفاءة البدنية وتحسين مستوى مضادات الأوكسدة تأثير التدريبات الهوائية وغاز الأزون على ذهنيا لدى الأطفال المعاقين
Prof.N Mawsouf ,
DEPARTMENT OF ANAESTHESIOLOGY, ICU AND PAIN MANAGEMENT AND HEAD OF OZONE THERAPY UNIT – NATIONAL CANCER INSTITUTE– CAIRO UNIVERSITY

115. EFFECT OF OZONE STEAM BATH ON RECOVERY TIME AND LEVEL OF PERFORMANCE IN RHYTHMIC GYMNASTICS

تأثير حمام بخار الأوزون على فترة الاستشفاء ومستوى الأداء في التمرينات الإيقاعية

PROF. MAWSOUF, M.N., RAWASH K.M., ABDEL KHALIK, R.H.

DEPARTMENT OF ANAESTHESIOLOGY, ICU AND PAIN
MANAGEMENT AND HEAD OF OZONE THERAPY UNIT –
NATIONAL CANCER INSTITUTE– CAIRO UNIVERSITY

Surgery جلسة الجراحة

09.00-11.00 Mian Auditorium

Chair: Dr Abdel Rahman. Yousef Germany
Professor Sami Asfar Kuwait

116. Biliary complications in laparoscopic cholecystectomy

الإختلاطات الصفراوية في عمليات المرارة بالتنظير
Prof. Muzahim Al-Khyatt
Dean Mosul Medical College, Mosul, Iraq.

117. LAPAROSCOPIC CHOLECYSTECTOMY IN THE ERA OF BLOCKADE

استخدام المنظار الجراحي لإستئصال المرارة عند المسنين
Dr.Samir I. Al-Saffar & Dr.Muzahim Al-Khyatt
Al-Zahrawi Teaching Hospital, Iraq

118. Flexor Tendon Injuries of The Hand at Zone II ,Early or Delayed Suture ?

نتائج المعالجة المبكرة او المتأخرة في أصابات اليد المنطقة ٢
Mohammed Ali Fathel AL-BAYATTI, Madhat Abid THEDAN
Baghdad, IRAQ

119. Laser Surgery in Haemorrhoid

جراحة اليواسير بمساعدة الليزر
Dr. Safa Eldean S. Neima
Kufa University, College of Medicine, Kufa

120. The Detection and Management of Early Gastric Cancer in Northern IraqTwenty Years Experience

Prof .Hisham A. Al-Atrakchi,
Department of Surgery, University of Mosul. Mosul Surgical Teaching
Hospital, Mosul, Iraq

121. Die Plastische Chirurgie , die ästhetische Chirurgie unter der Lupe Gemeinsamkeit und Unterschiede

Dr Abdel Rahman. Yousef,

122. "living related Liver Transplant, the surgical procedure"

Dr M. El-Wahsh
London Bridge Hospital, UK

123. Monitoring Body Temperature during Major and Minor Surgery

التبدلات الحرارية في الجسم توحى بالتبدلات الإستقلابية في الجراحات الصغرى والكبرى
Dr. Nabil Kattab

Department of Clinical Sciences. Mosul University, Mosul-IRAQ.

**124. Infectious Complications of Central Venous Catheters:
diagnosis, incidence and risk factors**

الإختلاطات الالتهابية للطريق الوريد المركزي التشخيص والتواتر

Fatma A. Amer, Atef Radwan*

Microbiology & Immunology Department, Anaesthesiology

Department*, Faculty of Medicine, Zagazig University, Zagazig, Egypt

Orthopedy & Traumatology جلّسة العظمية والحوادث
11.30-13.30 Mian Auditorium

Chair: Prof Dr. A.K. Martini Germany
Dr Ahmed Hawi Germany

125. Traumatic Head Injuries, Management Of Patients With Traumatic Head Injuries

معالجه اصابات الراس الناتجه من الحوادث

الدكتور مازن الكسان شاشا Dr. Mazen SHASHA

Emergency Department, Rotorua Public Hospital, Rotorua, New Zealand

126. Management of liver trauma

تدبير اصابات الكبد الرضية

Professor Sami Asfar,

Chairman of Department of Surgery, Faculty of Medicine, Kuwait University, Kuwait

127. Surgery of Rheumatoid Hand

الإمكانيات الجراحية في إصابات اليد الرثوية

Prof. Dr med. K A Martini

Heidelberg University, Germany

128. HIP FRACTURE/AN EPIDEMIOLOGICAL STUDY IN AL-NAJAF

دراسة وبائية عن كسور الورك في النجف

Dr.MOHAMMAD H.ALOBAIDI

Head of Orthopedic department, College of Medicine/University of Kufa

129. URETERIC INJURY

إصابات الحالب الرضية

Dr Abdulghafoor S. Abdulkareem, Dr Zaid S.Khudher

Dept. of Surgery, College of Medicine, Mosul University.

130. Vacuum assisted closure for the treatment of sternal infections and poststernotomy mediastinitis

معالجة التهابات القص والمنصف بشفط المفززات بعد عمليات القلب

Dr. El Sadek M, Prof. A.Welz

Department of Cardiac Surgery, Bonn University Hospital, Bonn, Germany

131. Amputees in Yemen

الحاجة الماسة لتأهيل ورعاية المرضى المبتورين في اليمن

Ghassan Husni AL- ALOUSI.

Baghdad, IRAQ.

132. Prophylactic Uses of Antimicrobials in Hospitals

إستعمال المضادات الحيوية بشكل وقائي في المشافي

Prof. Fatma A. Amer

Professor of Microbiology & Immunology, Faculty of Medicine, Zagazig University and Secretary General of the Arab Alliance for the Prudent Use of Antimicrobials, Egypt

**133. Current status of vertebro- and kyphoplasty in germany.
Preliminary results of a prospective cross-sectional study**

El-Zayat, B.F., Björn Brüning, Celik, I., Stiletto, R.

Dept. for Trauma-, Reconstructive- and Handsurgery, Philipps-University Marburg, Germany (Head: Prof. Dr. L. Gotzen)

Pharmacology & Medical Science جلسة العلوم الدوائية
14.30-16.30 Mian Auditorium

Chair: Prof. Dr Hartmut Liebich Germany
Dr. Samir Issa Bloukh UAE

134. Medical Biotechnology: The Northern Ireland Experience

خبرة أيرلندا في التقنيات الطبية الحيوية

Prof. Gerry McKenna

University of Ulster, Coleraine, Northern Ireland, UK

135. Clinical Chemical analysis of modified nucleosides and their diagnostic value in Tumor disease

دراسة سريرية كيميائية في تشخيص الأورام مخبريا

Prof. Dr Hartmut Liebich, Müller Hagedorn, S., Klaus, F.,Dietrerle,F.
Medizinische Universitätsklinik, Tübingen, Germany

136. VIRTUAL BRONCHOSCOPY, COMPUTERIZED TOMOGRAPHIC BASED NEW TECHNIQUE: THE CLINICAL ROLE IN ACUTE SPONTANEOUS PNEUMOMEDIASTINUM

التشخيص المعتمد على الكومبيوتر تموغرافي والتنظير القصبي في التهابات الرئة والمنصفا

Wael Shabana1 Prof.Dr. Tadeus Stadnik1,Dr.Jouke De Regt2

,Dr.Marc Meysman2 ,Prof. Dr. Walter Vincken

1 department of Radiology , 2 department of pneumology.

Academic hospitals Vrij universitet Brussels. Belgium

137. The effect of hemodialysis and dialyzer biocompatibility on erythrocyte glutathione and related enzymes on uremic patients

تأثير ديلزة الدم والتوافقية الحيوية لأغشية الديليزة على الجلوتاثيون والآنزيمات المتعلقة به في

كريات الدم الحمراء عند المرضى المصابين بقصور الكلية

Dr.Adnan F.Ahmad Al-Najjar,*, Dr.Abdul-hameed Al-Kassirand

Mohammed Saiel Saeed(B.Sc.,M.Sc.)***

Al-Mustansirya University,College of Industrial Pharmacy, University of Baghdad.

138. Five Years Correlations between Formative and Summative Examination in Pharmacology at A.U.S.T. Network, Abu-Dhabi Campus, U.A.E.

Prof. Abdalla Salem Elhwuegi

Department of Pharmacology & Toxicology, Faculty of Pharmacy & Health Sciences, AUST, U.A.E.

139. Quality of Jordanian Medicine : An Emperical Study

جودة الدواء الأردني : دراسة ميدانية

Dr. Mohammad Shehada, Abu Yaman

Business Administration Dept., Ajman AUST, Aljarf, Ajman, UAE

Medical Science & Curriculum Development

جلسة العلوم الطبية - المناهج التطويرية والعلاقات الأكاديمية

17.00-19.00 Mian Auditorium

Chair: Dr Faidi Omar Mahmoud Germany
Prof. Dr. Abdel Azim Ahmed Ali UAE

140. " ACCREDITATION IN HEALTH PROFESSIONS EDUCATION: EASTERN MEDITERRANEAN PERSPECTIVE

Professor W Talaat
Faculty of Medicine, Suez Canal University, EMRO, WHO Ismailia, Egypt;

141. ا الضوابط الشرعية للتقنيات الوراثية

د. أحمد محمد كنعان Dr Ahmed Mohamed Kanaan
Saudia Arabia
إدارة الرعاية الصحية الأولية بالمنطقة الشرقية (السعودية)

142. Progressive und degenerative Forschungsprogramme

برنامج البحث العلمي المتقدم والرجعي
Dr Nadim Sradj
Regensburg / Germany

143. Devloping CME Programme in the Arab Countries"

144. Prespective of Medical & Health Research in the Arab Countries"

تقييم الأنشطة العلمية والطبية في الدول العربية وتطويرها مستقبلاً البحث العلمي في الدول العربية
Dr. Ayad H. AL-Ramadhani
Mosul Continuing Medical Education Center, Mosul, Iraq

145. ASSESSMENT OF ACUTE FLACCID PARALYSIS (AFP) SURVEILLANCE IN KIRKUK GOVERNORATE

Dr Thamer Kadum Yousif, Dr Ayoub Abdul Hameed
Department of Community Medicine, College of Medicine, Tikriet University, Iraq

146. الوضع الطبي في فلسطين المحتلة

Fathi Salameh,
Lüdenscheid, Germany , fsalama@gmx.net
حالة الكادر الطبي
الاطباء في قطاع غزة و الضفة الغربية
التخصصات الطبية الموجودة و المطلوبة
مشروع تنمية طاقات الكادر الطبي في فلسطين

Poster Session III جلسة البوستر
09.30-11.30 Poster Hall

Chair: Dr Anas Schaker France
Dr. Mustafa Abdulrahman Bassatini France
Dr Nadim Sradj Germany
Ali Abu AlNoor UAE

147. A minimally invasive technique of intramedullary femoral nailing with the RDS system: a new technique for the insertion of a retrograde femoral nail (video-film)

El-Zayat, B.F., Stiletto, R.
Dept. for Trauma-, Reconstructive- and Handsurgery, Philipps-University Marburg, Germany (Head: Prof. Dr. L. Gotzen)

148. Actual use of vertebro- and kyphoplasty in Germany

El-Zayat, B.F., Stiletto, R., Schnabel, M., Gotzen L.
Dept. For Trauma-, Reconstructive- and Handsurgery, Philipps-University Marburg, Germany

149. Stigma of Mental Illness: Views of the Public in an Arabic Culture

وصمة المرض النفسي: وجهة نظر العامة في مجتمع عربي
Dr Mamdouh EL-Adl, Northamptonshire Healthcare NHS Trust, UK
and Dr Thuraya Balhaj, Ministry of Defence, UAE.

150. First Episode Psychosis: Primary Care Experience and Implications to Service Development

نوبة الذهان الأولى: خبرة الرعاية الأولية وتأثيرها على تطور خدمة الطب النفسي
Dr Mamdouh EL-Adl, Dr John Burke & Karen Little; Northamptonshire Healthcare NHS Trust, UK.

151. gastroscopy to demonstrate the prevalence of H.pylori in gastroduodenal diseases

دراسة وبائية الهيلكوباكتر باستعمال الصبغات
Dr BASHAR ABDUL-JABBAR
College of Medicine , Pathology Department Mosul University

152. Unusual cause of acute abdomen, case report & discussing the effects of embargo

Dr. Thair Mahmood Abbas
DEPARTEMENT OF SURGERY / BAGHDAD TEACHING HOSPITAL
MEDICAL CITY, IRAQ

153. Characterization of sialic acid and mammary lectins as tumor markers for breast cancer

Majid K. Hussain, Abd_Razzak Abd A-Jallel, Donia Mohamd Reda
University of Kufa, college of medicine, Department of Biochemistry

154. Chloroquine over Dosage and Toxicity A report on seven fatal cases of Chloroquine toxicity in children during a period Between (1994 – 2004)

Dr. ISMAEL DAWOUD SAEED,
Ibin Sina Teaching Hospital, Mosul-IRAQ

155. BONE PROFILE STUDY IN PATIENT ON ANTIEPILEPTIC THE ROLE OF TUMOR MARKER CA 15-3 IMMUNOCYTOCHEMISTRY AS PROGNOSTIC PARAMETER IN FINE NEEDLE ASPIRATION CYTOLOGY SMEARS OF BREAST CANCER PATIENTS

Dr. Maitham M. Al-Khateeb , Dr.Nidhal K. Al-Rahal
Kufa Medical College , Iraq

156. BONE PROFILE STUDY IN PATIENT ON ANTIEPILEPTIC

DR. ESTABRAK M. ALYOUZBAKI
MOSUL MEDICAL COLLEGE

157. Rheumatoid arthritis and possible risk factors

Dr Salah Eldeen Thanoon huseen
Ibn –Sena Teaching Hospital, Department of Rheumatology& Medical Rehabilitation Cardiac Rehabilitation Unit

158. Hydatid disease: Rare Localization Two case report

عرض حالتين عن إصابات بالأيستينو كوكن
Dr. Layth Qassid Al Harbawi
Department of Surgery, University of Mosul Iraq

159. Wet Nurses Milk is The Best Substitute for Mother Breastfeeding (Not Cow's & Powder Milk)

حليب المرضعات هو البديل الأمثل للرضاعة الامومية وليس خلانط الرضع البقرية
Dr. Mohammed Jamil Al-Habbal, Dr. Nabeel Nuaimi
Mosul/ Iraq

160. Connective Tissue Diseases for non-rheumatologists

DR Abdul-Wahab Al-Allaf
Rheumatology Department, New Cross Hospital, UK

161. Approach to Rheumatic complaints

DR Abdul-Wahab Al-Allaf
Rheumatology Department, New Cross Hospital, UK

162. Idemiological and Pathological Associations of Parasitic Appendiciti

التداعيات الوبائية والأمراضية لالتهاب الزائدة الدودية الطفيلي

Dr. Baqur A. Sultan*Dr. Nama H.AL- Jeboori

*Department of Microbiology. College of Medicine Kufa University ,Iraq

163. الطب في الكوفة بين موروث الحيرة وأصالة الفكر الإسلامي

Dr Hassan Hisaa Al-Hakeem

President of Kufa University, Iraq

164. Recent Developments in Drug-Eluting Stent for Interventional Cardiology

Dr Kadem Al-Lamee

Lombard Medical plc, Polymer Coating Technology Division, Sheffield S9 3SP, UK

165. Percutaneous Management of hydatid spleinc Disease

Dr.Jassim Mohamed Al-Mohana

Medicine of College, Kufa University, Iraq.

166. Natriuretic and pressor responses to cerebral hypernatremia persist during inhibition of central sympathetic outflow by clonidine

Kawa F.H. Dizaye *Salah Al-Din M.A. Al-Merani **

University of Salahaddin , Erbil , Iraq

167. Generation of dendritic cells for the immunotherapy of cancer

Thomas G. Berger*, Beatrice Schuler-Thurner, Gerold Schuler

Dept. of Dermatology, University Hospital of Erlangen-Nuernberg, Germany

Division of Dermatology, Tawam Hospital, Al Ain, UAE

168. PREVALENCE OF HYPOCALCEMIA AMONG THALASSEMIC PATIENTS REGISTERED IN IBN

AL-BALADY HOSPITAL (THALASSEMIC CENTRE), BAGHDAD IRAQ

Dr.Ali Hassan Al-Jumaily, Dr.Shaimaa Khider

169. Use and Abuse of Antibiotics

مانع ومضاد الحيوي

Dr Fateh Srajedine

Toronto Canada

170. Use and Misuse of Psychotropic Drugs, a Clinical-Psychopharmacologist View.

*Mohamed Toutoungi, Michel Schorderet,

*1, Rue Monnier, CP 313, CH-1211 Genève 12 and Department of Pharmacology of the University of Geneva, Geneva, SWITZERLAND.

171. Importance of teaching medical ethics on the basis of Islamic legislation for students of medical college

أهمية تدريس أخلاقيات الطب وفق قواعد الفقه الإسلامي في كلية الطب
الاسم الدكتور ضياء الدين الجماس _
Jammass, Dia'a Eddeen
Dier Ezzor – Syria

172. CORTICOSTEROID AND ANTIBIOTICS FOR TREATMENT OF KEROSENE PNEUMONIA IN CHILDREN .

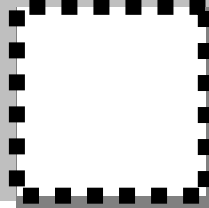
دور المضادات الحيوية و الكورتيكوستيرويد في علاج ذات الرئة الناتجة عن استنشاق النفط الأبيض
Dr.Raafat K. Al-Aswad
Assistant Manager of the Central Teaching Hospital of Pediatrics, Iraq-
Baghdad, BAGHDAD / IRAQ

173. NORMOBLASTS IN LARGE FOR GESTATIONAL AGE INFANTS

الكريات الحمر ذات النواة في حديثي الولادة ذوي الأوزان الكبيرة
Dr. Salam Jasim Hussein, Dr.Samar Adnan Kamel
Child's Central Teaching Hospital, Baghdad

Workshops

ورشات العمل



Workshops Programme

البرنامج العملي لورشات العمل التدريبية العلمية

Hall B	Sunday, 27 March 2005	الأحد
8.30-17.30	Child. Psychiatry I	الأمراض النفسية
		Workshop Hall B

Trauma Psychology, PTSD and Child & Adolescent Psychiatry For Mental Health Professionals

Trauma Psychology & PTSD

174. Introduction of the Course and Faculty 8:30 - 9:00

175. Post Traumatic Stress Disorder and Co-Morbid Conditions: Diagnosis, Management and Protective Factors 9:00 - 10:30

Syed Arshad Husain, M.D.)

10.30-11.00 Break استراحة

176. Mental Imaging, Techniques to Deal with Trauma 11:00 -13:00

(Wayne Anderson, Ph.D.)

13.00-14.00 Lunch Break استراحة الغذاء

177. Using Mental Imaging Techniques to Deal with Trauma (cont)
14:00 - 15:30

(Wayne Anderson, Ph.D.)

15.30-16.00 Break استراحة

178. Managing Children's Fears 16:00- 17:30

(Barbara Bauer, Ph.D.)

Hall B	Monday, 28 March 2005	الاثنين
08.30-17.30	Child. Psychiatry II	الأمراض النفسية
		Workshop Hall B

179. Stress Relieving Techniques for Children 8:30 - 10:30

(Wayne Anderson, Ph.D.)

10.30-11.00 Break استراحة

180. EMDR: Theory and Practice 11:00- 13:00

(Barbara Bauer, Ph.D.)

13.00-14.00 Lunch Break استراحة الغذاء

181. EMDR: Theory and Practice (cont.) 14:00 - 15:30

(Barbara Bauer, Ph.D.)

15.30-16.00 Break استراحة

182. Helping Survivors Deal with Grief and Loss 16:00- 17:30

(Syed Arshad Husain, M.D. & Wayne Anderson, Ph.D.)

Hall B	Tuesday, 29 March 2005 الثلاثاء
08.30-18.00	Child. Psychiatry III الأمراض النفسية Workshop Hall B Advances in Child & Adolescent Psychiatry

183. Diagnosis and Treatment of Depression and Anxiety Disorders In Children 8:30 - 10:30
(Judith Milner, M.D.)

10.30-11.00 Break استراحة

184. Diagnosis and Management of ADHD and Bi-Polar Disorder in Children 11:00 - 13:00
(Syed Arshad Husain, M.D.)

13.00-14.00 Lunch Break استراحة الغداء

185. Principles and Practice of Group Therapy in Children
14:00 - 15:30
(Judith Milner, M.D.)

15.30-16.00 Break استراحة

186. Current Advances in Psychopharmacology in Children and Adolescents 16:00- 17:30
(Syed Arshad Husain, M.D & Iyad Khreis MD .)

187. EFFICAY & EFFECTIVENESS OF ATYPICAL ANTIPSYCHOTICS: EXAMINING THE EVIDENCE. 17:30- 18:00

Dr Mohammed Al-Uzri
Consultant Psychiatrist & Honorary Senior Lecturer
Neuropsychopharmacology Unit Leicester General Hospital Leicester
UK

Hall A	Sunday, 27 March 2005	الأحد
08.30-11.00	Coronary Heart Disease	الشرايين الإكليلية Workshop Hall A

188. National Service Framework for Coronary Heart Disease (NSF – CHD) & MINAP (Myocardial Infarction National Audit Project)

الخدمات الوطنية لتدبير الداء الإكليلي والاحتشاء الحاد عند البالغين

Mrs Eman H Al-Waidh

NSF Coordinator / Clinical Auditor

Surrey and Sussex Health care NHS Trust-UK

189. Acute coronary syndrom (ACS)

DR. Fathi Salamah

Germany

190. Coronary Recanalization and Revascularization: Trends and Strategies

الاستراتيجية المفضلة في معالجة القصور الإكليلي

Dr Faidi Omar Mahmoud, Dr.Frank Harig, Johannes Rösch

Center of Cardiac Surgery, University Hospital of Erlangen, Germany

191. Post Operative Management after Cardiac Suugery

تدبير المريض في العناية المشددة بعد عملية القلب

Dr. Med. Aiman Alken

Herz und Kreislaufklinik Bad Bevensen, Germany

192. Management of Intermittent Claudication

تدبير تضيق او انسداد الشرايين الوركية في الحوض

Dr Munther Aldoori: Huddersfield's Royal Infirmary Hospital, UK

Hall A	Sunday, 27 March 2005	الأحد
11.30-13.30	Asthma	الربو Workshop Hall A

193. Asthma education intervention trial in GP setting: baseline information

N. Sulaiman* , T. Liaw, C. Harris, T. Maksimovic, C. Barton, J. Byron.

* Department of General Practice, The University of Melbourne, Australia

194. Breath with ease: an interactive asthma CD for GPs and trainees

التنفس المريح لمرضى ربو القصبات الهوائية في أستراليا- برنامج تدريبي فعال على قرص مدمج.

Dr Nabil Sulaiman, Michael Abramson, Frank Thien, Gregor Kennedy,

د نبيل سليمان، مايكل إبراهيمسن، فرانك ثاين، جريجور كندي، جينيفر كيرك، تينغ لاي.

جينيفر كيرك، تينغ لاي.

The University of Melbourne- Department of General Practice

Melbourne, Australia

195. Asthma Best Practice Selfmanagement Models in Australia

أفضل برامج الرعاية الذاتية لمرضى ربو القصبات الهوائية في أستراليا.

N Sulaiman*, L Wyatt, G Jacob, D Oconnor, L Keatley, A Bourke, D Pilbrow, J Wicking, L Barnetby. الدكتور نبيل سليمان، ل. وايت، د. أوكونور، أ. بورك، د. بليرو - قسم الطب العام في جامعة ملبورن.

Department of General Practice, University of Melbourne, Australia

13.30-14.30 Lunch Break استراحة الغداء

Hall C	Sunday, 27 March 2005	الأحد
08.30-13.30	Paediatrics	ورشة عمل طب الأطفال Workshop Hall C

196. Resuscitation of the newborn in the delivery room

انعاش الوليد في غرفة المخاض

Dr Mustafa ABDULRAHMAN

Paris-France

197. Implication of Maternal Disease on the unborn and future child. Special focus on the Wheezy infant and the asthmatic child

Dr Majeed H Jawad

East Surrey Hospital & Royal Brompton National Heart and Lung Institute -UK

13.30-14.30 Lunch Break استراحة الغذاء

Hall C	Sunday, 27 March 2005	الأحد
15.00-18.00	مهارات الإتصال مع المريض وأخلاقيات مهنة الطب	Workshop Hall C

Doctor -Patient Communication & Medical Ethics

198. Doctor -Patient communication , Compliance and Medical Ethics

Dr Amer Hosin, Lodnon Metropolitan University (North Campus) , London , UK

Dr Anas Schaker Paris, France

199. Therapeutic Patient Education for Chronic Diseases Individualised health promotion for women: a pilot program

تاهيل المريض المزمن ، هل النساء يتطلبن معالجات ورعاية خاصة ؟

Dr. Tajeddin (Dia-Eddine) May

Geneve-Suisse

Hall A	Monday, 28 March 2005 الإثنين
08.30-13.30	تدبير الألم و الأوزون في الطب Workshop Hall A

Ozone in Practice and Pain Management

200. The Pain & Its main Treatment

تحرير المريض من الألم هو الهدف الأول
 Professor Serra and Dr Farnos
 University Hospital La Pitie Paris, France

201. Pain Therapy: Principles and Applications

تدبير الألم من وجهة الطبيب الممارس في العيادة
 Dr. Mazen Kabbani, Stathagen, Germany

202. Ozone: Indication & applications by rhematic diseases Paintherapy by rheumatic joint diseases

معالجة الألم وتطبيق الأوزون في أمراض الروماتيزم
 Prof. Ziad Fahmy
 Augusta Clinic for Rheumatic Diseases , Bad Kreuznach , Germany

13.30-14.30 Lunch Break استراحة الغذاء

Hall C	Monday, 28 March 2005 الإثنين
08.30-13.30	وحدة الرعاية المركزة و طب الطوارئ Workshop Hall C

Accident, Emergency and Intensive Care

203. Severely ill patients/Cardiac Arrest

تدبير توقف القلب و المريض الخطر في العناية المشددة
 الدكتور مازن الكسان شاشا SHASHA
 Emergency Department, Rotorua Public Hospital, Rotorua, New Zealand
 Management of Patients in A & E: The first critical hours
 Dr Baha Al-Wakeel, North Middlesex University Hospital, London UK

Dr Naif Shnyien
 Barnet Hospital, London, UK
 Challenges of Clinical Trials In Emergency Medicine

204. 100 Golden Rules in Emergency Medicine (Second thoughts of an ER Consultant)

Dr M.S.El Tawil
 Medical Education, Hamad Medical Corporation
 Doha, Qatar

13.30-14.30 Lunch Break استراحة الغذاء

Hall C	Tuesday, 29 March 2005 الثلاثاء
08.30-13.30	الجهاز الهضمي والكولون والكولون Gastroenterology Workshop Hall C

205. Food intolerance

Ossama Al-Babbili, UAE

206. Pathogenesis of Intestinal Carcinoma: Effect of Diet and Chemicals, Experimental and Clinical Evaluation

Prof. Majid Amin Alousi,
Professor of Pathology, Past President of Iraqi Medical Sciences Association (USA)

207. Classification, Pathogenesis and Management of Irritable Bowel Syndrome

اسباب وتصنيف وتدبير تناذر الكولون المضطرب
Nadim Haboubi UK

208. Metabolic Syndrome and Obesity

مخاطر الأمراض الاستقلابية والتدابير الوقائية من زيادة الوزن
Nuha Haboubi west Wales General Hospital UK

13.30-14.30 Lunch Break استراحة الغذاء

Hall C	Tuesday, 29 March 2005 الثلاثاء
15.00-18.30	تطوير الخدمات الطبية والتعليم الطبي حسب الدليل العلمي Workshop Hall C

Evidence Based Medicine and the Reorganisation of Health Services and Medical Teaching

209. Overview of the health services in Arab Countries

Mr Mohammad El Wahsh, Consultant Liver Transplant UK

210. Clinical Governance (Clinical Risk Management & Errors in Practice)

Dr Maher Hilali, Consultant Haematologist UK

211. How to Introduce Evidence Based Medicine in Health Services and Medical Teaching in the Arab Wrold

Mr Mousa Al-Kurdi, Consultant Gynaecologist UK

212. Data Bases for EBM & Assessment of Clinical Guidelines (The Saudi's Experience)

Dr Abdulla Alkhenizan, King Faisal Sp.Hospital, KSA

213. Continued Professional Development (CPD) (The Gulf Region Experience)

Dr Wail Almeheemed. Consultant Cardiologist Abu Dhabi, UAE

Hall A	Tuesday, 29 March 2005 الثلاثاء
8.30-13.30	Neurology الأمراض العصبية Workshop Hall A

214. Stroke and Management of Spasticity or giving a talk on Management of Stroke/Transient Ischaemic Attacks.

تدبير الحوادث والسكتات الدماغية المفاجئة وعلاجها

Dr Sulaiman Jawad

Consultant Physician in Care of the Elderly, Surrey, UK

215. Neurological movement disorders, Restless legs Syndrome. Sleep Laboratory

التحليل العصبي لاضطرابات النوم في مختبر النوم

Dr Walid Said

Mannheim Germany

216. Presentation about Benssapharm

Dr Walid Said

217. Schlaflabors zur Differential diagnostik

التشخيص التفريقي في مختبر النوم

Dr Ahmed Abdel Jabbar Mohd

Klingenmünster Germany

13.30-14.30 Lunch Break استراحة الغذاء

Hall A	Tuesday, 29 March 2005 الثلاثاء
15.00-18.30	Orthopaedics جلسة العظمية واليد Workshop Hall A

218. Surgery of the congenital malformation of the hand

معالجة التشوهات الولادية لليد

Prof. Dr med . K A Martini

Heidelberg University, Germany

219. Arthroscopy

جراحة الكتف ومبادئ التنظير

Dr. Ahmed Hawi

Braunschweig Germany

Tuesday, 29 March 2005 الثلاثاء		
19.30-21.00	Conference Resolutions and Closing Speech الجلسة الختامية	Mian Auditorium

إلى اللقاء في السنة القادمة في باريس إنشاء الله

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Otolaryngology الأمراض الأنفية

220. MALIGNANT TUMOURS OF NASAL CAVITY AND PARANASAL SINUSES IN NORTH OF IRAQ, A fifteen years retrospective study

خبرة المشفى الجامعي في الموصل في معالجة الأورام الخبيثة في الأنف والجيوب الأنفية

Dr. Daoud S. Allos

Dept. of Surgery, Mosul College of Medicine

Fifty eight cases of malignant tumours of nasal cavity and paranasal sinuses studied retrospectively over fifteen years period (1980-1994). 33 were maxillary, 17 nasal cavity and eight ethmoidal in origin. They constituted 0.51% of all malignancies and 2.13% of head and neck cancers. For sinus tumours, both sexes and sides were equally affected. Nasal cavity tumours were more common in male (male/female=1.4/1) and in the right side (right/left=1.33/1). The commonest age at presentation was the fifth decade. The most common presenting symptom was facial and nasal pain with average delay in diagnosis of about 8.5 months. Tumours of epithelial origin formed the majority of cases (85.68%). All maxillary and ethmoidal cases were late at time of diagnosis (T3 or T4), while nasal cavity tumours were 60% T1 and T2. 21.87% of patients had palpable cervical lymph node on presentation. Majority of patients managed with radiotherapy alone, few cases with surgery or both, but prognosis was generally unsatisfactory.

Key Words: Malignant Tumours, Nasal Cavity, Paranasal Sinuses

درست ثمانية وخمسون حالة من الأورام الخبيثة في الأنف والجيوب الأنفية خلال خمس عشرة سنة (1980-1994). منهم 33 في الجيب الفصمي، 17 في التجويف الأنفي، و 8 في الجيب الغربالي. وشكلت بمجموعها 0.51% من مجموع الأورام الخبيثة و 2.13% من أورام الرأس والعنق. أورام الجيوب كانت متساوية لدى الذكور والإناث في حين كانت أورام التجويف الأنفي أكثر لدى الذكور (1.4/1) وفي الجهة اليمنى (1.33/1). أكثر الأعمار إصابة كانت حول الخمسين سنة، وأكثر الأعراض الأولية اكتشافاً للمرض كانت الألم في الوجه والأنف ومعدل التأخير بين الشكوى والتشخيص كان 8.5 شهراً، أورام الأغشية المخاطية شكلت 85.68% من الحالات. وجدت جميع أورام الجيوب الأنفية في مراحل متقدمة عند التشخيص (T3-T4) في حين أن 21.87% من أورام التجويف الأنفي كانت (T1-T2). كانت لديهم عقد ليمفاوية محسوسة عند التشخيص. معظم الحالات عولجت بالأشعة، وبعضها بالأشعة والجراحة ولكن النتائج كانت غير مرضية بصورة عامة.

Allos Dr. Daoud S. Dept. of Surgery, Mosul College of Medicine, Tel: 009647701618388, Email: daoudallos@yahoo.com

221. Is Bilateral Choanal Atresia Comptable With Life ? (Case Report of 35 y.Old patient with Bilateral Choanal Atresia)

هل أنسدادات فتحات الأنف الخلفية يتلائم مع الحياة

Dr. Nashat AL-Khayat E.N.T Specialist

Alzehrave Teaching Hospital Mosul, Iraq

Email: nashat_al khayat@yahoo.com

It is generally acknowledged that bilateral choanal atresia is incompatible with life without urgent surgery. This case, a 35 y. old man, worker, presented with history of complete bilateral nasal obstruction since birth with complete Anosomia. Clinical

examination ,nasal fiberoptic endoscopy,and C-T scan proved the diagnosis of membranous complet bilteral choanal atresia. Atresia opened through transnasal approach with bilateral intranasal Tube for 6 weeks. The post operative period was smooth.

(تسجيل حالة نادرة لمريض في الخامسة والثلاثين ويشكو من انسداد فتحات الأنف الخلفية في كلتا الجهتين) من المعلوم أنه لا يمكن للمريض المصاب بآسداد فتحات الأنف الخلفية الولادي أن يعيش بدون تدخل جراحي سريع، في هذه الحالة كان المريض في الخامسة والثلاثين ويشكو من آسداد كامل في الأنف مع أنعدام حاسة الشم الكامل منذ الولادة، وتبين من خلال الفحص السريري والفحوصات الشعاعية أنه يشكو من الحالة أعلاه، وقد أجريت له عملية فتح الأنسداد عن طريق الأنف ووضع أنابيب في داخل فتحتي الأنف لمدة ستة أسابيع وكانت حالته مستقرة.
الدكتور نشاط الخياط أخصاصي انف واذن وحنجرة

AL-khayat Dr.Nashat E.N.T Specialist, Alzehrawe Teaching Hospital Mosul Iraq. Email: nashat_alkhayat@yahoo.com

222. Deafness in children and the need for cochlear implants

الصمم عند الأطفال والحاجة إلى زرع الحززون

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Objective: This investigation was aimed to determine the current status of sensorineural hearing loss in children from Mosul (north Iraq) and to report on those with sever to profound hearing loss who are in need of cochlear implant.

Methods: A comprehensive survey of 7500 Mosul children was carried out from Dec.1997 through to Dec. 2000.The subjects were randomly selected. The main objective was to screen these children for hearing impairment. A survey team included an ear, nose and throat specialist, a nurse, social worker and an audiologist. A questionnaire was completed; clinical examination and audiological assessment was performed. Those confirmed and in doubt cases were referred for further audiological and clinical assessment including computerized tomography scan and auditory brain stem response.

Results: The over all prevalence of hearing impairment was (10%). Those with sensorineural hearing loss (1.6%) and those with sever to profound bilateral sensorineural hearing loss (0.15%).

Conclusion: The prevalence rate of severs to profound sensorineural hearing loss is high in our country compared to developed countries. Cochlear implant is a useful procedure for those with severe & profound sensorineural hearing loss but hearing aid must be tried first. There is definitely a requirement for hearing and speech centers and the need for early detection of hearing loss is very important to improve the outcome of treating deaf children.

Keywords: sensorineural hearing loss prevalence, cochlear implant.

الصمم عند الأطفال والحاجة إلى زرع الحلزون

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**اختصاصي الجملة العصبية-كلية الطب-جامعة الموصل

***اختصاصية الأحياء الحيوي-كلية الطب-جامعة الموصل

الأهداف: يهدف البحث إلى التعرف على المعدل الحالي للإصابة بالصمم الحسي العصبي لدى الأطفال في مدينة الموصل وتحديد الذين هم في حاجة منهم إلى عملية زرع الحلزون.

الطرق المتبعة: تم إجراء المسح العشوائي على 7500 طفل عراقي من مدينة الموصل للفترة من كانون الأول 1997 ولغاية كانون الأول 2000، وقد اختير الأطفال بصورة عشوائية من ثلاثة مراكز استشارية للأذن والأنف والحنجرة موزعة على مناطق مختلفة من المدينة. وكان الهدف الأساسي من ذلك هو فحص هؤلاء الأطفال لاكتشاف أي خلل في السمع، وتالف فريق المسح من: طبيب اختصاصي أذن وانف وحنجرة وباحثة اجتماعية واختصاصي بالسمع والتخاطب وكان هناك أسئلة معدة مسبقاً للطفل ولذويه بالإضافة إلى الفحص السريري، والفحص الخاص بالسمع. والأطفال الذين أثبت الفحص المذكور أصابتهم بخلل سمعي والذين هناك شك بإصابتهم بخلل سمعي أرسلوا لأجراء فحوصات سمعية أخرى وأعيد تقييمهم سريرياً وأجريت لهم فحوصات أخرى.

النتائج: بلغت نسبة الأطفال الذين ظهر لديهم اعتلال سمعي 10% من المجموع الكلي للأطفال الذين اجري عليهم المسح وشكل الأطفال الذين لديهم فقدان سمع حسي عصبى اقل من ستون وحدة سمع قياسية نسبة 1,3% أما الأطفال الذين لديهم نقص سمع حسي عصبى أكثر من ستين وحدة سمع قياسية فقد شكلوا نسبة 0,3%، منهم 15% كان لديهم فقدان سمع بالجانبيين.

الاستنتاج: أن نسبة معدل الإصابة بفقدان السمع الحسي العصبي الشديد والشديد جداً لدى الأطفال هي نسبة عالية في المنطقة التي اجري فيها الفحص بالمقارنة مع معدل الإصابة في البلدان المتقدمة مما أبرز الحاجة إلى أهمية زيادة الوعي الصحي ومراكز الرعاية الصحية الأولية وعدد المراكز الاستشارية وعدد مراكز السمع والتخاطب وإدخال عمليات زرع الحلزون إلى حيز التطبيق.

مفتاح الكلمات: اعتلال السمع، الصمم الحسي العصبي، زرع الحلزون، مراكز السمع والتخاطب

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Muneer Muna, Mosul Medical College, Mousl, Iraq

223. Effect of ionizing radiation on some microorganisms causing chronic suppurative otitis media

فعالية المعالجات الشعاعية في إصابات الأذن الوسطى الإلتهابية

Dr. Hayffa Hashim Mohamed, A. Al-Muhson, Y. S. Allaf, Nadia A. Al-

Derzi, Mohammed F. Kashmoola, Muna Muneer -

Albatool teaching Hospital, Mosul, Iraq

Aim: To evaluate the effect of diagnostic x-ray in vitro study on bacteria causing chronic suppurative otitis media.

Design: The Number of viable cell count pre and post exposure to different doses of radiation was estimated.

Setting: Ear, nose and throat Dept. in Mosul General Hospital, Microbiology and x-ray unit in Alsalam General hospital- Mosul-Iraq during the period from July 1999 to July 2000.

Material and Methods: The effect of ionizing radiation (x-ray) has been studied on different strains of bacteria in vitro.

Results: The final results showed that there is a statistically significant reduction in the number of viable cell count of certain microorganisms after exposure to a specific dose of radiation in vitro.

Conclusion The single small dose of x-ray radiation (diagnostic x-ray dose) reduced the number of viable cells of certain microorganism in vitro.

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224. OCCUPATIONAL HEARING LOSS IN STATE COMPANY FOR TEXTILE INDUSTRIES /HILLA

فقد السمع عند العاملين في الحرف النسيجية

Dr. Safa Sahib Najji Sultan.

College of Medicine, Babylon University

INTRODUCTION Occupational hearing loss consider one of the enviromental pollution & its importance in controlling the effects of occupational noise on the health of the worker in the community as it depends on the time ,degree, duration of expoure,nature of the sound & previous health state of the worker in the textile factory in Hilla/Iraq

Aim Is to look for the effect of occupational Noise on the hearing & to provide valid comparsion between the duration & degree of exposure on the hearing of the textile workers.

Patints & Methods*An original study was carried out during the first half of 2002 to see the effect of occupational noise on the hearing of the workers in textile factory in Hilla,through measurment of noise(sound) level by- Sound level meter,in different productive sectors in textile factory. *Audiometric examination of 101 workersseleced randomly by -Clinical audiometer. Analysis*Retrospective cross sectional study*Pvalue $P < 0.01$ is the level of significance

Results Nearly most of the workers have developed occupational hearing loss (70-80 dBell),sensorineural type between (51-60) years of age mainly, in the male(11.6:1) $p < 0.001$

Conclusions &Recommendation

Occupationalnoise is areal hazards on the workers in the textile factories.Therefore its produnt to momitor the noise level in these sectors by sound level meter with frequent audiometric examminations using clinical audiometer to the worker & obsrve any change in hearing levels.

advicethe worker to use ear plugs to rduce the diret effect of noise to the ear,reduce the time of contact with the noisy mecchine & rehabilitate the older one or replace it by new one.Frequent enviromental monitoring done by occupatinal specialist,sociological survey with medical advice by otologist to predict early cases& to rehabilitate the diagnosed one(using hearing aid as an example).

دراسة الإصابات السمعية الناتجة عن الأصوات عالية التردد لدى العاملين في الشركة العامة للصناعات النسيجية في الحلة

إعداد الأستاذ المساعد الدكتور/ صفاء صاحب ناجي سلطان كلية الطب /جامعة بابل

خلال النصف الأول من عام ٢٠٠٢ تم إجراء دراسة ميدانية في معمل نسيج الحلة لمعرفة مدى تأثير الضوضاء على كفاءة سماع العمال في مختلف القطاعات الإنتاجية ، وتأثير الضوضاء على درجة السمع . هذه الدراسة أنجزت من خلال قياس مستوى الضوضاء بواسطة جهاز قياس شدة الضوضاء في مختلف القطاعات الإنتاجية ، وكذلك تم فحص كفاءة السمع لعينة عشوائية مكونة من (١٠١) عامل في المعمل رقم (١) من المصنع .

أظهرت البيانات إن الصمم المهني قد اثر بصورة رئيسية على الفئة العمرية (٦٠-٥١) سنة للعاملين في صالات قسم النسيج المعروفة بزيادة شدة الضوضاء .

وكذلك أظهرت البيانات إن الصمم المهني قد اثر في العاملين الذي يكون متوسط سنوات الخدمة (٢٠-١٠) سنة .

أظهرت البيانات إن نوع الصمم المهني هو عصبي حسي لاكثر من نصف العينة ، والأعراض هي قصور تدريجي في السمع مما يؤدي إلى فقدان السمع .

أظهرت البيانات إن الصمم المهني يحدث في الذكور بنسبة (٦، ١١ : ١) أعلى من الإناث

Sultan Dr. Safa Sahib Naji. College of Medicine, / Babylon University

225. Noise pollution

محاضر الضجيج

Dr. Radhi Jawad Bakir

Otolarygologist Al Zahraa General Hospital Kut, Wasit, Iraq

In this very world, where the new is overcoming the old and the balances of its primary components have changed, man is proud with his new inventions and evolutions but under-estimating their effects on his environment and so greatly jeopardizing the future of the life on earth.

Hopefully, a worldwide serious quest in the field of environment is encountered to protect life on earth.

Many conferences, commissions and researches have been held previously.

So far, I think it is convenient to talk about the sound, an environmental element that may pollute it.

Sound: Noise

If the silence is considered as a one of the sound grades that surround the man arising from the different living and non-living creatures, the other grades increase gradually till a noise grade is reached, thence increase to a lethal level.

The noise: means the shouting and loudness of the people voices in the war as mentioned in the Al Waseet dictionary. In the Webster's dictionary, it means any annoying sound.

The sources of the noise

1. Man and his inventions pollute the environment as follows:
2. The automobile noises and their klaxon. It is shown that the large automobiles cause 70 % of the noises.
3. The factories
4. The loud speakers and audio's in the streets and markets in Iraq because of shortage in electricity, generators are widely used so in crowded streets the level of noise is high.
5. Entertainment instruments in the public places and streets.
6. The war weapons in different types

The noise has many senses;

Physical sense:

Noise is a complex sound having little or no periodicity, which can be measured, or its characteristics can be analyzed. These can be repetitive, pulsatile, or explosive.

The sound intensity is measured by "decible" units similar to the meter or gram in measurement of the height and weight. Most of the people cannot hear the sound of less than 0-decible intensity, though some of them can.

The human can tolerate 60-decible sound intensity without disturbance.

The human voice is of 30-decible during conversation and may reach up to 60-decible in shouting.

The noise of the automobiles in the busy streets reaches to 70-decible, while the airplanes have 120-decible sound.

The canon bombs have 130-decible and the pave lithotripter has 110-decible sounds.

The spaceship compeller rocket gives a very loud sound of 175-decible.

Effects of sound (and noise) stimulation on the ear 2

Adaptation / Temporary threshold shift (fatigue) / Permanent threshold shift

Adaptation or per-stimulatory fatigue, is an immediate phenomenon, which occurs when a sound is presented to the ear somewhat elevating the threshold the recovery is exponential in nature, and for fatiguing sound of up to 70dB occurs fully within 0.5 second. while temporary threshold shift is a post stimulatory fatigue which increases progressively with stimulus duration and intensity, the higher the frequency of the stimulating tone, the greater the temporary threshold shift, irrespective of the exposure frequency.

Physiological fatigue should be limited to temporary threshold shift that lasts for more than 2 minutes, but that has completely recovered in less than 16 hours.

Temporary threshold shift for impulse noise grows linearly with time in stead of exponentially, as found with steady noise.

But in case of permanent threshold shift there is an irreversible elevation of the auditory threshold produced by noise exposure, associated with permanent pathological changes in the cochlea.

The scientific bases for the equal energy concept: which proposed that equal amount of acoustic energy, between a level which is totally safe and one which is totally injurious produce equal amount of hearing loss, the led to the term (noise immission level) as an index of the total noise energy incident on the ear over a period of time.

The anatomical correlates of sound / noise injury

Acoustic injury to the ear has a dynamic and a static phase. The former starts during acoustic stimulation during which the cellular elements in the cochlea undergo structural and functional change, which may be lethal or may initiate repair.

After cessation of sound trauma, the degenerative and reparative processes compete leading to full recovery, partial recovery and scarring or destruction, and then the static phase in which hearing is stable is entered.

The current view is that different patterns of over-stimulation leave unique footprints of hair cell injury and this may be related to peripheral features such as the middle ear muscle response to sound.

Drugs like ototoxic and noxious agents that damage the ear as well as vibration, degree of melanization all may have synergistic effect with a noise-induced damage

It has been shown that after damage to the cochlea by noise, the most sensitive frequency of individual auditory neurons was lowered by half an octave and that the sensitive tip was lost.

Central changes in noise induced permanent threshold shift are similar to those that occur with any acquired sensorineural hearing loss. Most of the range of human audibility categorized with respect to the risk of injury and hearing loss²

The physiologic and pathologic senses:

The noises are meaningless sounds to hear, but may lead to simple physiologic changes at high levels and even may lead to a temporary or permanent hearing loss. The sound has other harmful physiologic effects according to its intensity as follows: in a region of 70-decible, the human being will have a high blood pressure and nervousness.

Hearing loss and tinnitus will develop in the region of 90-decibles.

If 120-decible sound intensity is encountered, eardrum damage with its accompanying clinical features will be the worse results.

Can you now imagine the effect of 140-decible! Bleeding in the inner ear and a permanent deafness with vertigo and tinnitus.

If the high intensity sound continues, its effects will increase as well and leads to arterial contraction that leads to hypertension and heart failure.

The lethal level that damages the thoracic cavity and the lungs with rapid death is in the region of 170-decible., this is the cause of death in areas of explosion even regardless the shell injuries.

This explains the death of the old peoples of Aad, Thamoud and Lout as mentioned in the holly Kuran by a yell, "al sayha" in 11 verses, e.g "when our order came, we save Shuaib and his good followers with our mercy and bad people have been takes by the yell, "Al sayha" their dead bodies are found in their homes, Hud 94.

The high sound is mentioned as a sign of the doomsday in other 17 verses. 3

Noise effect on Hearing

It was found that noise is one of the important causes of hearing loss in the world.

Noise-induced hearing loss 2

Noise induced temporary threshold shift

Together with the permanent threshold shift, imply a prior prolonged exposure to noise, which may be steady-state, impact or a mixture of the two.

The usual initial change following hazardous noise exposure is a high frequency threshold shift. Classically this appears as a steep isolated audiometric dip, the acoustic notch at 3,4 (usually), or 6 KHz.

Gloric noted that individuals with normal hearing whose ears have never previously undergone prolonged noise exposure (green ears) demonstrate greater temporary threshold shift than those whose ears have been exposed for long periods of time (ripe ears).

There is an acquired resistance to the auto traumatic effect of noise a (toughening up) of the ear.

A low intensity sound, priming the ear prior to a subsequent high intensity sound reduces the temporary threshold shift produced.

Most recovery occurs in the first two days except for explosions for here significant recovery continues for some weeks.

1. Noise induced permanent threshold shift.

This is the most commonly encountered hearing loss caused by noise. Synonymous are occupational hearing loss, industrial, chronic acoustic trauma etc.

Two points of practical importance are the quiet uneven levels in industry and the great individual variability in susceptibility to the effect of noise, acoustic reflex may play a part as a protecting agent, (which is a reflex contraction of stapedius muscle in response to a loud sound) as it is almost unfatiguable for impulse noise, but quickly extinguished with steady-state noise.

Subjects with permanent threshold experience difficulty in discriminating speech.

Noise –induced permanent threshold shift usually commences between 3 and 6 KHz, often around 4, and gradually worsens at that frequency and spreads into neighbouring frequencies so people affected have difficulty with sounds being too quiet.

The rate of progression depends upon the type of noise and individual susceptibility. Acoustic emissions might make a sensitive screen for susceptibility to noise damage.

It is said that if a whole population could be kept alive to age 86 it would make no difference what the exposure history of the members of that population has been. It is now known suggested that presbycusis and noise are additive.

2. Impact noise

It is a hearing loss caused by single intense sound sources as for example a rifle shot or worse blast trauma from an explosion. It is dangerous as in rifle shots and riveting shot the characteristics of it varies enormously rise and decay times range from abrupt to a gently sloping and reverberation varies, all of which may alter the effect on the ear. For a given exposure impulse noise is more harmful than steady state noise.

Tinnitus is a constant feature of an acute blast injury and is a fairly constant concomitant of noise-induced permanent threshold shift it presents for some hours and may disappear, but it may become permanent if the exposure last for years.

It is found usually to be tonal sometimes relieved by a hearing aid, and of a greater prevalence of those exposed to impact noise.

In acute acoustic trauma there may also be damage to the tympanic membrane and ossicles with a variable degree of injury to the cochlea

Otitic blast injury

In this form of trauma external, middle and inner ear structures can all be damaged?

Blast is the sudden explosive force generated by bursting shells, bombs or other explosives.

Usually the tympanic membrane perforates which face the bombe. Different shapes and edges of these perforations can be seen.

The inner ear damage is variable, most of the affected people will have certain degree of sensory hearing loss which may clear quickly and completely, but some may have permanent deaf. Tinnitus usually accompanies these injuries and also may clear up.

Worsening of hearing after cessation of noise exposure

Continuing damage to the cochlea may occur in the presence of an apparent asymptomatic threshold shift i.e. hair cell damage continues even so the audiogram remains static, but it is shown that subjects with hearing loss from a single traumatic episode found with no evidence of progression from the accident

The psychological sense:

Here the noise is considered as the unwanted and unpleasant sound.

It is good to mention the delightful effect of the voice of the wholly Kuran recited in the early morning in the mosque by a melodious voice that has a good psychological effect on the audience and a feeling of calmness and faith.

God behave us not to rise our voices high like the most unacceptable donkeys sounds:Lukman verse 19.

The far shout of the coq early in the morning leads to awakening but the repetitive one of the neighbors' is very annoying.

The melodious voice of Fairooz singing soft songs on the way to work is refreshing one only to be disturbed by the noise of the automobiles and the bad songs.

The soft and quiet sound has a nice effect that an old doctor said that it is the ear the best route to deliver the treatment to a sick man.

The quiescence has good effect on the patient.

It was found that there is a selective elevation of blood pressure monitoring alarms an effect on noise pollution in intensive care units 4, as well as another study showed that noise is a stressful eliciting changes in the autonomic nervous system, impairing mental facilities and producing masking that could effect the staff leading to decreased work performance and anxiety respectively.⁵

Noise pollution and community

Physicians of the medieval medical school of Salerno noted: 2

Our hearing is a choice and dainty sense'

And hard to mend, yet soon it may be marred,

Blows, falls, and noise ...all these...

Breed tingling in the ears, and hurt our hearing

It is one type of environmental pollution, noise can be high to such a level that affects the man till a stage of nuisance or harm.

The people can respond differently to the noises, and the children are more susceptible to its danger as showed the studies.

Children and noise:

Children are a high risk group 6, they are vulnerable to the adverse effects of noise exposure, especially the effects on cognitive performance, motivation and annoyance.

A study showed that there is an effect of long- term exposure to road traffic emissions on the respiratory and dermatological diseases in children. Noise signal 7 (as lorry noise) associated with danger can trigger stress reaction mostly during night which may lead to adjuvant effect on the pathogenesis of asthma, chronic bronchitis and neurodermitities. Also the studies showed that the students' performance and learning are affected greatly in the schools in the noisy areas.

Urban population and different acoustic areas:

A comparative analysis 8 among 357 inhabitants , who live in two areas , Noise above 70 dB/A and moderate below 57 dB/A; it shows noise disturb realization of many important daily activities , evoke emotional irritation , mental pressure , throat and eye irritation , disturbance of rest , speech etc, it may lead to pills intake to sleep .

Relative risk of appearance of disturbance mentioned or mental and emotional reaction in group of people who are exposed to high noise from 3-6 times bigger in comparison with people from quiet areas.

As well as most of the symptoms due to intensification neurotic character are connected with cardiovascular symptoms ; palpitation , constrictions in the chest , hot flush , the relative risk of appearance of the mentioned above unfavorably health symptoms in group of people from noisy areas is about 1.5 times higher than in areas blow 57dB/A

In additionally the escalation of troubles probably connected with bigger air pollution (frequent dry cough, sneezing, and nasal stuffing) is observed in areas of intensive traffic noise.

People from low socio-economic status 9 suffering more noise pollution as they live in busy roads and effected by traffic pollution, this was shown in a study by German Federal Health Survey to show a social inequality and noise pollution.

And also the public impact of large airports 10 on the near by inhabitants which showed a high effect of noise on them.

Climate also show difference in noise exposure effect as in hot climate areas the peoples are obliged to open their windows are more susceptible to the noises in their homes.

It is interesting what was shown in a study 11 that noise and communal dinning facilities have effect on the psycho-physical well being of the dinners.

Legislation and Noise

If we consider noise as it is anything disturbs the physical comfort or even the existence and not only the state of luxury and calmness of the normal life that could be a legal article in legislation for this reason.

Noise and other polices and practice in many sectors affect health so a Health Impact Assessment 12 is one of the ways to predict these health impacts, and in order to recommended improvements in policies to improve health.

The general draft (Health for All) 13, for the European region of WHO, describes 21 objectives for a new global health policy in the 21st century.

This policy aims at promoting and protecting public health from the cradle to grave.

The public health services, responsible for the control and co-ordination of the entire system, have their own scope of procedure,

Objective 10:

It mentions that noise pollution is one of the health hazards and to be reduced considerably. German Federal State adopted Laws on health care upon which the public health services are based.

The public health department acting as public authority, should make available the expert medical knowledge and experience of their staff and contribute comprehensively to regional and development planning procedures in addition to focus on health compatibility testing of projects to ensure efficient preventive health protection and the German National Association NHS physicians stipulated that health compatibility testing should be included in the text of the Law.

Finnish 14 authority recommended a level of 85 dB/A of sound to be accepted in common places.

The British law secures the right of quiet listening.

The records of the British courts 2 present examples of noise cases. Those legitimate even the barking.

One of cases of a teacher prosecuted his neighbor for the noises that obliged him to raise his voice on giving private lessons at his home that led to have cancer of the vocal cords.

Control of the noise 15

- Identification and control of the sources by laws and legislation
- Treatment of the cause. The industrialists and the researchers developed silent engines and compressors of air conditioners that lessen the noise.
- Use of individual hearing protective devices.
- Education programs beginning with school-age children.
- Consumer guidance

- Increasing product noise – labeling
- Hearing conservative programs for occupational settings
- Designing Green belts on scientific base to serve as wind and dust and as well as a noise control.16
- Establishing a department of noise in general hospitals 17 as of the surveys of recent researches on the effect of noise and music in health care - orthopedic operations – dentist clinics and other high level noise areas.

A Europeans project 18 to coordinate by the national institute health, Denmark. The project is (children and noise – prevention of adverse effect) partly financed by the European commission program on pollution – related diseases. It is directed towards preventing noise effect children development and health

Summary

This short account shows the negative effect of the noise on the peoples and this is the right time to control the noise by the specialists and the researchers. The legislator has a great role in this problem.

W Allah al mowafik

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Paediatric Medicine أمراض الأطفال

226. Atypical phenotype in Huntington's disease, presentation of clinical and molecular data.

النمط الظاهري غير النموذجي لمرض هنتنغتون، دراسه و تقديم البيانات السريرية والوراثية للحاله المرضية.

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Huntington's disease (HD) is clinically characterised by choreic movements, cognitive decline and personality change. It's caused by a CAG repeat expansion beyond 35 triplets in the IT 15 gene. The early clinical manifestations of HD vary widely and sometimes have atypical onset. We report an adult-onset case of HD presented with movement disorders, cerebellar ataxia, and slurred speech rather than chorea. The patient, 42-year old female was suspected to have a form of spinocerebellar ataxia (SCA).MRI demonstrated atrophy of the cerebellum .The family history of HD was not ascertained until now. Accordingly she was diagnosed as having adult –onset HD mimicking SCA, confirmed by molecular genetic testing. This indicates HD may present with atypical clinical features at the initiation of the illness , that's why it's crucial to determine CAG repeat size in Huntington gene for patient with movement disorders .The relationships between clinical phenotypic variation of Huntington gene expression are not determined .

مرض هنتنغتون هو، سريريا يمتاز بحركات كورية رقصية الشكل،تناقص الإدراك وتغير في شخصية المريض.السبب يعود الى التوسع في تكرار سي أي جي [ثلاثي الترابينوكليوتايد] أكثر من ٣٥ مكرر في أي تي ١٥ وهو الجين المسؤول عن المرض. أولى الاعراض السريرية للمرض كثيرا ما تختلف وتكون غير نموذجية في بعض الاحيان.نقدم هنا حالة لمريضة راجعت قسم الاستشارات الوراثية في المستشفى بسبب اضطراب في حركات الجسم ، رنح مخيخي ، و التلطف غير الواضح أكثر مما هو كورية الحركات.المريضة في عمر الثانية والاربعين قد تم تحويلها الينا على اساس تشخيص رنح نخاعي مخيخي . جهاز الرنين المغناطيسي بين بوضوح اضمحلال المخيخ . التاريخ المرضي للعائلة ليس واضحا. وتبعاً لذلك قد تم اجراء الفحوص اللازمة وتم تشخيص الحالة المرضية على انها مرض هنتنغتون باعراض مشابهة لمرض رنح نخاعي مخيخي، مثبت باختبار الهندسة الوراثية وتحديد الطفرة الوراثية في الجين. هذا يثبت ان مرض هنتنغتون يمكن ان يظهر باعراض غير نمطية في بداية المرض، ولهذا من المهم جدا والحاسم هو تحد يد حجم تكرار السي اي جي في جين الهنتنغتين لكل مريض يعاني من اضطراب الحركات الجسميه . اما علاقه بين اختلاف صياغة الاعراض السريرية لهذا الجين فهي لحد الان غير معروفة.

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227. MODREN PREVENTION OF DIARRHEA IN IRAQI MALROURSHIED CHILDREN USING AN INFANT FORMULA CONTAINING ANTI- ESCHERICHIA COLI COLOSTRAL ANTIBODIES FROM HYPERIMMUNIZED COWS

وقاية معاصرة غير تقليدية لحالات الإسهال عند الأطفال العراقيين المصابين بسوء التغذية باستخدام حليب مدعم بمضادات الاشيرشيا القولونية الممرضة من أبقار ممنعة

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المقدمة: إن سوء التغذية والإسهال يكونان مشكلة صحية كبيرة في القطر. إن المعطيات الموثقة حول الإسهال وأنماط حدوثه تؤكد الحاجة إلى تحسين الإجراءات الوقائية لمجابهة هذه الحالات المهددة للحياة. الهدف: إن هذه الدراسة تهدف إلى تقييم التأثير الوقائي لحليب الأطفال المدعم بأجسام مناعية مضادة للاشيرشيا القولونية مأخوذة من أبقار ممنعة لمنع الإسهال عند الأطفال المصابين بسوء التغذية. في دراسة ضابطة ميدانية. طرائق العمل: تم تمنيع أبقار بمجموعة مختلفة من ذراري الاشيرشيا القولونية تم الحصول على اللبن الممنع واستخدمت طرق كروماتوغرافيا الهلام (Sephadex G-200) والهجرة الكهربائية (SDS-PAGE) لغزل وتوصيف الأجسام المناعية. تمت متابعة ١٠٠ حالة لأطفال مصابين بسوء تغذية تناولوا الأجسام المضادة المتخصصة كذلك تمت متابعة مجموعة أخرى من الأطفال اعتبروا كعينة ضابطة. التحاليل: تم استخدام اختبار t-test للمقارنة. وان مستوى $p < 0.05$ قد استخدم للدلالة الإحصائية. النتائج: إن المجموعة التي تناولت الحليب المدعم أظهرت أقل نسب انتشار نوبات الإسهال ($p < 0.001$). وقد عزلت جراثيم الاشيرشيا القولونية الممرضة من ١٦% و ٤٨% من مجموعة الدراسة والعينة الضابطة على التوالي. الاستنتاجات: إن تناول حليب مدعم ببعض المضادات المناعية المتخصصة قد توفر طريقة فعالة للوقاية من الإسهال عند الأطفال المصابين بسوء التغذية.

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228. History of Paediatric Medicine in the Arab and Islamic World

طب الأطفال عند العرب والمسلمين

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الدكتور محمود الحاج قاسم محمد

باحث في تاريخ الطب العربي الإسلامي، طبيب أطفال، نقيب أطباء الموصل (محافظة نينوى العراق) الغاية من البحث: إبراز آراء وإضافات الأطباء العرب والمسلمين في فرع طب الأطفال من خلال استعراض مؤلفاتهم في هذا العلم.

الطريقة: لقد احتوى البحث جرداً لكل مؤلفات الأطباء العرب والمسلمين في طب الأطفال وحسب التسلسل الزمني لمؤلفيها. مع ذكر ما جاء لديهم من الأفكار حول أمراض الأطفال والتي تصيب أجهزة الجسم المختلفة وأساليبهم في معالجتها. ولما للرازي من أهمية في تاريخ طب الأطفال رأينا تقسيم البحث إلى ثلاثة مراحل هي: أولاً: مرحلة ما قبل الرازي. ثانياً: مرحلة الرازي. ثالثاً: مرحلة ما بعد الرازي.

الاستنتاج: بين البحث أن الأطباء العرب والمسلمين كانوا غزيري الإنتاج في حقل طب الأطفال، وكان للرازي سبق تاريخي حيث لأول مرة فصل طب الأطفال عن الأمراض النسائية بتأليفه (رسالة تدبير الصبيان)، وكان لابن ماسويه سبق أيضاً بتأليفه (مقالة في الجنين) والذي يعتبر أول مؤلف مستقل في علم الأجنة. من إضافاتهم حول أمراض الأطفال، تفريق الرازي لأول مرة بين مرضي الجدري والحصبة، وتفريق البلدي مرض الجدري الكاذب عن الجدري

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229. Childhood Solid Cancer : 12 Years Experience in Ninevah Province

دراسة وبائية عن الأورام الخبيثة عند الأطفال، خبرة ١٢ سنة

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Childhood cancer is uncommon, yet it remains a major cause of death among children. This retrospective study was done to find the incidence and relative frequencies of childhood cancer (CC), to classify different types of tumours, their distribution according to age and sex and to assess any change in frequency of CC after the second Gulf war. The study covered all CC referred to Hazim Al-Hafidh Oncology and Nuclear Medicine Hospital (Mosul / Iraq) over 12 years period from 1990-2001 which was nine hundred sixty two cases. Clinical data including the age, sex, site and the histology of the cases in addition to the residence of the patients were collected. The crude incidence of CC in Ninevah province was (65.1 / million / year). The tumours showed distribution of (360, 342 and 260) within the three childhood quinquennia respectively. The male: female ratio was 1.6: 1. There is (22.8%) rise in the frequency rate of cancers in the second half of the period of the study compared to the first half. In addition, Ninevah province showed twice incidence of cancer than that of Duhouk and Erbil provinces collectively (65.1 vs. 29.1). However, this number represents only the cases who attended the above centre during the period of the study. NHL is the most common diagnosis (28.8%) followed by central nervous system tumors (21.1%). Key Words: Childhood Cancer, Incidence, Frequency.

سرطانات الطفولة ليست بالأمراض الشائعة ومع هذا فهي تشكل أحد الأسباب الرئيسية للوفيات عند الأطفال وأجريت هذه الدراسة الرجعية لمعرفة وقوع ومدى الانتشار النسبي لأورام الطفولة وتصنيف الأورام حسب أنواعها وعلاقتها بالعمر والجنس وملاحظة أي تغيير في نسبة تكرار المرض بعد حرب الخليج الثانية. نُفِذَت الدراسة في مستشفى حازم الحافظ للأورام والطب الذري (الموصل/ العراق) للفترة ما بين ١٩٩٠-٢٠٠١. حيث شملت الدراسة ٩٦٢ حالة من أورام الطفولة، وتم جمع المعلومات السريرية كالعمر والجنس إضافة إلى أنواع الأورام ومحل إقامة المرضى. إن الحدوث النيئ لأورام الطفولة في محافظة نينوى هو (٦٥,١) / مليون طفل/سنة. أبدت الأورام توزعاً يساوي (٣٦٠ و ٣٤٢ و ٢٦٠) في فئاسيات العمر الثلاث للطفولة على الترتيب، ولوحظ أن هناك زيادة في عدد الحالات السرطانية خلال النصف الثاني من الدراسة عما كانت عليه في النصف الأول تقدر ٢٢,٨%. كما لوحظ أن الحدوث النيئ للحالات السرطانية في محافظة نينوى (٦٥,١) لكل مليون طفل سنوياً وهو أكثر عما عليه في محافظتي دهوك وأربيل معاً (٢٩,١) وهذه النتائج تمثل الحالات التي تم علاجها في المستشفى المذكور. سوان نمط "لا هودجكن" هو أكثر الأورام انتشاراً (٢٨,٨%) يليه أورام الجهاز العصبي المركزي (٢١,١%). مفتاح الكلمات: سرطانات الطفولة، التكرار، وقوع.

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230. CRITERIA FOR REFERRAL TO ULTRASOUND HIP EXAMINATION IN CLINICALLY DOUBTFUL CASES OF DEVELOPMENTAL DYSPLASIA OF THE HIP (DDH)

نتائج تشخيص خلع الورك الولادي بالأمواج الصوتية

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During the period from January 2002 to March 2004 one hundred infants below 6 months of age (62 females and 38 males) attending orthopedic outpatient unit in Al-Salam General Hospital in Mosul with inconclusive clinical diagnosis of developmental dysplasia of the hip (DDH) were included in this study. The study aimed at evaluating the validity of certain clinical signs (including unequal thigh and inguinal skin folds, hip click and limited abduction) and risk factors (including sex, cesarean section, breech presentation, family history, ect by relating them to the results of ultrasound examination of the hip in the static and dynamic modalities. The clinical signs and risk factors were appraised using within-group comparison statistical analysis and considering ultrasound as the reference standard for diagnosis of DDH in this age group. Abnormal hips were more frequently detected in females (female to male ratio 1.5-1) but males tended to have more severe pathology (38% of male had dislocatable hips compared to 19 % of females) especially when associated with foot deformities. Breech presentation was more frequently associated with subnormal hips (type IIa/b in 47% of breech presenting versus 29.5% of head presenting infants) but did not significantly affect the severity of DDH. Cesarean section had no significant effect on frequency and severity of DDH when considered in isolation. The first born child was clearly more at risk of having DDH and their hips represented 42% of the total abnormal hips. Foot anomalies increased the possibility of DDH both quantitatively and qualitatively (P value 0.00 1 and OR 3.24). Positive family history of DDH was the most significant risk factor encountered in the study population (P value 0.01 and OR 3.5). Unequal skin folds represented a sensitive indicator of hip abnormality (sensitivity 82%) but had low specificity (15.8%). Yet, this sign should be regarded as an indispensable adjunct to other criteria for the diagnosis of DDH. Hip click had moderate sensitivity and specificity but a high positive predictive value (71) denoting its value in detecting true positive cases of DDH. Limited abduction was the most specific sign in DDH (71.2) and hence, the most valuable clinical sign. Depending on the foregoing clinical criteria, the diagnostic accuracy in this age group in the absence of frank sings of DDH (positive Barlow and Ortolani tests and severe limitation of abduction) was 63%.

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231. Neonatal and infantile erythrodermas. A clinical study of 42 cases.

المشاكل الجلدية عند الخدج وحديثي الولادة

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BACKGROUND: Erythroderma in neonate and infants is non-infrequently encountered problem in the daily practice in paediatric dermatology.

OBJECTIVE: To determine the frequency of various causes of this clinical entity as well as which clinical and laboratory findings useful in the differentiation of these causes.

PATIENTS AND METHODS: forty-two patients under one year age were included in this study with a follow up period of 3-5 years was completed. The study done in the department of dermatology-Alnajaf teaching Hospital during the period from 1998-2003.

RESULTS: The diagnosis was made at average of 3 months after the onset of the disease. The underlying causes included seborrheic dermatitis in 8(19.3%) patients, atopic dermatitis in 6 (14.7%) patients, different types of ichthyoses in 13 (31.5%) patients ,psoriasis in 2(4.7%) patients, Netherton syndrome in 2 (4.7%) patients, Immune deficiency syndromes in 4(8.5%) patients and unclassified Erythroderma in 7(16.6%) patients. The following parameters were of value in determining the underlying cause of Erythroderma: onset of the disease, presence of skin infiltration, hair and/or nail involvement, course of the disease, response to topical corticosteroid therapy, presence of infection and failure to thrive. Histopathological examination of skin biopsy can confirm the diagnosis in 17(60%) of 28 cases and it is of great value in detecting significant lymphocytic infiltration. The prognosis was poor with a mortality rate of 16.6% (7patients) and severe dermatoses persisted in 17(48.8%) of the survivors.

CONCLUSION: It is difficult to make the etiological diagnosis of neonatal Erythroderma from the first examination. Associated immune deficiency should be suspected if the condition associated with skin indurations, severe alopecia, failure to thrive and/or infectious complications. The prognosis is poor especially in those with immune deficiency or chronic persistent course.

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232. MANAGEMENT OF ANORECTAL MALFORMATIONS A STUDY OF 100 CASES

التشوه الخلقي للمستقيم والشرج - دراسة لمانة حالة

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Objective: To study the management of imperforate anus and the proper surgical technique for each type and to find the role of radiology in relation to clinical and operative findings.

Design: A prospective study of 100 cases of imperforate anus.

Setting: All of our patients managed at Al-Khansa'a hospital between January 1997 and March 1999.

Result: Prenatal history shows positive poly hydramnios in 27%. Fifty- six percent presented with acute intestinal obstruction in the first week of life .Of these 100 cases, 44% were high lesion, 21% intermediate lesion and 30% low lesion. Twenty-three percent of male lesions were rectourethral fistula as the commonest male lesion while rectovestibular fistula represents the commonest female lesion (15%).

Thirty-one percent has associated anomalies involving different system with 15% of them involving genitourinary tract as the commonest system involved. Invertogram used to determine the level of the lesion shows 65% true results while the remaining 35% failed to predict the level of the lesion. Distal colostogram used for identification of

urinary fistula and it was true positive in 40% while in the remaining 60% fistula were detected per operatively. Low lesions managed by one stage perineal approach using cruciate anoplasty in 20 patients , anal transposition in 6 patients and cut back operation in 2 patients. Six patients with anal agenesis successfully treated by one stage cruciate anoplasty. Three stage operation using posterior sagittal anorectoplasty (P.S.A.R.P.) were the standard technique for the remaining lesions in 84% and in the remaining 16% an abdominal approach was added.

Conclusions: 1. High lesion carries the highest incidence of associated anomalies, which is responsible (in addition to delay diagnosis) for majority of the deaths, and genitourinary anomalies are the commonest.

2. Invertogram and distal colostogram carry a significant percent of false results.

3. Low lesions and anal agenesis can be managed through perineal approach with colostomy.

4. Posterior sagittal anorectoplasty is the optimal surgical procedure for high lesion and rectovestibular fistula.

الهدف: دراسة حول كيفية معالجة التشوه الخلقي للمستقيم والشرح مع بيان التداخل الجراحي اللائق لكل نوع، مع دراسة دور التشخيص بواسطة الفحص الشعاعي مقارنة مع نتائج الفحص السريري والعمليات الجراحية .
التصميم : دراسة مستقيلية ل (١٠٠) حالة مصابة بالتشوه الخلقي للمستقيم والشرح .
موقع الدراسة : تم معالجة كل المرضى قيد الدراسة في مستشفى الخساء للاطفال في الموصل للفترة ما بين كانون الثاني ١٩٩٧- اذار ١٩٩٩ .

النتائج : كان ٢٧% من الامهات مصابات بازدياد كمية السائل الامنيوسي اثناء فترة الحمل. تم ادخال ٥٦ طفل (٥٦%) خلال الاسبوع الاول من العمر مصابين بانسداد الامعاء الحاد . في ٤٤% منهم كان التشوه من النوع العالي وكان ناسور المستقيم والاحليل اكثر التشوهات شيوعا في الذكور (٢٣%) بينما كان ناسور المستقيم و مدخل المهبل الاكثر شيوعا في الاناث (١٥%). كانت نسبة التشوهات الخلقية المصاحبة (٣١%) وخصوصا في الجهاز التناسلي البولي بنسبة (١٥%). التصوير الشعاعي للحوض بالوضع المقلوب استخدم لتحديد نوع التشوه حيث كانت النتائج مطابقة في ٦٥% من الحالات بينما لم تكن كذلك في ال (٣٥%) الباقية. الاشعة الملونة استخدمت لتعيين ناسور المستقيم ومجرى البول وكانت النتائج ايجابية في ٤٠% من الحالات بينما كانت النتائج سلبية في ال (٦٠%) الباقية والتي تم تشخيصها اثناء عمليات سحب القولون. تم معالجة النوع المنخفض من التشوهات خلال مرحلة واحدة وباستخدام طرق متعددة كما تم معالجة حالات ضمور المخرج (النوع المتوسط) خلال مرحلة واحدة ودون الحاجة الى مفاغرة القولون ، بينما تم معالجة بقية الانواع خلال ثلاث مراحل باستخدام عملية سحب القولون (طريقة Pena) ودون الحاجة الى فتح البطن في ٨٤% من الحالات بينما كانت الحاجة الى فتح البطن في ١٦% الباقية منهم.

الاستنتاجات والتوصيات

- اعلى نسبة من التشوهات الخلقية المصاحبة كانت عند المرضى ذوي النوع العالي والتي كانت مسؤولة عن معظم الوفيات بالإضافة الى تاخر التشخيص ، والجهاز البولي هو اكثر الاجهزة تعرضا لهذه التشوهات.
- التصوير الشعاعي للحوض بالوضع المقلوب والاشعة الملونة للقولون تحمل نتائج خاطئة في نسبة لا باس بها من المرضى
- ضمور المخرج والنوع المنخفض من التشوهات يمكن معالجتها وبصورة ناجحة جدا خلال مرحلة واحدة
- عملية سحب القولون (طريقة Pena) هي العملية الاكثر ملائمة لعلاج حالات التشوه من النوع العالي وناسور المستقيم ومدخل المهبل.
- فحص الطفل عند الولادة من الامور الضرورية جدا لغرض تلافي مشاكل التأخير في التشخيص.

- التاكيد على دور الاب والام في متابعة الاطفال بعد اجراء عمليات سحب القولون لغرض الحصول على نتائج ايجابية.
مفتاح البحث : التشوه الخلقي للمستقيم والشرح .

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Psychiatry الأمراض النفسية

233. Young People's Mental Health in Northern Ireland: The Legacy of Violence

أثار العنف التي ترتبت على الصحة العقلية للأفراد في أيرلندا الشمالية

Prof. Ed Cairns

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As the political violence in Northern Ireland, which lasted for some 30 years, stutters to an end, this paper will review the implications for the mental health of children and young people in that society. For the most part research suggests that, while the violence was ongoing, some individuals were deeply scarred by 'the troubles', most people, adults and children, learned to cope with the violence partly by habituation and by using distancing and/or denial. This paper will review this literature and discuss new evidence based on a community survey of young people. These data will be used to investigate the possibility that the Northern Irish political violence has bequeathed a legacy that has implications for young people's mental health in the post-violence period

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234. Study of the Psychological Profile of the Street Children and the Services Rendered to them

Prof. Amira Gamal Seif El Din

Professor of Mental Health Chairperson of Community Medicine
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The present study has investigated the profile of 75 street children attending mental health service centre. Street children were compared with a control group of school children in relation to their personnel, social, and psychological profile. The mean age of street children was (12 years), 20% of them came from large families migrating from rural areas. Result of this investigation revealed that more than three quarters of street children sample have dropped out of school mainly due to physical abuse from the parents and the heavy and unpleasant school curriculum. Smoking was a behaviour adapted by a sizeable proportion 42.67%, glue sniffing found among 16% and chemical abuse appeared among 8% of street children. Street children were also inclined to show more aggressive behaviour and hopelessness than the control group. Other result also indicated that their self esteem level didn't differ significantly than the control school children.

The services provided to street children didn't focus on the psychological aspect for this high risk group where the knowledge and the awareness of the psychosocial development and needs for those children are limited in comparison to the physical care provided to them. It is recommended to train services providers in a more professional approach to deal effectively with the psychological aspect using

cognitivebehavioural therapy to help street children to return back to the community in a positive approach.

Seif El Din Prof. Amira Gamal M.D. Prof. of Mental Health Chairperson of Community Medicine Department, Faculty of Medicine, Alexandria University
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235. Suicide and Depression in the Elderly

الإنتحار والإكتئاب عند المسنين

Dr Saad Khalaf

Depression is the commonest cause of suicide. The prevalence is sample location influenced. It is under-recognised and under-treated with presentation often masked with management requiring modification

Suicide in the elderly is again under-recognised and under-treated for the very reasons above.

Historically and since antiquity suicide is accepted as part of ageing and considered as useless citizens justifiable may end their life.

Albert Camaus - 'There is but one truly serious philosophical problem and that is suicide.' Elderly people have a higher risk of completed suicide than any other age group worldwide, not recognised for historical, economical and political reasons.

Freud whilst dying from CA palate justified it.

Epidemiologically suicidality should be more accurately estimated of hopelessness as a key issue. Elderly commit suicide three times more than a younger age group with 80% of completed suicides having a history of major depression. Elderly people are twice as likely to complete suicide as attempt it.

Increased Use of Lethal Means - Recently noticed factors associated with suicide, psychological, depression, alcohol dependence and other diagnoses, physical co-existence of three medical problems is predictive of increased suicide.

Social Factors – The elderly seem to have excess of major life events predominantly loss due to bereavement, disability or status.

Religiosity and life satisfaction including marriage were found to be independent protective factors.

Management – Treat the underlying cause Aim at high-risk individuals.

Prevention of Sub-Clinical Cases Improving physical and emotional health.

Lifestyle Modification Training, scanning individuals with opportunistic screening at family level where enhanced training is a must.

Conclusion – Suicide is a complex but multifactoral phenomena. Depression is the commonest treatable and preventable cause that is under-recognised and improving outcome should include screening and management prevention and finally strengthening family and society values.

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236. Challenges Bipolar Disorders

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Bipolar disorder is among the top ten leading causes disability in both developing and developed countries. The life rate prevalence of the Bipolar type 1 is 1%, while the prevalence of Bipolar spectrum is up to 6%. The onset of the disease is early adulthood and it is often misdiagnosed. The mean time from the first symptoms to the diagnosis is usually SEVEN years. 15% of patients commit suicide and substance abuse is up to 50%.

In the last 10 years new pharmacological treatments were evolved and educational programs were developed to improve the treatment and increase the awareness of Bipolar disorders.

This presentation will review the diagnostic skills, the use of MOOD STABILIZERS in acute manic - depressive episodes and in recurrence prevention. The family based Psychoeducational program and the Cognitive Behaviour Therapy that helps to minimize the risk of recurrence for people with bipolar illness will also be discussed.

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237. Psychotropic drugs and Intimacy dysfunction, Myth or Reality ? A Clinical-Psycho-Pharmacologist View.

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Introduction: Sexual disorders are frequent in patients with psychiatric disorders (Psy. Dis) Introduction of psychotropic drugs (PD) alleviates psychiatric symptoms but often aggravates the sexuality and the quality of intimacy (SQI). Arbitrary literature on the effect of PD on SQI is frequent. The objective of this study is to evaluate the association between the use of PD and poor SQI outcome.

Material and methods: We investigated in a 12 weeks follow up study by mean of face to face diagnostic interview 33 patients; 18 women (W) and 15 men (M), mean age 41 years. For sexual problems we used the french Auto-Evaluation Questionnaire for Sexual Problem (AEQSP) and get a screening before, on acute phase and after remission of Psy. Dis while continuation PD. Diagnostic according to DSM-IV criteria revealed: Depressive disorder (D) 21 (15 W / 6 M), Bipolar disorder (BP) 9 (1 W / 8 M), Psychotic disorder (Psycho) 2W and Anxiety disorder (A) 1 M. Patients received adequate dosage of SSRI, ADT for D, lithium and gabapentin for BP, risperidone, clozapine and pimozide for Psycho and SSRI for A.

Results: 3 patients (1W / 2 M) stopped all medication and lieved the study.

Psy. Dis are often associated with modification of sexuality. SQI is often decreased during D and enhanced in manic episode. Lithium in euthymic situation has no effect

on sexuality (1 W / 7 M) . In 13 W, (82 %) AEQSP after remission returned to the same level than before Psy. Dis. and in 1 W AEQSP worsened after remission. The same observation is noted in men but 4 of them needed simple intervention: association of yohimbine to dibenzepin, buspirone to citalopram, sildenafil to gabapentin and drug holiday for citalopram in addition to take SSRI after intercourse.

Conclusion: This study suggest that PD use do not modify SQI after Psy. Dis. remission and maintaining drug intake. PD seems to restore SQI to the level before Psy. Dis. Good SQI before Psy. Dis predicts favorable outcome while using PD. Some times, in men, mechanical difficulties could be handled with simple approach.

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238. Epidemiological Features of Legionnaires disease in 16 patients.

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Geneva, Switzerland

Context: Legionnaires' disease (LD) is a great matter of concern in the Public Health Institutions within Europe. There is many programmes of control and regulary publications / informations. An "Observatoire" of LD in Switzerland is held in Tessin.

Purpose of review: This review provides a specific data about the etiology, clinical characteristics, and prevention of community acquired legionnaires' disease (LD).

Design, Setting, and Participants: Epidemiologic investigation of cases of LD identified retrospectively from 1990 through 2002 in patients admitted to Geneva Medical Institutions (hospital and nursing home).

Results: There were 161 cases of LD, Median age was 58 (range, 2-91 years). The sex ratio was: men / women, 2:1. The incidence was 3.07 per 100.000 residents (range 3.40 in 1990 to 4.21 in 2002) and a global lethality incidence of 17.40 %. The 3 most important risk factors were: tobacco use (31 %), immuno-suppressiv conditions 21 % (AIDS, use of cortisone and related drugs and different forms of leukenmia) and alcohol abuse (14.50 %). A majority of patients (44.78 %) contracted LD after trips and journeys with swimming pool facilities and refrigerated air comnditions accomodations mostly located in Europe. Nosocomial infections accounted for about 30 % of the patients, cooling towers and others water systems were implicated. From 1997, the routine use of urinary antigen leeded to a rapid diagnostic and prompted the introduction of adquate treatment.

Conclusion: There are many challenges in preventing outbreak of LD in the community. Smoking and debilitaded patients by immuno-suppression and leukemia are at high rik. Surveillance of refrigerator towers and different water sources (swimming pools, bathes and air condition apparators etc...) should continue to prevent nosocomial infection. Some methods of control and surveillance of the quality of water will be discussed.

TOUTOUNGI Lina Naimé, Docteur ès Sciences. 1, Rue Monnier, CP 313, CH-1211 Genève 12 and Institut de Médecine Sociale et Préventive, Faculté de Médecine, Université de Genève, Genève, SWITZERLAND

239. First Episode Psychosis: Factors associated with delayed access to care in a rural Egyptian setting

نوبة الذهان الأولى: العوامل المصاحبة لتأخر بلوغ المريض رعاية الطب النفسي في منطقة من الريف المصري

Dr Mamdouh EL-Adl, Northamptonshire Healthcare Trust NHS, UK;
Dr Mohammed EL-Mahdy, AL-Azhar University, Egypt
and Dr Musheera Anis, Mansoura General Hospital, Egypt.

Aim: To identify factors associated with delayed access of individuals diagnosed with first episode psychosis (FEP) to psychiatric care.

Background: FEP studies show that average time between onset of symptoms & first effective treatment is often one year or more (McGlashan, 1998). This long duration of untreated psychosis (DUP) is undesirable. Early treatment helps minimise risk of serious consequences due to changes in mental state & behaviour (Wyatt et al, 1998; Larsen et al 1998); and can reduce sufferings (Ho et al, 2003).

Most FEP studies have been conducted in developed countries. This study addresses the question of FEP delayed access to care in a rural Egyptian setting and aims to identify possible causes.

Method: FEP cases presented to Psychiatric Department at Mansoura General Hospital over a period of 6 months and diagnosed according to ICD-10, were interviewed together with relevant others (family members/friends), using a semi-structured interview, either at first contact or after recovering from acute stage.

Main results:

Total number of cases 40: Schizophrenia 14, Affective disorder 15, Post-partum disorders 5 and others 6.

On average FEP cases have first contact with Psychiatric service about 7 months from onset: Schizophrenia: 11 months and Affective within 3 months.

Main factors associated with delayed access to Psychiatric service are:

Cultural factors (36%): Jinn "Spirit" (16%), preference to traditional healers (10%) and female gender (10%).

Lack of knowledge about mental illness and service (28%).

Stigma (14%)

Financial factors (14%)

Effect of mental illness (7.4)

Unsuitable service (0.6%)

Sources of referral: Family 45%, Friends 20%, GP 20% and others 15%.

Conclusion: The study results indicate that cultural factors, lack of knowledge about mental illness & available service, stigma and financial factors may play a significant role in delayed access of FEP to care.

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Internal Medicine الأمراض الداخلية

240. Advances in the Gastroenterology Endoscopy

Prof Dr. med Eckart Hahn
Director of Gastroenterology Department of the University Hospital in
Erlangen, Germany

241. Pathogenesis of Intestinal Carcinoma: Effect of diet and chemicals: Experimental and Clinical Evaluation

Prof. Majid Amin Alousi, Past President of Iraqi Medical Sciences
Association (USA)

The incidence of colon cancer (c-ca) in North America and Northwest Europe is high compared to East Africa, Asia and South America. Migrants who move from low risk areas (LRA) to high risk areas (HRA) assume c- ca rates of the HRA. This supports the epidemiological findings, which suggest that environmental factors play a role in causation of c- ca. Dietary differences between the two areas are thought to be a major factor. Populations of HRA consume diets high in animal proteins and fats (excess dietary energy) and accumulated epidemiological evidence reveals an association between the presence of insulin resistance and colon adenomas and carcinomas. The excess dietary energy leads to an increase in circulating insulin levels, tri-glycerides and non-esterified fatty acids. In addition, secretion of high levels of bile acids into a high anaerobic bacterial intestinal flora results in the metabolism of bile steroids into autogenous intestinal carcinogens in HRA. (The intestinal flora in LRA populations is high in lactic acid bacteria and low in anaerobic bacteria.) Colonic content comes in contact with the colonic mucosa which in HRA induces inflammation, releasing reactive oxygen intermediates which ultimately leads to DNA damage, cell death (apoptosis) or mutation leading to malignant changes. This presentation will show the findings I reported on resected colons as well as rat colons in which ca is induced by azoxymethane carcinogen. Cancer progression is initiated from surface dysplasia (low to high grade) and leading to carcinoma in situ and ultimately invasive carcinoma. The rat experimental model augments the epidemiological findings of c- ca.

Alousi Prof Majid Amin, MD Professor of Pathology Past president of Iraqi Medical Sciences Association (USA) Email: alisea@wideopenwest.com

242. Helicobacter Pylori Center a luxury or Necessity

Dr. Tarik Al-Zubaidy
Diagnostic bacteriology & Immunology. Faculty of Pharmacy & Health
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It is estimated that approximately two – third of world's population is infected with Helicobacter pylori (H. Pylori), which is a spiral – shaped bacterium that found in the gastric mucus layer or adherent to the epithelial lining of the stomach .

A wealth of information has shown that H. Pylori causes more than 90 % of duodenal ulcers and up to 80 % of gastric ulcers. Large audiences of scientist believe that infected persons have a 2- to 6- fold increased risk of developing gastric cancer and a mucosal – associated lymphoid –type (MALT) , lymphoma compared with their uninfected counter parts.

There are world wide spread of H. Pylori centers in the world offering their services to the communities.

Establishing H. Pylori center in Ajman University Network will be in the core of mission and the goals of innovated medical environment which is pioneered by H. E. Dr. Saeed A. Salman , AUST president, seeking for creation of medical team who will share in offering health care services to reach to the ‘ Healthy Society ‘ through health promotion , prevention and unique therapy . In addition , breaking the barrier between the academic entity and society , such as hospitals , regional and international institutes .

An outline will be presented for the services that H. Pylori center will offer to the staff members , students and community at large .

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243. EVALUATION OF SERUM IgG ANTIBODIES TO H.PYLORI, PEPSINOGEN-1, AND GASTRIN-17 IN PATIENTS WITH SOME OF UPPER GASTROINTESTINAL TRACT DISEASES

المضادلبكتيريا الهيلوكوباكثير بايلوري والبيسنوجين-Gتقييم مستوى الغلوبولين المناعي
والكاسترين-17 لدى المرضى المصابين ببعض أمراض الجهاز الهضمي العلوي

Dr.Adnan F.Ahmad Al-Najjar, Dr.Hazzim Hussein Edan, Sa'ad Saeed Salihe* Dr. Salah Abd-Alnabi*

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This study was carried out to investigate serum Immunoglobulin (IgG) level to H. pylori, G-17 hormone level, and PG-1 enzyme level in Iraqi patients with duodenal ulcer, gastric ulcer , chronic gastritis, and gastric cancer compared with healthy control groups and between them. This study included (130) patients with upper gastrointestinal tract diseases. (50) Duodenal ulcer, (10) gastric ulcer, (52) chronic gastritis, and (18) gastric cancer patients, with (25) healthy control

Group. Each patients were diagnosed endoscopically and blood sample were taken from each patient after endoscopic examination.

By using ELISA technique, serum level of IgG Ab to H. pylori showed a significant increase in patients with duodenal ulcer, chronic gastritis and gastric cancer as compared with control groups. In addition, serum level of PG-1 showed a significant increase in patients with duodenal ulcer, gastric ulcer, and chronic gastritis as compared with control group. However, serum level of PG-1 showed a significant decline in gastric cancer patients as compared with control group.

Serum level of G-17 showed a significant increase in patients with duodenal ulcer, gastric ulcer, chronic gastritis, and gastric cancer as compared with control group.

The present study also showed a significant correlation between the elevated serum levels of IgG Ab to H. pylori with high serum level of G-17 in gastric ulcer and chronic gastritis patients.

So we can concluded that H. pylori had a role in the development of these diseases, and H. pylori infection is associated with increases in PG-1 and G-17 concentrations in these diseases with exception of a decline in PG-1 level in gastric cancer patients which may be used to assist the diagnosis of gastric cancer.

تم تبني هذه الدراسة من أجل الكشف عن مستوى مصل الدم للغلوبولين المناعي (غلوبولين مناعي G) المضاد لبكتيريا الهيلوكوباكتر بايلوري ومستوى هرمون الكاسترين-17 ومستوى إنزيم البيسوجين-1 لدى مرضى عراقيين مصابين بقرحة الاثني عشر، قرحة المعدة، التهاب المعدة المزمن وسرطان المعدة بمقارنتها فيما بينها ومع أفراد المجاميع الضابطة.

شملت الدراسة (130) مريضاً مصاباً بأمراض الجهاز الهضمي العلوي (50 مريضاً مصاباً بقرحة الاثني عشر و10 مصاباً بقرحة المعدة و52 مصاباً بالتهاب المعدة المزمن و18 مصاباً بسرطان المعدة المشخص حديثاً)، بالإضافة إلى (25) شخصاً سليماً أدخلوا في الدراسة لغرض المقارنة كمجاميع ضابطة.

أجريت عملية التنظير لكل مريض، وشُخص بواسطة الناظور، كما تم أخذ عينة الدم من كل مريض بعد فحص الناظور. وباستخدام تقنية فحص مترابطة الخميرة بمادة ماصة المناعة (ELISA) تم تحديد المستويات المصلية لكل من الغلوبولين المناعي G المضاد لبكتيريا الهيلوكوباكتر بايلوري وهرمون الكاسترين-17 وإنزيم البيسوجين-1 عند (130) مريضاً مصاباً ببعض أمراض الجهاز الهضمي العلوي مقارنةً بالمجاميع الضابطة وكذلك تمت المقارنة بين المرضى أنفسهم.

سجلت المستويات المصلية للغلوبولين المناعي G ارتفاعاً معنوياً لدى المرضى المصابين بقرحة الاثني عشر والتهاب المعدة المزمن وسرطان المعدة مقارنةً بأفراد المجاميع الضابطة.

بالإضافة فقد سجلت المستويات المصلية لإنزيم البيسوجين-1 ارتفاعاً معنوياً لدى المرضى المصابين بقرحة الاثني عشر والمعدة والتهاب المعدة المزمن مقارنةً بالمجاميع الضابطة. بينما سجل مستوى إنزيم البيسوجين-1 في مصل دم المرضى المصابين بسرطان المعدة انخفاضاً ملحوظاً مقارنةً بنتائج الأشخاص الأصحاء.

أظهرت نتائج مستوى تركيز هرمون الكاسترين-17 للمرضى المصابين بقرحة الاثني عشر والمعدة والتهاب المعدة المزمن وسرطان المعدة أن هناك زيادة ملحوظة في مستوى هذا الهرمون لدى هؤلاء المرضى مقارنةً بنتائج الأشخاص الأصحاء.

أظهرت الدراسة الحالية أيضاً وجود علاقة طردية مهمة بين مستوى الغلوبولين المناعي G المضاد لبكتيريا الهيلوكوباكتر بايلوري مع مستوى هرمون الكاسترين-17 لدى المرضى المصابين بقرحة المعدة والتهاب المعدة المزمن

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244. A State of the Art Review Hematology.

عرض عام عن الوضع الحالي والراهن في الأمراض الدموية

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245. AGEMENT OF TUBERCULOSIS

التدبير المثالي لمرض السل

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College of Medicine, Tikriet University, Iraq

Background: Tuberculosis is considered as a socio medico clinical problem in Iraq with annual risk of infection of 1.5%.the incidence of smear positive pulmonary tuberculosis is 41 per 100000 populations. Since 1978 Iraqi national program depends on passive case finding and ambulatory domiciliary treatment with short course chemotherapy of 6-9 month duration achieving 35% detection rate of case finding measure and cure rate of 50-70 % in the last decade.

Aim and Objectives: To determine the impact of DOTS in the management of tuberculosis after its implementation in Iraq.

Methodology: Estimation of case detection, cohort analysis study of 267 new cases registered at tuberculosis institute during the year 2000 with smear positive pulmonary tuberculosis. The diagnosis depends on 3 occasion smear examination of sputum and CXR They were treated with DOTS strategy, category 1(2HRZE/4HR)and evaluated by sputum examination which is done for acid fast bacilli detection on the end of 2nd,4th and end of treatment

Results: The success rate of treatment was 88% .out of patients evaluated,198 of them 74% were cured, while those who completed the duration of treatment without having sputum examination at the end of treatment were 37 patients(14%).,treatment failure in 12 patients(4%), defaulters were representing 4.5%.The sputum conversion rate was 90.8%.

Conclusion: With these satisfactory results (success rate 88% and sputum conversion rate 90.8%), the DOTS strategy can be successfully implemented in Iraq

Saleh Dr Qassim Abdul jabbar, College of Medicine, Tikriet University, Iraq

246. Nutritional anaemia in Yemen

فقر الدم الغذائي المنشأ في اليمن

Dr. Basaharaheel , Sanaa, Yemen

The countries of the EasternMediterrance Region are facing a multitude of nutritional problems, all having a cummulative effect on physical and intllectual developement which affects work performance and socio-economic developement.

The Nutritional anaemia in Yemen affects about 36% of prgnant women in urban areas and up to 70% in Rural areas.There is limited information on the type and nutritional value of local foods and traditional meals.

The Important causes of Nutritional anaemia in our study are childbearing, and lack of nutritonal value of of foods, and irrigrular visiting of pregnant women to M C H centres and low intake for Iron supplementation during pregnancy

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Heart Disease الأمراض القلبية

247. National Service Framework for Coronary Heart Disease (NSF – CHD) & MINAP (Myocardial Infarction National Audit Project)

الخدمات الوطنية لتدبير الداء الإكليلي والاحتشاء الحاد عند البالغين

Mrs Eman H Al-Waidh

NSF Coordinator, Clinical Auditor

Surrey and Sussex Health care NHS Trust-UK

“Winning the War on the Coronary Heart Disease”

CHD is among the biggest killers in the U.K. More than 1.4 million suffer from angina, 300,000 have heart attacks every year, and over 110,000 die of heart problems in England every year. For this reason, the Government have identified heart disease as a top priority, and set a target of reducing the death rate by at least 40% by 2010.

Much hard work resulted in the development of a radical and far-reaching ten year programme aimed at transforming the prevention, diagnosis and treatment of coronary heart disease (CHD).

The MINAP (Myocardial National Audit Project) began when a broadly based steering group developed a data set for acute myocardial infarction. This allowed clinicians to examine the management of myocardial infarction within their hospitals, against targets specified by the NSF for CHD.

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248. Biochemical Markers for Acute Coronary Syndrome

العلامات المخبرية لتناذر الداء الإكليلي الحاد

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249. Guidelines For Treating Hypertension in 2004: What’s New?

الجديد في معالجة ارتفاع التوتر الشرياني والتصنيف العالمي لها

Dr Baha Al-Wakeel

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Hypertension is a common cause of morbidity and mortality worldwide, with an estimated UK prevalence of 37%. Whilst there are a multitude of different management options available, tailoring the appropriate evidence based therapy to the individual is often problematic. In light of the above, an aggressive yet systematic approach to both primary and secondary prevention measures are key to tackling this global problem. To this end the British Hypertension Society has convened numerous meetings; 1989 1993 1999 and most recently 2004. This article summarises the latest guidance for the

management of hypertension as outlined in the report produced by the fourth working party of the British Hypertension Society (BHS IV). The main changes between the 1999 and 2004 guidelines are:

The use of 'AB/CD' pharmacotherapy. Patients are stratified in terms of race and age, with those under 55 and non-black being treated with ACE inhibitors or beta blockers, whilst those who are either black or over 55 being treated with calcium channel blockers or diuretics. Plasma rennin levels underlie these recommendations

Risk assessment for primary prevention is no longer only aimed at preventing coronary heart disease. New risk tables have been produced that seek to prevent all forms of cardiovascular end points, including stroke. In patients with coexisting diabetes, treating hypertension is no longer considered a primary prevention measure; it is now considered as secondary prevention. Furthermore, in light of the UK Prospective Diabetes Study (UKPDS), the target blood pressure in patients with diabetes has been lowered.

Finally this article discusses the relationship between hypercholesterolaemia and hypertension, noting that in addition to being additive cardiovascular risk factors, hypercholesterolaemia may be causally implicated in the development of hypertension.

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250. CAROTID ENDARTERECTOMY UNDER LOCAL ANAESTHESIA; EFFECT OF CONTRALATERAL CAROTID DISEASE ON BLOOD PRESSURE INSTABILITY.

استئصال العصيدة من الشريان السباتي بالتخدير الموضعي في مرضى ارتفاع الضغط الغير المستقر

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Backgrounds: It is believed that carotid endarterectomy (CEA) under local anaesthesia (LA) preserves cerebral autoregulation; however some patients suffer from blood pressure instability during this procedure. We studied the variation in blood pressure during CEA under LA in relation to presence of contralateral carotid stenosis (CCS).

Methods: Forty-two patients, 15 female and 27 male, with median age of 73 years (ranges from 50-83) were included in this study. Twenty-nine patients were hypertensive. Sixteen patients had significant CCS (i.e. stenosis > 70%), 9 had 70-89% stenosis and 6 had >89% stenosis (two had >95% and 4 had 100% occlusion). Arterial blood pressure measured invasively throughout the procedure. The differences between highest MAP and lowest MAP records were calculated and analyzed using statistical package (SPSS).

Results: The mean preoperative MAP was 99.4 ± 12 , there was no significant difference in preoperative MAP between hypertensive (mean = 101 ± 10) and normotensive patients (mean = 98.7 ± 12) $P = 0.57$. There was no significant difference in preoperative MAP between patients who had significant CCS (mean 103 ± 14) and those with insignificant CCS (i.e. stenosis < 70%) (Mean 92.6 ± 21) $P = 0.21$. There was no significant difference in the degree of perioperative MAP instability between patients with significant CCS and those with insignificant CCS, $P > 0.05$. However patients with

CCS of more than 89% showed higher degree of perioperative MAP instability compared to those with insignificant CCS, $P = 0.034$.

Conclusion: Our data showed that CCS >89% associates with significant blood pressure instability during CEA under LA.

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251. Interaction between isoleucine intake and the content of cardiac arginine in the rats

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The influence of the chronic intake of isoleucine on free amino acids in the heart and the plasma after long-term administration of rats were investigated, using an automatic LKB Amino Acid Analyzer [Biochrom Ltd., Cambridge, England]. Feeding isoleucine intake 100 mg/kg/day for 14 weeks significantly elevates the contents of aspartate, glutamine, alanine, ornithine, lysine and histidine in the cardiac tissues. These increases are concomitant with completely abolishing the content of arginine and a significant decreased in the content of tyrosine. Under the same conditions chronic oral treatment of rats with isoleucine 100 mg/kg/day for 14 weeks significantly elevated the plasma levels of glycine, alanine, leucine, tyrosine and arginine

These results indicated that mobilization of the cardioprotective amino acids in the cardiac tissue along with the abolishing of arginine in the cardiac tissues are concomitant with an increase in free arginine in the plasma. These changes remain important from a physiological standpoint in myocardium metabolism and function. Thus, this finding of the current study provides physiological data indicating that isoleucine may be beneficial particularly in protecting the myocardium against insulting stress and other stimuli that precipitate ischemia and arrhythmias and these result also explain the fact that isoleucine is involved in stress, energy and muscle metabolism

Keywords: Isoleucine, Amino Acid Analyzer, Cardioprotective amino acids, Rats

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252. Evaluation of serum myoglobin in patients with acute myocardial infarction

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Iraq.

For several decades, the diagnosis of acute myocardial infarction (MI) was based on characteristic clinical history, specific ECG changes and elevation of relevant serum enzymes.

Serial determination, namely, the release of SGOT by the liver and kidneys, of LDH by the lungs and RBCs and of CPK by the brain and muscles.

The evaluation of both CPK&LDH isoenzymes has led to specific diagnosis with the MB fraction of CPK.

In an attempt to find amore sensitive chemical marker of acute MI ,serum myoglobin (MG) was compared with total CPK & MB-CPK in 20 patients with acute MI and in 12 subjects (controls) .Samples were drawn on admission within the first 4, 12, 24, 48 hours of the onset of the chest pain.

Serum (MG) (Latex Agglutination) start to rise 2-4 hours, attains a peak value of 12 hours and start to decline after 36 hours from the onset of pain.

The corresponding value for CPK-MB were attained later (rising after 8-12 hours), peaking at 12-24 hours and starting to decline after 48 hours.

Serum (MG) showed higher sensitivity as compared with CPK-MP, other advantage included lower cost, lesser time and the possible measurement in haemolysed samples. The extent of increasing of serum (MG) reflects the extent of myocardial damage.

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253. HYPERGLYCAEMIA FOLLOWING ACUTE MYOCARDIAL INFARCTION ; THE CONTRIBUTION OF STRESS AND DIABETES MELLITUS AND THEIR RELATION TO OUTCOME

تزايد مستوى السكر بعد الاحتشاء الحاد دليل على سير المرض

Dr Jasim Mohamed T Al-Hayal

Abstract :assessment of the glycaemic state was performed by measuring plasma glucose and serum fructosamine concentrations in 62 patient with confirmed acute myocardial infarction .twenty six percent of non diabetic patient showed hyperglycaemia on admission .marked increase in serum cortisol level was observed which was significantly higher in the hyperglycaemic non-diabetic and diabetic patient than non-diabetic patient with normoglycaemia .asignificant correlation was found between admission serum cortisol and plasma glucose in the non-diabetic group.

Threr was no significant difference in infarct size as assessed by peak serum aspartate transaminase activity between nin-diabetic and diabetic patient .

No significant correlation was found between peak aspartate transaminase activity and admission cortisol level in the non-diabetic and diabetic .astepwise increase in the frequency of arrhythmia in the hyperglycaemic non-diabetic and diabetic patient ,and of pump failure and heart block in diabetic patient was demonstrated.

Diabetes mellitus is an independent risk factor in the development of cornary heart disease .acute myocardial infarction (AMI) is associated with higher mortality in the diabetic than in the non-diabetic patient;the metabolic derangment that accompanies AMI may be a responsible cofactor. Hyperglycaemia may also develop in some AMIpatient as part of the metabolic response to stress. It is, therefore, important to be able to establish the origin of the hyperglycaemia in these patient by measuring, in

addition to blood glucose, another index of the glycaemic state, namely glycated haemoglobin or glycated serum proteins. Recently, serum fructosamine assay, a novel colorimetric assay of glycated serum proteins, has been described as an intermediate term index of glycaemic control that may be used for this purpose.

The aim of the present study was to evaluate the changes of plasma glucose and their effect on the progress in non-diabetic and diabetic patient who develop complications following AMI.

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254. Effects of ARBs on regression of left ventricular hypertrophy in patients with essential HYPERTENSION.

تأثير التيلمستتان او الكاتستران في تراجع ضخامة البطين الأيسر في مرضى ارتفاع التوتر الأساسي

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Background : Left ventricular hypertrophy (LVH) represents an independent risk factor in patients with essential hypertension.

Objectives : Reversal of LVH may be associated with an improvement of prognosis so the effects of new antihypertensive drugs such as AT1 receptor blockers on LVH should be determined .

Methods and Results : In a randomized double blind trial, 50 previously untreated hypertensive patients with echo-cardiographically proven LVH, ie, left ventricular mass index (LVMI) >134 g/m² in men and >110 g/m² in women and or end-diastolic septal thickness >12 mm, received either telmisartan or candesartan for 6 months. After 6 months of telmisartan treatment (n=30), LVMI decreased from 148 ± 20 to 105 ± 21 g/m² (p<0.01 versus baseline). Under candesartan (n=20), LVMI decreased from 147 ± 20 to 106 ± 22 (p<0.01 versus baseline). No significant differences were found between the effects of telmisartan and candesartan on LVMI .

Conclusions : Telmisartan and candesartan treatment for 6 months produced a significant regression of LVH in patients with essential hypertension .

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البوستر | Poster Session I

255. Establishment of base level concentration of inorganic chemical in domestic water in UAE as compared to the WHO drinking water standards

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256. Prevalence of Mitral Valve Prolapse among Patients with Sickle Cell Anemia

احتمالية الإصابة بتهدل الصمام التاجي في مرضى فقر الدم المنجلي

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Sickle cell anemia is inherited disorder characterized by chronic hemolytic anemia and vasoocclusive crises. Bone and connective tissue are frequent sites of injury by sickling process. There was conflicting reports regarding the prevalence of mitral valve prolapse in patients with sickle cell anemia

The aim of this study was to determine the prevalence of mitral valve prolapse among patients with Sickle Cell Anemia in Basrah (South of Iraq).

A comparative study was done on 100 subjects, 50 patients and 50 healthy control through the period from February 2002-October 2002.. All subjects underwent M mode and two-dimension echocardiography using 2-4 MHZ sector probe (Kertz technique volusion 530D). Both American and recently adopted criteria were used for diagnosis of mitral valve prolapse.

Out of one hundred subjects were included in this study, mitral valve prolapse was more prevalent in-patients with Sickle cell anemia (34%) than control group (4%). It was more common in females (64.7%) than in males (35.3%). These differences were statically significant. There were no significant differences in LV size and function between patients and control groups or between the sickler patient with and without mitral valve prolapse.

In conclusion: The prevalence of mitral valve prolapse was higher in the patients with sickle cell anemia. We believe that Sickle cell anemia affects the connective tissue of mitral valve apparatus leading to prolapse of the mitral valve leaflets.

Key word: prevalence, mitral valve prolapse, sickle cell anemia

فقر الدم المنجلي مرض وراثي يتميز بنقص الدم الناتج عن تكسر كريات الدم الحمر مع نوبات انسدادات وعائية. العظام والأنسجة الرابطة هي الأكثر عرضة للتأثيرات المنجلية. ،هناك تضارب في الدراسات الحديثة حول العلاقة بين فقر الدم المنجلي وتهدل الصمام التاجي

الهدف من هذه الدراسة : هو لتحديد احتمالية تهدل الصمام التاجي بين مرضى فقر الدم المنجلي. أجريت دراسة مقارنة على ١٠٠ شخص، ٥٠ مصاب بمرض فقر الدم المنجلي ٥٠ شخص صحيح متناضرين في الجنس والعمر للفترة من شباط ٢٠٠٢ إلى أيلول ٢٠٠٢..

-المرضى الذين لديهم أمراض خلقية في القلب، أمراض الصمامات، أو عدم كفاءة الدورة الدموية القلبية تم استثنائهم من هذه الدراسة، كل الأشخاص اجري لهم فحص بجهاز مخطاط صدى القلب أحادي وثنائي البعد وباستخدام مسبار بتردد ٢-٤ ميكا هرتز تقنية كرتز.تم اعتماد خصائص الجمعية الأمريكية و خاصة حديثة أخرى معتمدة في تشخيص تهدل الصمام التاجي.

أثبتت هذه الدراسة أن تهذل الصمام التاجي هو أكثر شيوعاً في مرض فقر الدم المنجلي (٣٤%) منه في مجموعة السطوة (٤%). كما لوحظ أن الإصابات أكثر شيوعاً في الإناث (٦٤,٧%) منه في الذكور (٣٥,٣%). وكانت هذه الفروقات ذات مدلول معياري مهم. كما لوحظت الدراسة عدم وجود تغيرات ذات مدلول معياري في حجم أو وظيفة البطين الأيسر في مرض فقر الدم المنجلي و مجموعة السيطرة أو في مرض فقر الدم المنجلي الذين لديهم والذين ليس لديهم تهذل الصمام التاجي. في الخلاصة أن النسبة العالية العلية لتهذل الصمام الإكليلي في مرضى فقر الدم المنجلي ذات المدلول المعياري المهم يقودنا إلى الاعتقاد بان مرض فقر الدم المنجلي يؤثر على الأنسجة الرابطة للصمام التاجي وبالتالي يقود إلى تهذل الصمام. مفتاح الكلمات: تهذل الصمام التاجي. فقر الدم المنجل ، احتمالية الإصابة

Al-Humrani, Dr Abdul Raheem Hassen.. **عبد الرحيم حسن الحمراي**. M.B.Ch.B. D.M, C.A.B.M. Assistant Professor of Medicine, Head of Department of Medicine, Basrah university, Basrah. Iraq, E-Mail: aralhumrani@yahoo.com

Farhan Dr. Mohammed * **محمد راضي فرحان** This condenses part of A thesis Submitted to the Iraqi Commission for Medical Specialization in Partial Fulfillment of the Requirement for the Degree of Fellowship of Medicine

257. THE METABOLIC SYNDROME – A POSTPRANDIAL DISEASE

التأثر الاستقلابي

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Introduction: The metabolic syndrome as an epidemic was first observed in the time of baroque in Saxony when opulent eating and low physical activity were typical life style in upper classes. Today in affluent societies with a dinner culture the postprandial phase lasts about 20 hours per day. There is now more and more evidence that the metabolic syndrome starts with complex derangements in hormonal and metabolic regulation in the postprandial phase. Abdominal obesity and deficits in physical fitness escalate a vicious cycle which leads to impaired glucose tolerance and finally type 2 diabetes at the one side and endothelial dysfunction and cardiovascular diseases on the other side.

Aim: Better definition and intense study of "Prediabetes" and the Metabolic Syndrome have led in the last decade to some important insights:

- "Prediabetes" and the Metabolic Syndrome are extremely prevalent
- People with "Prediabetes" and the Metabolic Syndrome are at high risk for diabetes and CVD and are the ideal target population for prevention programs
- There are safe, potentially effective, interventions, which can affect modifiable risk factors
- Intensive lifestyle interventions are efficacious and should be encouraged. However, they may be difficult to broadly apply and/or sustain
- Effective pharmacological therapies must also be identified

Conclusion: The primary goal of treatment for metabolic syndrome is to prevent the development of type 2 diabetes, heart attack and stroke. Usually, this can be

accomplished with an aggressive regimen of self-care strategies focusing on diet and exercise.

Keywords: Syndrome X , Metabolic Syndrome, Prediabetes

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258. THE SIGNIFICANCE OF MODIFIED LATEX AGGLUTINATION WITH 2-MERCAPTO-ETHANOL (2ME) TEST IN DIFFERENTIATION BETWEEN ACUTE AND CHRONIC TOXOPLASMOSIS

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Different serological tests often measure different antibodies that possess unique patterns of rise and fall with time after infection. A combination of serological tests is frequently required to establish whether an individual has been more likely infected in the distant past or has been recently infected.

This study was carried out in Kirkuk Hospitals and Primary Health Care Centers to detect Toxoplasma antibodies among 319 pregnant women aged from less than 18 to more than 35 years old. The period of study was from beginning of November 2003 to end of May 2004.

The study showed that 117 case out of 319 was positive for Toxoplasma gondii (36.6%) by using LAT, 54 case out of 319 was positive for IgM- ELISA (16.9%) and 66 out of 117 was positive for 2ME test (56.6%).

The total serum protein and serum albumin did not vary significantly between seropositive and seronegative toxoplasmosis, but the serum globulin level was elevated in Toxoplasma seropositive cases.

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GHALIB , AYL KHEDEHER. F.I.C.M.S., KIRKUK UNIVERSITY, KIRKUK.

OTHMAN NAZAKAT FAKHRADDIN, MS.C, DIRECTORY OF HEALTH, KIRKUK.

259. Serum Creatinine and Microalbuminuria:as Sensors of Cardiovascular Risk

زيادة الكرياتينين في مصل الدم وظهور البيلة الالبومينية فحصان منذران للاصابة بالنوبات القلبية الوعائية

Dr.Mohammed Jamil Al-Habbal (Consultant Physician and Nephrologist) , Mosul-Iraq

It is well known that cardiovascular (CV) system is profoundly affected in many diseases,like essential hypertension (HTN), chronic renal failure (CRF), diabetes mellitus (DM),and collagenosis e.g SLE. This is secondary to higher frequency of: 1.

Atherosclerotic heart disease. 2. Left ventricular hypertrophy. 3. Congestive heart failure. 4. Stroke (CVA)

SERUM CREATININE (S.Cr) values above the cutoff point of 1.5 mg/dL, and /or MICROALBUMINURIA more than 30 microgm/min (more than 43 mg in 24 hours of urine), are early and sensitive predictors of CV diseases.

They represent a generalized vascular disorder due to increased endothelial permeability leading to elevated risk of CV events.

All data reinforce the need of these two parameters of renal function commonly used in daily practice, as potent sensors for the appearance of CV events in patients of a higher risk. Detection of these warning markers indicate the development of nephropathy, which need prompt control of the primary disease. Thus prevention and/or reduction of CV events and death.

Conclusion: The kidney is a mirror and a sensor of cardiovascular status

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260. THE EFFECT OF SOME SOCIAL AND BIOLOGICAL FACTORS ON THE VALUES OF SERUM GLUCOSE, CHOLESTROL AND URIC ACID.

Dr. Razak J. AL-Essa

The effect of some social and biological factors namely, marital status, alcohol consumption, genetic factors, the effect of body weight and quetelet index on the values of serum glucose, cholesterol and uric acid were studied. The striking finding is that the genetic factors of family history of diabetes mellitus, hypertension, myocardial infarction and sudden death do not operate before the 5th decade in females. In males there was a strong effect of genetic factors.

تم دراسة بعض العوامل الاجتماعية و البيولوجية كالحالة الزوجية، تناول الكحول، العوامل الوراثية، وزن الجسم، والعامل الايضى على مستوى السكر والكولسترول و حامض البوليك. في عينة عشوائية من ٣٦٨ مواطن عراقي من سكة محافظة النجف. أظهرت النتائج أن عامل التاريخ العائلي لأمراض السكر، ضغط الدم، احتشاء العضلة القلبية والموت المفاجيء ليس له تأثير في الإناث قبل العقد الخامس من العمر أما الذكور فإن التأثير كان واضحا

AL-Essa Dr. Razak J. Email: razakalessa@yahoo.com

261. EFFECT OF IRON DEFICIENCY ANEMIA ON SOME LIVER ENZYMES LEVELS IN THE ADULT MALES

دراسة تأثيرات مرض فقر الدم التغذوي بسبب نقص الحديد على مستويات بعض الإنزيمات الكبدية

Yesar M.H. Al-Shamma, Heider H.A. Al-Heidery

Department of Physiology, College of Medicine, Kufa University.

The main purpose of this study was to study the effect of nutritional iron deficiency anemia on levels of some liver enzymes (Alkaline Phosphatase, Alanine Aminotransferase, and Aspartate Aminotransferase) in the age of 20-50 years adult

males (105 patients and 90 normal persons as a control group) which were divided into three subgroups according to the age with ten years interval for each subgroup (20-30, 31-40, 41-50) years

The principal conclusion of the study was the inversely significant relation between serum iron level and Alkaline Phosphatase ($P < 0.001$) from one side, and from the other side with aminotransferases (Alanine Aminotransferase and Aspartate Aminotransferase) ($P < 0.05$) for all age groups of this study.

إن الهدف من الدراسة هو دراسة تأثيرات مرض فقر الدم التغذوي بسبب نقص الحديد على مستويات بعض الإنزيمات الكبدية (ALP, ALT and AST) في الذكور البالغين الذين تتراوح أعمارهم بين ٢٠-٥٠ سنة وعددهم ١٠٥ مريض و٩٠ من الأصحاء كمجموعة سيطرة) والذين قسموا إلى ثلاثة مجاميع فرعية وكلتنا المجموعتين الرئيسيتين وبصورة متساوية وحسب العمر حيث تكون فترة كل مجموعة فرعية هي عشرة سنوات (٢٠-٣٠، ٣١-٤٠، ٤١-٥٠ سنة).

لقد كان الاستنتاج الرئيسي للدراسة هو وجود علاقة عكسية ذات معنوية عالية احصائياً بين حديد المصل وإنزيم ALP ($P < 0.001$) من جهة ، وبين حديد المصل وإنزيمي AST, ALT ($P < 0.05$) من جهة أخرى.

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262. Assessment of Metforman on Lipid profile in included hyperlipidimic rats

Dr.Jabbar Yassir Al-Mayah

Diabetes mellitue and hyper lipideinwiy both are independent risk factors for coronary heart disease which is a major killer worldwide .

This study explains the effect of metforman on lipid profile in rats .

Thirty rats were allocated randomly into 3 groups, each group inclnde 10 rats .

One group was put on normal chew diet for 16 weeks and reserved as normal control group. the other 2 groups were given high fat diet for 8 weeks . The blood samples were collected from these 3 groups before commencing treatment . Serum lipid profile namely . TG, TG , LDL, VLDL and HDL were measured and thier results revealed that all group became hyperlipidemic . One group received distilled water and served as hyperlipidemic cautrol . The 2nd group received Metformin . The groups were kept one fat rich diet for another 8 weeks . The serum lipid profetes were checked triglycerid ;Metformin showed a highly significant reduction of serum TG level ($p<0.01$) and significant reduction of total cholesterol ($p<0.05$)

-After these results , can conclude the following .

-Metformin significantly decrease TG,TC,LDL.VLDL cholest

Al-Mayah Dr.Jabbar Yassir

263. Cancer Treatment.

مستجدات علاج السرطان

Dr Layth Yahya Ibrahim Al-Hussainie

Mosul University Medical College, Iraq

Aim of the Research: Prsention of the Latest Cancer Treatments. Research Justifications: the poor therapeutic treatments of Cancer and treatment outcomes justified this research work in this area. Research Method: Presentation of course material that I attended in the National Cancer Centre in Tokyo, Japan, 13 Sep- 19 Nov 2004. Research Review: this can demonstrated from these headlines, The Cancer treatment include four traditional ways, Surgery, Chemotherapy and Biologic Therapy, Radiation therapy, Combined treatment, beside some of other new approaches in Cancer Treatment. Also I demonstrated information about the Cancer Stastics in Japan, and hints about the information technology Systems in Oncology, Research Findings: the importance of improving Cancer treatment Centres. the importance of improving the research activities in this area. the importance of the therapeutic trials. the importance of the Informed consent sessions between the patients and the physician.

Key Words: Cancer, Treatment.

مستجدات علاج السرطان

هدف البحث:- استعراض آخر مستجدات علاج السرطان.

ميررات البحث:- قدم الوسائل العلاجية المتوافرة عندنا في العراق، وانعدام البحث العلمي في حقل السرطان في العراق.

طريقة البحث:- استعراض علمي للدورة العملية التي حضرها الباحث في المركز القومي للسرطان في طوكيو/اليابان.

استعراض البحث:- أقيمت الدورة في الفترة من ١٣ أيلول ولغاية ١٩ تشرين الثاني ٢٠٠٤، وقد تركزت على العلاج الإشعاعي للأورام، مع تضمناها أيضا لمعلومات تخص الأساليب الأخرى في علاج السرطان، والتي يمكن إجمالها بأربعة أساليب رئيسية وهي العلاج الجراحي، العلاج الإشعاعي، العلاج الكيماوي والعلاج البايولوجي، وأساليب أخرى جديدة. كذلك تم التطرق إلى بعض الإحصائيات السرطانية عن اليابان وبعض التقنيات العلمية الحديثة في الأنظمة الصحية.

نتائج البحث:-

١- ضرورة الاهتمام بتحسين الأساليب العلاجية للسرطان في منطقتنا العربية.

٢- ضرورة الاهتمام بالبحث العلمي السرطاني.

٣- ضرورة الاهتمام بالتجارب العلاجية في معالجة السرطان.

٤- ضرورة مناقشة المريض وذويه فيما يخص العلاج السرطاني وأشكاله والمال وما إلى ذلك من الأمور المتعلقة.

كلمات البحث:- السرطان، العلاج.

د. ليث يحيى إبراهيم الحسيني، طبيب مقيم أقدم أورام في جامعة الموصل، كلية طب الموصل، مستشفى الأورام والطب النووي في مدينة الموصل الطبية في الموصل، ص.ب.(٣٢٢)، الموصل، العراق.

Ibrahim Dr Layth Yahya Department of Radiology, , Oncology Section , Mosul University, Medical College, Mosal Iraq, Mosul, P.O.Box 322, Tel: 00 964 770 162 5670, Email: drlaythyahya@yahoo.com or drlaythyahya@maktoob.com

264. Mono polar diathermy versus ligaclips for cystic artery occlusion during laparoscopic Cholecystectomy

مقارنة ما بين استعمال المشروط الكهربائي الوحيد القطب مع الكليس المعدني في إغلاق الشريان المراري في عمليات التنظير

Dr. Muzahim Al-Khyatt Dr. Samir I. Al-Saffar Hesham Al-Attrakchi
Mosul Hospital , Iraq

Background: The blockade against Iraq since 1990 was resulted in great difficulties with the availability of medical supplies. The shortages in ligaclips was the main reason for trying this method of monopolar diathermy coagulation (MDC) for cystic artery control and division.

Objective : To compare cystic artery occlusion during laparoscopic Cholecystectomy (LC) by (MDC) versus ligaclips.

Design : prospective randomized trial .

Setting : Mosul Hospitals of Iraq .

Intervention: LC for chronic and acute cholecystitis.

Out come measures: safety, conversion, and total length of operation, bleeding episodes and complications.

Method: This study was conducted in two stages. In the first stage MDC was tried only in certain selected patients, females, young ages, normtensives, not in acute cholecystitis, and not diabetics. The second stage was conducted after evaluating the results of first stage which was encouraging and so MDC was applied non-selectively for patients who planned to undergo LC and the selection was randomly performed prior to the operation when the patients were grouped either to undergo MDC or ligaclip for the control of cystic artery.

Results: Bleeding events were similar between the two groups and these bleeding episodes during or after cystic artery occlusion were not the cause of conversion to open procedure. Total length of operation time was nearly the same between the two groups. No blood transfusions were required in both groups . There was no bile duct injury and no second (post operative) laparotomy in this study.

Conclusion: The standard technique of cystic artery occlusion is by ligaclips, the alternative effective way is by MDC which is found to be safe and carries a potential cost advantage over clips in the authors institution in the presence of blockade.

Key wards : laparoscopic Cholecystectomy , cystic artery , mono polar diathermy coagulation , vascular ligaclips

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265. Diagnosis and therapeutic implications of the cranio-cervical arterial dissection, dural sinus thrombosis and pituitary apoplexy."

T. Stadnik & W. Shabana

Department of Radiology, AZ VUB Brussels, Belgium

Three nontraumatic neurologic emergencies encountered by the emergency department radiologist will be presented, with an emphasis on clinical features and imaging findings that aid in the diagnosis.

Dural Sinus Thrombosis

The major entities with which dural sinus thrombosis can be confused on clinical grounds are migraine headache and pseudotumor cerebri. Early identification of dural sinus thrombosis is important and may be lifesaving.

CT and MR imaging play a fundamental role in distinguishing dural sinus thrombosis from these entities.

CT features of dural sinus thrombosis include a hyperdense dural sinus on unenhanced CT and an unenhanced central portion of the affected sinus after administration of contrast material (the "empty delta" sign). However, the diagnosis of dural sinus thrombosis is often difficult to establish on CT for a number of reasons.

MR imaging offers substantial benefits over conventional CT in the diagnosis of dural sinus thrombosis. On MR imaging, dural sinus thrombosis is manifested by replacement of the flow void of the dural sinuses or major veins by abnormal signal intensity. However, the diagnosis of dural sinus thrombosis may be also difficult to establish on MR.

CT venography is a recently developed imaging study that offers greater sensitivity and specificity than routine contrast-enhanced CT and MR in the diagnosis of dural sinus thrombosis.

Dissection of the Cervicocephalic Arteries

Patients typically present with headache or neck ache. Because headache and neck ache are nonspecific and common in the general population, the diagnosis of arterial dissection is often delayed. However, dissection of the cervicocephalic arteries is a neurologic emergency because of the increased risk of cerebral infarction.

MR imaging has replaced catheter angiography for the diagnosis of arterial dissection at many institutions. The development of CT angiography using helical techniques offers a good alternative to MR in the diagnosis of arterial dissection.

Pituitary apoplexy

Patients typically present with headache, photophobia, stiff-neck, altered consciousness and convulsions. The pituitary apoplexy may be confused with meningitis or subarachnoid hemorrhage! In this condition MR remains superior to CT.

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266. ARTHRITIS RHEUMATOID AND HOMEOPATHY TREATMENT

التهاب المفاصل والعلاج بالطب المثيل
Dr Ossame Yosef

الدكتور اسامة يوسف Yosef Dr Ossame

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267. Mono polar diathermy versus ligaclips for cystic artery occlusion during laparoscopic Cholecystectomy

مقارنة ما بين استعمال المشروط الكهربائي الوحيد القطب مع الكلبس المعدني في إغلاق الشريان المراري في عمليات التنظير

Dr. Muzahim Al-Khyatt Dr. Samir I. Al-Saffar Hesham Al-Attrakchi
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Results: Bleeding events were similar between the two groups and these bleeding episodes during or after cystic artery occlusion were not the cause of conversion to open procedure. Total length of operation time was nearly the same between the two groups. No blood transfusions were required in both groups . There was no bile duct injury and no second (post operative) laparotomy in this study.

Conclusion: The standard technique of cystic artery occlusion is by ligaclips, the alternative effective way is by MDC which is found to be safe and carries a potential cost advantage over clips in the authors institution in the presence of blockade.

Key wards : laparoscopic Cholecystectomy , cystic artery , mono polar diathermy coagulation , vascular ligaclips

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268. HYDATID DISEASE OF THE HEART, A REPORT OF THREE CASES AND REVIV OF LITERATURES

عرض ٣ حالات عن إصابة القلب بالأيشينو كوكين

Abdul Raheem H. Alhumrani, Hussein Ali Alchalbi
Medical College, Basrah University, Iraq

Cardiac echinococcosis is rare disease even in countries where the hydatid disease is endemic. The involvement of the heart itself is reported to range between 0.5 and 2% of cases of Echinococcosis.

Three patients with cardiac hydatid cyst were reported in this study, their age ranged from 16 to 55 years. One pt had multiple hydatid cysts, which involve the interventricular septum, this pt had polyvisceral involvement, of liver, spleen, lung and kidney that were removed surgically. The other two pts had pericardial cyst that removed surgically. Trial of albendazole was given to pt with interventricular hydatid cyst but failed. Cross sectional chocardiography is the best diagnostic procedure for cardiac hydatid disease.

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269. A clinical evaluation of automated blood pressure measurement using Eagle 4000 patient monitor

Dr Yesar Al-Shamma; Safaa Ali Khudhiar; Zehraa Al-Mudhafar
Kufa College of Medicine, Iraq

Al-Shamma Dr Yesar; Kufa College of Medicine , Iraq

Khudhiar Safaa Ali Kufa College of Medicine , Iraq

Al-Mudhafar Zehraa Kufa College of Medicine , Iraq

270. Hyperhomocysteinemia as an independent risk factor for coronary Artery disease:

الهوموسيستينين يعتبر كعامل مستقل للخطر في حدوث أمراض الشرايين التاجية

Omar Al-Kubaissi (FRCP), Aouff Al-Azzawi (FRCM) &
Waleed M.S. Al-Mashhadani (PhD), Iraq

We examined whether hyperhomocysteinemia is an independent risk factor for the development of coronary artery disease (CAD) in randomly selected 25 male patients who have angiographically proved CAD and without any of classical cardiovascular risk factors. And 20 male healthy volunteers are enrolled in this study.

The outcome measures include; coronary angiography, ECG, SBp, DBp, FBS, Fasting plasma total Homocysteine(tHcy),Lipid profile, and anthropometric measures. The results showed that all patients and volunteers were below 45 years age, no one of the

patients had obesity, hypertension, diabetes mellitus, dyslipidemia or smoking habit.. The results: there were no significant difference between patients and controls regarding age, BMI ,WHR, SBp, DBp, FBS, and Lipid profile ($P>0.05$).While there were a significant higher levels in fasting plasma tHcy in patients compared to that of controls($P< 0.05$).

Conclusion: Our results indicate that fasting plasma tHcy levels may act as an independent risk factor for development of CAD ,and this result may open anew line of treatment of cardiovascular disease by using drugs that affect the levels of plasma homocystein.

Key wards; CAD, Coronary angiography, Homocysteine, risk factor.

تم اختبار فيما اذا كان فرط الهوموسيتئين يعتبر كعامل مستقل الخطورة على حدوث أمراض الشرايين التاجية في مجموعة من المرضى (٢٥ ذكر) تم انتقايم بشكل عشوائي من المرضى المثبتة حالتهم عن طريق تلوين (قسطرة) الشرايين التاجية والذين ليس لديهم مسببات اخرى لحدوث الحالة . اضافة الى ذلك تم ادخال عشرون شخصا من الأصحاء المطوعين في هذه الدراسة. قياسات النتائج الرئيسية اشتملت على ما يلي: تلوين (قسطرة) الشرايين التاجية ، تخطيط القلب الكهربائي، ضغط الدم الانقباضي والانبساطي ،بلازما السكر ، بلازما الهوموسيتئين الكلي، النمط الشحمي. النتائج:أظهرت الدراسة بأن كل من المرضى والمجموعة المسيطرة كانوا تحت سن ٤٥ سنة،اطافة الى أن جميع المرضى هم ليسوا ببناء ولا من المدخنين ولا يعانون من أمراض السكري ،ارتفاع ضغط الدم أو من عدم انتظام مستوى الشحوم في البلازما.كما أظهرت النتائج بأن ليس هناك اختلاف ذو دلالة نوعية متميزة بين المرضى والمجموعة المسيطرة فيما يخص العمر،قياسات الجسم،ضغط الدم الانقباضي والانبساطي،بلازما السكر والنمط الشحمي .الا أن ارتفاع بلازما الهوموسيتئين الكلي كان ذو دلالة نوعية متميزة في المرضى عند مقارنته مع المجموعة المسيطرة. الأستنتاج:يستنتج من الدراسة بأن مستوى الهوموسيتئين الكلي في البلازما من الممكن أن يعمل كعامل مستقل الخطورة في حدوث أمراض الشرايين التاجية
الدكتور عمر الكبيسي،الدكتور عوف العزاوي ،الدكتور وليد المشهداني

Al-Kubaisi Omar (FRCP), Iraq

Al-Azzawi Aouff (FRCM) Iraq

Al-Mashhadani Waleed M.S. (PhD), Iraq

271. Bone lengthening in patients with poliomeylitis

نتائج تطويل العظم في مرضى شلل الأطفال

Dr. Yamman W.Zain Alabideen.

Al Jamhury Teaching Hospital , Mosul - Iraq.

A prospective study on 54 patients with poliomeylitis followed up for 3-24 months (mean 12 months) from march- 1990 to March 1992 the main limb discrepancy was 4.5cm. bone lengthening was done on 30 of these patient by different methods. the results were analyzed

Zain Alabideen Dr. Yamman W., Orthopedic Surgeon, Al Jamhury Teaching Hospital , Mosul - Iraq.

272. THE EFFECT OF CONTRACEPTIVE PILLS ON PLASMA LIPIDS AND BLOOD PRESSURE

تأثير استخدام حبوب منع الحمل على مستوى الدهون في الدم وضغط الدم

Dr. Sajeda S. D. H. Al-Chalabi & Dr. Baybeen K. Al-Selevany,
Department of Medical Physiology, College of Medicine, University of
Mosul, Iraq

Objective: To show the effect of oral contraceptive pills on lipid profile, blood pressure and body weight.

Design: Case series study.

Setting: Al-Wafa Diabetes Clinic in Mosul-Iraq.

Patients and Methods: Forty women using combined oral contraceptive (OC) pills mean age 32.4 ± 7.2 years and 36 women as controls mean age 29 ± 6.2 years investigated by serum triglyceride (TG), total cholesterol (TC), high density lipoprotein (HDL), low density lipoprotein (LDL), very low density lipoprotein (VLDL), using enzymatic colorimetric method. Blood pressure and body weight measurement was done.

Results: There is a significant effect of OC use on serum TG, TC, LDL, VLDL levels while no significant effect on serum HDL and atherogenic index was noticed. In addition to that a significant correlation was found between the duration of OC use and LDL level while no significant effect of age was found on LDL and VLDL levels OC users. A significant effect of OC use on systolic and diastolic blood pressure was noticed.

Conclusion: Plasma lipid profile and blood pressure measurement should be done in all OC users.

أهداف البحث: يهدف البحث إلى توضيح تأثير استخدام حبوب منع الحمل على مستوى الدهون في الدم وضغط الدم.

التصميم: دراسة مستقبلية لحالات متسلسلة.

مكان إجراء البحث والإطار الزمني: عيادة الوفاء لداء السكري في الموصل-العراق.

الطرق المتبعة: أجريت فحوصات قياس مستوى الدهون في الدم وقياس ضغط الدم لأربعين امرأة يستخدمن

حبوب منع الحمل معدل أعمارهن $32,4 \pm 7,2$ سنة وستة وثلاثون امرأة كسيطرة معدل أعمارهن $29 \pm 6,2$ سنة.

سنة. تم قياس ثلاثي الكليسيريد، الكوليستيرول الكلي، الكوليستيرول عالي الكثافة، الكوليستيرول واطئ الكثافة والكوليستيرول واطئ الكثافة جدا في المصل بواسطة الطريقة اللونية باستخدام الأنزيمات.

النتائج: وجد تأثير مهم لحبوب منع الحمل على مستوى الدهون في الدم وكذلك تأثير مهم على مستوى ضغط الدم

عندما تمت المقارنة بين النساء اللاتي يستخدمن حبوب منع الحمل مع نساء السيطرة بالإضافة إلى ذلك وجدت

علاقة بين مدة استخدام حبوب منع الحمل مع مستوى الكوليستيرول في الدم بينما لم يلاحظ تأثير مهم للعمر على

مستوى الكوليستيرول واطئ الكثافة والكوليستيرول واطئ الكثافة جداً عند النساء اللاتي يستخدمن حبوب منع

الحمل.

الاستنتاج: يجب قياس مستوى الدهون في الدم وقياس ضغط الدم عند النساء اللاتي يستخدمن حبوب منع الحمل.

الدكتورة ساجدة حمودي الجلي، الدكتورة بيبين خورشيد السليفاني

قسم الفسلجة الطبية/كلية طب الموصل/جامعة الموصل/الموصل-العراق

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273. Pseudouridine as tumor marker for breast tumors

التقصي عن النيوكليوسيد المحوّرة (السيديوريدين) كمؤشر سريري لمرضى أورام الثدي

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This work was done to evaluate the role of pseudouridine status which is modified nucleoside in the serum of breast tumor patients.

Serum Pseudouridine Ψ was measured by it HPLC (high performance liquid chromatography with UV detection and to study the effect of in serum of 12 normal healthy volunteers compared to values obtained from 30 subjects with breast tumor grouped according to the type of tumor into two groups (malignant and benign). all subjects aged between (30-60) years as compared with control.

The statistical analysis for the data obtained in the present study showed that the concentration level of pseudouridine was significantly elevated in the patients with malignant tumors as compared with controls but serum showed slightly increased but not significant in benign breast tumor patients as compared with controls.

The results observed shows that the concentration levels of this type of modified nucleosides could be a useful parameter for the early diagnosis of patients with breast tumor, so this method suggested that this compound is a sensitive marker for breast tumor patients.

التقصي عن النيوكليوسيد المحوّرة (السيديوريدين) كمؤشر سريري لمرضى أورام الثدي في هذه الدراسة تم التقصي عن أحد النيوكليوسيدات المحورة الموسومة (Pseudouridine) في مصل الدم للنساء المصابات بأورام الثدي (الحميد و الخبيث). و اعتمدت طريقة القياس على الطور العكوس للكروماتوغرافيا السائل ذي الأداء العالي باستخدام مجس الأشعة فوق البنفسجية (UV) الذي وصف التحليل الكمي لهذا النيوكليوسيد ودراسة تأثيره في مصل الدم ل(١٢) متبرع من النساء والتي قورنت مع القيم التي تم الحصول عليها من (٣٠) مريضة مصابة بأورام الثدي ممن تتراوح أعمارهم بين (٣٠_٦٠) سنة والذين قسموا إلى مجموعتين الأولى: المصابات بأورام حميدة وعددهم (١٤) حالة والثانية: المصابات بأورام خبيثة وعددهم (١٦) حالة. من النتائج الإحصائية التي تم الحصول عليها، اظهرت الدراسة بأن مستوى (Pseudouridine) قد أعطى زيادة معنوية سرطان الثدي الخبيث مقارنة مع الأشخاص الأصحاء (controls) في حين إن مستوى (pseudouridine) قد أظهر تذبذباً لمرضى أورام الثدي الحميدة لكن من الناحية الإحصائية لم تعطي فروقا معنوية مقارنة مع مجموعة الأشخاص الأصحاء. نستنتج مما سبق إن دراسة هذا النوع من المركبات ذو فائدة لتشخيص الأورام السرطانية المبكرة للمرض كذلك يمكن اعتبارها كمؤشرات حساسة

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274. Childhood Anaemia in Mosul: A clinicohaematological study

دراسة سريرية عن فقر الدم عند الأطفال في الموصل

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275. MEGALOBlastic ANAMIA IN CHILDREN

فقر الدم بسبب نقص حامض الفوليك وشدته في الأطفال

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Objective: To assess the severity, age, sex distribution, type of feeding and the clinical picture of children with megaloblastic anemia.

Design:case series study.

Setting:Al-Khansaa Maternity and children Teaching Hospital in Mosul over aperiod of one year starting from June 2000.

Participants:Thirty in patients with megaloblastic anaemia due to folate deficiency aged between 2 months and 3.5 years.

Intervention: Clinical data were obtained regarding age, sex, type of feeding, drug history, economic state, history of blood loss, main presenting symptoms and signs. A complete blood picture and marrow aspirate was performed. Therapeutic trial with folate was started and reticulocyte response was observed after one week.

Results: The anaemia was severe with a mean Hb of 6.4g/dl; it affected breast fed babies more than bottle fed babies (60% versus 26.6%), response to therapeutic trial of folate was inversely proportional to Hb level: $p<0.01$ (highly significant). Hepatomegaly and splenomegaly was found in 40% and 10% respectively.

Conclusion: Megaloblastic anaemia in children is a common problem and it is due to nutritional deficiency and extra requirements and the haemoglobin (Hb) level was positively related to platelet and white blood cell count (W.B.C.).

Key word: Anaemia, folic acid, feeding.

اهداف البحث: وصف الاعراض والعلامات السريرية لفقر الدم بسبب نقص حامض الفوليك وشدته في الأطفال

التصميم: جمع البيانات السريرية لحالات مرضية بفقر الدم بسبب نقص حامض الفوليك راقدة في المستشفى المذكور.

مكان اجراء الدراسة والاطار الزمني لها:نفذت هذه الدراسة في مستشفى الخنساء بالموصل لمدة سنة ابتداء من شهر حزيران ٢٠٠٠

المشاركون: ٣٠ طفلاً تتراوح اعمارهم بين ٢شهر و٣ ونصف سنة مصابين بفقر الدم نتيجة نقص حامض الفوليك ادخلوا مستشفى الخنساء التعليمي.

المدخلات العلاجية: تم جمع المعلومات السريرية كالعمر والجنس ونوع التغذية والحالة المعاشية للأسرة والاعراض والعلامات السريرية لكل طفل كما تم اجراء فحص لصورة الدم الكاملة مع فحص نخاع العظم لكل مريض.

القياسات المستخرجة: تم اعطاء جرعة من حامض الفوليك لكل مريض مع حساب نسبة الاستجابة أي الارتفاع في كريات الدم الحمراء الشبكية بعد اسبوع.

الناتج: كان فقر الدم شديدا حيث كان معدل مستوى الهيموغلوبين ٤،٦ غم وكانت الاستجابة لحامض الفوليك تتناسب عكسيا مع مستوى الهيموغلوبين، تضخم الكبد والطحال لوحظ في ٤٠% و ١٠% على التوالي.

الاستنتاج: فقر الدم بسبب نقص حامض الفوليك في الاطفال ويتسبب عن نقص تغذوي وكان مستوى الهيموغلوبين يتناسب طرديا مع الاقراص الدموية وكريات الدم البيضاء.

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276. THE DEMONSTRATION OF HELIOBACTERPYLORI IN THE GASTRODUDENAL ENDOSOOPIC BIOPSIES BY USING DIFFERENT STAINS

دراسة عن إصابة المرضى بالتهاب المعدة المزمن بالهيليوباكتر بالتنظير

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During a period of six months, biopsy specimens were taken from intact antral mucosa of (81) patients presented for gastroscopy to demonstrate the prevalence *Helicobacter pylori* (*H. pylori*) in gastroduodenal diseases by using Giemsa, Warthin-Starry and haematoxylin and eosin. It has been observed that *H. pylori* was detected in (75.3%) of all patients, however, the highest prevalence was seen in those with chronic superficial gastritis (88.8%) and its prevalence was more in patients with peptic ulcer (84.5%) than in Non-Ulcer Dyspepsia (MUD) (71%) with the use of different stains . From this study it was clear that Giemsa stain is simpler, quicker, cheaper, and is more reliable than Warthin-Starry in the demonstration of *H. pylori*.

INTRODUCTION

H. pylorus is a species of the new genus *Helicobacter*. It is curved or spiral, gram negative and flagellated organism (1) until recently, the stomach was considered as sterile for bacteria. However, there were articles describing spiral bacteria for back as 1886(2). Even after advent of endoscopy, description of the presence of curved organisms on the surface of the gastric mucosa was ignored by main steam medicine.

In 1982, the microorganisms was successfully cultured in Perth, Australia, from patients with histologic gastritis and was soon named *campylobacter pylori* (a name later changed to *Helicobacter pylori*)(3)*H. pylori* is found mainly on gastric epithelium of antral part of the stomach, where the organisms tend to cluster around junctions between cells and virtually never penetrate the cells themselves(4). It is also found on areas of gastric metaplasia in the duodenum (5). The golden and standard procedure for demonstration of *H. pylori* in tissues is a combination of cultures (6) and histologic identification of microorganisms on mucosal-biopsy specimens obtained by endoscopy (7). Different stains are used for identification of *H. pylori* like Giemsa and Warthin-Starry Silver (8).

Warren and Marshall described an association between the presence of *H. pylori* on the surface of gastric mucosa and chronic type B gastritis in both adults and children(9), which was reported to be around (90%)(10). A great deal of attention has been given to *H. pylori* and gastrointestinal dysmotility as potential etiological factors in the pathogenesis of Non-Ulcer Dyspepsia (11). Colonization of antral mucosa by *H. pylori* in the peptic ulcer disease was reported to be (90-100%), and a causal

relationship has been postulated(12). This study done, to asses the prevalence of H. pylori infection in patients with different gastroduodenal symptoms, to establish a correlation between H. pylori and gastroduodenal diseases viz NUD, gastritis and peptic ulcer and to compare the efficiency of different stains used in histological demonstration of H. pylori.

PATIENTS AND METHODS

During a period of six months from 1st of April 1996 to 30th of September, (81) patients were selected randomly from the endoscopy unit in Ibn-Sina Teaching Hospital. These patients were referred to the upper gastrointestinal endoscopic examination for the following symptoms: Epigastric pain, nausea, vomiting and upper intestinal bleeding presented as haematemesis and/or malena. Completed a questionnaire detailing age, sex, present and past symptoms, history of drug use, especially Non-steroidal anti-inflammatory drugs (NSAIDs). All endoscopies were carried out using Olympus GIFXQ10, in all cases scanning of the stomach and duodenal was thoroughly evaluated by initial inspection through the pyloric canal. Then 2-4 biopsy were taken from intact antral mucosa and send to the department of pathology with clinical diagnoses. Additional directed biopsies were obtained from any mass in the stomach of patients with suspected gastric malignancy. The biopsies obtained each measuring approximately 1-2 mm, usually oriented on Filter paper, fixed by 10% buffered formalin and routinely embedded in paraffin wax. Serial sections of $4\pm m$ t

KEY WORDS H. pylori, Giemsa stain, Warthin-Starry stain, Gastroduodenal endoscopic biopsies.

خلال فترة ستة أشهر، تم أخذ عينات من غار المعدة لـ(٨١) مريض ممن يراجعون وحدة التنظير وذلك لدراسة وبائية الهيليكوباكتر باستعمال الصبغات التالية (الكيمزا)، (وارثن ستاري)، (الهيماتوكسيلين). ومن خلال الدراسة تم تشخيص الهيليكوباكتر في (٣,٧٥%) من المرضى. وكانت أعلى نسبة إصابة في المرضى الذين يعانون من التهاب المعدة المزمن (٨٨,٨%) بالمقارنة مع أولئك المرضى المصابين بعسر الهضم (٧١%). وهذه النتائج تدعم نتائج البحوث الأخرى. ولقد وجدنا من خلال الدراسة أن نسبة الإصابة المرتفعة في المرضى المصابين بالتهاب المعدة البسيط توحي بأن هنالك عوامل أخرى قد تلعب دوراً في وبائية الهيليكوباكتر. وقد تم الاستنتاج بأن الكيمزا، والتي هي أبسط وأسرع تحضيراً وأرخص، أكثر اعتماداً في تشخيص الهيليكوباكتر من الوارثن ستاري.

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277. Lipid Profile in Polycystic Ovarian Syndrome

دراسة نسبة الدهون في دم المرضى المصابين بمتلازمة تكيس المبايض

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Introduction PCOS is a very common endocrine disorder affecting about 20% of women in their reproductive age. In addition to its known gynaecological and obstetrical importance, recently found that PCOS has a serious long term health complications including dyslipidemia, D.M. and CVD. Dyslipidemia is one of the most significant risk factor for CVD that is found to be associated with PCOS.

Study Design In this prospective cross-sectional study, we investigated fort-three PCOS women and 95 normal healthy women serving as control after age and BMI matching. We determine their lipid profile in their venous blood after 8-12 hours fasting.

Results we found that there is a Dyslipidemia in PCOS patients comparing to their control. This Dyslipidemia characterized by elevation in the level of total cholesterol (T.C), Triglycerides (T.G), low density lipoprotein-cholesterol (LDL-C) and reduction in the level of high density lipoprotein-cholesterol (HDL-C).

Conclusion PCOS is associated with significant Dyslipidemia characterized by elevation in TC, TG, LDL-C levels and reduction in HDL-C level.

Obesity, which is frequently associated with PCOS, aggravates the pattern of Dyslipidemia.

Hyperandrogenism may play a small role in the Dyslipidemia that is associated with PCOS.

إن مرض تكيس المبايض هو مرض شائع يصيب تقريبا ٢٠% من النساء في سن الانجاب ومن اعراضه السمنة، عدم انتظام الدورة الشهرية، العقم. حديثا لوجظ لهذا المرض مضاعفات صحية لا تقل اهمية عن الاعراض التي يسببها أو قد تكون أهم لها من تأثير كبير في تعريض المصابات بهذا المرض إلى خطر الإصابة المبكرة بامراض القلب والاووعية الدموية والتي تمثل واحدة من اكثر الأمراض المؤدية إلى الموت في الإنسان. من أهم هذه المضاعفات والتي ترتبط بهذا المرض هو فرط الشحمية والذي بدوره يعتبر عامل مهم في نشوء امراض القلب والاووعية الدموية.

في هذه الدراسة التي شاركت فيها ٤٣ امرأة مصابة بمرض تكيس المبايض و ٩٥ امرأة غير مصابة تتراوح اعمارهن بين ٢٠-٤٠ سنة بعد جمع المعلومات المطلوبة عن كل المشاركات واجراء الفحوصات اللازمة سحبت عينة من الدم من كل مشاركة بعد صيام ٨-١٢ ساعة على الاقل وتم اجراء التحاليل الكيموحيوية لدراسة نسبة الدهون في الدم.

اظهرت النتائج وجود اختلافات هامة في نسبة الدهون في الدم (فرط الشحمية) في مجموعة النساء المصابات حيث لوحظ ارتفاع في مستوى الكولسترول ومستوى كولسترول البروتين الدهني واطى الكثافة ومستوى الشحوم الثلاثية كما لوحظ انخفاض في نسبة كولسترول البروتين الدهني عالي الكثافة. اوضحت الدراسة ايضا دور السمنة كعامل مهم يؤثر سلبا في مستوى الدهون في الدم ويجعل فرط الشحمية اسوأ إضافة إلى تأثيرها السلبي المعروف على سير المرض نفسه. كما اظهرت الدراسة ايضا بان ارتفاع نسبة الهرمون الذكري (تستوستيرون) في مرض تكيس المبايض له تأثير قليل على مستوى فرط الشحمية.

د. فؤاد حمد الدهان ،كلية الطب جامعة البصرة

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278. Effect of Maternal Iron Deficiency Anaemia on Fetal Outcome

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Objective: To evaluate effects of maternal iron deficiency anaemia on fetal outcome.

Design: randomized cross-sectional study was carried out in Al-Batool-Teaching Hospital from the beginning of May 2003 to the end of December 2003. The study comprised 280 pregnant women in the first stage of labour.

Methods; randomly selected 280 women in labor, the following indices were examined after history and clinical examination: Hemoglobin concentration, haematocrit level, red blood cell morphology, reticulocyte count, serum iron, total iron binding capacity and percentage of transferrin saturation. A comparison was done between four groups of

women; the non-anemic, mild, moderate and severe iron deficiency anemia, in respect to the followings: Maternal age, parity, hematological parameters, neonatal outcome and placental characteristics.

Results; the proportion of anemia in this study group was 62.8%, the majority of cases (85.2%) were due to iron deficiency anemia, 76% of women 35 years old were anemic, compared with 40% of age group 15-24 years, 85.7% of grandmultiparous women were anaemic vs. 48.7% of the nulliparous ($P < 0.0001$), 11.8% of women gave birth to preterm babies, 80% of them were to anaemic mothers compared to 20% in the non-anaemic group (P -value < 0.0001), 18.1% of women delivered low birth weight babies (82.6% were to anaemic mothers compared to 17.4% of the non-anaemic group) (P -value < 0.0001). Mean placental ratio for the non-anaemic, mild, moderate and severe iron deficiency anaemia groups was 0.167, 0.191, 0.212 and 0.226, respectively ($P < 0.0001$), while there was no statistically significant difference in placental weight of the four groups. However maternal hemoglobin values were positively correlated with lower neonatal Apgar score. Admission to the Neonatal Intensive Care Unit was more in newborns of anaemic mothers (77.8% vs. 22.2%).

Conclusion: Fetal outcome is adversely affected by maternal iron deficiency anemia, reflected by the increased risk of preterm labour, delivery of low birth weight babies, lower neonatal Apgar score and subsequently higher rates of admission to the Neonatal Intensive Care Unit.

Keywords: anemia, pregnancy, fetal outcome.

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279. Response to Clomiphene Citrate in PCOS Patients with Abnormal Lipid Profile and impaired Glucose Tolerance Test

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Objective: To assess the response to clomiphene citrate for ovulation induction in PCOS patients with abnormal lipid profile and impaired glucose tolerance test, and to examine the postprandial triglyceride response to high fat meal in PCOS patient.

Design: controlled clinical study.

Setting: infertile PCOS women attending infertility center in Al-Batool maternity Teaching Hospital.

Patients and methods: 50 infertile women with PCOS (25 non-obese and 25 over weight), and 25 healthy women as controls. Assessment of; Clinical, anthropometric measurement, fasting serum glucose, fasting lipid profile, oral glucose tolerance test, postprandial triglyceride, cholesterol, high and low density lipoprotein, hormonal assay, and ovarian ultrasound.

Results: Both obese and non-obese PCOS women had a significant higher waist-to-hip ratio than controls at $P = 0.05$. PCOS women had higher levels of fasting, 2 hours

postprandial blood glucose levels, fasting and postprandial high density lipoproteins in a significant difference at $P = 0.05$. High density lipoprotein was significantly lower in PCOS women than controls at $P = 0.05$. Clomiphene citrate response was significantly less in PCOS groups with impaired glucose tolerance 33.4% than those with normal blood sugar (81.8%), and in women with type 2 diabetes mellitus 100% were clomiphene citrate resistance. Also clomiphene citrate resistance was more in PCOS patients with abnormal lipid profile compared to normal, they were; in abnormal triglyceride 71.4%, abnormal cholesterol 78.2%, and in PCOS women with abnormal high density lipoprotein 67.7%.

Conclusion: PCOS patients with impaired glucose tolerance test, non insulin dependent diabetes mellitus and abnormal lipid profile had more resistance to clomiphene citrate in ovulation induction, than those with normal serum glucose and lipid profile. PCOS patients had postprandial hypertriglyceridemia which is related to high waist-to-hip ratio and insulin resistance regardless of obesity and this contributes to increase risk to coronary artery disease.

Key words: PCOS, clomiphene citrate, abnormal lipid profile, impaired glucose
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280. Breast Cancer and Genetic Testing

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Who should have Genetic testing in breast and ovarian cancer?

1-Several genes can cause familial breast and ovarian cancer:

BRCA1 familial breast and ovarian cancer

BRCA2 familial breast and ovarian cancer, with male breast cancer and pancreatic cancers

P53- the Li-Fraumeni Syndrome of sarcomas, brain tumors, adrenal cortical cancers and breast cancers

CHK2 some Li-Fraumeni families that are P53 negative

PTEN causing Cowden Syndrome of breast cancer, thyroid cancer and skin lesions.

2 BRCA1&2 account for 5% of all breast cancers in the USA

Allele frequency for BRCA1 mutant genes 1/1000 about the same for BRCA2. There is a higher frequency in Ashkenazi Jews 1/100. 3. Rules for genetic counseling and testing. Never consider testing without referral to genetic counseling.

Test only adults there is no reason to test people <20 years old

Test affected patients first as they are most likely to have the affected gene

Test women who are likely to carry a susceptibility gene for instance a woman with breast cancer younger than 50 years old or ovarian cancers or bilateral breast cancers

Respect confidentiality

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281. POST-SURGICAL LOCO REGIONAL RECURRENCE OF BREAST CARCINOMA IN IRAQ

دراسة عن الحالات الناكسة بعد استئصال الثدي

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Background: From the standpoint of mortality & morbidity, cancer is by far the most important clinical problem that concerns the breast today .The age adjusted incidence of new cases has been increasing steadily with increase in the incidence among the Iraqi women during the last few years .

Materials & method : A prospective study was arranged to assess the occurrence of post-surgical loco-regional recurrence of breast carcinoma in the Iraqi female patients , a total number of 91 female patients were assessed during period from Dec.2000 to Dec.2002, the median period of follow up was two years .

Result: Loco-regional recurrence developed in 20 patients (22%). Chest wall and axilla were the main sites of loco-regional recurrence seen in 12 (60%) and 6 (30%) patients respectively. Significant association were found regarding the duration between first complaint and surgical management (latency period), the size of primary tumour, the number of lymph nodes involved, staging , histopathology & grading of primary tumour . While the association between the rate of loco-regional recurrence and age ,education level , socioeconomic status ,contraception history, marital state , lactation state , family history , parity , type of adjuvant therapy, type of surgery were in-significant .

Conclusion: Carcinoma of the breast affecting Iraqi females at younger ages in a high & increasing rate than other studies with a higher Loco-regional recurrence rate. Significant association were found regarding the duration between first complaint and surgical management (latency period), the size of primary tumour , the number of lymph nodes involved (staging), histopathology & grading of primary tumour .

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282. Evaluation Of trace metals in serum and hair of Female Patients with Breast Tumor)

(تقييم العناصر المعدنية في المصل والشعر عند النساء المصابات باورام الثدي)

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The aim of this study was to evaluate the role of trace metals status in the serum and hair of women with breast tumor.

Serum and hair levels of micromolecules (Cu, Zn , Se , Fe) and macromolecules (Ca, Mg) were measured in 68 females. Fourty one female patients with breast tumor were grouped according to the type of tumor into two groups (malignant:23 and benign:18) and twenty seven were apparently healthy.

The results showed that, Copper and Calcium levels in serum & hair were significantly increased in malignant groups as compared with benign and healthy controls.

The levels of serum Zn , Se , Mg and Fe were significantly decreased in malignant & benign groups as compared with controls and also in benign groups respectively as compared with controls.

A significant decreased in the levels of hair Se is seen in malignant tumor groups as compared with controls.

Hair Zn , Mg & Fe levels were significantly increased in both malignant & benign breast tumor patients as compared with controls.

في اول دراسة في العراق تم التقصي و ايجاد علاقة بين مستويات بعض العناصر ومن ضمنها العناصر النزرة في كل من المصل والشعر للنساء المصابات باورام الثدي (الحميد والخبيث).

شملت الدراسة (٤١) امرأة مصابات باورام الثدي ممن تتراوح اعمارهم بين (٣٠-٦٠) سنة قسموا الى مجموعتين الاولى : المصابات باورام حميدة ، وعددهم (١٨) حالة ، والمجموعة الثانية : المصابات باورام خبيثة وعددهم (٢٣) حالة ، بالاضافة الى (٢٧) امرأة سوية لغرض المقارنة (مجموعة التحكم) ، وقد اجري هضم الشعر باستخدام طريقة الهضم بالحوامض ومن ثم تم قياس مستويات تركيز كل من العناصر (النحاس ، الخارصين ، السلينيوم ، الكالسيوم ، المغنيسيوم ، والحديد) في عينات الشعر والمصل للمرضى مقارنة مع مجموعة التحكم. بعد معالجة النتائج احصائياً تم ملاحظة مايلي : وجود زيادة دالة لكل من عنصرى النحاس والكالسيوم في المصل والشعر للمرضى المصابات باورام خبيثة مقارنة بمجموعة النساء المصابات باورام حميدة ومجموعة التحكم.

تدني مستوى تراكيز العناصر (الزنك ، السلينيوم ، المغنيسيوم ، وكذلك الحديد) في مصل وشعر مجموعة النساء المصابات باورام خبيثة مقارنة بمجموعة النساء المصابات باورام حميدة ومجموعة التحكم). وجود تدني دال في مستوى عنصر السلينيوم في الشعر للمصابات باورام خبيثة مقارنة بمجموعة التحكم كذلك وجود زيادة دالة في مستويات العناصر (الزنك والمغنيسيوم وكذلك الحديد) في شعر النساء المصابات باورام خبيثة مقارنة بمجموعة التحكم بينما وجدت زيادة دالة لنفس العناصر للنساء المصابات باورام حميدة مقارنة بمجموعة التحكم.

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283. NON – SELECTIVE APPROACH TO LAPAROSCOPIC CHOLECYSTECTOMY: A PROSPECTIVE STUDY IN MOSUL

اللاينتنائية في عمليات إستئصال المرارة بالمنظار

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Objective: To assess the efficacy, safety, and the applicability of laparoscopic cholecystectomy (LC) when applied for patients with gall bladder diseases non-selectively.

Study design: This study is a prospective and interventional one.

Patients and Methods: Patients with gall bladder diseases, in the majority had Cholelithiasis, were planned to undergo LC non-selectively with no consideration to their age, weight, pathological state of gall bladder, and the presence of abdominal scar of previous surgery.

Setting: This study was performed in Al-Zahrawi Teaching Hospital, during the period from October 1997 to December 2000.

Results: One hundred and thirty five consecutive patients were scheduled for LC. LC was successful in 123 patients. Conversion to open cholecystectomy (OC) was done in 12 patients (9.7% conversion rate). The conversion was mainly for anatomical difficulties (75%). Intraoperative complications were limited to; perforation of gall bladder with bile leakage (19.2 %), intraperitoneal loss of stones (3.2 %), and intraoperative bleeding (15.6 %). Postoperative complications were limited to wound infection (7.4 %), and port hernia which was reported in one female patient. No death occurred nor were there any lesions of the common bile duct. The mean operating time was 45.6 minutes (range 20-120 minutes). The mean hospital stay was 1.2 days.

Conclusion: LC is a safe and economic procedure with a low rate of complications. LC can be performed for almost all patients with symptomatic gall bladder pathologies non-selectively and even can be performed safely for patients with acute cholecystitis without increasing the morbidity or mortality.

اللاينتنائية في عمليات إستئصال المرارة بالمنظار

الهدف: تقييم كفاءة وامكانية تطبيق عمليات رفع المرارة بالمنظار الجراحي لكافة مرضى المرارة بدون انتقائية.

الطريقة: أخذت مائة وخمسة وثلاثون حالة بدون انتقائية لمرضى يشكون من أمراض كيس الصفراء بسبب وجود حصى، وأجريت لهم عمليات رفع المرارة بالمنظار الجراحي في مستشفى الزهراوي التعليمي للفترة ما بين تشرين الأول ١٩٩٧ وكانون الأول ٢٠٠٠.

النتائج: كانت عمليات رفع المرارة بالمنظار الجراحي ناجحة في مائة وثلاثة وعشرون حالة. في اثنتي عشرة حالة تم تحويل العملية إلى فتح البطن (٨٠٩% نسبة التحويل) وذلك لوجود تشوهات تشريحية في تسعة حالات ولحدوث مضاعفات أثناء العملية (نزف دموي) في ثلاث حالات أخرى. لم تسجل مضاعفات مهمة أثناء وبعد العملية. كان معدل استغراق العملية ٤٥,٦ دقيقة، وكان معدل رقود المريض ١,٢ يوم.

المحصلة: تتصف عمليات رفع المرارة بالمنظار الجراحي بكونها اقتصادية مع نسبة ضئيلة في المضاعفات. ويمكن إجراؤها لكافة مرضى المرارة تقريبا بدون انتقائية. كذلك يمكن إجراء عمليات رفع المرارة بالمنظار للمرضى المصابين بالتهاب المرارة الحاد بأمان ومن غير زيادة في نسبة المضاعفات.

	Group I	Group II	Group III	Group IV
Mean op. Time(minutes)	49.9	67.7	57.1	42
Conversion rate (%)	13.34	23.5	26.7	5.9
Hospital stay (days)	1.6	1.7	1.16	1.1
Intraop. Complications %	25	44	16.65	12.3
Postop. Complications %	0	11.7	0	7.4

Table: 5

Group I; Old ages >60 years.

Group II; Those with acute cholecystitis.

Group III; Those with paraumbilical surgical scar.

Group IV; Those follow the old criteria for selection for LC.

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Diabetes السكري

284. PREVALENCE OF DIABETES MELLITUS IN MOSUL CITY COMPARISON OF 1997 AMERICAN DIABETES ASSOCIATION CLASSIFICATION WITH 1985 WORLD HEALTH ORGANIZATION CLASSIFICATION

الإجراءات الوقائية للداء السكري على حسب المعايير الدولية الجديدة

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Objective: To estimate the overall prevalence of diabetes mellitus (DM) and impaired glucose tolerance (IGT) in Mosul city in northern Iraq.

Design: Cross sectional study.

Setting: The survey program involved screening of the disease among a population sample of 1015 subjects aged > 25 years from different urban and rural areas in Mosul city, during the period from 1st August 2000 to 31st January 2001.

Main outcome measures: Fasting plasma glucose (FPG) and 2 hours plasma glucose (2hPG) was measured. The diagnosis of DM was achieved based on both the new 1997 American Diabetes Association (ADA) criteria and the old 1980-1985 World Health Organization (WHO) criteria.

Participants: The subjects were classified into 5 groups: Group 1: Subjects with FPG <110 mg/dl (n= 883), Group 2: Subjects with impaired FPG 110-125 mg/dl (n= 29), Group 3: New diabetics diagnosed solely by new 1997 ADA criteria with FPG 126-139 mg/dl (n= 20), Group 4: New diabetics diagnosed according to old WHO criteria with FPG ≥ 140 mg/dl (n= 23), and Group 5: Known diabetics (n= 60). Subjects in groups 2 and 3 underwent a standard 75 gm oral glucose tolerance test (OGTT) as recommended by the WHO. Two subjects (6.9 %) in group 2 and 7 subjects (35%) in group 3 had 2hPG ≥ 200 mg/dl and considered as diabetics, 6 subjects (20.7 %) in group 2 and 7 subjects (35%) in group 3 exhibited 2hPG between 140-199 mg/dl and considered to have impaired glucose tolerance (IGT) while 21 subjects (72%) in group 2 and 6 subjects (30%) in group 3 got 2hPG < 140 mg/dl and regarded as non-diabetics. Reclassification of subjects into 3 groups according to FPG or/and 2hPG was done for all subjects; Group A (non-diabetics); Subjects with FPG <110 mg/dl and/or 2hPG < 140 mg/dl (n= 910). Group B (Diabetics): Subjects with FPG ≥ 140 mg/dl and/or 2hPG ≥ 200 mg/dl (n= 92) including 60 known diabetics in group 5 and 23 new diabetics in group 4 in addition to 2 subjects in group 2 and 7 subjects in group 3. Group C (IGT): Subjects with 2hPG between 140-199 mg/dl (n= 13).

Results: The overall prevalence of DM using WHO criteria was 9.1 %, however, it rose to 10.35 % when the ADA criteria were used. The overall prevalence rate of IGT was 1.28 % when the WHO criteria were used and the prevalence of impaired fasting glucose was 2.86 % when the ADA criteria were used. To show the effect of age on the prevalence of DM, the subjects were divided into those aged; 25-34, 35-44, 45-54, 55-64 and ≥ 65 years of age. The prevalence of DM increased with increasing age. Using the WHO criteria, the prevalence rates of DM in the 5 groups were 0.31 %, 4.33 %, 17.33 %, 18.67 % and 16.85 % respectively. When the new ADA criteria were used. The prevalence rates of DM were 0.31 %, 5.19 %, 18.81%, 21.69 % and 20.22 %

respectively. There was also a significant difference in the prevalence rate of DM in subjects aged < 35 years and subjects aged ≥ 35 years ($Z=18.57$, $p< 0.0001$). The prevalence rates of DM and IGT rose from 0.31 % and 0.61 %, in those <35 years to 13.23 % and 1.60 % respectively for those aged ≥ 35 years old (when WHO criteria were used), and from 0.31 % and 0.61 % for DM and IGT respectively to 15.12 % and 3.49 % (when the new ADA criteria were used).

Conclusion: Diabetes mellitus is common in Iraqi population, and its prevalence rate increases with age.

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285. Advances in treatment of diabetes

العلاجات المفضلة للداء السكري

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286. Ajman/German Co-Operation in Diabetes Care and Management:the Pilot Study

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287. THE METABOLIC SYNDROME – A POSTPRANDIAL DISEASE

التنادر الاستقلابي

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Introduction: The metabolic syndrome as an epidemic was first observed in the time of baroque in Saxony when opulent eating and low physical activity were typical life style in upper classes. Today in affluent societies with a dinner culture the postprandial phase lasts about 20 hours per day. There is now more and more evidence that the metabolic syndrome starts with complex derangements in hormonal and metabolic regulation in the postprandial phase. Abdominal obesity and deficits in physical fitness escalate a vicious cycle which leads to impaired glucose tolerance and finally type 2 diabetes at the one side and endothelial dysfunction and cardiovascular diseases on the other side.

Aim: Better definition and intense study of "Prediabetes" and the Metabolic Syndrome have led in the last decade to some important insights:

- "Prediabetes" and the Metabolic Syndrome are extremely prevalent
- People with "Prediabetes" and the Metabolic Syndrome are at high risk for diabetes and CVD and are the ideal target population for prevention programs

- There are safe, potentially effective, interventions, which can affect modifiable risk factors
 - Intensive lifestyle interventions are efficacious and should be encouraged. However, they may be difficult to broadly apply and/or sustain
 - Effective pharmacological therapies must also be identified
- Conclusion: The primary goal of treatment for metabolic syndrome is to prevent the development of type 2 diabetes, heart attack and stroke. Usually, this can be accomplished with an aggressive regimen of self-care strategies focusing on diet and exercise.

Keywords: Syndrome X , Metabolic Syndrome, Prediabetes

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288. Functional properties of the minor hemoglobin fractions A1a and A1b

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Introduction Hb A1c, the major hemoglobin fraction of the glycated hemoglobin, has been an invaluable tool for the monitoring of long-term complications in type 1 and type 2 diabetes. The other two glycated hemoglobin fractions A1a and A1b have not yet been fully studied due to their low concentrations, which both of them do not exceed one fourth of the major A1c fraction.

Objective To study the role of the A1a and A1b fractions in normal and in diabetic subjects.

Methods Hb A1c, A1a and A1b fractions were obtained by eluting the bands obtained by electrophoresis on a polyacrylamide gel plates. Concentration of the eluted solutions was made by passing it through a column of sepedox G25.

Blood samples from 40 diabetic patients and 20 normal subjects aged 30 to 60 years old were obtained by vein puncture.

Results Results obtained shows that the rate of glycation of the minor fractions A1a and A1b do not go parallel with that of Hb A1c fraction but are differently increased or decreased. This is fully discussed in the text.

Conclusion Evidence are given to show that the minor hemoglobin fractions A1a and A1b although undergo normal glycation at high levels of blood glucose, The pattern is completely different as glycation does not correlate well with the increase of blood glucose, and that in some cases there is no effect or even might be decreased. Such fluctuation in the glycation process might indicate structural changes with these fractions. This necessitates the selection of an analytical method for evaluating the A1c fraction only if an exact picture of the diabetes condition is required.

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289. SIALIC ACID PROFILE IN DIABETIC PATIENTS

عيار حمض الساليك في السكريين

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Diabetes mellitus is the commoment metabolic disorder all over the wold. It may be complicated by micro and macroangiopathy. This leed to serious problems in the kidney (Nephropathy), eye (Retinopathy), and nervous system (neuropathy).

Sialic acid has been recognized to have a strong pathophysiological effect on the development and course of microangiopathy.

The present study included 127 patients age range (4 -80 year) with diabetes mellitus, they were included 30 patients with insulin depended diabetes mellitus and 97 patients with non-insulin depended diabetes mellitus, within which 32 were newly diagnosed (less than 1 month) and 65 patient of mean diabetic duration (7 ± 4) years.

The study included measurement of fasting serum total sialic acid (STSA), lipid associated sialic acid (LASA), protein associated sialic acid (PASA), and glucose levels. All parameters were significantly increased in diabetic patients compared with normal control subjects.

A higher significant difference in type 2 than type 1 is occurred. , also there was no significant difference between newly diagnosed and diabetes with long duration . According sex groups, there was highly significant difference between female than male in type 2 diabetes in the results of the sialic acid, lipid associated sialic acid, and protein associated sialic acid. There was also significant positive correlation between STSA and PASA with age of the diabetic patients.

The results of this study showed that the measurement of serum TSA, LASA, and PASA could become a useful biochemical means to monitor the degree of the diabetic microangiopathy, dependent of the age, sex, and blood glucose ,and independent on the duration of the disease. In this study negative correlation was found between serum TSA, and PASA, with blood glucose level, which need more future studies

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290. Prevalence of cutaneous manifestations in diabetic patients in Najaf city

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To evaluate the prevalence and types of cutaneous manifestations in diabetic patients with a duration of the disease more than 5 years. The study was carried out at Medical Teaching Hospital in Najaf city. The files of a hundred patients with diabetes mellitus of type I and type II attending diabetic center were evaluated. 60% male and 40% female , 62% type I and 38% type II were studied. Neuropathic skin lesions is the commonest cutaneous manifestation in form of dryness of the skin and hair fall. Dermopathy and necrobiosis lipodica diabeticorum constitute high percentage of the vascular lesions 14.6%. Bacterial and monilial infections show the same incidence 17.26%. Drug eruption was not so common but lipid atrophy and lipohypertrophy complicate insulin therapy in 8.83%. Vitiligo was more in type II diabetes.

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291. Erythrocyte glutathion and uric acid in type II diabetes mellitus.

كلوتاثايون كريات الدم الحمراء وحمض اليوريك عند مرضى السكر من النوع الثاني

Dr. Abdul Hameed A. AL Kassir

The work was done to evaluate the role of uric and Erythrocyte glutathion in type II diabetic Different Biochemical Parameters were obtained from 100 diabetic patients; 50 male and 50 female and normal Volunteers of both sexes as normal healthy controls The statistical analysis showed a significant ($p < 0.05$) In uric acid concentration for diabetic male and female compared with control, in addition there were significant differences ($p < 0.05$) in uric acid concentrations between diabetic males and females. A significant reduction in glutathione values were obtained in diabetic patients for all age groups compared with control ($p < 0.001$), GSH/HB values were 10 – 18 % greater in women than in men for all age groups younger than 60 years from the study We concluded that uric acid and glutathione can be used as a useful indicators of diabetic risk in males and females

Key words : Diabetes mellitus , antioxidant.

يهدف هذا البحث الى دراسة أهمية بعض العوامل المانعة للتأكسد والتي تعمل داخليا وهي مركب حامض اليوريك والكوتاثايون الذي يعتبر كمؤشر للحالة الصحية للانسان شملت الدراسة مئة شخص من المصابين بالسكر من النوع الثاني والذين لا يعانون من أي اختلالات مرضية خمسين من الذكور وخمسين من الاناث ممن تتراوح أعمارهم بين (٢٠ – ٦٠) سنة قسموا الى خمسة فئات عمرية بالإضافة الى (٥٠) شخصا اصابة من كلا الجنسين اعتبروا كمجموعة مقارنة من الدراسة وجد ان هناك انخفاض دال ($p < 0.05$) في مستوى حامض اليوريك للاناث والذكور بصورة عامة مقارنة الأصحاء كما وجد اختلاف دال ($p < 0.05$) بين مجموعتي الذكور والاناث من المصابين بداء السكر . اما بالنسبة للكوتاثايون فقد لوحظ وجود انخفاض دال ($p < 0.001$) لجميع الفئات العمرية لمرضى السكر مقارنة بمجموعة الأصحاء وكانت قيم (GSH/HB) اكبر بنسبة تتراوح (١٠ – ١٨ %) عند النساء مقارنة بالذكور ممن تقل اعمارهم عن (٦٠) سنة اما بالنسبة للذكور فلا يوجد هناك اختلاف للفئات العمرية

نستنتج مما سبق ان انخفاض مستوى تراكيز حامض اليوريك والكوتاتايون والتي تعمل كموانع للتأكسد يحدث بصورة ميكرة عند الاصابة بالسكر من النوع الثاني وخصوصاً عند النساء مما قد يؤشر وجود علاقة بين عوامل التأكسد والاصابة بالسكر .

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Gynaecology الأمراض النسائية والثدي

292. Urethrocystopexy with fibrin sealant and suture of the vaginal to the abdominal fascia

العلاج الجراحي لسلس البول عند النساء

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Vaginal repair has long been the procedure of choice for gynecologists to treat female urinary stress incontinence. High failure and recurrence rates in objectively controlled studies have guided towards abdominal procedures. Tension free vaginal tape (TVT) has proven to be an adequate choice in female USI without concomitant vaginal relaxation such as paravaginal prolapse. Many surgeons are very cautious with implanting TVT in young patients. Severe paravaginal defects and additional pathology leave a wide spectrum for the abdominal approach – colposuspension. To provide evidence-based results, 472 patients have been treated under clinically controlled study. Patients have been included in the study under following criteria:

- 1) Pre surgical cystoscopy and cysto-urethro tonometry.
- 2) Classification of stress rate according to Gaudenz
- 3) Pure stress incontinence without Neuro. Or urge pathology
- 4) Concomitant lateral pelvic floor defect.

This method bases on a combination of supportive and suspension theory it involves an incision of the abdominal wall to visualise

The bladder neck. The bladder neck and dropped down paravaginal area will be pulled up to their original – normal position- by using tow stitches situated between either sides of the distal bladder neck + vaginal fascia and the abdominal fascia. To improve a permanent suspension, the paravaginal wall will be attached to the pubis with Fibrin glue.

Outcome: First results 6 months, one year and 2 years after surgery were very encouraging. Ten years after surgery a complete healing rate of 86% have been verified. This group of ex-patients do not need pads at all. Further 10% of the patients are satisfied with the result of the surgery. Tow percent feels better, and tow percent have no benefit.

Keywords: Female stress induced urine incontinence therapy – coplo-fascial suspension- suture and fibrin sealant for incontinence and paravaginal defect repair

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293. Women's Health and Gynaecology Healthy forever: Lessons on the preservation of women's Health

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Cervical neoplasia screening, modern contraception, and menopausal therapies ensure that a woman remains healthy. The workshop will explore 3 themes:

The UK Cervical screening saves the lives of 4,500 women every year. A combination of targeted screening and the use of colposcopy and outpatient treatment can stop the thousands of deaths each year from this terrible disease in developing countries. Modern contraception is part of safe motherhood, with additional benefits such as preventing menorrhagia and anaemia and reducing the risk of many female cancers. Women now spend 1/3rd of their lives in the menopause. Hormone treatment and lifestyle measures maintain the quality of life in this important phase.

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294. Urinary Stress Incontinence

معالجة سلس البول عند النساء

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295. Diltiazemas compared with oxybunin for yrnary incotinenec in women

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Background Whereas certain oral antimuscarinic drugs are well documented to have activity for the long term management of over active bladder. The clinical usefulness of these agents is limited. In view on the influence on urinary reports indicate. that high level of calcium ion exert a diuretic action probably by inhibiting vasopressin action in the collecting duct. We therefore asses calcium inhibitors (diltiazem) effect on the control of UI in women with over active bladder, asses prior to treatment and eight-weeks following treatment.

Participants 47 women aged over 40 or more with UI, were randomly received eight weeks of double blind treatment with diltiazem (20mg daily) or oxybutnin (20mg daily). Main outcome measures Severity index with categories slight, moderate and severs (data on 48 hour frequency multiplied by amount of leakage) for evaluating the effect of anti-incontinence treatment on a particular patients.

Results At the eight-week follow-up, protection against incontinence was complete for 23 of the 37 patients in the diltiazem group (62.2%) and 15 of the 37 patients in the oxybutnin group (40.5%).

Conclusion As compared with base line (prior to treatment) eight-week course of oral diltiazem provide a significant a significant protection against incontinence. Tolerance to the medication and rebound worsening of bladder after discontinuation of treatment were not seen.

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296. THE ROLE OF TUMOR MARKER CA 15-3 IMMUNOCYTOCHEMISTRY AS PROGNOSTIC PARAMETER , IN FINE NEEDLE ASPIRATION CYTOLOGY SMEARS OF BREAST CANCER PATIENTS

الفحص الخلوي بطريقة الوخز الدقيق بالاشتراك مع الفحص الكيميائي المناعي باستخدام المعلم في مرضى عقد الثدي (CA15-3) الوراثي

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Fine needle aspiration cytology (FNAC) in combination with immunocytochemical study is a simple, rapid and safe procedure, yielding enough information to diagnose breast masses it allows possible and accurate treatment option, to be explained to the patient before surgery.

This is a prospective study which was planned and performed for the first time including 43 cases with variable breast lesions managed in the Teaching Hospital in Najaf, during the period of study from June 2001-December 2003.

After clinical assessment all our patients underwent fine needle aspiration cytology for their breast lesions. And then subjected to immunocytochemical study with CA15-3 tumor marker, followed by histopathological confirmation after open surgical biopsy.

The results of FNAC examination were as follow. Benign lesion in 13 cases (30.2%) , malignant in 25 cases (58.2%) , 5 cases (11.6%) were reported as suspicious.

After immunocytochemical study with CA15-3 tumor marker the results were as follow. All 13 (30.2%) benign cases interpreted as negative (benign), 18 (72%) out of 25 malignant cases, were positive (malignant), and 3 (60%) out of 5 suspicious cases proved to be positive (malignant).

After histopathological study the results were as follow, all 13 (30.2%) benign cases interpreted as benign, all 25 malignant cases, were malignant, and 3 (60%) out of 5 suspicious cases proved to be malignant.

No false positive diagnosis, 3 cases diagnosed as suspicious lesions by FNAC proved to be malignant after immunocytochemical study, and histopathological confirmation , giving (25%) false negative rate all obtained results were analysed , compared and assessed.

The result of immunocytochemical study relative to the standard histopathological results, where as follow, sensitivity (80%), specificity (100%), and overall accuracy (86%).

الفحص الخلوي بطريقة الوخز الدقيق بالاشتراك مع الفحص الكيميائي المناعي باستخدام المعلم الوراثي (CA15-3) في مرضى عقد الثدي ، وحالات سرطان الثدي عند النساء هي طريقة بسيطة وسريعة وامينة ذات مردود استنتاجي عالي يوفر معلومات هامة في تشخيص عقد الثدي قبل استخدام الجراحة.

هذا بحث مستقبلي تم التخطيط له وتنفيذه في المستشفى التعليمي في مدينة النجف وشمل البحث ٤٣ حالة عقدة ثدي من مختلف الأنواع ، كانت فترة البحث منذ شهر حزيران ٢٠٠١ الى كانون الاول ٢٠٠٣ ، بعد الفحص السريري لجميع المرضى ، ثم استخدام الفحص الخلوي بطريقة الوخز الدقيق ، وبعد معالجة هذه

السلايدات بالمعلم الوراثي (CA15-3) تم مقارنة هذه النتائج بنتائج الفحص النسيجي لعقد الثدي بعد ان تم استئصالها جراحيا.

كانت نتائج الفحص الخلوي بطريقة الوزن الدقيق كما يلي ، الحالات الحميدة ١٣ حالة (٣٠%) والحالات الخبيثة ٢٥ (٥٨%) ، والحالات المشتبه بها ٥ حالات (١١,٦%) ، وبعد المعالجة بالمعلم الوراثي (CA15-3) كانت النتائج كما يلي ، جميع الحالات الحميدة سجلت سالبة (حميدة ايضا) ، و١٨ حالة (٧٢%) من الحالات الخبيثة كانت موجبة (خبيثة) ، كذلك ٣ حالات من الحالات الـ المشتبه بها اثبتت انها موجبة (خبيثة) ، وعند استخدام طريقة الفحص النسيجي على العقد المستأصلة جراحيا كانت النتائج كما يلي ، ١٣ حالة (٣٠,٢%) حميدة بالفحص الخلوي الدقيق كانت حميدة ايضا بالفحص النسيجي ، وجميع الحالات الخبيثة (٢٥) بواسطة الوزن الدقيق كانت ايضا خبيثة بواسطة الفحص النسيجي ، اما في الحالات الحالات المشتبه بها ٣ حالات ثبت بانها خبيثة وحالتين حميدة.

وكان الاستنتاج بان طريقة الفحص بواسطة المعلم الوراثي (CA15-3) على سلايدات الفحص الخلوي بطريقة الوزن الدقيق مفيدة في في الحالات المشتبه بها وتعطي نتيجة مشابهة للفحص النسيجي على العقد المستأصلة جراحيا

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297. The kinetic and thermodynamic studies on the binding of 125I-progesterone to its receptors in ovarian tumors homogenates

التغيرات الحركية والحرارية في معالجة أورام المبيض الهرمونية

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Kinetic and thermodynamic studies were carried out on the ovarian tumor homogenate binding to 125I-progesterone. Time-course of the association of 125I-progesterone with its receptor in human ovarian tumors of four different temperatures revealed the time and temperature dependency. Association kinetics indicated pseudo first order kinetics for the binding. Time-courses, Scatchard, Van, t Hoffs and Arrhenius plots led to the theoretical determination of thermodynamic parameters of both the standard state (i.e., ΔH^0 , ΔG^0 , ΔS^0) and transition state (i.e., ΔH^* , ΔG^* , ΔS^*).

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298. Pharmacological and pathological role of taurine on female reproductive system

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The aim of this work was to evaluate the effect of taurine on pregnancy in rats including number of nidation as well as prostacyclin and thromboxane A2 uterine levels. Four groups of rats each consisted of 7 rats. Group I served as a control receiving ordinary drinking water, Group II received taurine 50 mg/kg/day, group III received taurine 100 mg/kg/day and group IV received taurine 200 mg kg/day. Duration of treatment was 14 weeks before subjected to mating and conception. Taurine was continuously given daily during pregnancy. On the 16th day of pregnancy animals were sacrificed and dissected to calculate number of faeti. The uterus also isolated, homogenized with iced Krebs's solution to prepare the uterine 6-oxo-PGF1 and TXB2 an organic solvent (a mixture of ethyl acetic acid: water in the ratio (v/v/v/v) 110: 50: 25: 100) was prepared. The silica gel mini column was used to collect the two fractions. The prostanoids were quantitated using radioimmunoassay kits (Amersham) utilizing a high specific activity 6-oxo-PGF1 or TXB2 iodotyrosine methyl ester traces. Data were analyzed using Student's t-test.

The results showed that taurine decreased the fetal number in dose-dependent manner compared with the control group, concomitant with increase in uterine prostacycline level. in dose dependent manner.

In conclusion, taurine might influence of infertility rate as well as an important pharmacological as well as physiological and pathological effects on reproductive mechanism.

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299. GESTATIONAL TROPHOBLASTIC DISEASE:REVIEW OF SEVENTEEN CASES

حدوث الحمل العنقودي الكامل والناقص وسرطان السخد

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Objective: The aim of this study was to know the incidence of some forms of gestational trophoblastic disease (GTD) in Mosul and to evaluate the classification system that stratifies the treatment of the malignant GTD.

Design: retrospective clinical study done over a period of 5 years.

Setting: Al-Batool Maternity Teaching Hospital.

Participants: The records of a series of 17 consecutively treated patients who had been diagnosed to have malignant GTD were reviewed. The records of these 17 patients were studied for their age, parity, and mode of presentation. All patients were underwent staging studies which included chest and skull x-rays and abdominal ultrasound and were classified as good prognosis group 8 patients (47%) and poor prognosis group 9 patients (53%).

Intervention(s): The good prognosis group was treated with courses of intramuscular methotrexate (50 mg on alternative days 1,3,5,7) with folinic acid rescue (7.5 mg orally on alternative days 2,4,6,8). The poor prognosis group was treated with methotrexate (10 mg/m² /day) intravenously (iv), dactinomycin (0.3 mg/m² /day) iv, and cyclophosphamide (110 mg/m² /day) iv, for three-day course. Both courses were repeated according to patients' response.

Results: The incidence of complete mole was one in 479 pregnancies, of partial mole was 1 in 7777 pregnancies and of malignant GTD was 1 in 3660 pregnancies. The mean age incidence of malignant GTD was 37.2 years, the mean parity was 4.6, equally presented from rural and urban areas. The presenting symptom of malignant GTD was vaginal bleeding in 47%, cough and shortness of breath in 41.1%, cough and hemoptysis in 11.7%. The blood group was O+ve in 64.7%, A+ve in 17.5%, B+ve in 11.7% and AB+ve in 5.9%. The antecedent pregnancy for malignant GTD was complete mole in 88.2% (the entire good prognosis group), term pregnancy in 5.9% and abortion in 5.9% (both of them in the poor prognosis group). The mean duration between the antecedent pregnancy and treatment of malignant GTD was 5.7 months. Complete response rate without recurrence was 75% for the good prognosis group and 44.4% for the poor prognosis group. The mortality rate was 0% for the good prognosis group and 33.3% for the poor prognosis group giving an overall cure rate of 58.8%. Hysterectomy was needed in 2 patients (22.2%) of the poor prognosis group.

Conclusion: Malignant GTD is uncommon disease in our locality, a complete mole usually precedes it. Classification into good and poor prognosis groups is a successful way for treatment.

Key words: Gestational trophoblastic disease, complete mole, hydatidiform mole, partial mole, vesicular mole, neoplasm staging.

الهدف: لتبيان نسبة حدوث الحمل العنقودي الكامل والناقص وسرطان السخد وكذلك تقويم طرق التصنيف لغرض العلاج.

الطريقة: دراسة سريرية راجعة لحالات متسلسلة.

المكان والمشاركون: تمت الدراسة في مستشفى البتول التعليمي لأمراض النسائية والتوليد وذلك بدراسة سجلات كل المرضى المشخصين كحالات سرطان السخد (١٧ حالة) خلال فترة ٥ سنوات.

المداخلات العلاجية: تم تجميع المعلومات السريرية كالعمر، عدد الولادات، وطريقة ظهور الأعراض، وقد اجري لكل المرضى أشعة الصدر والجمجمة ومسح الأمواج فوق الصوتية للبطن لغرض التصنيف.

القياسات المستخرجة: تم تصنيف المرضى إلى مجموعتين مجموعة الحالات ذات التكهين الجيد وعددها ٨

حالات (٤٧%) تمت معالجتها بدواء ميثوتريكسيت لوحده مع فولينيك اسيد، ومجموعة الحالات ذات التكهين

الفقير وعددها ٩ حالات (٥٣%) وقد تمت معالجتها بدواء الميثوتريكسيت مع اكينونوميسين وسليكلوفوسفاميد.

النتائج: كانت نسبة حدوث الحمل العنقودي الكامل هو ١ من ٤٧٩ حمل، ونسبة حدوث الحمل العنقودي الناقص

هو ١ من ٧٧٧٧ حمل، أما نسبة حدوث سرطان السخد هو ١ من ٣٦٦٠ حمل. كان معدل عمر الإصابة

بسرطان السخد هو ٣٧،٢ سنة، ومعدل عدد الولادات هو ٤،٦، وكان تقسيم المرضى بصورة متساوية تقريباً بين

القرى والمدنية. كان العرض الرئيسي لسرطان السخد هو النزف الرحمي في ٤٧% من الحالات. يليه سعال

وضيق في التنفس في ٤١،١% ثم سعال وتخمد دموي في ١١،٧% . كان صنف الدم السائد لمرضى سرطان

السخد هو (O) موجب في ٦٤،٧% و (A) موجب في ١٧،٥% ، يليه (B) موجب في ١١،٧% ثم (AB)

موجب في ٥،٩% من الحالات. كان الحمل السابق لسرطان السخد هو حمل عنقودي كامل في ٨٨،٢% (وهم

يمثلون الحالات ذات التكهين الجيد) يليه حمل كامل في ٥،٩% و إسقاط في ٥،٩% والأخيرين يقعان في

مجموعة الحالات ذات التكهين الفقير. كانت الفترة بين البدء بالعلاج والحمل الأخير ٥،٧ أشهر. كانت الاستجابة

التامة للعلاج ٧٥% للحالات ذات التكهين الجيد و ٤٤،٤% للحالات ذات التكهين الفقير، كانت نسبة الوفيات

صفر% للحالات ذات التكهّن الجيد ٣٣,٣% للحالات ذات التكهّن الفقير. أما نسبة الشفاء الكلي فقد كانت ٥٨,٨% , وكان عدد استئصال الرحم ٢٢,٢% من الحالات ذات التكهّن الفقير. الاستنتاج: سرطان السخد مرض غير شائع في الموصل وغالبا ما يسبقه إصابة بالحمل العنقودي الكامل. إن تقسيم المرضى إلى حالات ذات التكهّن الجيد و حالات ذات التكهّن الفقير هي طريقة ناجحة للعلاج.

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البوستر II Poster Session

300. LEAD TOXICITY AMONG WORKING IRAQI CHILDREN (recycling lead from old batteries)

تأثير الرصاص على الاطفال العاملين في معامل استخلاص الرصاص من البطاريات
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Background: During the period from 20th of December 2002 to 1st of February 2003, this study was done in a small smelting factory for recycling of lead from used batteries by an old method ,in a poor area in Baghdad ,in which all the workers were children (their age ranged from 12-16 yr.) for whom general examination and measurement of blood lead level(BLL) was done .A control group of children from the same area was selected .Objective: To study the BLL and its effects on working children in this smelting factory .Design/Methods: Sera from the target children were taken, using Schmitzue flameless atomic absorption spectroscopy with lead hallow cathode lamp, for determination of lead level and so as from the control group . Results: twenty seven working children were tested for BLL and presence of lead lines in their gums and 21 children as a control group, their age range from 12-16 yr. ,with main age of 13.40 yr. and 12.28 yr. respectively .Lead lines found in 14 (51.85%) working children .Using CDC guidelines for lead intoxication ,no one of the workers had BLL < 15 ug/dl in comparison to 20(95.23%) children of control group ,11(40.7%) workers vs. 1 (4.77%) child from control had BLL range from 15-30 ug/dl,12(44.5%) workers had BLL in the range of 31-40 ug/dl ,4(14.8%) workers had BLL in the range of 41-50 ug/dl. Concerning the duration of working, 20(74.07%) worked for more than 6 wk. with BLL ranged from 31-50 ug/dl vs. 7(25.93%) worked less than 6 wk. with BLL ranged from 15-30 ug/dl, P <0.05 Conclusion: As lead intoxication in children significantly causes complications and those working children in smelting factories are at high risks, and must be forbidden from working at these factories ,although their work is against the law.

Key words: Lead toxicity ,Iraqi children ,recycling lead,

الخلفيتقي نهاية العام ٢٠٠٢ وبداية العام ٢٠٠٣ تمت دراسة تأثير الرصاص على الاطفال العاملين في معامل استخلاص الرصاص من البطاريات بصورة بدائية في منطقة فقيرة من بغداد وكانت اعمارهم تتراوح بين ١٢-١٦ سنة من خلال التحري عن وجود ازرقاق اللثة وقياس نسبة الرصاص في الدم ومقارنتهم مع اقربانهم الساكنين في نفس المنطقة .الهدف:دراسة تأثير الرصاص على الاطفال العاملين في ورشة استخلاص الرصاص. الخطة وطريقة البحث:تم فحص نسبة الرصاص في الدم باستخدام جهاز الامتصاص الذري الكهروحراري باستخدام المصباح الكاثودي المجوف لعنصر الرصاص للأطفال العاملين في ورشة استخلاص الرصاص ومقارنتهم مع اطفال اصحاء ساكنين في نفس المنطقة. النتائج:تم فحص ٢٧ طفلاً عاملاً للتحري عن وجود ازرقاق اللثة مع فحص نسبة الرصاص في الدم مع فحص ٢١ طفلاً سليماً للمقارنة وكانت اعمارهم تتراوح ما بين ١٢-١٦ سنة وبمعدل ١٣,٤٠ سنة للأطفال العاملين و ١٢,٢٨ سنة للأطفال الاصحاء ولقد وجد ازرقاق اللثة لدى ١٤ (٥١,٨٥%) طفلاً عاملاً وعند استخدام المعايير الدولية لمستوى الرصاص تبين انه لا يوجد مستوى للرصاص للدم اقل من ١٥ ميكروغرام /مل لدى كل الاطفال العاملين بينما كان المستوى اقل من ١٥ ميكروغرام/مل لدى ٢٠ (٩٥,٢٣%) من الاطفال الاصحاء ووجد لدى ١١ (٤٠,٧%) من الاطفال العاملين وطفلاً واحداً(٤,٧٧%) من الاصحاء مستوى الرصاص يتراوح ما بين ١٥-٣٠ ميكروغرام/مل وان مستوى الرصاص لدى ١٢ (٤٤,٥%) طفلاً عاملاً كان يتراوح ما بين ٣١-٤٠ ميكروغرام/مل وكان مستواه يتراوح ما بين ٤١-٥٠ ميكروغرام/مل لدى ٤ اطفال عاملين (٨,٤%) وتبين ان مدة اشتغال ٢٠ (٧٠,٠٧%) طفلاً عاملاً

كان اكثر من ستة اسابيع وان مستوى الرصاص كان يتراوح ما بين ٣١-٥٠ ميكروغرام/مل بينما كان مستواه ما بين ١٥-٣٠ ميكروغرام/مل لدى ٧ (٩٣،٢٥%) من الاطفال العاملين الذين كانت فترة اشتغالهم تقل عن ستة اسابيع . الاستنتاج: ان الاطفال العاملين في ورشات استخلاص الرصاص معرضون الى الاصابة بالتسمم بالرصاص وعليه يجب منع تشغيلهم فيها علماً ان القوانين لا تجيز تشغيلهم.

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301. The prognostic factors of congenital diaphragmatic hernia in Mosul

العوامل المؤثرة في سير مرض فتاق الحجاب الحاجز الولادي دراسة تحليلية لثلاثين حالة
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Objective: To study the prognostic factors of congenital diaphragmatic hernia in Mosul city and its drainage areas in the north of Iraq.

Methods: 30 cases with congenital diaphragmatic hernia, admitted to Al-Khansa hospital in Mosul for the period between Jan.1994 and Jan.2001. Diagnoses were based on clinical and radiological findings. Surgical repairs were done through abdominal approach.

Results: the study involved 17 males and 13 females. Their age ranged from few hours to five years. Most of them presented within the neonatal period. There were 27 cases of Bochdalek type (23 left, 4 right), and 3 cases of Morgani hernia. The main presenting feature was respiratory distress. Associated anomalies were found in 26.6% of our cases. Mortality rate was 33% with 30% in Bochdalek hernia.

Conclusion: The important prognostic factors we found were: age, side of the hernia. Polyhyrmanios, associated anomalies, scaphoid abdomen and the timing of surgery.

الهدف : دراسة تحليلية للعوامل المؤثرة في سير مرض فتاق الحجاب الحاجز الولادي في مدينة الموصل وبقية المناطق في شمال العراق.

الطريقة : ثلاثون حالة مرضية ادخلت الى مركز جراحة الاطفال في مستشفى الخساء في الموصل. للفترة ما بين كانون الثاني ١٩٩٤ الى كانون الثاني ٢٠٠١ تم التشخيص بالاعتماد على الحالة السريرية والنتائج الشعاعية، العلاج الجراحي تم عن طريق فتح البطن.

النتائج : الدراسة اشتملت على ١٧ ذكر و ١٣ انثى. اعمارهم تراوحت بين بضع ساعات الى خمس سنين . اكثر الحالات كانت بين حديثي الولادة . واكثر الحالات كانت من النوع الخلفي الجانبي وهي ٢٧ حالة ، (٢٣) في الجهة اليسرى و ٤ في الجهة اليمنى) مع ثلاث حالات من النوع الامامي. اهم الاعراض كانت تعسر التنفس . كانت نسبة التشوهات الخلقية ٢٦،٦ % نسبة الوفيات كانت ٢٣% ، (٣٠ % كانت بالنسبة للفتق الجانبي).

خاتمة : العوامل المؤثرة على سير المرض كانت العمر ، جهة الفتق ، زيادة السائل الاميني ، وجود التشوهات الخلقية المصاحبة ، تعذر البطن وتوقيت العملية.

مفتاح البحث : فتاق لحجاب الحاجز ، العوامل المؤثرة.

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302. Cooperation exercises' pre-clinic

التحضير الجيد للمرضى قبل القبول في المشافي

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Besides aim orientation and contents determination as components of a lesson the method lay-out is very important. It is a special problem in the pre-clinical education that the students have hardly a reference to patients. To soothe this problem, we combined the pre-clinical courses with the clinical part as a part of the method lay-out of the lesson in our university. This combination is produced by practical exercises in which students join from 3 different semesters. For the evaluation, questionnaires were designed, to investigate the opinion of the pre-clinic-and clinicstudents. Aim: The exercises shall give every student the possibility to collect first experiences both from view of the Dentist and from view of a patient for the dental job. The clinical exercises are carried out under the supervision and instructions of the Assistant-Professor. Results: Of the distributed questionnaires we could record a return of 75%. The cooperation exercises are judged predominantly (86%) positively. 92.4% of the students would like to extend the clinical exercises.

Keywords: Pre-clinic, Propaedeutik, combination, teaching methods, tutorial program, teaching program, phantom course.

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303. Prevalence of H.pylor. Infection in patients with gasTroesophageal reflux disease.

الإجراءات الوقائية في حالات القلس المعدي

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The present study was undertaken to assess the hypothesis that H. pylori protects the esophagus against gastroesophageal reflux disease (GERD) A prospective case-control study in which patients with GERD and asymptomatic control were compared for the prevalence of H. pylori infection .

H. pylori status was determined by histological examination of gastric biopsies, which were examined under hematoxylin and eosin, and Giemsa stains.

GERD was diagnosed by the presence of heartburn that improve with acid suppressive drugs and endoscopic evidence of erosive esophagitis.

A total of (54) GERD patients and (60) age and sex matched a symptomatic control were enrolled.

The prevalence of *H. pylori* infection was significantly lower in GERD patients (33.3%) compared with controls (61.6%) ($P < 0.001$).

AL-Mahana Dr. Sadiq Jabbar, Dean , Kufa College of Medicine

304. Comparative Effects of Ciprofloxacin, Cotrimoxazole and Amoxicillin in Patients with UTIs in Mosul Population

مقارنة لفعاليات ٣ مضادات حيوية في معالجة التهابات الطرق البولية

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The efficacy of ciprofloxacin, cotimoxazole and amoxicillin was compared in a number of patients suffering from urinary tract infections.

Ninety outpatients complaining from signs and symptoms of UTIs participated initially in the study. Six patients were excluded from the study because no causative organisms were isolated. The remaining 84 patients with positive urine culture were included in the final assessment. Clinical examination, general urine examination, urine culture and antibacterial sensitivity test were performed for each patient.

The results of the study showed that 29 patients (34.53%) were suffering from cystitis and 55 patients (65.47%) suffering from pyelonephritis. The main signs and symptoms of cystitis reported were frequency, dysuria, urgency and suprapubic pain while in case of pyelonephritis, fever, loin pain and costovertebral angle tenderness were the main symptoms reported.

General urine examination showed that pyuria was present in all patients, microscopic haematuria in 42 patients (50%) and bacteruria in 22 patients (26%) only. The most frequently isolated bacteria was *E. Coli* which present in 41 patients (49%). The overall response to treatment showed that ciprofloxacin produces excellent response in 25 patients (86%) out of 29 patients, amoxicillin in 10 patients out of 29 patients (34%) and cotrimoxazole in 4 patients out of 26 patients (15%).

This study showed that ciprofloxacin was the favour drug for the treatment of patients with UTIs in Mosul City as the uropathogenic bacteria are highly sensitive to ciprofloxacin than cotrimoxazole or amox

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305. Study of the relationship between trace elements values in patients with different types of brain tumors

دراسة عن التغيرات الكيميائية المختلفة بين ورمين دماغيين

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Copper, Zinc and Iron trace elements were measured in tissue extracts of (37) patients with brain tumors (benign 19 and malignant 18) using flameless atomic absorption technique. Astocytoma, Glioma and Meningioma are subgroups of brain tumors which

were investigated in this study. The results indicated a highly significant increase ($p < 0.001$) of these trace elements of malignant brain tumors comparing with that of benign brain tumors, the same results were found in subgroups astrocytoma and glioma, while insignificant increase ($p > 0.05$) of subgroup meningioma of malignant patients.

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306. Immunohistochemical Study of CA-125 tumor marker expression in Endometrial hyperplasia in correlation to grade and progressive endometrial carcinoma in Iraq.

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CA-125 tumor marker is encountered in most of patient's ovarian carcinoma and little has been encountered about its role in endometrial carcinoma. 44 patients with different grades of endometrial hyperplasia ranging from 38 to 56 years and 16 cases of endometrial carcinoma ranging from 48 to 69 years were included in this study. CA-125 tumor marker immunohistochemical over expression was reported in most cases of endometrial hyperplasia but more frequently in those with adenomatous and atypical types than simple cystic type, and well correlation has been reported with both the intensity of expression and endometrial carcinoma. We conclude that endometrial hyperplasia and endometrial carcinoma may share the same pathogenesis in some aspect. CA-125 tumor marker expression could be considered as an early predictive parameter for the diagnosis of endometrial carcinoma.

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307. SEROPREVALENCE OF TOXOPLASMA GONDII AMONG PREGNANT WOMEN IN KIRKUK / IRAQ.

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Toxoplasma gondii is an intracellular parasite of many types of tissues, including muscle and intestinal epithelium. The infection may be acquired or congenital, the congenital form is most severe when maternal infection occurs early in pregnancy. *Toxoplasma* serological tests has been used successfully to determine whether the infection acquired in the recent or more distant past.

The aim of this study was to detect *Toxoplasma gondii* antibodies among pregnant women in Kirkuk city by using different serological tests.

The study was carried out in Kirkuk Hospitals, and Primary Health Care Centers to detect Toxoplasma antibodies among 319 pregnant women aged from less than 18 to more than 35 years old. The period of study was from beginning of November 2003 to end of May 2004.

The study showed that (117) case out of (319) was positive for Toxoplasma gondii (36.6%) by using LAT, and 54 case positive for IgM- ELISA (16.9%).

The highest rate of Toxoplasma seropositivity was among the age group 19-35 years (38.3%) by LAT and (18.75%) by IgM-ELISA.

The distribution of Toxoplasma seropositivity was higher in housewives than officials and was higher in rural area than urban area by both methods.

The pregnant women who were in contact with animals showed higher rate of seropositivity than those not in contact with animals. There was no relationship between number of abortions and Toxoplasma seropositivity.

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308. PREVALENCE OF ASTHMA AMONG PEOPLE WITH ENVIRONMENTALY POLLUTED AREAS

انتشار الربو في المناطق الموبوءة

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Asthma is a disease of airways which characterized by increase responsiveness of the trachiobronchial tree to different stimuli.

Air pollution play major role in the spread of disease in area ssurrounding oil refineries.

Aim of study: To evaluate the role of pollutant on the prevalence of Asthma in the areas surrounding oil refineries.

Methodology: Cross sectional study was done during the year 2004 and lasted for 6 months (up to 30/6/2004. 420 persons were selected randomly from 2 different areas with different pollution (high pollutant areas and law pollutant areas) the first one is near the oil refineries north of Iraq(Beji) and the second one far from these areas(balad and al dujeel) all in salah aldeen governorate. Clinical condition of the patients were measured and classified as normal, asthmatic and or other respiratory complaints, with information's related to the demography and geography characteristics.

Physical examination and peak flow metric test and exercise were applied.

Investigations regarding (WBC, ESR) were done

Results: Prevalence of asthma was 9% of whole population. it was 15% in highly pollutant area and 7% in low pollutant one with positive association between asthma and degree of pollution.

No significant differences were estimated regarding gender, with more hospitalization regarding the first category an elevated ESR.

Conclusion and recommendations: Prevalence of asthma is highly significantly increase in highly pollute areas which mainly reveal the harm effect of gaseous pollutants on the health oh human being.

And we recommend mainly to limit the exposure to these pollutants as a preventive measure which should be done by different levels of health authorities and education programs.

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309. Contacts infection in Smear-Positive Pulmonary Tuberculosis (PTB)

عدوى الملامسة عند التدرن الرئوي المفتوح الموجب العصيات

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المقدمة: ازداد معدل التدرن في العراق بعد حرب الخليج ١٩٩١ بعدد الحالات الموجودة وكذلك بمعدل زيادتها السنوي وذلك بسبب الحصار الاقتصادي وتردي الحالة الصحية والاقتصادية ونقص الأدوية.

الهدف: دراسة تأثير حالات التدرن الرئوي الموجب على نقل التدرن إلى الملامسين المباشرين في المنزل. طرائق العمل والتحليل: الملامس هو الشخص السليم المتقرب جدا إلى الحالة المرضية لمدة ٢-٣ شهر قبل تشخيص المرض. اشتملت الدراسة على ٦٢٦ حالة ملامسة لتسع وتسعين حالة تدرن رئوي مفتوح خلال عام ٢٠٠٢ في مدينة بغداد. الحالات المرضية الدرنية كانت ٦١ ذكر و٣٨ أنثى تتراوح أعمارهم بين ٢٣-٥١ سنة.

اشتمل فحص الملامسين على الفحص السريري والشعاعي وفحص البلغم وفحص التوبركلين للحالات التي تقل أعمارها عن ١٥ سنة. فحص البلغم بصيغة زيهل نيلسون لثلاث نماذج متتالية اثنان منها صباحا والثالثة في الصباح التالي. فحص التوبركلين باستعمال ٥٠١ مل من التوبركلين **PPD, RT23 TWEEN80** باستعمال وحدتين تزرقي في الجانب الأيمن للساعد. يفحص التفاعل بعد ٧٢ ساعة بالمسطرة ويعتبر الفحص موجبا إذا كان قطر دائرة التفاعل ١٠ مليمتر أو أكثر. نصف الملامسين أعيد فحصهم بعد ثلاثة أشهر من الفحص الأول. أشعة الصدر (فيلم كبير) أخذت لجميع الملامسين.

النتائج: إن عدد الحالات ٦٢٦ ملامسا (٣٣٠ ذكر و٢٩٦ أنثى) منهم ٣٥,٨% كانت ملامستهم لمدة أقل من ثلاثة أشهر و ٦٤,٢% كانت ملامستهم للحالات المرضية أكثر من ثلاثة أشهر الملامسين أقل من ١٥ سنة عمرا كان عددهم ٢٦٧ شخصا (٤٢,٧%). التشخيص المقترح للتدرن من خلال الأعراض السريرية كان موجود عند ١٢٦ شخص (٢٠%) منهم ٩٣,٦% أعمارهم أقل من ٢٥ سنة وبلا فر وقات معنوية بين الجنسين. ثبت التشخيص الدرني بواسطة فحص البلغم أو أشعة الصدر مع التوبركلين عند ٨١ حالة ملامسة (١٣%). تصاعفت عدوى انتقال التدرن إذا تعدت مدة الملامسة ثلاثة أشهر واعتبر المصدر الرئيسي للعدوى عند ٦٤% من الحالات. لم يلاحظ فرق إحصائي معنوي في فحص التوبركلين عند الملقحين السابقين بلقاح

BCG

الاستنتاجات والتوصيات: لا يزال التدرن مرض يهدد صحة المجتمع في العراق. ربما ارتفع عدد الحالات المسجلة نتيجة الوعي الطبي في تقصي المرض. خطر الانتقال مرتفع إذا طالت مدة الملامسة. لقاح **BCG** لم يكن عالي الوقاية من الإصابة بالتدرن بالرغم من نسبة التغطية الجيدة للقاح.

انه من المهم جدا زيادة الوعي الطبي لكشف ومعالجة حالات التدرن بسرعة وعلاجها بادامة طريقة **DOTS** العلاجية المباشرة.

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310. Impaired glucose tolerance (IGT) in patient with renal impairment

تحمل السكر في مرضى قصور الكلية

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The present study was under taken to evaluate glucose intolerance in patient with renal impairment. 30 patients with renal impairment were studied prospectively matched with 50 healthy control subjects with normal renal function both groups were arranged for oral glucose tolerance test. A sample of 19 patients had IGT regarding the group associated with renal impairment versus 3 healthy subject were found to have IGT, which was statistically significant.

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311. Tetracycline Therapy Associated Hyperkalaemia

ارتفاع البوتاسيوم المترافق بمعالجة التتراسيكلين

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Background: Despite wide range of unwanted effects, tetracycline associated hyperkalaemia has not yet reported.

Aim: To detect and assess degree of K⁺ shift in protracted tetracycline therapy .

Patients and Methods: Serum K⁺ and other parameters were monitored in a 40 patient receiving tetracycline for acne vulgaris over a period of several weeks.

Results: Serum K⁺ was significantly raised (P<0.001) in nearly all patients by the end of treatment course.

Conclusion and Recommendation: Hyperkalaemia may complicate extended tetracycline therapy and serum K⁺ monitoring in this regard is strongly recommended.

بالرغم من تعدد الآثار الجانبية لعقار التتراسايكلين إلا إن ارتفاع مناسيب بوتاسيوم مصل الدم لم يتم رصده من قبل وفي هذه الدراسة تمت متابعة مناسيب البوتاسيوم في مصل الدم لأربعين مريضاً عولجوا بالتتراسايكلين لعدة أسابيع بسبب مرض جلدي (حب الشباب) ولوحظ ارتفاع زيادة معنوية في تراكيز البوتاسيوم لجميع المرضى تقريباً (p<0.001) وهذا يدل على أن المعالجة بالتتراسايكلين لا تخلو من مخاطر ويجب مراقبة مناسيب البوتاسيوم في مصل الدم لجميع المرضى الذين يعالجون بالتتراسايكلين لاسيما لفترات طويلة .

الأستاذ الدكتور

حسين سرحان الجنابي

الأستاذ الدكتور

جبار ياسر المياح

العراق – بابل – كلية الطب / جامعة بابل

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312. Systemic Lupus Erythematosus Disease Activity Index its Application to Retinopathy

اعتلال الشبكية الناجمة عن الذئبة الحمامية

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Unselected group of 48 patient with SLE (44 females 4 males) were studied their disease activity according to SLEDAI as standardized measure and its Application to Retinopathy. Measurement of disease activity were done according to SLEDAI chart and retinal examination for all 48 patient there were 6 patients having retinopathy, all had active disease and it was correlated with C.N.S manifestations. Our study revealed a correlation of retinopathy with active disease.

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313. ISOLATION OF CLASSICAL Vibrio cholerae FROM KUFA RIVER OF EUPHRATES, IRAQ

عزل ضمات الهيضة الكلاسيكية من نهر الكوفة (من الفرات) في العراق

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Introduction: Since human pathogenic vibrios are naturally occurring in aquatic environment of Iraq in which classical biotype of cholera is not reported. The microbial ecology of this biotype becomes of importance because it may significantly predict the occurrence of epidemics. The classical biotype of cholera had been disappeared during the last pandemic and reappeared in Bangladesh during the current seventh pandemic. The isolated Vibrio during epidemics of 1966, 1998 and 1999 were El-Tor biotype.

Objective: The study is an attempt to differentiate the isolated Vibrio, and to verify whether classical Vibrio cholerae might be a risk for future epidemics of this unusual pathogen.

Study design: epidemiological investigation for cholera source of infection through standard laboratory examination (a descriptive study).

Methods: 30 samples of water were taken every fortnight from three sight sites of Kufa river (Half of Euphrates) in Najaf governorate during the period between 30th June to 1st November 2003, the time at which cholera epidemic is expected. The samples were transferred and inoculated for culture according to WHO guide of Vibrio cholerae isolation and classification.

Results: In Al-Zerga part of the river (before the city of Kufa) , 12 of 20 samples were positive for El-Tor vibrios and no classical one was isolated in this area. In bathing ghats of the river, entire the city 23 samples were positive ; 18 samples El-Tor and 5

(21.7%) samples were classical biotypes. While at the estuaries of raw sewage beyond the city ,27 Of 34 vibrio contaminated samples were positive for El-Tor and 7(20.6%)samples were positive for classical pathogen.

Conclusion: classical cholera is endemic in the aquatic environment of this locality, not only El-Tor, which make it imperative to identify the geographic location where the ecological conditions are favorable for toxigenic *V. cholerae* group O1 classical biotype.

عزل ضمات الهيضة الكلاسيكية من نهر الكوفة(من الفرات) في العراق

إن ضمات الهيضة الكلاسيكية قد اختفت من العالم وظهرت فقط في بنغلادش في الفترة الوبائية السابعة. وقد كانت الضمات المعزولة عند انتشار وباء الهيضة في العراق خلال السنوات ١٩٦٦، ١٩٩٨، ١٩٩٩، ١٩٩٩ كلها من نوع الطور .

استهدفت الدراسة التفريق بين العزلات كذلك معرفة ان تكون ضمات الهيضة الكلاسيكية هي المسبب الرئيسي لانتشار وباء الهيضة مستقبلا في العراق . وقد تم اخذ العينات من مناطق مختلفة من نهر الكوفة احد الفروع الرئيسية لنهر الفرات تضمنت ما قبل مدينة الكوفة وشاطئ المدينة ومن نهاية النهر المار في المدينة (مصبات مياه المجاري) . جاءت النتائج كما يلي : شكلت عينات من نوع الطور ١٢ عينة من مجموع ٢٠ في المنطقة الأولى حيث لم تظهر الضمات من النوع الكلاسيكي في هذه المنطقة ؟ أما في المنطقة الثانية والثالثة فقد ظهرت ضمات الهيضة الكلاسيكية بنسبة ٢١,٧ % ، ٢٠,٦ % من مجموع العينات في تلك المناطق على التوالي .

يستدل من ذلك أن ضمات الهيضة من نوع الطور ليست الوحيدة المستوطنة في المنطقة لذلك يتوجب التعرف والسيطرة على الظروف البيئية الملائمة لنمو واستيطان ضمات الهيضة الكلاسيكية .

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314. EFFECTS OF FLUVASTATIN ON SELECTED COAGULATION PARAMETERS IN NORMOCHOLESTEROLEMIA AND HYPERCHOLESTEROLEMIA

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Background: hypercoagulability is frequently associated with hypercholesterolemia.

Aim of the study: our study is aimed to evaluate the effects of fluvastatin, in a non-lipid lowering dose, on some coagulation parameters (PT, aPTT, fibrinogen) in normolipidemia and hyperlipidemia.

Methods and results: 21 male Sprague-Dawely rats were involved in the study. Rats were divided into three groups: Group (A) control, group (B) normocholesterolemic rats received fluvastatin 3mg/kg for 4 weeks and group (C) rats received cholesterol-enriched diet (4%) for 12 weeks and then treated with fluvastatin 3mg/kg for another 4 weeks. Cholesterol, fibrinogen, PT, and aPTT were measured before and after the experiment. Fluvastatin significantly ($p<0.05$) prolongs PT and aPTT in normocholesterolemic group. In addition, it significantly ($p<0.05$) decreases fibrinogen level in hypercholesterolemic group.

Conclusion: fluvastatin favorably influences coagulation in a non-lipid lowering mechanism.

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315. A New Rapid Spectrophotometric Method For Detection Of Xanthinuria:

Elham Hamed Al Dabbagh

The purpose of this study was to develop a rapid procedure for detecting xanthinuria. In this hereditary defect there is a gross deficiency of the enzyme xanthine oxidase and the oxypurines, xanthine and hypoxanthine, replace uric acid in the urine. A number of enzymatic spectrophotometric and chromatographic methods have been developed for determining these oxypurines but these methods are not readily available to most routine laboratories. The new procedure is based on the absorption maxima of hypoxanthine, xanthine and uric acid at 250, 270 and 292 nm respectively because the urines of normal and xanthinuric subjects contain contrasting concentrations of these compounds, the possibility that the urinary absorption ratios 250/292 270/292 nm would be significantly different between the two groups was investigated.

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316. Transfer of a Small Plasmid (Coding Multi-drug Resistance) Between Different Gram-negative Urinary Bacterial Organisms

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Objective: Urinary tract infections exist when pathogenic microorganisms are detected in the urine, urethra, bladder, kidney, or prostates. In most instances, growth of more than 10⁵ organisms per millimeter from a properly collected midstream urine sample indicates infection. Urinary tract infection may be uncomplicated or complicated; the latter may result in permanent renal damage, the formers rarely (if ever) do so. Uncomplicated infections are almost invariably due to single strain of organisms. The first stage in the development of urinary tract infection is colonization of the periurethral zone with pathogenic fecal organisms. Sexual intercourse causes minor urethral trauma and may transfer bacteria from the perineum into the bladder. Instrumentation of the bladder may also introduce organisms. Multiplication of organisms then depends on a number of factors, including the size of inoculation and virulence of the bacteria. In this study multi-drug resistant urinary bacterial isolates were characterized on a molecular level and risk factors for their development were identified.

Material and Methods: 175 isolates of gram-negative urinary bacterial infection were studied for their relatedness by antibiotic susceptibility testing and examined for the genetic location of their resistance determinants.

Results: Significant multi-drug resistant, *Esherichia coli* was the predominant pathogen isolated from 115 sample; *Klebsiella* was the next in order found in 38 sample. *Pseudomonas* was isolated in 15, and *Proteus* found in seven isolated.

Genetic studies demonstrated that resistance to ampicillin and cephaloxin were linked and carried on a small plasmid transferable between different isolates of gram-negative urinary bacteria.

Conclusion: The presence of the determinant resistance to ampicillin and cephaloxin in all isolates suggest that it is an endemic of urinary bacteria crossing a small plasmid interaction with the capacity to spread. Infection control measures should be directed towards restricting the further spread of this cross-small plasmid.

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317. OZONE HEALING PROPERTIES

خصائص المعالجة بالأوزون

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For many years the health sciences have been seeking to identify the primary, physical cause of all diseases and the cure-all that this basic principal would yield. Now both have been found, but their utter simplicity makes them difficult to accept at first, since it seems like if it's that easy, we should have been using them all along. Our bodies are composed mostly of water, which is eight ninths oxygen. Most nutritional studies tend to get caught up in the small details of biochemistry and overlook our most abundant and essential element, and the fundamental role of its depletion in causing illness. Of all the elements the body needs, only oxygen is in such constant demand that its absence brings death in minutes. The main difference, for healing purposes, between benign microorganisms (including our own cells), and those which cause disease, is that the later require much lower oxygen levels. This is due to their more primitive evolutionary origins, during the ages when free oxygen was far less abundant. Now their descendants can only survive in low oxygen environments such as accompany stagnation and decay. To become a growth medium for such parasites, one has to have allowed the oxygen saturation of the bodies fluids to drop well below the optimum level for healthy cell growth and function. The implest substances available for restoring one's oxygen balance to a healthy ange are ozone (O3), and hydrogen peroxide (H2O2), which is much easier to obtain and use. They are both highly toxic when concentrated, which has tended to obscure their germicidal value except as a skin antiseptic. But when diluted to therapeutic levels (for H2O2, 1/2 of 1% or less), they are not only non-toxic but uniquely beneficial

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318. The influence of cholesterol intake in glutamine metabolism by inducing a renal acidosis in rats

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The effects of the long - term cholesterol intake on free amino acids in the kidneys, plasma and liver of rats were investigated, using an automatic LKB Amino Acid Analyzer [Biochrom Ltd., Cambridge, England]. Administration of cholesterol at 100mg/kg/day for 20 weeks significantly elevates the free levels of aspartate from 1759 ± 197 to 2022 ± 66 (*P< 0.05), threonine from 880 ± 026 to 1082 ± 093, serine from 1279 ± 033 to 1621 ± 154 (**P< 0.01), glutamic acid from 1340 ± 073 to 2128 ± 172 (****P< 0.001), glycine from 1894 ± 137 to 3175 ± 314 (****P< 0.001), alanine from 2548 ± 245 to 3851 ± 268 (***P< 0.005), valine from 1064 ± 033 to 1447 ± 41 μmol /100 (*P< 0.05), cystine from 103 ± 006 to 168 ± 001 (****P< 0.001), methionine from 371 ± 011 to 455 ± 033 (*P< 0.001), isoleucine from 683 ± 021 to 871 ± 110 (*P< 0.05), leucine from 1359 ± 048 to 2033 ± 061 (***P< 0.005), lysine from 1182 ± 055 to 1514 ± 25 (*P< 0.05), histidine from 318 ± 014 to 388 ± 032 (*P< 0.05) and arginine from 471 ± 057 to 592 ± 065 μmol /100 wet tissue (*P< 0.05) in the kidneys. Under the same condition cholesterol administration at 100 mg/kg/day for 20 weeks significantly decreased homocystine from 100 ± 007 to 57 ± 018 μmol /100 wet tissues (*P< 0.05) in the kidneys. Meanwhile, glutamine was not detected in the kidneys of the cholesterol fed rat.

Results also indicate that all amino acid contents in the liver were significantly decreased in the cholesterol feed animal group. The amplitude of reductions varied between 40-100 %. Glutamine and tryptophan were not detected in the liver of cholesterol feed group. The plasma concentrations of taurine, glutamate, alanine, valine and phenylalanine were elevated whose mean percentage increases were 48 +/- 4, 40 +/- 3, 25 +/- 3 and 35 +/- 4 respectively. These increases were associated with significant decrease in the concentration of ornithine (37%). Meanwhile proline was not detected in the plasma of treated animals. These alterations in the content of the amino acids in the tissues of the experimental group were associated with a significant elevation in the plasma gamma glutamyl transferencees [γGT] activity.

In conclusion, this study provides the first evidence that the cholesterol intake increases the Gln utilization in the renal and hepatic tissues. Under normal conditions Gln is nonessential amino acids, but it seems likely that Cholesterol intake increases demand for Gln and consequently endogenous Gln supplies become a limiting factor for cholesterol metabolic processes which is a necessary feature of the normal physiological homeostasis such as acid – base balance in the kidney.

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319. Stump problems associated with Partial Foot amputations in Iraq.

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Abstract:- Prostheses for partial foot amputations present numerous problems regarding fit, function and cosmetics. The mid-tarsal amputation of Chopart and tarsi-metatarsal amputation of Lisfrance have a bad reputation as performed in the past due to equines deformity, painful callosities and ulcerations of the stump. The result in both procedures were discarded for a period of time . But nowadays due to the improvement of surgical techniques they are regaining their place in the management of sever forefoot injuries. But here in Iraq and from our experience in orthopedic workshops it has been noticed that :

1- Most of the cases suffer from the above mentioned complications because they are still performed using the formal surgical procedure.

2- Fixation of the ankle joint movement performed by some of the surgeons gave better result and allowed us to use leather sockets which are cheaper and of lighter weight.

3- Using hard (plastic sockets) which eliminate ankle joint movement gave better results in comparison with leather sockets in unfixed stumps.

For all what have been mentioned and all the cases which have been taken care of during this study, it has been concluded that all chopart and lisfranc amputation procedures should have the ankle joint fixed to overcome most of problems raised during the prosthetic stage.

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320. Selenium level in viral warts among Iraqi patients

الثاليل الجلدية المستعصية

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Background:- Viral warts are common dermatological diseases caused by human papilla virus(HPV).Although spontaneous resolution may occur,it is consuming, and some patients might not show this spontaneous healing. selenium is of fundamental importance to human health.as a constituent of selenoproteins it has structural and enzymic roles and known as an antioxidant and catalyst for the production of some active hormones. Selenium is needed for the proper functioning of the human immune system thus its level has been linked to many diseases some of them are viral other are not.

Objective:- The present work was devoted to find a link between selenium level and the duration of viral warts disease, in order to confirm the hypothesis that selenium level has a counter acting effect in the development and inhibition of some viral diseases.

Patients and methods:- Thirty –five patients were involved in this study. fifteen patients diagnosed positively as having viral warts from those attending the department of dermatology&venereology of Baghdad teaching hospital during the period between April 2002-March2003. the other twenty aged matched subjects were categorized as healthy controls. The selenium level was determined using furnace atomic absorption spectrophotometry.

Results:- Fifteen patients with viral warts were measured selenium level their aged ranged from 10-45years (mean+SD23.8-13.3)and the duration of disease rang 0.1-10 years (mean+SD1.9-2.5) in all patients the serum level of selenium was low as the longer duration of the diseases.

Conclusions:- According to these results low or diminishing selenium status in Iraq during the sanction must be considered as a great cause of coarsen, especially as selenium appears to be a key nutrient inhibiting oxidative stress and inflammation.

التأليل الجلدية المستعصية هي من الامراض الجلدية الشائعة . هذة التأليل تشفى ذاتيا بعد مدة . بعض المرضى لا يظهرون هذا الاستعداد للاستشفاء . ان عنصر السيلينيوم يدخل في تركيب الكثير من الانزيمات وهو مضاد للتاكسد وهو مهم في جهاز المناعة. تم قياس عنصر السيلينيوم في مصول دم (١٥) مريضا مصابين بالتأليل الجلدية المستعصية بواسطة المطياف الذري . وقد اظهرت الدراسة انه كلما زادت مدة المرض كلما قل تركيز السيلينيوم .

تم الاستنتاج بان الحصار الجائر قد اثر سلبا على مستوى السيلينيوم عند العراقيين . وهذا لا بد ان يؤخذ بنظر الاعتبار وخصوصا ان عنصر السيلينيوم يعتبر مثبت للجهد التاكسدي والالتهابات.

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321. Contribution of functional MRI to the localization of language areas prior to neurosurgery: normative data and case studies

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Cognitive paradigms using functional magnetic resonance imaging (fMRI) have been proposed to provide precious information concerning the functionality of brain regions prior to neurosurgery. In this context, mapping language brain areas is of practical importance since it allows preventing major post-surgery aphasia. However, before applying experimental paradigms to clinical practice, one must ensure having at hand a task that is validated and feasible (by the patients) and that provides robust and reliable fMRI responses. For assessing the robustness and reliability of responses, one should

determine inter-individual variability of fMRI activation. For language studies more particularly, the tasks must be able to reveal consistent activations not only in classical left hemisphere language regions, but also to detect right hemisphere activations in subjects with atypical language representation. In this project, we validated a fast paradigm using two language tasks (a phonologic and a semantic task) in a large group of control subjects and showed, by the individual analysis, the extent of implication of each activated area. Significant activations, found mainly in the left hemisphere, concerned the inferior frontal gyrus, the superior/middle temporal gyri, the prefrontal cortex, the inferior parietal lobe, the superior parietal lobule/superior occipital gyrus, the pre-central gyrus and the supplementary motor area. The frequency of activation analyzed in nine regional subdivisions revealed that the most frequently activated regions were the inferior frontal gyrus and the prefrontal cortex. Our results pointed to the fact that when a combined analysis of frequency was performed almost all the activated regions showed a high probability of occurrence [Human Brain Mapping, 2004, In press]. In two clinical reports, we could show that these tasks were able to reveal either bilateral [Neuroreport 2004, 5:785-790] or exclusive right hemisphere activations [Neuroreport 2001, 13:2785-2790] in patients in whom right activations correlated with aphasic symptoms. Findings from the patients were interesting for neurosurgeons since they suggested how to tackle the lesions without producing massive post-surgery aphasia. This paradigm has now been tested in a large series of patients (>50) with various pathologies including arteriovenous malformations, meningioma, glioblastoma and pharmaco-resistant epilepsy. We propose that the combination of the two tasks tested here constitutes a suitable tool for determining language lateralization and mapping major language centers prior to neurosurgery (supported by the the SNSF grant no' 3151A0-102271/1).

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322. Pyloric Reconstructive Surgery For Postoperative Reflux Gastritis

جراحة بواب المعدة الترميمية لعلاج التهاب المعدة الارتجاعي

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Background: Postoperative alkaline reflux gastritis (PARG) is one of the complications that may occur after duodenal ulcer surgery including vagotomy and pyloroplasty. Severe and resistant cases are difficult to control conservatively. Surgical treatment includes complicated and technically difficult operations, with many side effects. Since 1995, we started to use a simple, effective and technically easy operation, for the treatment of severe cases of PARG: reconstruction of the pylorus (RP).

Objective: To describe our experience in the use of this procedure in patients who had vagotomy and pyloroplasty 1-20 years ago for the treatment of duodenal ulcer. Eight

patients had additional Contribution of functional MRI to the localization of language areas prior to neurosurgery: normative data and case studies

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Cognitive paradigms using functional magnetic resonance imaging (fMRI) have been proposed to provide precious information concerning the functionality of brain regions prior to neurosurgery. In this context, mapping language brain areas is of practical importance since it allows preventing major post-surgery aphasia. However, before applying experimental paradigms to clinical practice, one must ensure having at hand a task that is validated and feasible (by the patients) and that provides robust and reliable fMRI responses. For assessing the robustness and reliability of responses, one should determine inter-individual variability of fMRI activation. For language studies more particularly, the tasks must be able to reveal consistent activations not only in classical left hemisphere language regions, but also to detect right hemisphere activations in subjects with atypical language representation. In this project, we validated a fast paradigm using two language tasks (a phonologic and a semantic task) in a large group of control subjects and showed, by the individual analysis, the extent of implication of each activated area. Significant activations, found mainly in the left hemisphere, concerned the inferior frontal gyrus, the superior/middle temporal gyri, the prefrontal cortex, the inferior parietal lobe, the superior parietal lobule/superior occipital gyrus, the pre-central gyrus and the supplementary motor area. The frequency of activation analyzed in nine regional subdivisions revealed that the most frequently activated regions were the inferior frontal gyrus and the prefrontal cortex. Our results pointed to the fact that when a combined analysis of frequency was performed almost all the activated regions showed a high probability of occurrence [Human Brain Mapping, 2004, In press]. In two clinical reports, we could show that these tasks were able to reveal either bilateral [Neuroreport 2004, 5:785-790] or exclusive right hemisphere activations [Neuroreport 2001, 13:2785-2790] in patients in whom right activations correlated with aphasic symptoms. Findings from the patients were interesting for neurosurgeons since they suggested how to tackle the lesions without producing massive post-surgery aphasia. This paradigm has now been tested in a large series of patients (>50) with various pathologies including arteriovenous malformations, meningioma, glioblastoma and pharmaco-resistant epilepsy. We propose that the combination of the two tasks tested here constitutes a suitable tool for determining language lateralization and mapping major language centers prior to neurosurgery (supported by the the SNSF grant no' 3151A0-102271/1).

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323. dumping and diarrhoea. And to assess the safety, efficacy, and clinical results of this procedure.

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Methods: Diagnosis of severe PARG was made clinically, and by gastroscopy and biopsy, and exclusion of other biliary and (GIT) diseases. RP was done at least 12 months after the initial vagotomy and pyloroplasty. Follow-up was done clinically and by gastroscopy and biopsy.

Results: At follow-up, even after 64 months, there were excellent clinical results; 20 patients (69%) were cured completely, seven (24%) markedly, and only two (7%) moderately. Of eight patients with dumping, six (75%) were cured completely, and of two patients with diarrhoea, one was cured completely and the other had a marked improvement.

Conclusion: Reconstruction of pylorus is a simple, safe, technically easy, and very effective procedure in the treatment of resistant cases of PARG and associated postgastric surgery complications like dumping and diarrhoea.

Keywords: Alkaline Reflux Gastritis, Surgery. Post-operative Gastric Complications.

تمهيد: التهاب المعدة بعد العملية نتيجة رجوع محتويات الاثني عشر (سوائل وعصارات الصفراء والبنكرياس القلوية) هو احد المضاعفات التي قد تحدث للمريض بعد عمليات معالجة قرحة الاثني عشر، ومن ضمن هذه العمليات واكثرها شيوعا هي: عملية قص العصب التانه (المبهم) وتوسيع بواب المعدة. وبشكل جزء من هذه الحالات مشكلة مستعصية لعدم استجابتها للعلاج التحفظي، مما يستدعي علاجها جراحيا بواسطة عمليات معقدة جدا وذات تأثيرات جانبية غير مستحبة، ومضاعفات عديدة. وتجنبنا لذلك بدأنا منذ عام ١٩٩٥ باجراء عملية بسيطة وسهلة الاجراء ولكنها مؤثرة وهي: اعادة بناء بواب المعدة (كما كان قبل عملية التوسيع الاولى) وذلك لمنع رجوع محتويات الاثني عشر الى المعدة.

الهدف: لعرض خبرتنا في اجراء هذه العملية وكيفية اجرائها، وتقييم مدى نجاحها في معالجة مرضى سبق وأن اجريت لهم عمليات قرحة الاثني عشر (قص العصب التانه وتوسيع بواب المعدة) قبل ١ - ٢٠ سنة. وكذلك تقييم مدى نجاحها في معالجة مضاعفات اخرى بعد عمليات القرحة مثل: متلازمة الإغراق والإسهال. الطرق: تم تشخيص حالات التهاب في المعدة سريريا في ٢٩ مريضاً وبواسطة تنظير المعدة مع اخذ خزع من الغشاء المبطن للمعدة وتحليله نسيجياً. كما تم التأكد من التشخيص باجراء فحوصات المرارة والجهاز الهضمي. وقد اجريت هذه العمليات بعد مرور ١٢ شهراً على الاقل من اجراء العملية الاولى (عملية قرحة الاثني عشر). تم متابعة حالات المرضى بعد العملية سريريا وبواسطة ناظور المعدة والخزع النسيجية لغشاء المعدة.

النتائج: تم متابعة حالات المرضى لحد اقصى (٦٤ شهرا) وكانت النتائج ممتازة في (٩٣%) من المرضى، حيث شفي (٢٠) مريضاً تماماً من مجموع (٢٩) أي نسبة (٦٩%)، كما تحسنت حالة (٧) مرضى تحسناً كبيراً أي نسبة (٢٤%)، بينما كان التحسن متوسطاً في مريضين فقط (٧%). ومن ضمن (٨) مرضى مصابين بمتلازمة الإغراق شفي (٦) أي (٧٥%). أما المرضى المصابون بالإسهال وعددهم (٢) فقد شفي احدثهم تماماً وتحسنت حالة الآخر تحسناً ملحوظاً. ولم تحدث أية مضاعفات بعد العمليات.

خاتمة: نستنتج ان عملية إعادة بناء بواب المعدة هي عملية سهلة وبسيطة وناجحة جداً في معالجة الحالات المستعصية من التهاب المعدة بعد عمليات قرحة الاثني عشر، كما تبين بأنها ناجحة أيضاً في معالجة مضاعفات أخرى كمتلازمة الإغراق والإسهال.

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324. Diagnostic Delays of Gastric Cancer A Prospective Study in Mosul

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To examine the lengths of delay in diagnosis of gastric cancer, the reasons, its clinical importance, and the possible means to diagnose the disease as early as possible. A study of 74 patients with gastric cancer (GC) diagnosed from patients who were gastroscopied by the author as part of their management during six-year period (1993-1998). The Delays in diagnosis (in weeks) from onset of symptoms to endoscopic diagnosis, number of visits of patients to their doctors, nature of investigations done, and whether palliative or curative resection was possible, were the main outcome measures of the study.

No detectable delay was found in 28% of patients (21 out of 74). Median delay of 40 weeks (range 16-64) weeks was found in 72 % of patients (53/74). This delay was made up of the following components: delay in consulting a doctor (patient's delay 25%), doctor's delay i.e., delay in referral to consultant or to investigation (41%), investigation delay (incorrect or inconclusive) 15%, and combinations of the previous three in 19% of patients. The median duration of doctor's delay (16) weeks was significantly higher than patient's delay (12) weeks ($P < 0.01$). Forty-nine (66%) of patients made more than one visit to their doctors, 37 (50%) made 2 or more visits before being referred correctly. Sixty nine patients were treated surgically; nearly half (48%) of patients in the no-delay group had curative resection compared to only 6% in the delay group, a highly significant difference ($P < 0.001$).

In conclusion long delays still occur in the diagnosis of patients with (GC), mainly related to treating doctors, patients, and systems of referral. Early and streamlined referral and investigations pathways are needed; with public education, to diagnose (GC) as early as possible.

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325. INTERSTITIAL PHOTOCOAGULATION OF LOW ANAL FISTULA USING 810nm DIODE LASER, Prospective study

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Background: Many conservative sphincter-preserving procedures had been described to be effective in healing of anal fistula without excision or de roofing.

Objective: To verify the out come of mere photocoagulation of the fistula tract on healing of low anal fistula.

Materials and Methods: Using 810nm Diode laser, the tracts of low anal fistulae in a cohorts of six male patients (mean age of 32 years) had been photocoagulated by retrograde application of laser light through an orb tip optical fiber threaded in to the tract. Swabs for culture and sensitivity testing were obtained before and after laser application. Patients were followed up regularly to announce fistula healing.

Results: Mean laser exposure time was 6.6 min., mean operative time was 19 min., mean hospital stay was 5.9 hours and mean fistula closure time was 7.7 days.

The negative immediate post laser exposure swabs indicate that laser may have a bacteria killing power. There were no evidences of incontinence or recurrence within the mean follow up period of 9 weeks.

The feasibility of using the selected laser and accessory was excellent. The basic laser-tissue interaction was thermal photocoagulation without carbonization.

Conclusions and Recommendations: It may be possible to heal a low anal fistula tract by mere photocoagulation of the tract. Healing and closure of the fistula tract may be attributed to the coagulative destructive effect of the laser coupled with its bacteria killing power. Within the chosen parameters for application, there was no evidence of damage to the anal sphincter. The procedure can be repeated in case of failure and its application dose not precludes the application of any other conventional procedure. The Intraluminal application of fibrin glue may compete with interstitial photocoagulation of the fistula tract.

It is recommended that larger number of cases need to be done to establish a statistical analysis. Results need to be verified against control cases. Longer follow up period to assess intermediate and long term recurrences is recommended. High type, complicated and recurrent anal fistula cases should be included in any future study.

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326. Effect of Aerobics and Ozone on Physical fitness and anti oxidant level in mentally retarded children

رفع الكفاءة البدنية وتحسين مستوى مضادات الأكسدة لدى تأثير التدريبات الهوائية وغاز الأوزون على ذهنيا الأطفال المعاقين

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- معهد الأورام القومي بجامعة القاهرة رئيس التخدير والانعاش وعلاج الألم وحدة العلاج بالأوزون -

الأستاذ الدكتور محمد نبيل موصوف - أستاذ
معهد الأورام القومي وحدة العلاج بالأوزون - التخدير والانعاش وعلاج الألم ورئيس بقسم
بجامعة القاهرة

327. EFFECT OF OZONE STEAM BATH ON RECOVERY TIME AND LEVEL OF PERFORMANCE IN RHYTHMIC GYMNASTICS

تأثير حمام بخار الأوزون على فترة الاستشفاء ومستوى الأداء في التمرينات الإيقاعية

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Objectives: This study was conducted to evaluate the efficacy of ozone steam bath in enhancing the physical fitness and decreasing the recovery time after exercise.

Method: The study included two groups, the study group and the control group with 10 female athletes in each group. Their age ranged between 20 and 21 years. In the study group lactic acid was measured before exercise, ten minutes following physical exercise using ergometric bicycle, after 20 minutes of rest. The second day the same procedure was repeated, but instead of having rest each athlete had a 20 minutes exposure to ozone steam bath. The same procedure and measurements were repeated after having six sessions of ozone steam bath in a two month period. Evaluation for the rhythmic gymnastics performance was made by three judges and scores were given. This evaluation was done for all athletes of both groups twice: at the start of the study and after two months

Results: The results showed that the mean lactic acid level increased from 2.76 (before exercise) to 10.11 mill mole after exercise and decreased to 6.98 mill mole (following rest), but however the decrease was marked (2.28 mill mole) following ozone steam bath. Following 6 sessions of ozone exposure in 2 months time in comparison to the readings at the beginning of the study there was a decrease in lactic acid levels as follows 22.46% (before exercise), 32.15 % (after exercise), 17.19% (following rest) and 34.21% (following ozone exposure). Evaluation of the rhythmic gymnastics performance indicated a 55.37% improvement in the study group in comparison to only 6.31% improvement in the control group.

Conclusion: Ozone steam bath is highly effective in enhancing the performance in athletes as well as reducing the recovery period after exercise. This is particularly evident if several sessions were given.

الغرض من البحث: تقييم فعالية حمام بخار الأوزون في تحسين اللياقة البدنية وتقليل فترة الاستشفاء عقب المجهود العضلي.

طريقة البحث: تضمنت هذه الدراسة مجموعتان؛ المجموعة البحثية والمجموعة الضابطة؛ في كل مجموعة ١٠ من الرياضيين الإناث الذين تراوحت أعمارهم ما بين ٢٠ و ٢١ عاماً. في المجموعة البحثية تم قياس مستوى حامض اللاكتيك قبل التدريب، وبعد ١٠ دقائق من التدريب على الدراجة الأرجومترية وبعد ٢٠ دقيقة من الراحة. في اليوم التالي تم تنفيذ نفس البرنامج ولكن بدلاً من فترة الراحة تم تعريض كل رياضية إلى ٢٠ دقيقة من حمام بخار الأوزون. هذا وقد تم إجراء نفس القياسات السابقة بعد شهرين تم إعطاء الرياضيين خلالهما ٦ جلسات من حمام بخار الأوزون. وكان تقييم الأداء في التمرينات الإيقاعية في المجموعتين في أول الدراسة وبعد شهرين من بدايتها عن طريق النقاط بواسطة ثلاثة من الأساتذة المحكمين...

النتائج: أظهرت النتائج أن متوسط مستوى حامض اللاكتيك ازداد من ٢,٧٦ "قبل المجهود" إلى ١٠,١١ ملليمول بعد المجهود ثم انخفض إلى ٦,٩٨ ملليمول بعد الراحة ولكن انخفاض مستوى حامض اللاكتيك كان كبيرا "٢,٢٨" بعد جلسة حمام بخار الأوزون. بعد ٦ جلسات من حمام بخار الأوزون خلال فترة شهرين وبالمقارنة بالنتائج قبل التعرض لهذه الجلسات المتعددة كان هناك انخفاض في مستوى حامض اللاكتيك كما يلي: ٢٢,٤٦% قبل المجهود، ٣٢,١٥% بعد المجهود، ١٧,١٩% عقب الراحة، ٣٤,٢١% بعد التعرض لحمام بخار الأوزون. تقييم الأداء في التمرينات الإيقاعية أوضح تحسن ٥٥,٣٧% في مستوى الأداء في مجموعة البحث بالمقارنة بتحسن ٦,٣١% في المجموعة الضابطة.

الخلاصة: حمام بخار الأوزون ذو فعالية كبيرة في تحسين الأداء في الرياضيين علاوة على اقلال فترة الاستشفاء عقب المجهود العضلي وقد تعاضم هذا الدور في حالة اعطاء جلسات متعددة.

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الجراحة Surgery

328. Biliary complications in laparoscopic cholecystectomy

الإختلالات الصفراوية في عمليات المرارة بالانتظير

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Objective: to report the frequency and types of biliary complications of LC

Design: prospective case series

Setting: Mosul Teaching Hospital

Patients and Methods: Two groups were included in the period from sept 1995 to sept 2004, in group I, 4625 patients underwent LC and in group II, 2250 cases subjective to open cholecystectomy (OC)

Results: these biliary complications are recorded:

1. Bile duct injury in 3 cases (0.065%) in group I, and in 3 (0.13%) cases in group II, the types, time of recognition, and surgical management of these injuries were compared to other studies.
2. Biliary peritonitis due to slipped clip of cystic duct in one case (0.02%) in group I.
3. Retained CBD stone in 5 patients (0.1%) in group I and 3 cases (0.1%) in group II.
4. Subhepatic biloma in one case (0.04%) in group II.
- 5 Retained cystic duct stones in one case (0.02%) in group I.
- 6 Sub hepatic abscess due to retained intraperitoneal stone in one case (0.02%) in group I.
7. Abdominal wall abscess due to retained stones at the site of the port where pulling the gall bladder out occurred in two cases (0.04%) in group I

Conclusion: Biliary complications following LC or OC are rare but are dangerous mainly those related to bile duct injury. these problems can be avoided by a careful preoperative work-up, meticulous dissection of Calot's triangle and preoperative cholangiography if available.

Surgeons should be aware of these complications in case of anomalies, severe inflammation and during the use of diathermy coagulation and other instruments of LC

Keywords: cholecystectomy, bile duct injury, laparoscopic methods, surgery

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329. LAPAROSCOPIC CHOLECYSTECTOMY IN THE ERA OF BLOCKADE

استخدام المنظار الجراحي لإستئصال المرارة عند المسنين

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BACKGROUND: The blockade on Iraq led to sharp shortages in the supply of medical equipment, including those used in laparoscopic surgery (LS). In order to continue progressing in the field of LS and defying one of the aims of Blockade, additional or alternative methods were used during the performance of laparoscopic cholecystectomy (LC).

OBJECTIVE: To describe and assess the results of using some of these modalities;

1-Monopolar diathermy control of cystic artery.

2-Three ports approach to (LC).

3-Silk ligature of cystic duct.

SETTING: This study was accomplished during the period from 1996 to 2001 in the Al-Zahrawi Teaching Hospital.

RESULTS: Monopolar diathermy control of cystic artery was attempted in 137 cases out of 200 patients who underwent LC. It was found to be safe with no noticeable increase in the incidence of intraoperative bleeding (16 %) and no report of postoperative bleeding.

Three ports approach adopted safely in 37 cases out of 200 patients. This approach further minimizes the invasiveness of LC and so it is more economic in regard to less instruments needed and more cosmetic.

Ligation of cystic duct by silk suture was attempted in 24 cases (12 %). Although it increased the operating time (average 7 minutes additional), but it was found to be safe and no report of postoperative bile leakage.

CONCLUSION: It was found that these modalities in LC were, safe, having no drawbacks, economic, and can be regarded as alternatives to the standard methods in LC.

استخدام المنظار الجراحي لإستئصال المرارة عند المسنين

الهدف: تهدف هذه الدراسة لمعرفة إمكانية استخدام المنظار الجراحي لرفع المرارة بأمان عند كبار السن. الطريقة والنتائج: شملت هذه الدراسة ١٨٢ حالة تم إجراء رفع المرارة لهم باستخدام المنظار الجراحي، من ضمنهم ٤٣ حالة لمرضى تتراوح أعمارهم ٦٠ سنة فما فوق. تكلفت عمليات رفع المرارة بالمنظار بنجاح في ٣٦ حالة (٨٣,٧%). كان معدل تحويل العملية إلى رفع المرارة عن طريق فتح البطن (١٦,٣%) وفي معظم الحالات سبب التحويل تشوهات تشريحية لوجود التصاقات كثيفة ناتجة عن الالتهابات المتكررة للمرارة لكون معظم الحالات متأخرة في طلب المعالجة الجراحية.

المضاعفات أثناء العملية كانت مقصورة على حالات قليلة من حدوث نزف دموي من شريان كيس المرارة أو

أحد أفرعه الرئيسية (١٦%) وتمت السيطرة عليه في معظم الحالات ناطورياً (٩٧,٧%).

المضاعفات ما بعد العملية كانت لا تختلف عن تلك التي سجلت للمرضى دون سن الستون وكانت لا تتعدى

التهابات سطحية لأحد المباحض (٧%). في حالة واحدة لمریضة كبيرة بالعمر تم اكتشاف فتق في أحد المباحض

الخاصة بالجراحة الناظورية. لم تسجل أية حالة وفاة من بين كل المرضى الذين أجريت لهم عمليات رفع المرارة بالمنظار.

كان معدل رفقود المرضى الكبار (١,٥ يوم) وهو أكثر بقليل من معدل الرفقود (١,٢ يوم) عند المرضى دون

الستون، وعزيت هذه الزيادة في الرفقود إلى كثرة إصابة المرضى الكبار بأمراض ارتفاع ضغط الدم، داء

السكري، ومشاكل الجهاز التنفسي المزمنة وما تتطلبه من عناية ومراقبة بعد العملية ولفترة أطول.

المحصلة: لقد أثبتت هذه الدراسة انه بالإمكان إجراء عمليات رفع المرارة بالمنظار الجراحي بأمان وفعالية

لمعظم المرضى كبار السن، وبهذا يمكنهم الاستفادة من منافع هذه التقنية الجديدة في الجراحة.

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330. The Detection and Management of Early Gastric Cancer in Northern Iraq Twenty Years Experience

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Background: Early gastric cancer (EGC) is a distinct form of gastric cancer that have an excellent prognosis, compared to the poor prognosis of gastric cancer; but it is rarely diagnosed. The present study presents our efforts in the diagnosis and management of (EGC), and ways of improving the diagnosis of this form of cancer.

Patients and Methods: Between 1982 – 2002 (20 Years), 224 patients with gastric cancer were diagnosed, 11 of them had (EGC) diagnosed by endoscopy and biopsy. All were studied and operated on. Data collected regarding: previous treatment and endoscopy, clinical features, investigations, types of surgery, operative findings, histopathology, and follow up.

Results: Eleven cases of (EGC) diagnosed from 224 cases of gastric cancers during the period of 20 years: 4.9%.

Dyspepsia was the most comment symptom present in 100% of patients, followed by nausea and vomiting in 36% of patients.

72.7% of (EGC) were located distally in the stomach, and 63.6% were of the depressed type (type III). 45.5% were intramucosal, 54.5 were submucosal, and lymph node infiltration was presents in 18.2%.

Two patients had segmental gastric resection (RS), or pylorus preserving gastrectomy (PPG). Five-year survival was 88.9%.

Conclusions: (EGC) does exist in Iraq, and is the same as in other parts of the World. The incidence of the diagnosis is 4.9% which is low like the rest of the World, except Japan. It has an excellent prognosis.

High index of suspicion, and the frequent use of endoscopy and biopsy are important factors to help improve the diagnosis.

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331. Flexor Tendon Injuries of The Hand at Zone II ,Early or Delayed Suture ?

نتائج المعالجة المبكرة او المتأخرة في أصابات اليد المنطقه ٢

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Introduction: The healing of a sutured tendon in the hand usually occurs with an unwanted amount of scarring that defeats good results. Many variables have been studied over the last few decades; in which the timing of repair was a matter of debate .Zone II is the area where those variables mostly affect the results of treatment.

Aims: To study and evaluate the results of early or delayed repair under the effects of our local variables.

Methodology: The prospective study included 85 patients diagnosed with flexor tendon injuries of the hand in zone II .The patients were divided into three groups according to their time of surgical intervention post injury. Group A (early) had their tendon repair

within 48 hours , group B (delayed) had their tendon repair within three weeks , and group C who arrived late and had tendon graft procedure .

Results: Results showed that primary repair, group A, ended with better functional results than those with delayed repair and than those with tendon graft. In group A excellent plus good results were 83.7% versus 43.8% in group B& C .These results are statistically significant with a $P < 0.0002$.

Analysis : These results can be explained ; because in acute injury the wound is fresh, tendon are not retracted yet , while , in the delayed patients results are inferior because of the need to more dissection , and even more with tendon graft and using siliastic rod as temporary spacer to create a fibro-fascial canal for the second stage tendon graft .

Conclusion : We concluded that early suture of a tendon is better than delayed repair, and encourage casualty doctors to refer patients to hand surgery units to have improved end results in this difficult area of treatment

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332. Laser Surgery in Haemorrhoid

جراحة البواسير بمساعدة الليزر

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CO2 laser has been established to cut tissue with advantages over the blade in healing time, bleeding amount and pain severity , we apply this in haemorrhoidectomy and the result was encouraging too much especially when using local anaesthesia

بعد ان اثبت ان استخدام الليزر ثاني اوكسيد الكربون يساهم في تقليل الالم و النزف ويسارع في شفاء الجرح ثم تطبيق ذلك في جراحة البواسير و قد اظهرت النتائج تفوق هذا النوع من الجراحة الكلاسيكية و خصوصا عند استخدام التخدير الموضعي

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333. Die Plastische Chirurgie , die ästhetische Chirurgie unter der Lupe Gemeinsamkeit und Unterschiede

Dr Abdel Rahman. Yousef,,Germany

334. “living related Liver Transplant, the surgical procedure”

Dr M. El-Wahsh

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Currently OLT has proven to be clinically useful and often life saving in a variety of irreversible acute and chronic liver diseases for which no satisfactory medical therapy is available, with more than 4000 transplants performed annually worldwide. The first attempt at OLT was performed in Denver

between May and July 1963, when four OLT were performed, one patient of that group survived for 23 days. It was unsuccessful attempt, as were the next seven transplants performed in Denver, Boston and Paris. In 1964 Absolon and colleagues carried out the first heterotopic liver transplant in a child with biliary atresia who died from biliary leakage 13 days after transplantation. Calne and Williams initiated the procedure in 1968 at Cambridge and King's College in London and performed the first successful OLT in the UK

The first long-term survival after liver transplantation was in 1967. The patient, an 18 month old child with a hepatoma, survived for 13 months before dying from widespread tumour metastasis. The late 1960s and 1970s saw very slow progress in this field, with an overall 1-year patient survival of only 35%, as well as frequent and disabling complication. Several major advances in the early 1980s – the introduction of cyclosporine, the progress in donor surgery and organ preservation, and the refinement of the surgical technique – led to greatly improved results. However, due to shortage of brain dead donor, living related liver transplant was introduced to the clinical practice. The current presentation will explain the surgical procedure and compare it with orthotopic liver transplant.

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335. Monitoring Body Temperature during Major and Minor Surgery

التبدلات الحرارية في الجسم توحى بالتبدلات الاستقلابية في الجراحات الصغرى والكبرى

Dr. Nabil Kattab

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During anesthesia patients temperature may fall as result of reduction in the metabolism rate during the anesthesia periods. The anesthetic effect lead to cessation of muscle contraction, which can cause further reduction in metabolic rate and reduce blood flow to tissues.

Patients with open cavities and a large exposed area, and those who are undergoing deep anesthesia lose more heat than others patients. The terms Hypothermia refer to loss of body temperature below (36,60 C) or lower, when the body is unable to generate heat for body function. Inadvertent hypothermia may occur as a result of low temperature in the operating room, infusion of cold fluid; inhalation of cold gases, open wounds. Prevention of hypothermia is a major objective to minimize or reverse the physiological functions. Hyperthermia, may occur as a result of enzyme deficiency in some individuals, to metabolize specific anesthetic agent leading to fetal Hyperthermia. Objective The purpose of this study was to monitor the body temperature of patients during surgical operations done under general anesthesia and to asses heat loss in various surgical procedures.

Design and Setting Sixty patients were divided in two groups (minor and major) undergoing surgical operations under general anesthesia; in AL – Salaam teaching hospital participated in the study; during the period from August 2001 – January 2002.

18 patients (60%) were male in the first group, with age range of (20 – 40) years and 25 patients (83.4%) were female in the second group with age range of (41 – 50) years. Open cholecystectomy was taken as major operation and hernia was taken as minor operation. Recording of temperature done from the different sites of the body that include core temperature (esophageal), skin surfaces measured from chest, arm, thigh and calf, using a thermistor or thermocouple. The temperature was measured 5 minutes before induction of anesthesia, and then every 5 minutes throughout the operation time.

The operating room was kept between (21o – 23o C).

Results

The majority of minor operation group were males (60%) under 40 years, while in the major operation group, the majority were female (83.4%) and aged over 40 years. Monitoring of body temperature from all sites of measurement, in the post induction of anesthesia and throughout the intra-operation period, compared with pre – induction body temperature shows that there is a significant heat losses. There is a significant difference in heat loss between the two groups. There were no cases of Hyperthermia reported in this study. It was concluded that the two study groups were exposed to heat loss during the different periods of operation, due to the effect of general anesthesia and elderly patients were more prone to hypothermia than younger ones.

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336. Infectious Complications of Central Venous Catheters: diagnosis, incidence and risk factors

الإختلالات الالتهابية للطريق الوريدي المركزي التشخيص والتواتر

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Background: catheterization of central veins is a commonly used procedure in intensive care units (ICU). It is indicated for monitoring of central venous pressure, for long-term intravenous therapy and for total parenteral nutrition. Central venous catheter-related sepsis (CRS), is a problem of current concern.

Objectives: the following study was carried out to diagnose and determine the incidence of CRS among critically-ill patients admitted to Zagazig University Hospitals. Another objective was to identify risk factors for such type of infection.

Methods: quantitative culture of the tips of 75 catheters inserted in the internal jugular or the subclavian veins of 75 ICU patients were performed. Two samples for blood culture were collected from each patient; one at the time of catheter removal and the other within 48 hours later. 75 skin entry-site, 35 distant foci of infection cultures and 75 infusion fluid cultures were studied.

Results: no microorganisms were isolated from 39(52%) central venous catheters (CVC). Catheter contamination rate was 19% (14 catheters), colonization rate was 4% (3 catheters), while bacteremic CRS, and clinical CRS rates were 9% (7 catheters) and 16% (12 catheters), respectively. Positive blood culture results were associated with

positive more than with negative catheter tips. *Staphylococcus aureus*, *Staphylococcus epidermidis*, and *Candida albicans* were the most frequently isolated organisms, whether from catheters or from the other clinical specimens studied. The presence of a distant septic focus or a tracheostomy wound, contaminated skin-entry site or infusion fluid and the internal jugular site of insertion were the factors that carried significant risks for seeding our catheters with microorganisms. There was a direct proportion between positive catheter tips and the duration of catheter stay.

Conclusion: there is a need for upgrading existing infection control policies addressing CVC insertion and care. Monitoring of CRS rates provide guidelines for periodic modification of such policies. Blood culture can be considered a valuable parameter of CRS

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العظمية وطب الطوارئ والحوادث Orthopedics & Traumatology

337. Traumatic Head Injuries, Management Of Patients With Traumatic Head Injuries

معالجه اصابات الراس الناتجه من الحوادث

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Introduction : Injuries are still the leading cause of death below 45 years of age. About one third of these deaths due to head injury.

Management of Head injury is a very controversial subject.

Care of patients with head injury start from the time of injury and the arrival of paramedical personals. The main aim of the management is to prevent secondary brain death. So the prehospital and E.D. resuscitation play a major role in the patient out come.

Methodology & Aims :

To review and outline the management of head injury.

Concluding remarks :

The appropriate approach for resuscitation with proper monitoring and correcting or preventing secondary assaults factors to the brain e.g. hypotension, hypoxia; are the key factors.

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338. Management of liver trauma

تدبير اصابات الكبد الرضية

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339. Surgery of Rheumatoid Hand

الإمكانيات الجراحية في إصابات اليد الرثوية

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Indications و Principles of surgery in rheumatoid diseases as well as tenosynovectomy, synovectomy of the joints, tender repair, reconstructive and salvage procdures, orthoplasty and soft tissue procedures will be discussed.

جراحة اليد والأستطبابات واستئصال الزليل من غمد اليد والمفصل وعمليات الوظيفة للأوتار اوالمفاصل

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340. HIP FRACTURE/AN EPIDEMIOLOGICAL STUDY IN AL-NAJAF

دراسة وبائية عن كسور الورك في النجف

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The objective of this work is to study the epidemiology of the proximal femoral fracture (hip fracture), which is regarded as a big public health problem especially in elderly. Patient and method: the study was conducted in the teaching hospital in Najaf between Feb.1999 till Feb.2002, for all hospitalized patients who they had hip fracture. Results: there were 272 patient divided into two groups: The first aged 0-49 years, and the second aged 50 years and over. The first group included 40 patients: 30 male and 10 female, the mean age was 23 year. The causes of the fracture were fall from height 50%, road traffic accident 30%, and fall in 20% of the cases.

The second group included 232 patient: 156 woman and 76 man. Female to male ratio was 2:1. The mean age for this group was 68 years. The causes of the fracture were fall in 83%, fall from height in11%, and road traffic accident in 6%. The incidence of the fracture in the second group was 86/100,000 inhabitant/year in Al-Najaf. Conclusion: Hip fracture occurs more commonly in elderly especially women. Fall is the main cause of the fracture in elderly. New strategy is needed to face this health problem aiming to decrease its rate of occurrence.

كسر الورك(النهاية القريبة لعظم الفخذ)

الغرض من هذه الدراسة الوبائية هو للتعرف على حجم هذه المشكلة والتي تعتبر من المشاكل الصحية الكبيرة وخصوصا لدى كبار السن. أجريت هذه الدراسة خلال الفترة من شباط ١٩٩٩ ولغاية شباط ٢٠٠٢ في مستشفى صدام التعليمي في النجف لجميع المصابين بكسر الورك ولكل الفئات العمرية. كان عدد المرضى الكلي ٢٧٢ وقد تم تقسيمهم إلى مجموعتين: الأولى تضم الفئات العمرية من ٠-٤٩ سنة والثانية تضم الفئات العمرية ٥٠ سنة فما فوق.

ضمت المجموعة الأولى ٤٠ مريضا: ٣٠ ذكرا و ١٠ إناث، معدل العمر كان ٢٣ سنة. كانت أسباب الكسر كالاتي: ٥٠% سقوط من علو، ٣٠% حوادث طرق، و ٢٠% حالات سقوط كان يكون أثناء المشي. ضمت المجموعة الثانية ٢٣٢ مريضا: ١٥٦ امرأة، و ٧٦ رجلا، معدل أعمارهم ٦٨ سنة. نسبة النساء إلى الرجال ٢:١. كان معدل حدوث الكسر في المجموعة الثانية هو ٨٦ لكل ١٠٠,٠٠٠ مواطن يسكن النجف/لكل سنة. كانت أسباب الكسر كالاتي: ٨٣% نتيجة سقوط، ١١% سقوط من علو، و ٦% حوادث طرق، من أهم الاستنتاجات هي أن كسر الورك يصيب كبار السن وخصوصا النساء، وأن أهم سبب للكسر لدى كبار السن هو السقوط والذي يكون بسيطا في حالات كثيرة. إن وضع خطة مستقبلية لمواجهة هذه لمشكلة الصحية التي تواجه كبار السن قد يساعد في التقليل من نسبة حدوث مثل هذه الكسور.

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341. URETERIC INJURY

إصابات الحالب الرضية

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Retrospective study of ten cases of ureteric injury dealt with at Mosul teaching hospital -urology department from January 1998 to April 2002. All cases were referred from general surgical or gynecological departments. There were (6) male and (4) females; mean age was (25 years).

Eighty percent of cases diagnosed post operatively for variable duration from 24 hours to 2 months due to post operative complications like urinary fistula, loin abscess, fever or loin pain by IVU and retrograde pyelography.

The cause of injury was bullets or shells in (50%) of cases, gynecological operations in (30%) and RTA in (20%).

Lower parts of the ureter involved more frequently (60%) specially in pelvic surgery, equally involving both sides while any part of the ureter involved by missiles.

Missed or improperly treated ureteric injury carries high morbidity like hospital stay, re exploration (70%) and loosing renal function.

Uretero- common iliac artery fistula is a rare but serious complication reported in one of the cases.

The causes of missed ureteric injury are the rarity of the ureteric injury itself, poor anatomical knowledge of the pelvis, mass ligation of the uterine artery and keeping retroperitoneal hematoma without exploration.

Sound knowledge of pelvic anatomy and ureteric stenting are pre requisites in difficult pelvic surgery, and keeping the possibility of ureteric injury in mind, retroperitoneal hematoma exploration and its proper management at initial exploration decreases the morbidity and complications.

إصابات الحالب المنسية

دراسة مستعادة سجلت فيها عشر حالات لإصابات الحالب خلال الفترة من كانون الثاني 1998 إلى آذار 2002 تمت إحالتهم من الأقسام النسائية والجراحة العامة وعولجت في قسم الجراحة البولية في مستشفيات الموصل التعليمية، منها ستة ذكور وأربعة إناث، معدل العمر (25 سنة).

تم تشخيص (80%) من الحالات بعد إجراء العملية الأولى بسبب الإختلالات كارتفاع الحرارة وآلام البطن أو حدوث ناسور بولي بمدة 24 ساعة وحتى شهرين باستخدام الأشعة السينية بالصبغة الوريدية وقسطرة الحالب. أسباب الإصابات كانت الإطلاقات النارية (50%) ، عمليات الحوض النسائية (30%) وحوادث الطرق (20%).

نصيب الثلث السفلي للحالب كان (60%) من الإصابات في عمليات الحوض موزعة بالتساوي لكلا الجهتين بينما إصابات الإطلاقات النارية تصيب أي مكان من الحالب. إصابات الحالب المنسية لها معاناة مرضية أكثر مثل المكوث في المستشفى والتعرض لعملية جراحية إضافية أو أكثر (70%) وفقدان وظائف الكلية.

من أسباب عدم تشخيص إصابات الحالب عدم المعرفة التشريحية الشاملة للحوض، عقد الشريان الرحمي بدون استكشاف الحالب، عدم قسطرة الحالب في العمليات المعقدة وعدم استكشاف الأورام الدموية خلف البريتوني. المعرفة التشريحية الشاملة للحوض وقسطرة الحالبين خلال العمليات الجراحية والناظورية المعقدة في الحوض، والأخذ باحتمالية إصابة الحالب في كافة إصابات البطن وعلاجها أتيا يجنب الحالب الإصابات الغير مقصودة ويقلل إختلالاتها.

ومن الإختلاطات النادرة والخطرة التي سجلت، ناسور بين الحالب والشريان الحرقفي المشترك

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342. Vacuum assisted closure for the treatment of sternal infections and poststernotomy mediastinitis

معالجة التهابات القص والمنصف بشفت المفززات بعد عمليات القلب

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BACKGROUND: Vacuum-assisted closure therapy is a novel treatment employed to aid wound healing in different areas of the body and recently also in sternotomy wounds.

Sternal infections after median sternotomy remain a serious cause of postoperative morbidity and mortality. The treatment of sternal infections has evolved over the past few decades, and now aggressive surgical debridement with rotational muscle flap closure has provided an acceptable means of managing this complication. However, there are several disadvantages with this approach, mainly related to the morbidity associated with serial debridements with dressing changes and open packing until the wound is closed.

METHODS: Our method of managing sternal infections is based on the triad of prompt surgical debridement, serial quantitative wound cultures, and the use of the Vacuum Assisted Closure (VAC) device (KCI International). The wound is fitted with the VAC device, which consists of a non-collapsible, open-cell, polyurethane sponge with embedded vacuum tubing, a vacuum pump, and transparent adhesive dressing. When systemic signs of infection and quantitative cultures indicate the resolution of the local infection, regional muscle flap or primary wound closure is performed.

CONCLUSIONS: The VAC serves as a bridge to sternal wound closure and is a safe and effective therapeutic strategy for patients with impaired physiologic reserve and/or highly contaminated wounds. We feel that it is also reasonable to consider the VAC as a preventive strategy against right ventricular rupture. Furthermore, because the firmness of the vacuum sponge apparatus acts as an impressive sternal stabilizer, post-debridement extubation is possible, reducing the need for prolonged paralysis and mechanical ventilation. This stabilization also allows early postoperative ambulation with the VAC in place. In summary, we believe that the VAC device offers an effective means of managing patients with sternal infections.

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343. Amputees in Yemen

الحاجة الماسة لتأهيل ورعاية المرضى المبتورين في اليمن

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A (30) months study on the informations collected about (1100) amputees was conducted at the Physiotherapy and Prosthesis Center in Sanaa, which is the main one in the country. This was the first study about amputees and prosthesis in Yemen. Lack of detailed and classified informations had a great effect on the quality of results obtained. These results showed that Trans-Tibial amputation were the dominant level of amputees with (61%) to (34%) Trans-Femoral amputation. The traumatic causes were (56.37%) while diseases caused only (37.9%). Due to many reasons (explained in the paper) the conventional type of prosthesis (wooden type) were the most common type provided to amputees until the second half of 2001, when the Polypropylene prosthesis introduced by the International Red Cross Committee and starts to be more common.

Regarding upper limb amputees Below Elbow level formed (65.17%) which is more than double the Above Elbow (29.21%). Again traumatic causes were the dominant with (86.52%). They used the mechanical prosthesis mostly (88.76%).

In this paper the reasons behind the bad informations and how to be improved discussed. Upgrading prosthesis services in this country also discussed.

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344. Prophylactic Uses of Antimicrobials in Hospitals

استعمال المضادات الحيوية بشكل وقائي في المشافي

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Prophylactic uses of antibiotics in hospitals account for big proportion of total antibiotic uses. In all situations, the risk of acquiring infection must be weighed against the risk of selecting resistant and virulent strains, which may ultimately enhance the risk of infection. This necessitates that antimicrobial chemoprophylaxis, only be used when indicated and where the benefit is high and well documented. It is not feasible to cover the patients against all possible pathogens. If this is tried, it will only result in selection of the most resistant organisms from the environment, which may easily colonize and infect patients, after their own normal flora have been damaged with antimicrobials. Proper chemoprophylaxis should be directed to the action of specific agent on specific organism. Important applications for the prophylactic antibiotic uses in hospitals are for chemoprophylaxis in surgery, for prevention of endocarditis and prosthetic infections, for selective decontamination of the digestive tract and for prevention of infection in severely neutropenic patients.

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345. Current status of vertebro- and kyphoplasty in germany. Preliminary results of a prospective cross-sectional study

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Introduction: Vertebroplasty (VP) and Kyphoplasty (KP) are relatively innovative methods in spinal surgery. The procedure is based on percutaneous insertion of Polymethylmethacrylat (PMMA)- bone cement into unstable vertebral bodies. VP and KP in the light of the existing literature seem to be encouraging methods regarding pain in osteoporotic patients.

Methods: Due to the lack of valid data of incidence and prevalence in germany we decided to initiate a prospective non randomized cross-section study to create valid data. Secondary endpoints of the study were indications in- and excluding criteria in several departements, technical aspects of the procedure, complications and clinical endpoints like pain-reduction and morbidity. The study started on June 1st 2004 with the aim to include all german centers performing VP and KP. Until the February 1st 2005 nearly 500 institutions were evaluated by an standardized questionnaire.

Results: Preliminary Data from the 1st interim analysis regarding to the protocol criteria. At december 1st 2004 complete data of 100 centers were available. 15 centers performed both procedures. The average size of the hospitals was 248 (30-640) beds. VP (0-20 cases: n=6), (21-40: n= 2), KP (0-20: n=8), (21-40: n=5). Indications differed from fresh osteoporotic fractures VP (n=8), KP (n=8), osteoporotic vertebral bodies VP (n=10), KP (n=6), heamangioma VP (n=4), KP (n=1), metastasis VP (n=7), KP (n=3), fresh non-osteoporotic fractures VP (n=3), KP (n=3). The operation was performed for KP by senior surgeons (n=5), consultant (n=8), orthopeadic specialists (n=3), residents (n=2) and for the VP by seniorsurgeons (n=9), consultant (n=10), orthopeadic specialists (n=3), residents (n=3). The applicated amount of bone cement ranged for KP thoracal spine 5.83 ml (4-10 ml), lumbar sine 8.29 ml (5-14 ml) and for VP thoracal spine 6.2 ml (4-10 ml) and lumbar spine 8 ml (3-20 ml). The distribution of instrumented levels VP: thoracal spine 1-11 (n=4), thoracolumbar spine (Th 12-L1, n=8), lumbar spine (n=6) and for KP: thoracal spine (n=1), thoracolumbar junction (Th 12-L1, n=6) and lumbar spine (n=9). In the 53 reported VP and KPs 5 intraoperative complications were reported (3 cement loss, and 2 bleedings).

Discussion: The study inaugurated by our departement is performed to create valid data concerning the incidence and indications of VP and KP in germany. The current statistical analysis shows that this methods are relatively new surgical procedures in many departements with small patient numbers per unit. VP and KP according to our

data is generally performed by experienced surgeons. Indications are in most cases unstable vertebral bodies of different origins. Significant indication profiles, which clearly define the adequate patient for VP and KP with high evidence levels are currently not available. The reported complication rate is moderate. At the time of the ARABMED-Congress we will be able to present the data of the first 500 institutions evaluated in this study (total number of hospitals in germany 2400).

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Pharmacology & Medical Science العلوم الدوائية

346. Medical Biotechnology: The Northern Ireland Experience

خبرة أيرلندا في التقنيات الطبية الحيوية

Prof. Gerry McKenna

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Northern Ireland, like most western economies is experiencing a loss of manufacturing jobs to lower wage economies in areas such as textiles, shipbuilding and agriculture. The challenge is to transform Northern Ireland into a high technology-based economy. Medical biotechnology is a priority and is strength of the two Northern Ireland universities in terms of research and the supply of graduates. The development of medical biotechnology is being facilitated by government and private sector expenditure on research infrastructure, the recruitment of world-class researchers and a commitment to the commercial exploitation of research. This involves global alliances which can bring significant economic, social and cultural benefits to all the parties involved.

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347. Clinical Chemical analysis of modified nucleosides and their diagnostic value in Tumor disease

دراسة سريرية كيميائية في تشخيص الأورام مخبريا

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RNA in particular t-RNA, contains a large number of modified nucleosides, in addition to the normal ribonucleosides adenosine, guanosin, cytidine and uridine . They are formed Posttranscriptionally within the RNA molecule by the action of various modification enzymes, especially methyltransferases and ligasis. During RNA turnover free modified nucleosides are formed which circulate in the blood steam and are excreted in the urine, for example 1-methylguanosine, 2-methylguanosine and pseudouridine. The levels and the patterns of the nucleosides are altered in several malignant diseases.

The analytical procedure includes the isolation of the nucleosides from the urine by phenylboronate gel chromatography and the separation and quantitation by high performance liquid chromatography

In two clinical studies the diagnostic value of urinary modified nucleosides was investigated, in a study on women with breast cancer and a study on children with leukaemia and other malignant disease. As compared to healthy women and age related healthy children, statistically significant elevations of various nucleosides are observed as well as changes in the relative patterns. With diagnostic sensitivity and specificity of more than 80% the patterns have considerably better tumor marker characteristics for breast cancer than the conventional markers CEA and CA 15-3

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348. VIRTUAL BRONCHOSCOPY, COMPUTERIZED TOMOGRAPHIC BASED NEW TECHNIQUE: THE CLINICAL ROLE IN ACUTE SPONTANEOUS PNEUMOMEDIASTINUM

التشخيص المعتمد على الكومبيوتر تموغرافي والتنظير القصبي في التهابات الرئة والمنصف

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With the introduction of multi-slice computerized tomography CT, imaging speed and resolution quality were improved and the volumetric acquisition allowed reconstruction in every orientation with isotropic space resolution. One of the most interesting applications of these capabilities is virtual endoscopy, actually most often used in the colon. Obviously, virtual endoscopy can also be used at the level of the tracheobronchial tree. This technique allows accurate reproduction of major endoluminal abnormalities and excellent correlation with fiberoptic bronchoscopy regarding the location, severity and shape of airway narrowing. (1,2)

Virtual endoscopy also enables the clinician to visualize the bronchial tree beyond an obstructive lesion and thus to perform a kind of "reverse bronchoscopy". This unique application of virtual bronchoscopy evaluates the stenosis from a distal viewing point. Virtual bronchoscopy is of particular interest in diagnosing mild changes in airway caliber and understanding complex tracheobroncheal abnormalities^{3,4}

Pneumomediastinum is one of critical emergencies which need rapid decision and eventual interventions because of its major complication like mediastinitis. It is sometimes difficult to diagnose the reason of pneumomediastinum.

Tracheal perforation is one of the causes of pneumomediastinum ⁸

A perforation of the tracheo-bronchial tree is sometimes difficult to detect. Fiber-optic bronchoscopy is often described as the golden standard imaging technique.

Furthermore, patients with tracheal tear or trauma are often critically ill and respiratory instable and it can be more difficult to perform an endoscopy than to process a CT scan.

The advantage of virtual bronchoscopy is that it gave a 3-dimensional evaluation of hollow structures like the trachea bronchial tree just by fly-through navigation. Therefore virtual bronchoscopy is more practical, less time consuming and more accurate than the evaluation of the trachea and main bronchi on axial and coronal CT-images.

Moreover it is superior to fiberoptic bronchoscopy because of the possibility of retrograde endoscopy, especially in cases of pneumomediastinum where the contrast between air and soft tissue is high, which facilitates detection of small lesions

The use of virtual bronchoscopy should be considered as a reliable diagnostic tool in cases of pneumomediastinum especially due to the ability to explore the airways in both antegrade and retrograde navigation.

A case of severe COPD patient complicated by pneumomediastinum due to spontaneous tracheal perforation related to post influenza vaccination. The virtual

bronchoscopy was superior to fiberoptic bronchoscopy and classic multi slice CT in diagnosing the tracheal perforation.

Key words: trachea, perforation, virtual bronchoscopy, CT-scan, pneumomediastinum

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349. The effect of hemodialysis and dialyzer biocompatibility on erythrocyte glutathione and related enzymes on uremic patients

تأثير ديلزة الدم والتوافقية الحيوية لأغشية الديلزة على الجلوتاثاينون والإنزيمات المتعلقة به في كريات الدم الحمراء عند المرضى المصابين بقصور الكلية

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Twenty five healthy controls and forty two end stage renal disease (ESRD) patients on regular hemodialysis treatment were enrolled in this study. Blood samples were drawn immediately before and after hemodialysis, and erythrocyte glutathione peroxidase (GSH-Px), glutathione reductase (GSSG-RD) activities, as well as reduced glutathione (GSH) concentration were measured. To study the effect of a single hemodialysis session on glutathione defense system and oxidative stress, the patients were then divided into two groups according to the dialyzer type used in the session (cuprophane, n=23 patients and polysulfone, n=19 patients).

GSH-Px activity, as well as GSH concentration were significantly decreased in ESRD patients as compared with controls. GSSG-RD activity was significantly elevated in ESRD patients as compared with controls. A single hemodialysis session, regardless to the type of dialyzer used, did not induce any significant effect on any of the parameters measured. Cuprophane dialyzer did not result in any significant changes among glutathione defense system parameters. Polysulfone dialyzer exerted a significant correction on glutathione system parameters. The findings conclude that the Glutathione defense system may serve as a good index for monitoring oxidative stress and dialyzers biocompatibility in ESRD patients on regular hemodialysis treatment and the use of polysulfone rather than cuprophane dialyzers in hemodialysis procedure is recommended.

Key Words: Erythrocyte Glutathione, Hemodialysis, Renal Failure

تأثير ديلزة الدم والتوافقية الحيوية لأغشية الديلزة على الجلوتاثاينون والإنزيمات المتعلقة به في كريات الدم

الحمراء عند المرضى المصابين بعجز الكلية

المخلص: تتضمن البحث خمسة وعشرين شخصا صحيحا اعتبروا كمجموعة سيطرة الى جانب اثنين واربعين مريضا مصابين بالمرحلة المتأخرة من عجز الكلية ومعالجين بديلزة الدم المستمرة. أخذت عينات الدم من

المرضى قبل عملية الديليزة وبعدها مباشرة ثم أجري قياس تركيز الجلوتاثايون المختزل ((GSH وفعالية كل من الأنزيمات:مؤكسد الجلوتاثايون (GSH-Px) ومختزل الجلوتاثايون(GSSG-Rd) في كريات الدم الحمراء لغرض تحديد تأثير جلسة ديليزة مفردة على نظام الجلوتاثايون الدفاعي والأجهاد التأكسدي،ثم بعد ذلك فصل المرضى الى مجموعتين اعتمادا على نوع غشاء الديليزة (غشاء الكوبروفان-ثلاثة وعشرين مريضا و غشاء

لبولي سلفون-تسعة عشر مريضا). لوحظ إنخفاض معنوي في فعالية GSH-Px وتركيز GSH لدى المرضى مقارنة بالأصحاء وارتفاع معنوي في فعالية GSSG-Rd لدى المرضى مقارنة بالأصحاء ،وبغض النظر عن نوع غشاء الديليزة لم تؤدي جلسة ديليزة مفردة الى أي تغيير ملحوظ. كذلك لم تؤدي الديليزة باستخدام غشاء الكوبروفان الى أي تغيير ملحوظ بينما ادت الديليزة باستخدام غشاء البولي سلفون الى تصحيح دال في فعاليات الانزيمات المدروسة وفي تركيز الجلوتاثايون المختزل.

ويمكن الاستنتاج بأنه يمكن استخدام نظام الجلوتاثايون الدفاعي في كريات الدم الحمراء كدليل جيد على متابعة التغيرات في الاجهاد التأكسدي وكذلك درجة التوافقية الحيوية لأغشية الديليزة ويوصى باستخدام أغشية البولي سلفون بدلا عن الكوبروفان في عملية ديليزة الدم المستمرة.

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350. Five Years Correlations between Formative and Summative Examination in Pharmacology at A.U.S.T. Network, Abu-Dhabi Campus, U.A.E.

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This investigation was carried out to study the correlations between formative & summative assessments of Pharmacology subject thought to Pharmacy student at A.U.S.T. network. It also studied the correlations between student performance in pharmacology, their semester grade point average (GPA), overall grade point average (AGPA) and school average (Sch. Avg.) A complete data sets for 321 students included Pharmacology score (year, midterm and final exam marks), GPA, AGPA and school average. Significant high correlations were found between year, midterm, final marks and total pharmacology scores. There was also significant high correlation between

pharmacology scores, GPA, AGPA and School average scores. The high correlation between year, midterm and final exam marks indicates that the continuous (formative) assessment is essential in improving student performance in the final (summative) assessment. It can also be used as a predictor of student performance in the final exam. The significant correlation between the total score in pharmacology and students GPA & AGPA indicates the reliability of the assessment results in pharmacology and also reflects the homogeneous performance of the students between the different subjects thought in the Faculty of Pharmacy & Health Sciences of A.U.S.T network.
Keywords: Correlations, assessments, formative, summative, pharmacology performance.

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351. Quality of Jordanian Medicine : An Emperical Study

جودة الدواء الأردني : دراسة ميدانية

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Business Administration Dept., Ajman AUST, Aljarf, Ajman, UAE

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المناهج التطويرية والعلاقات الأكاديمية

Medical Sciences & Curriculum Development

352. . " ACCREDITATION IN HEALTH PROFESSIONS EDUCATION: EASTERN MEDITERRANEAN PERSPECTIVE

Professor. W Talaat

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The Eastern Mediterranean Regional Office (EMRO) of the World Health Organisation (WHO) has taken the initiative to conform with the global mandate, led by the World Federation for Medical Education (WFME) to deliberate the case for standards in medical education and reach consensus about better health care of populations for educational problems carefully tailored to address the real community health needs. To achieve this aim, EMRO launched a project aiming at establishing an accreditation system for Health Professions Education (HPE) based on national and/ or regional Standards.

Methods: This is a descriptive article/talk that analyses the trends, process, and outcome of a project that deals with a very sensitive subject that is becoming more and more crucial for the survival and development of HPE in the EMR.

Obstacles: Uncertainty, lack of awareness and confusion about the definitions, mechanisms, and benefits of Quality assurance and accreditation in health professions education is still an obstacle for the concepts of accreditation to prevail.

Main outcomes: The WFME set of standards for accreditation in HPE Has been adapted and adopted at the regional level, and also adapted and piloted at certain countries in the EMR. Serious steps have been taken in a number of countries in the region. Some of those had even the privilege of a political and legislative support.
Key-word: Advocacy and policy change

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353. ا الضوابط الشرعية للتقنيات الوراثية

د. أحمد محمد كنعان Dr Ahmed Mohmed Kanaan

Saudia Arabia

إدارة الرعاية الصحية الأولية بالمنطقة الشرقية (السعودية)

تتوقف صفات المخلوقات الحية من نبات وحيوان وإنسان على التكوين الوراثي لكل من هذه المخلوقات ، ويتركز التكوين الوراثي في المجين (Genome) الذي يوجد في كل خلية من خلايا هذه المخلوقات ، وفي الإنسان يتوزع المجين على (٤٦ صبغياً) وقد تبين أن البشر جميعاً متشابهون في التكوين الوراثي بنسبة تزيد عن (٩٩,٩٩ %) ، وقد طور العلماء في العقود الأخيرة جملة من التقنيات الحديثة لدراسة التكوين الوراثي للمخلوقات الحية ، والتدخل عليها بهدف علاج بعض الأمراض ، أو تحسين طرائق التناسل والإنجاب ، أو إنتاج سلالات أفضل ، أو غير ذلك من الأهداف .

ويعقد العلماء الكثير من الآمال على المعلومات التي سوف يحصلون عليها من خلال مشروع المجين البشري والتقنيات الحيوية التي سوف يتمخض عنها ، لكنهم في الوقت نفسه يتخوفون من المخاطر التي قد تنتج عن هذه التقنيات والتي قد لا تقتصر أضرارها على الجنس البشري وحده بل تتعداه إلى سائر أشكال الحياة في الأرض ، ولهذا فقد تنادت الجهات التشريعية في مختلف أنحاء العالم لوضع قوانين ملزمة من أجل ضبط التعامل مع هذه التقنيات ، وكان للمجامع الفقهية الإسلامية نصيب وافر من هذه التشريعات ، وسوف يناقش هذا البحث أبرز المواضيع المتعلقة بهذه التقنيات ، مع استعراض أهم القوانين الدولية والفتاوى الشرعية التي صدرت حتى اليوم بهذا الشأن ، والمواضيع التي سوف يطرحها البحث :

١ - مشروعية التقنيات الوراثية	٧ - التعديل الوراثي في الخلايا الجنسية
٢- امتلاك المجين البشري	٨ - التبرع بالمورثات والخلايا
٣- حجية البصمة الوراثية	٩ - زراعة مورثات حيوانية أو نباتية بجسم الإنسان
٤ - الفحص الوراثي	١٠ - الأغذية المعدلة وراثياً
٥ - العلاج الوراثي	١١ - الموقف العالمي من التقنيات الوراثية
٦ - تحسين النسل البشري	

وينتهي البحث بعدد من التوصيات العامة بشأن هذه المواضيع .

زميل الجمعية السعودية لطب الأسرة والمجتمع , د. أحمد محمد كنعان Kanaan Dr Ahmed Mohmed
بإدارة الرعاية الصحية الأولية بالمنطقة الشرقية (السعودية) رئيس قسم مكافحة الأمراض المعدية

354. Progressive und degenerative Forschungsprogramme

برنامج البحث العلمي المتقدم والرجعي

Dr Nadim Sradj

Regensburg , Germany

In der heutigen Medizin klappt eine Lücke zwischen technologischem Fortschritt und methodologischer Retardierung. Im Gegensatz zu allen anderen Disziplinen hat die Medizin bis heute noch keine Methodendiskussion geführt. Dies führt dazu, daß bei komplexen chronischen Erkrankungen keine befriedigende Problemlösung angeboten werden kann. Der Grund hierfür liegt in der Struktur der jeweiligen Forschungsstrategie. Wir unterscheiden zwischen progressiven und degenerativen Programmen. Ein progressives Forschungsprogramm besteht aus einer Theorie mit einem Überschuß an empirischem Gehalt. Ihre Erklärungskraft trägt dazu bei, neue Phänomene und Fakten zu entdecken und dient der pragmatischen Problemlösung. Demgegenüber beruht ein degeneratives Forschungsprogramm auf Konventionen und versucht rein experimentell mit Hilfe der Statistik Antworten zu finden. Dieser Ansatz ist a priori reduziert und birgt die Gefahr in sich, die Orientierung zu verlieren.

Diese unterschiedlichen Richtungen führen zur Frontenbildung zwischen Ökonomie und Ökologie, Technologie und Biologie, zwischen Mechanik und Thermodynamik. Diese Erkenntnisituation wird am Beispiel der Maculadegenerationsforschung demonstriert.

الطب الحديث يعاني فجوة بين التقدم التقني والتأخر الأسلوبى، على عكس العلوم الأخرى لم يدخل في مناقشة جدية من تركيب واختيار الطريقة العلمية المناسبة لذلك لا زال عاجزا عن تقديم حلول مقنعة في الأمراض المزمنة المعقدة ، نحن نفرق بين البرنامج العلمي المتقدم الذي يضمن نظرية ذات بعد واقعي واسع. هذه القوة التفسيرية تساعد على كشف مظاهر ووقائع جديدة وبذلك تقوم حلول عملية مقنعة على العكس الطريقة التراجعية تعتمد على الإصلاح والأكثرية مستعملة التجربة المصطنعة والإحصائيات لتبرير الأجوبة. وجهة النظر هذه هي

مبدئياً مقلصة ومحدودة خطرهما فقد التوجيه. هذه الجهتان المختلفتان خلق جبهتين وحدود بين الاقتصاد والبيئة، بين التقنية والبيولوجية فيزيائية الميكانيك Mechanics ودينامية الحرارة Thermodynamic هذا الوضع الفكري الحرج سيشرح على مثال مرض اللطخة الصفراء بالعين

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355. Devloping CME Programme in the Arab Countries"

356. Prespective of Medical & Health Research in the Arab Countries"

تقييم الأنشطة العلمية والطبية في الدول العربية وتطويرها مستقبل البحث العلمي في الدول العربية

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Both these themes are highly unsupported, if not neglected, in our Countries. It is a good idea to collaborate with Arab docotrs in Europe in order to exchange experiences on these two highly-needed topics to develop in the Arab countries. If you think the idea is acceptable, I can start working with you & other experts on these two themes taking in consideration that panelist (4-5) may include experts from Europe and the Arab World who have experience on these topics. On my part, Iraq has an ongoing CME programme that depends on CME Credit Points Accreditation. Our experience for (8) years can give an example to be discussed and compared with other countries.

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357. ASSESSMENT OF ACUTE FLACCID PARALYSIS(AFP) SURVEILLANCE IN KIRKUK GOVERNORATE

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Background: AFP is ongoing systemic collection, analysis and interpretation of health data in the process of describing and monitoring of health event. It is one of the 4 basic polio eradication strategies recommended by WHO and one of the PHC programs implemented in PHC(primary health care) centers in Iraq in the year 1994

Aim and objectives: the study aimed to assess the implementation of WHO recommended indicators of AFP surveillance in Kirkuk governorate during the period 2000-end of 2002

Methodology: The study depended on the file system available in AFP surveillance unit, and the WHO performance indicators of AFP surveillance. Direct interviewing was

made with AFP surveillance team at the central, intermediate and peripheral levels.33 AFP recorded cases were studied

Results: the ratio of non polio AFP recorded cases was (4.31),(1.74) and (2.54) in the year 2000,2001,2002 respectively. There is lack in the completeness and timeliness of AFP monthly reports(77.35%)completeness,(68.33%) timeliness in the year 2001 and (83.48%) completeness and(79.48%) timeliness in the year 2002. The investigation was done within acceptable time <48 hours of all reported cases in the years 2000, 2001 and 2002.Adequacy of stool specimens has a great improvement, 50% in the year 2000, 100% in the year 2001, and 90% in the year 2002.The 60 days follow up examination was improved also, it was 81.25% in the year 2000, 100% in the year 2001 and 90% in the year 2002.The percentage of specimens arriving at national lab. In good condition was 93.75% in the year 2000, 100% in the year 2001 and 2002

Conclusion and recommendation: to continue follow up training medical and para medical staff in all PHC centers for notification, reporting, recording and investigation of AFP cases in time. The necessary equipment for investigation must be available in all districts, and private sectors need to play a role in notification about AFP cases

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358. الوضع الطبي في فلسطين المحتلة

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حالة الكادر الطبي
الاطباء في قطاع غزة و الضفة الغربية
التخصصات الطبية الموجودة و المطلوبة
مشروع تنمية طاقات الكادر الطبي في فلسطين

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Poster Session III البوستر

359. A minimally invasive technique of intramedullary femoral nailing with the RDS system: a new technique for the insertion of a retrograde femoral nail (video-film)

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Philipps-University Marburg, Germany (Head: Prof. Dr. L. Gotzen)

A total of 65 patients with femoral fractures were treated, 31 of them with retrograde intramedullary fixation. A minimally invasive technique was performed in 11 cases using a self-developed retrograde dilatator system (RDS) for the insertion of the nail, the reaming of the femoral canal and the locking of the distal screws. The mean age of the 11 patients (4 men and 7 women) was 46 (± 27) years. 4 type A and 7 type B fractures of the femoral shaft according to the AO classification were observed. 3 of the patients had sustained a severe polytrauma. The mean ISS of the total collective was 15 (± 12). No nail failed, no infection occurred, and no nerve palsies were recorded. The follow-up time was 11 (± 8) months. All fractures healed uneventfully. 10 patients were mobilized under full weight-bearing and regained a full range of motion without pain. In 1 case of a very old female patient nursing was possible without pain. In 2 cases an implant removal was carried out in the same technique. The performed minimally invasive technique using the RDS minimizes damages to the patella ligament and the articular cartilage. It facilitates the control of rotational deformities and length discrepancies of the femur also under difficult conditions, e.g. polytrauma and obese patients.

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360. Actual use of vertebro- and kyphoplasty in Germany

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Vertebral fracture is the most common complication of osteoporosis. It results in significant mortality and morbidity, including prolonged and intractable pain in a minority of patients.

Percutaneous vertebroplasty is an efficient procedure to treat pain due to osteoporotic vertebral fracture. A variant of the old known vertebroplasty known as "kyphoplasty" has been suggested for correcting also vertebral compression fractures. A balloon placed inside the vertebral body is inflated to create a cavity, thereby restoring vertebral body height and allowing low-pressure cement injection into a collapsed vertebra.

In recent years the indication spectrum of kypho- and vertebroplasty was widened with vertebral fractures of different causes as well as metastatic diseases and hemangiomas in the vertebra.

Case reports suggest that these procedures are associated with a high pain relief. Many Short-term complications has been described.

We present the results of a study to the actual use of vertebro- and kyphoplasty in germany, as well as our own experience in more than 100 procedures.

Pain and function improved in 83% of the patients; an average of 16% of the lost vertebral height was regained. A 5 % cement leakage rate was observed, but was followed only in one case with surgical decompression.

Kyphoplasty is a reliable, minimally invasive method to stabilize fractured vertebral bodies. It improves pain and function and enables the treated vertebral body to regain of height.

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361. Stigma of Mental Illness: Views of the Public in an Arabic Culture

وصمة المرض النفسي: وجهة نظر العامة في مجتمع عربي

Dr Mamdouh EL-Adl, Northamptonshire Healthcare NHS Trust, UK
and Dr Thuraya Balhaj, Ministry of Defence, UAE.

Background: Stigmatisation is the process of marking individuals out for community sanction on the basis of some unacceptable deviation from the norm (Goffman, 1963). Stigma of mental illness is a recognised problem, which adversely affects individuals who suffer mental illness and probably their families. Sartorius (1998) believes that stigma of mental illness (SMI) and discrimination against psychiatric patients are the greatest remaining barriers to improving quality of life of sufferers. In 1998, The Royal College of Psychiatrists launched a five-year campaign, “Changing Minds” aimed at reducing SMI (Crisp et al, 2000).

The Arabic culture and Muslim religion are strongly against stigmatisation.

(يأبها الذين آمنوا لا يسخر قوم من قوم عسى أن يكونوا خيرا منهم ولا نساء من نساء عسى أن يكن خيرا منهن ولا تلمزوا أنفسكم ولا تنابزوا بالألقاب بئس الأسم الفسوق بعد الايمان ومن لم يتب فأولئك هم الظالمون) سورة الحجرات

However, most of the studies about SMI have been conducted in western culture. This survey aims to study public views and experience of SMI in an Arabic culture.

Aims: To study public views & experience of SMI in an Arabic culture.

To explore public opinion regarding organising local campaigns to combat SMI.

Method: A questionnaire of 9 questions developed by Dr EL-Adl & Dr Balhaj was circulated to a sample of the public in UAE.

Main results: Response rate 83.3% (1200 Questionnaires were circulated, 1000 received).

82% of responders believed that SMI is a problem in our society and 6.8% disagreed.

Majority of responders believed that risk of stigma is highest in case of HIV followed by mental illness & mental retardation. Individuals suffering from blindness, deafness &

mutism are at lower risk. Individuals suffering from HIV and mental illness (MI) are less likely to receive public support & sympathy while individuals suffering from blindness, deafness & physical disability are more likely to receive public support & sympathy. 40.3% believed that females suffering from MI are at higher risk of stigma than males while 45.6% believed that there is no difference.

56.3% believed that families of individuals suffering from MI suffer from stigma. 60.2% believed that the family suffers more if the patient is female.

60% believed that SMI should not be tolerated.

92.6% agreed that campaign to support individuals suffering from MI is needed and 94.7% agreed that campaign to improve public awareness of MI is required.

Conclusion: The study results indicate that SMI is a problem in our society and affect the sufferers & their families. Individuals suffering from HIV & mental illness are at highest risk of stigma. Campaigns to support sufferers, improve public awareness of mental illness & combat stigma are needed.

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362. First Episode Psychosis: Primary Care Experience and Implications to Service Development

نوبة الذهان الأولى: خبرة الرعاية الأولية وتأثيرها على تطور خدمة الطب النفسي

Dr Mamdouh EL-Adl, Dr John Burke & Karen Little; Northamptonshire Healthcare NHS Trust, UK.

Aim: To study Primary Care Experience prior to developing Early Intervention In Psychosis Service (EIP). To strengthen the interface with Primary Care.

Background: First episode psychosis (FEP) studies show that average time between onset of symptoms & first effective treatment is often one year or more (McGlashan, 1998). This long duration is undesirable. Early treatment helps minimise the risk of serious consequences due to changes in mental state and behaviour (Wyatt et al 1998; Larsen et al 1998). This can also reduce suffering (HO et al, 2003). Department of Health (1999) aims to establish a network of EIP service across UK. Most GPs see 1-2 new people with first episode psychosis/year (Shires & Lester, 2004). It was considered important to find about the local Primary Care experience of FEP before developing Northamptonshire EIP Service.

Method: Confidential questionnaire sent to 284 GPs.

Main results: Response rate: 43%. 43% of responders refer early stage psychosis cases only if they request/accept referral.

74% agreed that EIP is needed, 21% did not know & 4% did not agree.

If there is EIP: 87% would use, 11% did not know & 2% would not.

63% welcome having Mental Health Clinic in their surgery & 17% refused.

6. Likely causes of delayed referral to specialist service: disengagement, stigma, service is

difficult to access/inappropriate, poor knowledge about mental illness & unclear

diagnosis.

Conclusion: EIP Service developers can benefit considerably from studying Primary Care

experience. FEP needs a novel approach. Anti-stigma campaign is important.

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gastroscopy to demonstrate the prevalence of H.pylori in gastroduodenal diseases

دراسة وبائية وهيكلية باستخدام الصبغات

Dr BASHAR ABDUL-JABBAR

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During a period of six months, biopsy specimens were taken from intact areas of antral mucosa of (81) consecutive patients presented for gastroscopy to demonstrate the prevalence of H.pylori in gastroduodenal diseases by using Giemsa, Warthin-Starry and haematoxylin and eosin. It has been observed that H.pylori was detected in (75.3%) of all patients, however, the highest incidence was seen in those with chronic superficial gastritis (88.8%) and its incidence was more in patients with peptic ulcer (84.5%) than in NUD (71%). These results are similar to others. The high prevalence of H.pylori in patients with mild gastritis suggest that other factors may play a role in the pathogenicity of H.pylori. it has been concluded that Giemsa which is simpler, quicker, and is more reliable than Warthin-Starry in the demonstration of H.pylori.

خلال فترة ستة أشهر، تم أخذ عينات من غار المعدة لـ (٨١) مريض ممن يراجعون وحدة التنظير وذلك لدراسة وبائية وهيكلية باستخدام الصبغات التالية (الكيمزا)، (وارثن ستاري)، (الهيما توكسيلين أيوسين). ومن خلال الدراسة تم تشخيص الهيكلية بكتريا في (٧٥,٣%) من المرضى. وكانت أعلى نسبة إصابة في المرضى الذين

يعانون من التهاب المعدة المزمن (٨٨,٨%). في حين بلغت نسب الإصابة في المرضى المصابين بالقرحة الهضمية (٨٤,٥%) بالمقارنة مع أولئك المرضى المصابين بعسر الهضم (٧١%). وهذه النتائج تدعم نتائج البحوث الأخرى. ولقد وجدنا من خلال الدراسة أن نسبة الإصابة المرتفعة في المرضى المصابين بالتهاب المعدة البسيط توحي بأن هنالك عوامل أخرى قد تلعب دوراً في وبائية الهيليكوباكتر. وقد تم الإستنتاج بأن الكيمزا والتي هي أبسط وأسرع وأرخص أكثر اعتماداً في تشخيص الهيليكوباكتر من الوارثن ستاري.

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363. Unusual cause of acute abdomen, case report & discussing the effects of embargo

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Introduction:

Lead poisoning is an unusual cause of acute abdominal pain; it was nearly unknown in Iraq before the embargo.

Patients:

Three patients with acute abdomen are included in the study. The first two patients (AJJ & MJJ) were suffering of acute abdominal pain due to chronic lead poisoning, while the third patient (MKJ) was a true acute abdomen due to acute appendicitis complicated by chronic lead poisoning.

Discussion:

Today, lead is the most widely used nonferrous metal. In Iraq, the socio-economic changes that occurs after the establishment of the embargo, leading to appearance of unauthorized small lead factories, lacking most of the standards of occupational health, workers lacking the knowledge of the hazards they are exposed to. This leads to the recording of increasing number of patients suffering of lead poisoning

Conclusions:

The proper use of history & "routine tests" can help in the diagnosis of an uncommon condition; this may prevent unnecessary delay in management & prevent unnecessary surgery.

Abbas Dr. Thair Mahmood الدكتور ثائر محمود عباس DEPARTEMENT OF
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IRAQ

364. Characterization of sialic acid and mammary lectins as tumor markers for breast cancer

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In the current study sialic acid and its binding lectins were characterized as tumor markers for breast cancer. Three groups of females were enrolled, group 1 consisted of 30

breast cancer patient, group 2 contained 28 benign breast tumor patients (pathological controls) and group 3 comprised 25 healthy females. Total (TSA), bound (BSA), free (FSA), and lipid associated (LSA) sialic acids were determined in sera of all females and in tumor derived tissues. Significant elevations were indicated for the serum levels of the biomarkers in cancer patients when compared with healthy and pathological controls. The elevation were significantly correlated with the rise of tissue sialic acid contents in malignant tumors. LSA was found to be the most sensitive (80%) and TSA was the most specific (93%) tumor markers. However, sensitivity were highly improved when combinations of tumor markers were studied.

Mammary lection activity was estimated by a hemagglutination method. The optimal conditions of the essay protocol were evaluated and applied for the assessment of benign and malignant tumor lections. A significant increase of malignant breast tumor lection activity was demonstrated when compared with those of benign tumors. Such increase was essentially correlated with serum sialic acid levels in cancer patients but not in patients with benign tumors. The cutoff value of the method that introduced to discriminate malignant from other tumors was 0.8 SHU. Inhibitory characterization revealed that breast tumor lections were sialic acid specific lection.

The results suggest that mammary lection and their coagonate. i.e, sialic acid could be useful adjuncts in exclusion, diagnosis and follow up of breast cancer.

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365. Chloroquine over Dosage and Toxicity A report on seven fatal cases of Chloroquine toxicity in children during a period Between (1994 – 2004)

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Although the incidence and prevalence of Malaria in IRAQ began to decline during last few years, but it remains one of the most important endemic infection in some parts of it, especially during summer time. It is almost always caused by P. Vivax. Here we reported seven cases of fatalities in children at the Mosul City and surroundings (north-sector of Iraq) due to mis-using of Chloroquine for treatment of Malaria. The characters of cases were as follows:

Cases	Sex	Age in Y	Approximate weight in Kgs	Doses of Chloroquine	Residency
1	Male	6	15.5	600mg of base	Mosul-Badosh
2	Male	8	22	600mg	Mosul-Rashidia
3	Female	5	15	600mg	Mosul-Kalakh
4	Male	6	18.5	7oomg	Mosul-Aqra sector
5	Female	9.5	27	600mg followed by	Mosul-Aqra

				200	sector
6	Male	6.5	19	600mg	Mosul-Aqra sector
7	Male	8	21	600mg	Mosul-Aqra sector

We were depended on the information that was taken from parents and Forensic Medicine reports (only two of them referred to forensic Medicine).

In five of such cases the drug was prescribed and given by parents, and in the remaining 2 cases, one prescribed by a medical staff (a nurse), working at local dispensary and in another one the treatment was prescribed by a doctor.

Five of them were received a single dose of 600mg of Chloroquine base, one received 700mg, and another one received two doses initial 600mg followed shortly by 200mg.

Almost all of them developed the same symptoms as follows: Shortly (2-3 hours after the 1st dose) they started to develop nausea, repeated vomiting, bluish discoloration around the mouth and fingers (cyanosis), followed by cold extremities and convulsions (in some of them) to be ended by coma and death. Some of them received first aid treatment but without benefit. Further details will be discussed latter on.

Conclusions:

1. Although the number of cases looks very few during ten years period but still it considers very big figure in comparison with was reported in literatures (we find only few reported cases in adults who received more than one gram of Chloroquine for suicidal purposes)

2. Probably there are many hidden cases, which are not reported, or the causes of death were contributed to malarial infection itself rather than to its treatment.

3. Freely using and availability of anti-malarial agents without medical supervision, which allow the prescription of such toxic medicines by lay peoples including parents and paramedical staffs may lead to further catastrophic in the future.

4. Still the proper preparation and reading of slides by experts are lacking which may lead to mis-diagnosis of many fevers as Malaria especially during Epidemics.

ملاحظة: المناطق: بادوش، رشيدية، كلك، وعقرة هي قرى أو قصبات تابعة لمحافظة نينوى (أحد أكبر المحافظات الشمالية في العراق).

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366. BONE PROFILE STUDY IN PATIENT ON ANTIEPILEPTIC THE ROLE OF TUMOR MARKER CA 15-3 IMMUNOCYTOCHEMISTRY AS PROGNOSTIC PARAMETER IN FINE NEEDLE ASPIRATION CYTOLOGY SMEARS OF BREAST CANCER PATIENTS

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Fine needle aspiration cytology (FNAC) in combination with immunocytochemical study is a simple, rapid and safe procedure, yielding enough information to diagnose breast masses it allows possible and accurate treatment option, to be explained to the patient before surgery.

This is a prospective study which is was planned and performed for the first time including 43 cases with variable breast lesions managed in the Teaching Hospital in Najaf, during the period of study from June 2001-December 2003.

After clinical assessment all our patients underwent fine needle aspiration cytology for their breast lesions. And then subjected to immunocytochemical study with CA15-3 tumor marker, followed by histopathological confirmation after open surgical biopsy.

The results of FNAC examination were as follow. Benign lesion in 13 cases (30.2%) , malignant in 25 cases (58.2%) , 5 cases (11.6%) were reported as suspicious.

After immunocytochemical study with CA15-3 tumor marker the results were as follow. All 13 (30.2%) benign cases interpreted as negative (benign), 18 (72%) out of 25 malignant cases, were positive (malignant), and 3 (60%) out of 5 suspicious cases proved to be positive (malignant).

After histopathological study the results were as follow, all 13 (30.2%) benign cases interpreted as benign, all 25 malignant cases, were malignant, and 3 (60%) out of 5 suspicious cases proved to be malignant.

No false positive diagnosis, 3 cases diagnosed as suspicious lesions by FNAC proved to be malignant after immunocytochemical study, and histopathological confirmation , giving (25%) false negative rate all obtained results were analysed , compared and assessed.

The result of of immunocytochemical study relative to the standared histopathological results, where as folow, sensitivity (80%), specificity (100%), and overall accuracy (86%).

الفحص الخلوي بطريقة الوخز الدقيق بالاشترك مع الفحص الكيميائي المناعي باستخدام المعلم الوراثي (CA15-3) في مرضى عقد الثدي ، وحالات سرطان الثدي عند النساء هي طريقة بسيطة وسريعة وامينة ذات مردود استنتاجي عالي يوفر معلومات هامة في تشخيص عقد الثدي قبل استخدام الجراحة. هذا بحث مستقبلي تم التخطيط له وتنفيذه في المستشفى التعليمي في مدينة النجف وشمل البحث ٤٣ حالة عقدة ثدي من مختلف الانواع ، كانت فترة البحث منذ شهر حزيران ٢٠٠١ الى كانون الاول ٢٠٠٣ ، بعد الفحص السريري لجميع المرضى ، ثم استخدام الفحص الخلوي بطريقة الوخز الدقيق ، وبعد معالجة هذه السلايدات بالمعلم الوراثي (CA15-3) تم مقارنة هذه النتائج بنتائج الفحص النسيجي لعقد الثدي بعد ان تم استئصالها جراحيا.

كانت نتائج الفحص الخلوي بطريقة الوخز الدقيق كما يلي ، الحالات الحميدة ١٣ حالة (٣٠%) والحالات الخبيثة ٢٥ (٥٨%) ، والحالات المشتبته بها ٥ حالات (١١,٦%) ، وبعد المعالجة بالمعلم الوراثي (CA15-3) كانت النتائج كما يلي ، جميع الحالات الحميدة سجلت سالبة (حميدة ايضا) ، و ١٨ حالة (٧٢%) من الحالات الخبيثة كانت موجبة (خبيثة) ، كذلك ٣ حالات من الحالات اله المشتبته بها اثبتت انها موجبة (خبيثة) ، وعند استخدام طريقة الفحص النسيجي على العقد المتأصلة جراحيا كانت النتائج كما يلي ، ١٣ حالة (٣٠,٢%) حميدة بالفحص الخلوي الدقيق كانت حميدة ايضا بالفحص النسيجي ، وجميع الحالات الخبيثة (٢٥) بواسطة الوخز الدقيق كانت ايضا خبيثة بواسطة الفحص النسيجي ، اما في الحالات الحالات المشتبته بها ٣ حالات ثبت بانها خبيثة وحالتين حميدة. وكان الاستنتاج بان طريقة الفحص بواسطة المعلم الوراثي (CA15-3) على سلايدات الفحص الخلوي بطريقة الوخز الدقيق مفيدة في في الحالات المشتبته بها وتعطي نتيجة مشابهة للفحص النسيجي على العقد المتأصلة جراحيا.

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367. BONE PROFILE STUDY IN PATIENT ON ANTIEPILEPTIC

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This study was performed on 78 patients using antiepileptic drugs . Fifty patients were using carbamazepine ,while 28 patients were using sodium valproate .This study is performed on fifty normal individuals for comparison. Bone profile tests(Serum calcium,Phosphorous,Alkaline phosphatase activity) were performed on patients and control, serum calcium showed a significant decrease compared with that of the control($P<0.001$) while serum alkaline phosphatase activity showed a significantly higher value in patients compared with that of the control($P<0.001$)

368. Rheumatoid arthritis and possible risk factors

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Between rheumatoid arthritis (RA)and possible the relationship environmental risk factors was investigated ,using a case –control study design in which a detailed questionnaire was taken from (50) cases of

RA and (50) matched healthy controls. RA in this group was common in females, the females / males ratio is 7.34, the mean age for RA females was (47.66 ± 10.10) and for males(44.33 ± 19.31).the majority of RA cases (78%) fall in the age groups of (31-60) years.

The result showed significant association between RA and urbanization , illiteracy ,low economic status ,certain housing circumstances (overcrowding ,damp and humid condition),smoking ,recurrent joint strain and sprain .significant association was also found between RA and systemic symptoms suggestive of infection ,sore throat ,previous blood transfusion ,and certain dietary habits ,namely consuming hydrogenated and animal fats.Features of regional infections were more common in RA group but did not reach satistical significance.

Some other factors were significantly more in the healthy controls suggesting protective effect ,these are : consuming fish ,fruit ,vegetables ,tea, coffee ,liquid oil and moderate amounts of red meats (2-3 times/week)

It is concluded the avoidance of risk factors and encouragement of possibly protective factors should be included both in RA therapy and RA prevention especially in those with genetic and constitution disposition

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369. Hydatid disease: Rare Localization Two case report

عرض حالتين عن إصابات بالأيشينو كوكين

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Firstcase:a twelve year old female presented to our hospital with a painful mass in her left axilla 3months duration . Excision of the cystic mass as a definitive therapy was done and the cyst sent for histopathology which confirm a hydatid cyst .

The second case was a thirty years old male presented as emergency for our hospital with abdominal pain, vomiting and fever .Aftercorrecting his general condition, laparotomy performed through lower paramedian incision as suspected perforated viscus .Thintra operative finding was as a mass in the cecum with perforation.Right hemiclectomy done with the mass inside the cecum .Histopathological exam of the pathological specimen revealed hydatid cyst .Therefore, hydaid cyst cause a variety of clinical syndrome ,should kept in minde in differential diagnosis of any mass especially in endemic regions.

Key wards:hydatid disease, axilla,cecum,rare localization .

الدكتور ليث قاصد الحرباوي

أستاذ مساعد/ جراح استشاري، فرع الجراحة / كلية طب الموصل، جامعة الموصل، الموصل/ العراق

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Email: laythqassid@yahoo.com**370. Wet Nurses Milk is The Best Substitute for Mother Breastfeeding (Not Cow's & Powder Milk)**

حليب المرضعات هو البديل الأمثل للرضاعة الامومية وليس خلانط الرضع البقرية

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يهدف البحث الى مناقشة المحاور المهمة أدناه وصولا الى ان الرضاعة الامومية هي الغذاء المثالي للطفل الرضيع، وان الرضاعة البشرية من حليب المرضعات يجب ان تكون الاختيار الأول والبديل الأفضل لها في حالة عدم توافرها لأي سبب كان، وليس حليب البقر أو خلانط الرضع المصنعة منه والتي من الممكن اللجوء اليها في الحالات الاستثنائية التي تتعذر فيها الرضاعة البشرية (الامومية أو المرضعات).

١. بيان فوند وأهمية الرضاعة البشرية (من الأم أو المرضعة) مقارنة بحليب الأبقار وخلانط الرضع، سواء بالنسبة للطفل أو الأم.

٢. مكونات حليب البقر تتناسب لنمو العجول ولا تتناسب مع حاجة الأطفال الرضع فضلا عن ان خلانط الرضع البقرية لا ترقى لتلبية هذه الحاجة.

٣. بالرغم من وجود التقنيات المتطورة للتعقيم فان حليب البقر وخلانط الرضع قد ثبت تلوثها ونقلها لبعض الأمراض من أهمها مرض جنون البقر (عامل برايون) Prion Protein Diseases وأنماطه البشرية والذي سببه تغذية هذه الأبقار بأعلاف مكونة من خلطات حيوانية. وكذلك علاقتها المباشرة بالأمراض المناعية الذاتية المكتسبة (Autoimmune Diseases) كداء السكري المعتمد على الانسولين (IDDM) ومرض الصفائح المتصلبة (MS).

٤. اللجوء الى الرضاعة من حليب البقر أو أخلاط الرضع في الحالات الاستثنائية كالتالي لا يتوافر فيها الحليب البشري (الأم أو المرضعة) أو في بعض الحالات المرضية المعروفة بشرط التأكد من أن الحليب أو أخلاطه أو منتجاته جاء من أبقار لم تغذى ببروتين حيواني.

الاستنتاج: ان حليب الأم هو الغذاء الأمثل للطفل الرضيع ويعوضه في حالة عدم توافره حليب المرضعة لقله تعالى: (فان تعاسرتم فسترضع له أخرى). وليس حليب البقر وخلانط الرضع التي يجب أن تكون الخيار الأخير ووفق الضوابط المذكورة في البحث.

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371. Connective Tissue Diseases for non-rheumatologists

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Aim: Simple overview of CTD for non-rheumatologists.

Objectives:

1. Definition of CTD, 2. Simple screening questionnaire for CTD, 3. The role of immunology in CTD, 4. The role of inflammatory markers in CTD, 5. To review some of the diagnostic criteria.

Summary:

CTDs are systemic diseases which could involve many systems and patients could present themselves to different specialities. Accordingly the main aim of this talk is to increase the awareness of our colleagues from other specialities about CTD presentation. It is also important to understand the role of positive immunology and to understand the pitfalls of both false positive and negative tests. I will also discuss the role of different types of inflammatory markers in these conditions, pointing to the implications of the discrepancies between different inflammatory marker results in these conditions. I will also review some of the diagnostic criteria and how they should be implicated to help the diagnosis.

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372. Approach to Rheumatic complaints

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Aim: To simplify the way to approach rheumatic complaints or pain.

Objectives:

1. Introduction to painful rheumatic complaints, 2. Understanding patient's behaviour, 3. Asking the right questions, 4. Simplified algorithm for musculoskeletal pain to reach a formal diagnosis, 5. to review some of the diagnostic criteria.

Summary:

Musculoskeletal complaints are very common both in primary and secondary health care settings. Some of these patients have simply a Chronic Pain Syndrome, while the other have specific conditions which need specific types of treatment. We need to draw the attention of our colleagues from other specialities about the importance of differentiating

these two categories and what will be the simplest approach to make the formal diagnosis.

Patients with chronic pain syndrome such as fibromyalgia syndrome could present to any other specialities including cardiology, gastroenterology, genitourinary specialist, neurology, psychology and others. It is essential for physicians from these specialities to recognise and understand these patients to prevent any unnecessary investigations and to break the vicious cycles these patients going through by attending different specialities.

On the other hands, it is important not to miss a specific physical type of rheumatic complaints which need different approach and specific treatments. Most of arthritic conditions could have some systemic involvements as part of the extra-articular manifestations. Alternatively some other systemic disease could be the cause for or has some musculoskeletal symptoms. Some of these conditions will be discussed briefly with the highlighting of the involvements of different specialities in these conditions.

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373. Idemiological and Pathological Associations of Parasitic Appendicitis

التداعيات الوبائية والأمراضية لالتهاب الزائدة الدودية الطفيلي

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Introduction: The infection of human intestinal tract with pathogenic protozoa and helminthes have a worldwide distribution, and it was found to be common cause of most intestinal disturbances. The intestinal parasitic diseases are more commonly encountered in Iraq as well as other developing countries due to relatively low standard hygiene in rural areas of such countries. In Iraq although the problem of acute appendicitis has been reported by some workers, only few information is available regarding the association of parasites with acute appendicitis.

Aims: To identify the parasitic infections in patients who with acute appendicitis.

Methodology: This study included 665 patients of both sexes and different age who with clinically confirmed intestinal disorders. After performing operations of appendectomy, each appendix was examined carefully after opening it longitudinally, then the content was examined macroscopically and microscopically. Histopathological examination of appendices was done by hematoxiline – isooin method. T. test and chi-squared were applied to find the significant difference.

Results: Out of the total number only 64(9.6%) were associated with different parasitic infections. The prevalence rate of parasitic appendicitis in males and Females were mainly in the second and fourth decades which was (12.5%,14.06%), (20.3%, 12.5%) respectively. The parasitic appendicitis in urban and rural regions was 34.37% and 56.62 respectively. The isolated parasites were *E.histolytica* (10.93%), *A.lumbricoides* (26.5655) and *E.vermicularis* (62.5%).

The Histopathological changes were lymphoid follicular hyperplasia and acute suppurative appendicitis .

Conclusion: The result indicates that appendiceal entrobiasis is more frequent in females than moles ,while the appendical ascariasis and amoebiasis are more frequent in males .The role of parasitic infections in appendicitis is controversial .Histological examinations show that these worms invade the wall of the appendix, and hence inflammatory reaction occur.

التداعيات الوبائية والامراضية لالتهاب الزائدة الدودية الطفيلي

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د. نعمة حسوني الجبوري /كلية الطب /جامعة بابل

الخلاصة : تم إجراء هذه الدراسة على ٦٦٥ مريضاً من اللذين يعانون من التهاب الزائدة الدودية ، حيث تم تسجيل ٦٤ حالة (٦١ ، ٩%) مرافقة للإصابات الطفيلية . أجريت الفحوصات المختبرية على الزائدة الدودية المعزولة جراحياً ،وشمل الفحص العياني والمجهري لمحتويات الزوائد الدودية للتحري عن وجود الطفيليات . أظهرت نتائج الدراسة إن حالات التهاب الزائدة المرافقة لوجود أميبا الزحار ، دودة الصفر الخراطيني والدودة الدبوسية كانت ٩٣ ، ١٠% ، ٥٦ ، ٢٦% ، ٥ ، ٦٢% على التوالي

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374. الطب في الكوفة بين موروث الحيرة وأصالة الفكر الإسلامي

Dr Hassan Hisaa Al-Hakeem

President of Kufa University, Iraq

عرفت مدينة الحيرة صناعة الطب ما قبل الإسلام فبرز لفظ (الحكيم) و (الكحال)) للدلالة على طبيب الأبدان ، وطبيب العيون ، كما ورد لفظ ((العطار)) للدلالة على الصيدلي ، وكانت للحيرة صلات علمية في الطب والصيدلة والفلسفة مع مدرسة جنديسار العلمية ، فبرزت في الطب اسر معروفة في الحيرة ، وكانت أسرة العباديين قد أنجبت الكثير من الأطباء وقد أشار المؤرخون كأبن النديم وابن خلكان الى المشهورين من أطباء الحيرة ، وعند تمصير مدينة الكوفة عام ١٧هـ / ٦٣٣ م ، ورثت حركة العلم والفكر من الحيرة وذلك لمجاورتها والذي كان له كرسي عند خندق الكوفة لاستقبال المرضى ، وكان قد أشرف على جرح الإمام علي (عليه السلام) قبيل استشهاده وأخذت دائرة الطب بالتوسع في العصر الأموي (٤١ – ١٣٢هـ) وقد أشار القفطي في كتابه ((تاريخ الحكماء)) الى ((شيخ الطب)) الذي كان يتصدر أطباء المدينة ، وكانت أسرة آل أبحر من الأسر الطبية المعروفة في مدينة الكوفة . وقد استفاد الأطباء من حركة الترجمة ولا سيما في اللغة السريانية وبخاصة في العصر العباسي الأول ، وقد أحتضن بيت الحكمة في بغداد عدداً من أطباء الكوفة ، وقد أحفل الطبيب والكيميائي أبو موسى جابر بن حيان الأزدي موقعاً متميزاً في الطب والكيمياء وقد أشارت المصادر الى اكتشافاته في الكيمياء والى تأليفه المختلفة في مختلف العلوم حتى عد من أبرز العلماء في القرون الوسطى ، وكان قد بحث في الأمراض والاطعمه والاشربه والسموم وغيرها ، وقد ختم البحث بفيلسوف العرب والإسلام أبي يوسف يعقوب بن إسحاق الكندي ، ذلك العالم الذي طرق أبواب المعرفة من طبيعية وأنسانية ، وتناول في مؤلفاته ((الطب الروحاني)) و((الطب البقراطي)) وقد توصلنا من خلال البحث الى أصالة الفكر الإسلامي في الفترة الزمنية التي انتهى فيها البحث ، ويبقى الطب الإسلامي موضع بحث ودراسة في محاولة الالتقاء الماضي الأصيل بالحاضر المتطور . ومن الله تعالى التوفيق .

الأستاذ الدكتور حسين عيسى الحكيم

رئيس جامعة الكوفة

375. Recent Developments in Drug-Eluting Stent for Interventional Cardiology

Dr Kadem Al-Lamee

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Coronary stent implantation (Percutaneous transluminal coronary angioplasty, PTCA) has been proven to be superior to conventional balloon angioplasty for the treatment of coronary diseased arteries. However the major challenge in stenting procedures is the high rate of in-stent restenosis (the renarrowing of the blood vessel) calculated as 20 to 30% . In the last 10 years companies and physicians have been actively working to interrupt the biological processes that cause in-stent restenosis. During the last few years the drug coated stents, which used polymer coating as a carrier to deliver potent therapeutic drugs to prevent in-stent restenosis, represent a substantial improvement in patient care when implanted in coronary arteries. Drugs that are antiproliferative and anti-inflammatory may be incorporated within the drug-polymer coating and released in a controlled manner after the insertion and deployment of the stent. This technology is the most widely used in clinical practice in the area of Drug-Eluting Stents (DES) and is currently the 'hot' topic in the field of interventional cardiology.

Recent pre-clinical and clinical studies of non-degradable polymer-coated stents containing the immunosuppressant drug Sirolimus (Rapamycin) have shown a significant reduction in the vasculoproliferative response with no intimal tissue growth . A further example of a non-degradable polymer-coated stent antiproliferative and anti-inflammatory agent, Paclitaxel, is now commercially available in many countries. The latter technology has also been shown to be remarkably effective in reducing the rate of in-stent restenosis . Although the clinical studies of drug-eluting stents have produced good results, there are number of concerns in this area. These include (i) the loading capacity of the drug in the polymer coating, (ii) ensuring the effective control pharmacokinetics release profile of the drug (iii) the durability of the polymer coatings and (iv) the long-term biocompatibility of the coating. The object of this paper is to discuss the latest developments in this field.

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376. The Future Of Cardiology

Dr Rasha Al-Lamee

SHO in Cardiology

St Bartholomew's Hospital, London.

Discussion of the new worldwide advances in practice in cardiology.
A review of the literature on the following topics:

- Advances in angioplasty: including new practical techniques and the use of drug-eluting stents.
- Advances in echocardiography: new technical modalities and their application in clinical practice.
- Advances in electrophysiological procedures in cardiology: the uses of EP matrix models and new techniques in arrhythmia pathway detection and ablation.

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377. Percutaneous Management of hydatid spleinc Disease

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Introduction

Hydatid disease affect many organs in human body ,yet splenic hydatid represents about (0.8-4%)of all cases of human echinococcosis. Until recently , splenectomy was the recommended surgical procedure for splenic hydatid. Since 1980 there has been increasing tendency to use conservative option to deal with such pathology.

Aim of studyMinimum invasive splentic hydatid cyst.

Patients and Method

The procedure was done under complete aseptic technique in theater under general anasthesia and prophylactic antibiotics were give at time of procedure and continued for 3 day Abendozal give one day befor and tow days after procedure period of hospitalizatio ranged from 24-48 hours.

ResutThere is no peroperative or postopertive complication except the development of mild fever occurred in 5 patients required no treatment and one patient had developed allergic skin rash treated by medical treatment.

ConclusionOur early experience in splenic hydatid encourages us to use prcutaneous management of hydatted spleen disease whenere possible instead of splenectomy.

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378. Natriuretic and pressor responses to cerebral hypernatremia persist during inhibition of central sympathetic outflow by clonidine

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Introduction :

Increased concentration of NaCl in the blood perfusing the brain or intracerebroventricular (icv) infusion of hypertonic saline (HS) trigger natriuresis and pressor responses in experimental animals. The mechanisms underlying these responses are poorly understood. Recent data indicate that brain " ouabain " and brain renin – angiotensin system may activate the sympathetic nervous system leading to

elevation of blood pressure (BP). In the present study , renal and arterial BP responses to intracarotid (ic) infusion of HS in rabbits were evaluated when central sympathetic outflow was inhibited by clonidine.

Objectives :

The aim of the study was to investigate the mechanisms underlying natriuretic and pressor responses to ic infusion of HS , and to evaluate the role of sympathetic system in the pressor response.

Methods :

Experiments were designed to investigate the effects of ic infusion of 5% saline on renal function and arterial BP in anaesthetized rabbits. The measurements were also recorded in the same animals after a bolus iv injection of 6 µg / Kg of clonidine.

Results :

Intracarotid infusion of HS (5%) at a rate of 0.1 ml/min. produced marked increases in urinary Na⁺ excretion (4.8 folds) and urine flow (2.6 folds) accompanied by significant rises in urinary K⁺ excretion (+83%) , GFR (+97%) and arterial BP. These responses were absent in the same animals when the HS was infused intravenously. Both ic and iv infusions of HS induced small but statistically significant rises in plasma Na⁺ concentration. The increased GFR during ic infusion of HS was accompanied by a significant reduction in tubular Na⁺ reabsorption. Intravenous injection of 6 µg/Kg of clonidine produced a significant decrease in arterial BP for about 30 minutes with only slight reductions in electrolyte excretion. Intracarotid infusion of HS shortly after clonidine injection proved to be equally effective in producing its renal and pressor effects. Indeed, the pressor response was even more pronounced .

Conclusions

The increases in renal electrolyte excretion and arterial BP induced by cerebral hypernatremia was mainly attributed to the release of a brain natriuretic factor (BNF) with pressor activity. The findings indicate that the pressor effect is independent of sympathetic stimulation and provide evidence for direct vasoconstrictor activity of the BNF.

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إبالة الصوديوم و ارتفاع ضغط الدم استجابات لزيادة تركيز الصوديوم في الدماغ تدوم أثناء تثبيط النشاط العصبي السمبثوي مركزيا بواسطة الكلونيدين

د. كاوه فاريق حسن دزه بي و د. صلاح الدين محمد أمين الميراني

المقدمة :يؤدي زيادة تركيز كلوريد الصوديوم في الدم الذي يجهز الدماغ أو حقن محلول عالي التركيز منه في تجاويف الدماغ الى إبالة الصوديوم و ارتفاع ضغط الدم في الحيوانات التجريبية . ان اليات هذه الاستجابات تبقى غير واضحة . و تشير الدراسات الحديثة الى ان لمادة الواين ouabain و كذلك نظام الرينين و الانجيوتينيس المنتجة في الدماغ تأثيرات منشطة للجهاز العصبي العطوف الذي بدوره يرفع ضغط الدم . في الدراسة الحالية تم تقويم الاستجابات الكلوية و ضغط الدم الشرياني في الارانب بعد حقن محلول ملحي عالي التركيز في الشريان السباتي و اثناء تثبيط الجهاز العصبي العطوف مركزيا بواسطة الكلونيدين .

الاهداف : ان الهدف من هذه الدراسة هو التقصي عن الليات المسببة لإبالة الصوديوم و ارتفاع ضغط الدم في الارانب التي تسلمت حقنا مستمرا لمحلول ملحي مركز و تقويم دور الجهاز العصبي السمبثوي في استجابة ارتفاع ضغط الدم .

طريق البحث : تم تصميم التحارب لدراسة تأثيرات الحقن المستمر لمحلول 5% كلوريد الصوديوم في الشريان السباتي للارانب المخدرة على وظيفة الكلية و ضغط الدم الشرياني . و اعيد تسجيل القياسات التجريبية في نفس الحيوانات بعد حقنها في الوريد بجرعة من الكلوينيدين قدرها 6مايكروغرام / كغم من وزن الجسم .
 النتائج : أدى حقن محلول ملحي عالي التركيز (5% NaCl) بشكل مستمر في الشريان السباتي وبمعدل 0.1 مل/ الدقيقة إلى زيادات كبيرة في معدل طرح الصوديوم في البول (٤,٨ مرة) وفي حجم البول المطروح (٢,٦ مرة). رافقتها أيضا زيادات معنوية في معدل طرح البوتاسيوم (+٨٣ %) وفي معدل الترشيح الكبيبي (٩٧%). لم تظهر هذه الاستجابات عندما تم حقن المحلول الملحي المركز بشكل مستمر في الوريد. ومن الجدير بالذكر أن حقن المحلول الملحي المركز في كلا الحالتين (في الشريان وفي الوريد) قد احدثت زيادة صغيرة ومعنوية في تركيز الصوديوم في بلازما الدم. ورافقت الزيادة فب معدل الترشيح الكبيبي انخفاضا معنويا في اعادة امتصاص الصوديوم . كما أدى حقن مادة الكلوينيدين في الوريد وبجرعة ٦ مايكروغرام / كغم إلى انخفاض معنوي في ضغط الدم الشرياني ولفترة حوالي ٣٠ دقيقة، ويعود التأثير خافض الضغط للكلوينيدين إلى تثبيط الجهاز السمبثاوي مركزيا . إن حقن المحلول الملحي المركز في الشريان السباتي بعد حقن الكلوينيدين بفترة قصيرة بقي فعالا" في إحداث التأثيرات الكلوية والوعائية. وفي الحقيقة كان التأثير الرافع لضغط الدم أكثر حدة .

الاستنتاجات :تعزى الزيادات في طرح الاملاح و ضغط الدم الشرياني الناتجة عن ارتفاع تركيز الصوديوم في الدماغ الى افراز عامل دماغي مدرر للصوديوم و ذو نشاط رافع لضغط الدم . و يستدل من النتائج ان ارتفاع ضغط الدم الشرياني مستقل عن تحفيز الجهاز السمبثاوي و توفر دليلا على ان العامل الدماغي المدرر للصوديوم له تأثير مباشر و قابض للاوعية الدموية .

الاسم :د. كاوه فاروق حسن دزه بي و د. صلاح الدين محمد أمين الميراني

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379. Generation of dendritic cells for the immunotherapy of cancer

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Dendritic cell-based immunotherapy, a novel approach to fight cancer, has made a remarkably quick transformation from fundamental research to clinical application. In principle, antigen-presenting cells are generated in vitro using precursor cells obtained from cancer patients, loaded with tumor-specific antigens and reinjected to the patients. Early clinical studies have already demonstrated that vaccination with these antigen-loaded autologous dendritic cells (DCs) can induce immunological and clinical responses even in patients with advanced cancer, especially in melanoma, but also in other tumors. However, many issues such as source of DC, activation status of the cells or antigen loading procedures still have to be addressed. Also, due to the complexity of in vitro DC-generation, large scale vaccination of many patients still

remains a difficult task as long as closed systems for the generation of a standardized DC vaccine are not yet commercially available.

In bringing this new therapy option to the attention of a general audience, this presentation has its focus on our experiences with the generation of dendritic cells and their clinical use. Also, methods to monitor the vaccination efficacy will be discussed (immunomonitoring).

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380. PREVALENCE OF HYPOCALCEMIA AMONG THALASSEMIC PATIENTS REGISTERED IN IBN

AL-BALADY HOSPITAL (THALASSEMIC CENTRE), BAGHDAD IRAQ

Dr.Ali Hassan Al-Jumaily, Dr.Shaimaa Khider

The objective of this study is to through light on the prevalence Of hypocalcaemia in thalassemic patients registered in Ibn Al-balady Hospital (Thalassemic Centre) Baghdad Iraq

400 with thalassemia major were included in the study and randomly Selected at October 2001 they subjected to serum study for calcium, Phosphorus and alkaline phosphatase 20 patients x-rayed for bones Only no facilities for studying serum ferritin, parathyroid hormone And densometry for bones

It was found that hypocalcaemia so prevalent 87 patients out of 400 Tab. 1 and more prevalent among age group 10 years and above tab.2 The above findings are discussed and comments are put forward in The direction of finding clue(s) for such results

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381. Use and Abuse of Antibiotics

ماتع ومضاد الحيوي

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382. Use and Misuse of Psychotropic Drugs, a Clinical-Psychopharmacologist View.

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Seldom different types of psychotherapy could not ameliorate psychiatric syndromes and the introduction of psychotropic drugs is necessary to get improvement.

In affective disorders, tricyclic antidepressants remain the corner stone of the treatment of severe depression. Specific serotonin reuptake inhibitor (SSRI) are now widely used. They have less side-effects and less antidepressant efficacy and should not be prescribed in severe depression. Many data reveal that SSRI could induce cardiac arrhythmia, leucopenia, hyponatremia, bleeding and possibly serotoninergic syndrome. SSRI are subject to pharmacogenetic metabolism, SSRI being in the same time substrate and inhibitor of CYP2D6 implying more attention for drug dosage, interaction and side-effects in particular population. Antidepressants do not cause sexual side-effects in woman as is discussed elsewhere in this Conference.

Are antidepressants indicated in adolescent depression ?. The answer is yes if depression is not a unhappiness situation or the preliminary sign of schizophrenic evolution.

In psychotic disorders, second generation of neuroleptic (SNL) have less side-effects, being better tolerated and used in urgency in oral and or i.m. injection formulation. Cardiac arrhythmia is observed with SNL and different metabolic disorder are signaled; olanzapine is contra-indicated in diabetes mellitus. Haematological control remain necessary with clozapin. Prolactin elevation could provoke sexual disturbance and the risk of breast cancer remains a matter of discussion.

Clinical experience give the possibility to prescribe a SSRI (fluoxetine) or a NL (olanzapine) during pregnancy without fetal malformation. Nursing is still contra-indicated while using psychotropic drugs. Our practice of the use of lithium in bi-polar affected women who want to be pregnant will be also presented and discussed.

There is now in Switzerland a craze for natural and herbal medicine. St John Warts is the most popular one and his antidepressant efficacy is related to hyperforin an irreversible mono-amino- oxidase inhibitor and attention should be made on drug association.

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383. Importance of teaching medical ethics on the basis of Islamic legislation for students of medical college

أهمية تدريس أخلاقيات الطب وفق قواعد الفقه الإسلامي في كلية الطب
 الاسم الدكتور ضياء الدين الجماس _
 Jammas, Dia'a Eddeen
 Dier Ezzor – Syria

Outline of the idia:

1- Islamic legislation is very important to physicians:

There is a very intimate reciprocal relationship between Islamic legislation and medical science, so the Muslim physician feels the need to know the basic roles of Islamic legislation to correct and control his behavior while he practicing his work. These Islamic roles which belong to medical practice need to be collected in a reference and classified on the base of subjects or words so as to be easy as possible to refer if the physician needs them.

And for more usefulness this reference ought to be learned in medical college.

2- There are some New medical maters considered as legislation problems and need to be resolved ach as:

- Fertilization in vitro
- Cloning
- Organ transplantation
- Clinical brain death
- Others

3- A great reference like this need to be reviewed every year to give any modulation in judgments or legislations.

المقدمة preface

لما كانت العلوم الطبية علوماً بالغة الأهمية في الأحكام الشرعية المتعلقة بالأحوال الشخصية كما أن علم أصول الفقه ضروري لكل إنسان عموماً وللطبيب خصوصاً لضبط السلوك الأخلاقي القويم في الممارسة ، كان لابد من التفكير في تدريس أصول الفقه الإسلامي للأطباء وتدريب العلوم الأساسية الطبية في كلية الشريعة . ولما أصبحنا مدركين تماماً مدى سرعة وعمق التطورات العلمية والاجتماعية التي تفرض نفسها في عصرنا الحالي كما تفرض علينا وجوب استيعابها ضمن الإطار الشرعي القادر على احتوائها فمن الواجب أن نبادر إلى وضع أساس علمي شرعي يبني جانباً إبداعياً مهماً من شخصية طبيب وفقه المستقبل .

الهدف من المحاضرة : the gall of the lecture

الحث على إيجاد مرجع مدرسي يصلح للتعليم والتدريب كمقرر في كليات الطب الموجودة في البلاد الإسلامية ، والرجوع إليه من قبل الأطباء المسلمين في غير البلاد الإسلامية .

قضايا مستجدة للبحث : new issues for searching about

أ- أطفال الأنابيب fertilization in vitro

ب- الاستنساخ cloning

ج- زرع الأعضاء organ transplantation

د- موت الدماغ السريري clinical brain death

المنهجيات : methodology

أهمية تنمية روح الإيمان وأصول الفقه في شخصية الطبيب :

إنّ تنمية هاتين الحصلتين في شخصية الطبيب تثمر فوائد عظيمة أهمها :

تزيد من شعور الطبيب بالمسؤولية تجاه مرضاه . فيندفع إلى مواكبة تطور العلوم دون كلل لشعوره بأن هذا الأمر من حق المريض أولاً .

تجعل سلوك الطبيب المهني مثالياً : لشعوره بالرقابة الإلهية قبل الرقابة البشرية والقانونية .

تجعل الطبيب قادراً على تعليم المريض ما يترتب عليه من أحكام شرعية تخص مرضه . سواء إعفاه عن بعض الواجبات أو تعديل لطريقة تنفيذها .

الإبداع والاجتهاد في تطوير الأحكام ضمن الأصول الشرعية .
 الأدلة على ضرورة وجود هذا المرجع : the evidence for the this textbook to be exist :
 جهل كثير من الأطباء المسلمين بالأحكام الشرعية الأساسية .
 مستجدات علمية نظرية يمكن توظيفها لبيان ما كان مجهول الحكمة من الأحكام .
 مستجدات طبية تطبيقية بدأت تنتشر دون ضوابط شرعية وفيها خطر على الأمة .
 لا يعلم معظم الأطباء كيفية الحصول على حكم حادثة تعترضه أثناء ممارسته المهنة ، بينما يمكن الرجوع إليها في مرجع جامع للأحكام الطبية الشرعية. ماذا يجب أن يتضمن هذا المرجع : what dose this reference must be included

مفهوم الأخلاقيات الطبية الإسلامية
 رسم شخصية الطبيب الأخلاقي كمثل أعلى لكل طبيب .
 رسم السلوك المثالي الطبي للطبيب مع زملائه ومرضاه وفق القواعد الشرعية
 مبدأ ضمان المريض وتحمل مسؤولية أخطاء الممارسة .
 طرح القضايا التي اجتهد فيها العلماء سابقاً بناء على ما توفر لديهم من معلومات ونتائج إحصائية قليلة . وترجيح أحد أحكام المذاهب التي تتوافق مع المعطيات العلمية الحديثة .
 طرح اجتهادات أحكام القضايا المستجدة حالياً ولم تطرح سابقاً في كتب الفقه .
 توضيح الحكم العلمية والطبية وراء الأحكام الشرعية المختلفة والتي كانت خافية فيما مضى ، ابتداء من أحكام العبادات الأساسية كالشهادتين والصلاة والصيام والزكاة والحج بعد أن تبين الكثير من حكمها العلمية والطبية المفيدة على مستوى الفرد والجماعة.

إدراج الأحكام الشرعية الأساسية التي يجب أن يتعلمها كل طبيب مسلم ولها أحكام خاصة في المذاهب المختلفة وكثيراً ما يسأل المريض عنها طبيبه كما يسأله عن غذائه وعلاجه .
 الأحكام الشرعية المتعلقة بالأحوال الشخصية من زاوية التحليل والنظرة الطبية التي يمكن أن يتم الاجتهاد فيها بما يتناسب مع كل حالة على حدة .

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384. CORTICOSTEROID AND ANTIBIOTICS FOR TREATMENT OF KEROSNE PNEUMONIA IN CHILDREN .

دور المضادات الحيوية و الكورتيكو ستيرويد في علاج ذات الرئة الناتجة عن استنشاق النفط الأبيض

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OBJECTIVE: This study was under taken to provide the clinician with more objective data and to evaluate the efficacy of both corticosteroid and antibiotics in the treatment of kerosene pneumonia as an initial line of management .

PATINTS AND METHODS: Standard protocol was devised for use in Central Teaching Hospital for Pediatrics .Children were selected in the study according to the following criteria :1-Admission to the hospital
 2-History of kerosene ingestion, and
 3-Clinical and radiological evidence of pulmonary involvement.

The history were obtained from parents, relatives, a considerer able number of cases the parents,relatives,,on learning or discovering that the child had ingested kerosene they try to induce vomiting for their child.

Upon admission to the study, the patient's history and physical examination were completed and he was randomly assigned to drug or placebo treatment, the drugs (Dexamethasone and Ampicillin) was similar in appearance and packing To the placebo (glucose saline).

Chest radiographs were obtained 6-12 hours after admission, at 72 hours, and at time of discharge from the hospital. In addition, the patients temperature, sleeping respiratory rate and pulse rate, and general condition were recorded at least every six hours.

RESULTS: One hundred ninety two of the 212 children included in the study fulfilled the criteria for the selection outlined before and had complete the analysis.

There were 98 patients (51.4%) in the drug group and 94 (48.9%) in the placebo group.

There were no significant differences in these data between the drugs and the placebo groups.

CONCLUSION AND RECOMMENDATION

Together with the 192 cases reported here and the results of previous studies and experiences of others, it appear clearly that kerosene pneumonia in Iraq and other parts of the world is most often of the mild to moderate degree of severity a very few cases which were regarded as sever cases. The use of antibiotics therapy have a very limited use in the treatment of complication of the kerosene pneumonia, but not as a prophylactic, same for the use of corticosteroid which appear clearly that is not effective in treatment of kerosene pneumonia.

دور المضادات الحيوية و الكورتيكو ستيرويد في علاج ذات الرئة الناتجة عن استنشاق النفط الأبيض

د. رأفت خضير الأسود معاون مدير مستشفى الطفل المركزي- بغداد

الهدف هذه الدراسة عدت لتزويد اختصاصي طب الأطفال بمعلومات و حقائق علميه بيانيه لتقييم مدى فاعلية المضادات الحيوية و الكورتيكو ستيرويد في علاج ذات الرئة الناتجة عن استنشاق النفط الأبيض كخط أولي في العلاج

طريقة العمل. تم أعداد بروتوكول مثالي أستخدم في مستشفى الطفل المركزي التعليمي تم أختيار الأطفال في هذه الدراسة استنادا على ما يلي

١. الدخول إلى المستشفى

٢. تاريخ استنشاق الكيروسين

. الدلائل السريرييه و الشعاعيه حول إصابة الرئة

تم اخذ المعلومات من أهل و أقارب المريض الذي كان قسم منهم يعتقد خطأ بضرورة تحفيز الطفل على التقيؤ بعد شربه للنفط الأبيض.

و حل دخول المريض للدراسة تم أخذ كافة المعلومات و أكمل الفحص السريري و تم توزيع الأطفال بعشوائية بين مجموعتين الأولى مجموعة العلاج بالدواء (امبسلين-ديكساميثازول) و المجموعة لثانيه مجموعة اللا دواء (الماء المقطر).

تم اخذ الرقاق أشعاعيه بعده ٦-١٢ ساعة من الدخول و بعد ٧٢ ساعة و في وقت الخروج من المستشفى.

بل أضافه إلى ذلك تم تسجيل حرارة المريض و نبضه و تنفسه خلال النوم إضافة إلى أحواله أعمامه كل ٦ ساعات.

النتائج ١٩٢ من اصل ٢١٢ من الأطفال الذين انطبقت عليهم هذه الدراسة كان هناك ٩٨ مريض (٥١,٤) في مجموعة الدواء و ٩٢ مريض (٤٤,٩%) في مجموعة اللا دواء.

لم يكن هناك فرق ملموس بهذه المعلومات البانية بين المجموعات الدوائية و اللا دوائية

الأستنتاج و التوصيات مع ١٩٢ حاله تم تسجيلها في هذه الدراسة و نتائج البحوث أسابقه و خبرات

الأجربين بدا واضحا و وجليا بان ذات الرئة الناتجة عن استنشاق النفط الأبيض في العراق و مناطق أخرى

في العالم هي من أدرجه البسيطة و المتوسطة في معظم الحالات و القليل فقط تم اعتباره من الحالات الخطره .

إن أستخدم المضادات الحيوية لها مجال محدد و ضيق في علاج مضاعفات ذات الرئة الناتجة عن استنشاق النفط الأبيض و ليس كوقاية وكذلك بالنسبة لاستخدام الكورتيكو ستيرويد التي أظهرت الدراسة بوضوح عن عدم فاعليتها بعلاج مضاعفات ذات الرئة الناتجة عن استنشاق النفط

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385. NORMOBLASTS IN LARGE FOR GESTATIONAL AGE INFANTS

الكريات الحمر ذات النواة في حديثي الولادة ذوي الاوزان الكبيرة

Dr. Salam Jasim Hussein, Dr.Samar Adnan Kamel
Child's Central Teaching Hospital, Baghdad

INTRODUCTION: NORMOBLAT IS AN IMMATURE ERYTHROCYT THAT IS THE LAST NUCLEATED PRECURSOR (1st2)AND AFTER EXTRUSION OF THE NUCLEUS IT GIVES RISE TO THE RETICULOCYTE (3)

METHOD: in a prospective study 90 new borne infants were delivered by normal vaginal delivery and lower segment cesarean section at the maternity unit in Baghdad teaching hospital and nursing home for the period from the 1st April till 31st July 2001 were studied . these infants were divided into three groups each one included 30 neonates the classification was done according to the birth wt. according to lubchenco intrauterine growth charts the first group birth wt. ranging from 10th to 90th which is the control group , the second group birth wt. above 90th centile those infants of non diabetic mothers , the third group birth wt. above 90th centile and those infants of diabetic mothers .blood samples from these neonates of the three groups were examined for pcv, wbc, absolute lymphocyte count and nucleated RBC .

RESULTS: it had been found that the mean nucleated RBC in the first group was 4.9_+2.73 the second group was 17.27_+9.76 and in the third group was 18.27_+4.99 so it had found that there was a significant rise in mean nucleated RBC in the second and third groups as compared with control group P value <0.001 but there was no significant difference between the second and third groups .

CONCLUSION: there was a rise in the nucleated RBC in large for gestational age infants weather they were products of diabetic mothers or non diabetic mothers and there was no significant difference in mean nucleated RBC in infants of diabetic mother and in infants of non-diabetic mothers provided that both were large for gestational age and in both infants there were no significant correlation between increase in number of nucleated RBC for increase in body wt. so these findings indicated that these infants were subjected to some sort of fetal hypoxia in utero which directly stimulate EPO resulting in increase in nucleated RBC , so these fetuses need particular attention in terms of testing their well being during pregnancy , labor and delivery.

الكريات الحمر ذات النواة في حديثي الولادة ذوي الاوزان الكبيرة

في هذه الدراسة تم دراسة ٩٠ طفل حديث الولادة وادوا بولادة طبيعية او بعملية قيصرية في وحدات الولادة في مستشفى بغداد التعليمي ، ودار التمريض الخاص وفي مستشفى العلوية للولادة للفترة المحصورة من الاول من نيسان ولغاية الحادي والثلاثين من تموز لعام ٢٠٠١ م .
تم تقسيم الاطفال موضوع الدراسة الى ثلاثة مجاميع كل مجموعة مكونة من ٣٠ طفل حديث الولادة وحسب ما يعرف بمنحآت لوبجنكو

(Luobchenco Intrauterine Growth Curves)

وكما يلي :

المجموعة الاولى : وتضم الاطفال حديثو الولادة الذين تتراوح اوزانهم ما بين المنحني ١٠% - ٩٠% وهو الوزن الطبيعي عند حديثي الولادة .

المجموعة الثانية : وتضم الاطفال حديثو الولادة الذين تكون اوزانهم اعلى من المنحني ٩٠% وهم ولدوا لامهات غير مصابات بداء السكري .

مجموعة الثالثة : وتضم الاطفال الذين تكون اوزانهم اعلى من المنحني ٩٠% وهم ولدوا لامهات مصابات بداء السكري

تم جمع نماذج من دم هؤلاء الاطفال في المجاميع الثلاثة وتم فحص نسبة الكتلة الدموية ، الكريات البيض نسبة خلايا اللمفاوية وكذلك كريات الدم الحمراء ذات النواة . تم التوصل الى ان معدل كريات الدم الحمراء ذات النواة في المجموعة الاولى ٤,٩٩ + - ٢,٧٣ ، وفي المجموعة الثانية ١٧,٢٧ + - ٩,٧٦ ، وفي المجموعة الثالثة ١٨,٢٧ + - ٠٤,٩٩ تم التوصل الى ان هناك زيادة كبيرة في معدل كريات الدم الحمراء ذات النواة في المجموعتين الاولى والثانية بالمقارنة مع المجموعة الاولى $p < 0,001$ ، في حين انه لا يوجد فرق يذكر بين المجموعتين الثانية والثالثة .

تم الاستنتاج ان هناك زيادة في معدل كريات الدم الحمراء ذات النواة في الاطفال حديثي الولادة زائدي الوزن سواء ولدوا لامهات مصابات بداء السكري او غير مصابات وليس هناك فرق في معدل الكريات الحمراء ذات النواة بين هؤلاء الاطفال ، عند عمل اختبار المقارنة لم تكن هناك علاقة بين زيادة عدد كريات الحمر ذات النواة وزيادة الوزن في ظل مجموعة على حدة .

تم الاستنتاج الى ان الزيادة في معدل كريات الدم الحمراء ذات النواة في الاطفال حديثي الولادة سواء مولودون لامهات مصابات بداء السكري او غير مصابات معرضون الى نقص في الاوكسجين داخل الرحم والذي يقوم تحفيز الزيادة في الارثروبويتين والذي يؤدي الى زيادة في معدل كريات الدم الحمراء ذات النواة ، لذلك فان هؤلاء الاطفال يحتاجون الى عناية خاصة اثناء الولادة وكذلك اثناء الحمل .

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Abu Dhabi, Ajman, Dubai, Fujairah, Ras Al-Khaimah, Sharjah and Umm Al-Qaiwain are the seven sovereign shaikhdoms that formed the United Arab Emirates (UAE) in 1971, when the British withdrew from the Gulf. With only 83600 km² in area, the UAE is a small country, located between Oman, Qatar and Saudi Arabia at the Arabian Gulf. It is estimated that some 2 – 3 million people live in the UAE, while about only 25 % are true “Emirati nationals”. The rest has moved as workers to the UAE from Pakistan, Iran, India and other countries. The climate is characteristic for the region: mild winters and extremely hot summers, where temperatures can approach the 50°C mark in July and August, the UAE is a muslim country, which should be respected by visitors. Consequently, especially female visitors should be dressed properly, the UAE is rather liberal and tourists are generally welcome

Local Time GMT plus 3 hours

Currency The Local Currency is UAE Dirham. The Dirham is divided one hundred fils and it is tied to the us dollar at exchange rate of 1 US \$=3, 68 Dh



Dubai-Abu Dhabi	170 km
Dubai-Sharjah	15 km
Dubai- Ajman	30 km
Dubai -Al, Ayn	150 Km

„CONGENITAL AND ARTIFICIAL ORIENTATION“

The arrow of time shows upwards the direction of an artificial progress with increasing speed. Modern man is imprisoned in a cavern of techno-sciences and defined by numbers and measurabilities. But the arrow, being divided indicates an inner paradox and resistance. The downward tendency implies the intense desire for an unsophisticated environment.

The glance of the person in the center of the picture is for the sphere of nature.



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Bild und Begriff 011 Der Pfeil der Zeit zeigt die Richtung des artifiziiellen Fortschritts mit Geschwindigkeit nach oben. Der moderne Mensch ist in eine Höhle der Technowissenschaft numerisch eingeschlossen. Doch diese Tendenz ist in sich gespalten. Der große Pfeil zeigt inneren Widerspruch und Widerstand an. Die Gegenbewegung geht in Richtung einer animalisch freieren Umwelt. Der Blick der zentralen Figur zielt auf die Natursphäre.

معرض الصور الناطقة سيعرض مزيد من الصور في صالة البوستر وللمزيد من المعلومات اتصلو ب

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تصميم البرنامج العلمي والإخراج الفني

الدكتور فيضي عمر محمود جامعة إيرلنغن المانيا

ملاحظات هامة للمحاضرين

- مدة المحاضرة: ١٥ دقيقة (١٠ دقائق عرض و ٥ دقائق مناقشة) إمكانية العرض بالأقراص CD فقط، يجب على كل المحاضرين التقيد بالوقت المخصص لهم وسوف يكون هناك مؤشر ضوئي إنذاري في حالة تجاوز الوقت لذلك يفضل لا يتجاوز الشرائح التي سوف تعرض أكثر من ١٢ شريحة
- لغة المؤتمر: اللغة العربية والإنكليزية والألمانية والتركية
- يحيز ان تكون لغة شرائح العرض باللغة الأنكليزية لسهولة الفهم للمشترين غير العرب
- يجب على المحاضرين التأكد من تجهيز الشرائح أو الأقراص CD قبل يوم من الجلسة مع ذكر رقم المحاضرة واسم المحاضر لتقادي واكتشاف الصعوبات الفنية في وقت مسبق لكي لا ينحرج أحد ولكسب الوقت للجميع (الإستفسار عن ذلك في سيكريتارية المؤتمر)
- أخي المحاضر حاول ان تختصر بقدر المستطاع وحاول ان تركز على الهدف والإستنتاج العملي
- نأمل من المشتركين حضور الجلسات العلمية بأعداد كبيرة والمساهمة الفعالة في المناقشات والحرص على دقة المواعيد
- سيرعرض البوسترات في القاعات و في الأوقات المخصصة (قياس البوستر ٩٠ سم عرضا و ١٢ سم طولا) نرجو من الباحثين ان يجهزوا البوسترات مع وضع رقم البوستر في أعلى وأيمن اللوحة، الوقت المخصص لتقديم البوستر ٣ دقائق والمناقشة ٢ دقيقة
- في حالة عدم تمكن المحاضر من الحضور نرجو منكم إخبار اللجنة التنظيمية و رئيس الجلسة والسكريتارية قبل المؤتمر او قبل بدء الجلسات
- سيرعرض البرنامج العلمي والعملي على الأنترنت على:

عنوان الاتحاد <http://www.arabmed.de>

وفي جامعة إيرلنغن بعنوان مؤتمرات

<http://www.herzchirurgie.med.uni-erlangen.de/arab/index.htm>

خدمات المطار

ستقوم عدد من شركات الخدمة في العاملة و في مطارات الإمارات بإجراءات الاستقبال والتوديع لذلك يرجى من المشتركين إبلاغ اللجنة التنظيمية في عجمان عن مواعيد قدومهم الى هذه المطارات لتقديم الخدمات في المطار ولتسهيل الوصول الى الفندق

تأشيرة الدخول :

في حالة حاجة اي مشترك لتأشيرة دخول لدولة الإمارات العربية المتحدة فعليه تسديد رسوم استصدار تأشيرة الزيارة الممنوحة والبالغة ٧٥ دولار\$ لمدة ١٤ يوم الى دبي بشرط ان التعليمات النافذة تسمح باستصدار تأشيرة جنسية المشترك

ملاحظة : للاخوة حاملي جوازات السفر العربية يجب عليهم استحصال تأشيرة زيارة قبل قدومهم للإمارات ويستلزم منهم مايلي:

صورة جواز سفر كاملة وصالح لمدة لا تقل عن ستة اشهر.

صورة شخصية ملونة (يمكن ارسالها عن طريق البريد الالكتروني).

الرسوم البالغة \$75 والتي يتم ايداعها بحساب المؤتمر الذي ارسل سابقا على ان يتم اشعارنا بانه قد تم تحويل المبلغ الى الحساب ليتسنى لنا المباشرة بإجراءات استحصال التأشيرة ولايد ما الاشارة كلما كان موعد تقديم الطلب متقدم اي قبل بداية المؤتمر بفترة طويلة كان ضمان استخراجها كبير جدا ولكن لو تاخر تقديم الطلب الى فترة قريبة من بداية المؤتمر قد تواجهنا بعض الصعوبات باستخراجها.

عنوان المراسلات من أجل الفيزا السيد شادي ابو خالد Mr Shadi Abou Kahled

Mobile: 0097150 - 4824220

Tel.: 009716 – 7466497, Fax.009716 – 7466495

E-mail: shadi_a@yahoo.com

الغاء التسجيل

- الغاء التسجيل قبل ١٥ يوم من بدء اعمال المؤتمر (أي قبل تاريخ ٢٠٠٥/٣/١٠) سيتم خصم(٥٠%)
- الغاء التسجيل قبل ٧ أيام قبل من إنعقاد المؤتمر (أي قبل تاريخ ٢٠٠٥/٣/١٧) يتم خصم ١٠٠%
- نرجو من كل المشتركين تسديد كل المصاريف الإضافية في الغرف قبل المغادرة
- إن قبول المحاضرة او البوستر في البرنامج العلمي لا يعني التزام الجهة المنظمة بتغطية تكاليف المحاضر (السفر والإقامة) من أية دولة كانت

البرنامج السياحي

ستقوم اللجنة التنظيمية للمؤتمر بتنظيم رحلات سياحية للمؤتمرين للراغبين في الأشتراك يرجى منهم الاستفسار عن المواعيد في سكرتارية المؤتمر

- الجولة الاولى زيارة إمارتي عجمان والشارقة ويشتمل البرنامج على زيارة: اسطبلات الخيول العربية في عجمان + المتحف في إمارة عجمان + السوق الإسلامي في الشارقة + السوق الإيراني والمدينة القديمة في الشارقة + تناول العشاء في بوفيه مفتوح بفندق الكورال بيج في عجمان وعلى شاطئ الخليج العربي.
- الجولة الثانية زيارة إمارة دبي ويشتمل البرنامج على زيارة: قرية الغوص + ستي سنتر + جولة في مياه الخليج العربي بالمركب مع تناول وجبة العشاء بالمركب (مطعم اليوم).
- الجولة الثالثة زيارة مدينة العين في إمارة ابوظبي ويشتمل البرنامج على زيارة: جبل حفييت + المجررة/العين السخنة + زيارة مدينة البريمي في سلطنة عمان + تناول الغداء في فندق الروتانا/العين + وفي طريق العودة يتم زيارة ميركاتو سنتر في إمارة دبي والاطلاع على هذا السنتر الجميل.
- دعوة العشاء الرسمية.

الهيئات الرسمية المشاركة

منظمة الصحة العالمية للشرق الأوسط، نقابة أطباء مصر، جامعة الأندلس في سوريا
مكان المؤتمر: جامعة عجمان (الجرف) في الصالة متعددة الأغراض في دولة الإمارات العربية المتحدة
Ajman University, Congress centre Al Jurf, UAE

وثائق المؤتمر

سيزود المشتركون على وثائق المؤتمر: البرنامج العلمي والبطاقة الأسمية بالإضافة الى شهادات الحضور
البطاقات الأسمية: يرجى من المشتركين وضع هذه البطاقات في جميع المناسبات والجلسات
اللجنة التنظيمية: أصفر، المحاضرون: أزرق، المشتركون: أبيض
الدول المشاركة

ألمانيا، فرنسا، سويسرا، بريطانيا، بلجيكا الأردن، مصر، الإمارات العربية المتحدة، العراق، اليمن،
الكويت، قطر، السعودية، بولندا، أمريكا، فلسطين، نيوزيلاند، كندا، استراليا، بلجيكا
مدة المؤتمر ٢٥ - ٣١ آذار ٢٠٠٥:

رسم التسجيل: اسعار الصرف للعملة المتفق عليه (1 = \$ 0.75 = € 0.52 = UKP)
رسم التسجيل والاشتراك في المؤتمر (البرنامج العلمي فقط) \$ 100 (دون مبيت)
رسم الإشتراك في الجلسات العملية ورشات العمل \$ 200
تكاليف الإقامة والطيران للقادمين من أوروبا بالدولارات

البالغين	فندق ٤ نجوم	فندق ٥ نجوم
الغرفة المزدوجة للشخص الواحد	\$ 1000	\$ 1200
الغرفة المفردة للشخص واحد	\$ 1200	\$ 1400

- الاطفال دون سن السنتين \$150. في غرفة الوالدين
- الاطفال دون الخامسة عشر \$ 600 في غرفة الوالدين (بشرط ٣ أشخاص في الغرفة)، وفي غرفة مستقلة لكل طفل \$ ٨٠٠ في فنادق الدرجة الرابعة والخامسة للمزيد من التفاصيل يرجى الإتصال بمركز الإتحاد
- تذاكر الطائرة وبالدرجة السياحية ومن (روما، ميونخ، فرانكفورت، باريس ولندن) وإلى دولة الامارات العربية المتحدة سيتم استلام البطاقة (PTA) في المطارات المذكورة في يوم الطيران
تكاليف الإقامة لوحده بالدولارات

البالغين	فندق ٤ نجوم	فندق ٥ نجوم
الغرفة المزدوجة للشخص الواحد	\$ 750	\$ 950
الغرفة المفردة للشخص واحد	\$ 950	\$ 1150

- الاطفال دون الخامسة عشر \$ 400 في غرفة الوالدين (بشرط ٣ أشخاص في الغرفة)، وفي غرفة مستقلة لكل طفل \$ ٧٥٠ للمزيد من التفاصيل يرجى الإتصال بمركز الإتحاد
- يتضمن هذه المبالغ رسم التسجيل والاشتراك في المؤتمر مع حجز الفنادق والإقامة في الفندق لمدة ٦ ليالي والتي ستشمل (المبيت + الافطار + الضريبة) وفي فنادق حسب ما متوفر منها في إمارة الشارقة وهي:
روتانا، هوليدي انترناشونال، الكورال بيج و (الملينيوم خمسة نجوم). مع الرحلات السياحية و وثائق المؤتمر دون المشروبات والمكالمات الهاتفية في الفندق
عنوان البنك للحوالات المصرفية

Dresdner Bank Ludwigsburg , Germany (للقادمين من أوروبا)

Konto Nr 0503738400, BLZ 60480008

ARAB Bank Ltd, Ajman Branch, United Arab Emirates

Account Number: 3005 – 0020410 – 500, Swift Code No: ARABAEABAJM

فنادق المؤتمر

فئة الأربعة نجوم وهما فندق الروتانا الشارقة و فندق الكورال بيج رسيدنت.
فئة الخمسة نجوم الملينيوم في الشارقة

الهيئات المنظمة

إتحاد أطباء العرب في أوروبا، شبكة جامعة عجمان للعلوم والتكنولوجيا مع بيئة الإبداع الطبية
راعي المؤتمر

صاحب السمو الشيخ حميد بن راشد النعيمي عضو المجلس الأعلى للإتحاد حاكم عجمان
اللجنة الاستشارية العليا للمؤتمر

الدكتور سعيد عبد الله سلمان رئيس شبكة جامعة عجمان رئيس اللجنة
الدكتور حسان نجار رئيس اتحاد أطباء العرب في أوروبا
الدكتور بشير شحادة المشرف العام على فعاليات تكنوسفير ٢٠٠٥ الأول شبكة جامعة عجمان
الدكتور عامر حسين رئيس المؤتمر السنوي الثاني والعشرين لإتحاد الأطباء العرب في أوروبا
رئيس المؤتمر الدكتور عامر حسين
شعار المؤتمر

التنسيق والتكامل بين الأطباء العرب في أوروبا وأطباء الوطن الأم نحو تحقيق بيئة الإبداع الطبية

لجان المؤتمر

١- اللجنة العلمية المشتركة:

الأستاذ الدكتور عبد العظيم أحمد المدير العام لهيئة الإبداع الطبية (شبكة جامعة عجمان)
الدكتور فيضي عمر محمود رئيس اللجنة العملية للإتحاد نائب رئيس المؤتمر (ألمانيا)
الأستاذ الدكتور سليمان الشريف (شبكة جامعة عجمان)، الأستاذ زيد فهمي (ألمانيا) الأستاذ عبد القادر مارتيني (ألمانيا)
الدكتور عامر حسين (إنكلترا) الدكتور نهي حيوبي (إنكلترا) الدكتور منذر الدوري (إنكلترا)
الدكتور مصطفى عبد الرحمن (فرنسا) الدكتور أسامة البابلي (الإتحاد دولة الإمارات المتحدة)

٢- اللجنة المالية لإدارة فعاليات تكنوسفير ٢٠٠٥ الأول:

الأستاذ أحمد سعيد سلمان مدير عام مركز تكنوسفير للتميز رئيس اللجنة
الأستاذ ثامر سعيد سلمان نائب رئيس شبكة جامعة عجمان للشؤون الإدارية والمالية
الدكتور محمد الشربتي المشرف العام لفعاليات تكنوسفير ٢٠٠٥ الأول
الدكتور مازن قباني (الاتحاد)، الدكتور محمود حازم (الاتحاد)
السيد رائد شريم المراقب المالي للشبكة ، السيد عبد الرحمن أبو بكر مدير الرقابة الداخلية

٣- اللجنة التنظيمية من الإتحاد

الدكتور أنس شاکر (فرنسا) الدكتور محمود سلطان (ألمانيا)، الدكتور مازن قباني (ألمانيا) ، الدكتور نايف
شنين (إنكلترا) ، الدكتور محمد شعيب المهندس محمود الزين (ألمانيا)،

٤- اللجنة التنظيمية من شبكة جامعة عجمان:

الأستاذ احمد سعيد سلمان مدير عام مركز تكنوسفير للتميز رئيسا و الدكتور محمد الشربتي مدير مكتب
الاعمال المشرف التنفيذي العام للمؤتمر، الأستاذ عمرو ابوالمال عضوا، الأستاذ هشام المتناوي عضوا و
الدكتور انس شاکر عضوا / ممثلا عن الإتحاد

٥- اللجنة الإعلامية و المسؤولة عن المؤتمر من الإتحاد وشبكة جامعة عجمان

الدكتور حسان نجار، الدكتور عامر حسين، الدكتور فيضي عمر محمود
أ. أسامة سعيد سلمان (نائب رئيس شبكة جامعة عجمان للمعلومات والإعلام والترويج)

٦- الصياغة والسكرتارية والتوثيق:

الدكتور أحمد بابكر الطاهر (الصياغة والتوثيق) محمد الشامي (عميد كلية إدارة الاعمال/عضو مكتب
الاعمال)، الدكتور أنس شاکر الأمين العام للإتحاد، الدكتور اسامة السباعي (الاتحاد) والدكتور مصطفى عبد
الرحمن (الاتحاد)

٧- لجان أخرى من شبكة جامعة عجمان:

د. سمير بلوخ (تنظيم القاعات)، د. نشوان سليمان (اللجنة القانونية)، د. حسن السامرائي (الإستقبال وورش
التدريب)، د. علي أبو النور (المعرض)، أ. محمد سعيد سلمان (اللجنة الفنية- تقنية المعلومات)، أ. عمرو أبو
المال (الأنشطة الإجتماعية)، أ. عبيد الشامسي (العلاقات العامة)

كلمة عرفان وشكر زملائي وإخواني الأعزاء

أنه لمن دواعي سرورنا أن ندعوكم في هذا البرنامج إلى حضور جلسات مؤتمرا و ورشات العمل المزمع عقدها في شبكة جامعة عجمان للعلوم والتكنولوجيا في دولة الإمارات العربية المتحدة و التي يجريه اتحاد أطباء العرب في أوروبا في مؤتمرها الثاني و العشرين في الفترة ما بين ٢٥ - ٣١ آذار ٢٠٠٥. لقد توطلت العلاقات الأكاديمية بين الاتحاد وبين شبكة جامعة عجمان في السنتين الأخيرتين وحققت طفرات كبيرة و متميزة على جميع الأصعدة والمستويات ،ولقد لمسنا من خلال علاقتنا في الفترة الأخيرة بتمائل الأفكار والأهداف بين الطرفين

عندما عرض معالي الدكتور سعيد عبد الله سلمان رئيس شبكة جامعة عجمان للعلوم والتكنولوجيا في محاضراته في سبتمبر ٢٠٠٣ في بون في مؤتمرا السنوي العشرين مشروع بيت الحكمة والنخب والذي وجد أذانا صاغية وباتت الأنظار موجهة إلى الشبكة تتربق التطورات القادمة والجديدة . وها نحن إخواني اليوم معكم في هذا الصرح الضخم في مقر الجامعة لنحقق الأهداف التي نسعى إليها في تنفيذ مشروع عربي شامل، والسعي لتحقيق تواصل وتلاحم بين المؤسسات العلمية، وإثبات قوة وجدارة زملائنا العرب في أوروبا للاستثمار الأمثل لتكنولوجيا المعلومات، ولإعداد برامج عملية تنفيذية واضحة الأهداف، مع سوق عمل مناسبة للاستفادة من الطاقات الفكرية العربية المنظمة ولتنسيق الجهود ولخلق حوار أكاديمي ومناقشات بخصوص القضايا والاهتمامات المشتركة و كذلك الربط بين منجزات الحياة الغربية العصرية وتنمية المجتمع العربي

ستجرى هذه الجلسات العلمية العملية مع فعاليات التكنوسفير الأول لعام ٢٠٠٥ بالتوازي مع المحاضرات النظرية حيث سنحاول التعمق في هذه المواضيع الطبية المطروحة (حوالي ٤٦ محاضرة في أكثر من ١٢ جلسة لمدة ٣ أيام). إننا سنحاول بقدر المستطاع نقل البرامج العملية القابلة للتنفيذ على أرض الواقع وسنفتح المجال للمناقشة مع الخبراء لإيجاد علاقات تعاون جماعية بين المفكرين والمنفذين. لقد تم تقديم أكثر من ٢٠٠ بحث علمي و كان بودنا قبول جميع الأوراق والبحوث التي قدمت إلينا ولكن لكثرة الأوراق التي أرسلت إلينا ولضيق الوقت لقد اقتصرنا فقط على ١٨٠ ورقة علمية، سيقدم نصفها بشكل محاضرات والنصف الآخر بشكل بوستر، يشاركنا في هذا المؤتمر زملاء من جامعات أوروبية وعربية من أكثر ٢٠ دولة منها ألمانيا، فرنسا، سويسرا، بريطانيا، بلجيكا الأردن، مصر، الإمارات العربية المتحدة، العراق، اليمن، الكويت، قطر، السعودية، بولندا، أمريكا، فلسطين و نيوزيلاند، كندا واستراليا.

و يشرفنا ان ينعقد هذا المؤتمر في عجمان برعاية كريمة من صاحب السمو الشيخ حميد بن راشد النعيمي عضو المجلس الأعلى للاتحاد حاكم عجمان الذي عهدناه بكرمه ورعاية صدره ، يسعدنا أن نحيا المنظمين لهذا المؤتمر، وإننا باسم الاتحاد وباسم لجان المؤتمر نتوجه بالشكر الجزيل الى راعي المؤتمر والى معالي الدكتور سعيد عبد الله سلمان والى إخواننا في شبكة جامعة عجمان والمحاضرين والمشاركين والى كل الذين قدموا ويقدمون المساعدة والدعم المعنوي والمادي في إنجاح هذه التظاهرة العلمية

سوف نكون مسرورين عندما نراكم ونحييكم في عجمان ،فإلى اللقاء معكم ، في جو علمي أخوي مفيد ومثمر. دتم بخير والسلام عليكم ورحمة الله وبركاته

الدكتور فيضي عمر محمود
رئيس اللجنة العلمية للاتحاد



الدكتور عامر حسين
رئيس المؤتمر ورئيس فرع الاتحاد في بريطانيا

زملائي و زميلاتي ، أعزائي الأفاضل ،

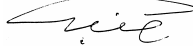
بكل سعادة وسرور يواصل اتحاد الأطباء العرب مسيرته في تعميق وتوثيق التعاون مع وطننا الأم، وذلك بتحقيق هدف من أهم أهدافه منذ انشائه قبل قرابة ربع قرن.

ان أهم ماتوصل اليه الاتحاد من خلال هدفه النبيل في بناء الجسور بين الوطن وأبناء المهجر هو اقامة العديد من المؤتمرات العلمية التخصصية في عدة دول عربية واجراء عمليات جراحية دقيقة وورشات عمل تأهيلية كان لها صدى ايجابيا كبيرا ، الى جانب تعميق أواصر الصداقة والأخوة والمحبة بين الأطباء المغتربين وزملائهم في الوطن.

ان تفعيل دور الاتحاد في تأسيس جامعة الأندلس الخاصة للعلوم الطبية في سوريا يعتبر نجاحا كبيرا في الاستفادة من خبرات أطبائنا وعلماننا في رفع مستوى التعليم الجامعي في قطرنا العزيز سوريا.

وتأتي خطوتنا المباركة لهذا العام باقامة مؤتمرنا السنوي الثاني والعشرون في امانة عجمان وبالتعاون والتنسيق مع جامعة شبكة عجمان للعلوم والتكنولوجيا تحت عنوان ((التنسيق والتعاون بين الأطباء العرب في أوروبا وأطباء الوطن الأم نحو تحقيق بيئة الإبداع الطبية)) لتتوج هذا النجاح الذي سيزيد في تعزيز وتعميق المعرفة لصالح الاتحاد وشبكة جامعة عجمان .

فالى جميع المشرفين على هذا المؤتمر أقدم بجزيل شكري وامتناني لجهودهم الكبيرة التي يبذلونها ، كما أتمنى لجميع المشاركين فائدة غنية بالمعرفة واقامة سعيدة.



د. حسان نجار

رئيس اتحاد الأطباء العرب في أوروبا

بسم الله الرحمن الرحيم
والصلاة والسلام على أشرف المرسلين سيدنا محمد الصادق الأمين وعلى آله وصحبه أجمعين.

الزملاء الأعزاء المشاركون في المؤتمر الثاني والعشرين لاتحاد الأطباء العرب في أوروبا ومؤتمر
هيئة بيئة الإبداع الطبية بشبكة جامعة عجمان للعلوم والتكنولوجيا (تكنوسفير ٢٠٠٥/الأول)
السلام عليكم ورحمة الله وبركاته

يسعدني بداية أن أقدم بأسمى آيات الشكر والعرفان لصاحب السمو الشيخ حميد بن راشد النعيمي،
عضو المجلس الأعلى - حاكم عجمان وراعي شبكة الجامعة، على رعايته الكريمة لهذا الحدث العلمي
الهام، والذي ينعقد تحت عنوان: الأطباء العرب في أوروبا والوطن الأم: نحو تحقيق بيئة الإبداع الطبية.
كما أنتهز الفرصة هنا وبإسم جميع منتسبي شبكة الجامعة أن أرحب بكم جميعاً في ربوع إمارة عجمان
وشبكة جامعة عجمان، إحدى أهم وأعرق منارات الإشعاع العلمي المتميز بدولة الإمارات العربية
المتحدة ومنطقة الخليج.

مرحباً بكم في مؤسستنا التي أنطلقت في العام ١٩٨٨م ككلية جامعية وتطورت خلال عقد من الزمن إلى
جامعة ثم إلى شبكة جامعية تستهدي في تطورها التصاعدي ثوابت رؤية شاملة ذات أبعاد ثلاثة: تعليمي
ومعلوماتي واستثماري، هذه الرؤية التي حظيت بقسط لا بأس به من التطبيق وأفرزت آليات
ومرجعيات وفلسفة تعليمية تتضمن معايير خمسة تشكل في ذات الوقت ميدان للعمل داخل شبكة الجامعة
وهي: التدريس والبحث والتدريب والخبرة والممارسة.
ويترسخ هذه الرؤية الشاملة بأبعادها الثلاثة وفلسفتها التعليمية نحاول في شبكة جامعة عجمان للعلوم
والتكنولوجيا أن نعطي نموذج جامعة المستقبل والتي تعتمد على رؤية شبكة الجامعة كنظام مفتوح
تتداخل فيه بيئة الجامعة التقليدية وعناصر البيئة الافتراضية لتحقيق بيئة الابتكار والإبداع سبيلاً
للنهوض بالامة .

كما نعمل على تفعيل مبدأ كسر الحاجز بين المجتمع الأكاديمي وسوق العمل ومجتمع الفعاليات وكذا
كسر الحاجز بين وسائل التعليم التقليدي وفضاءات السابير التفاعلية نحو تأسيس بيئة الإبداع الشامل.
وقد بدأت الخطوات الأساسية لبيئة الإبداع الشاملة فأنتجت هيئة بيئة الإبداع الطبية معلنة عبر برامجها
المتعددة مساهمتها كإحدى مرجعيات شبكة الجامعة في إثراء التجربة المعاصرة لهذه الأمة.
وهانحن اليوم نطوى حاجر المسافات بين النخبة من علمائنا المبدعين داخل وخارج الوطن الأم بتلاحمنا
مع اتحاد الأطباء العرب في أوروبا في إطار بيئة الإبداع الطبية .
وبأتى هذا التلاحم تفعيلًا حقيقياً لمشروعنا النهضوي المتمثل في بيت الحكماء والنخب والذي يعتبر
بمثابة الجسر والمعبر لإرساء ملامح مشروع نهضوي للأمة.

فمرحباً بكم جميعاً في ربوع شبكة جامعة عجمان للعلوم والتكنولوجيا وليكن الله معنا ومعكم في كل
خطواتكم فالأمل معقود عليكم بخيراتكم المتميزة لتحقيق الاهداف المرجوة من مؤتمر هيئة بيئة الإبداع
الطبية والمؤتمر الثاني والعشرون لاتحاد الاطباء العرب في أوروبا (تكنوسفير ٢٠٠٥/الأول).
واننى لانتهز هذه الفرصة للتقدم بأسمى آيات الشكر والعرفان للقائمين على اتحاد الأطباء العرب في
أوروبا وكافة أعضاء الاتحاد على مجهوداتهم الطيبة والمخلصة لانجاح هذا الحدث المتميز؛ وفقكم الله
الى ما فيه خير الامة والسلام عليكم ورحمة الله وبركاته.

د. سعيد عبدالله سلمان

رئيس شبكة جامعة عجمان للعلوم والتكنولوجيا

Under the patronage of His Highness
Sheikh Humaid bin Rashid Al Nuaimi
Member of UAE Supreme Council, Ruler of Ajman



تحت رعاية
صاحب السمو الشيخ حميد بن راشد النعيمي
عضو المجلس الأعلى حاكم عجمان



تحت رعاية
صاحب السمو الشيخ حميد بن راشد النعيمي
عضو المجلس الأعلى حاكم عجمان



شبكة جامعة عجمان للعلوم والتكنولوجيا
Ajman University of
Science & Technology
Network UAE

اتحاد اطباء العرب في اوربا
عضو في هيئة الأمم المتحدة
ArabMed
UN Member (NGO)

ينعقد

المؤتمر الطبي السنوي الثاني والعشرين لاتحاد أطباء العرب في أوروبا
ومؤتمر هيئة بيئة الإبداع الطبية بشبكة جامعة عجمان
(تكنوسفير ٢٠٠٥ / الأول)



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