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1. Are acute coronary syndrome patients admitted during off-duty hours treated differently? An analysis of the Saudi Project for Assessment of Acute Coronary Syndrome (SPACE) study

Al Faleh HF (Al Faleh, Hussam F.); Thalib L (Thalib, Lukman); AlHabib KF (AlHabib, Khalid F.); Ullah A (Ullah, Anhar); AlNemer K (AlNemer, Khalid); AlSaif SM (AlSaif, Shukri M.); Taraben AN (Taraben, Amir N.); Malik A (Malik, Asif); Abuosa AM (Abuosa, Ahmed M.); Mimish LA (Mimish, Layth A.); Hersia AS (Hersia, Ahmad Salah)

Abstract

BACKGROUND AND OBJECTIVES: It is often suggested that acute coronary syndrome (ACS) patients admitted during off-duty hours (OH) have a worse clinical outcome than those admitted during regular working hours (RH). Our objective was to compare the management and hospital outcomes of ACS patients admitted during OH with those admitted during RH. DESIGN AND SETTING: Prospective observational study of ACS patients enrolled in the Saudi Project for Assessment of Acute Coronary Syndrome study from December 2005 to December 2007. PATIENTS AND METHODS: ACS patients with available date and admission times were included. RH were defined as weekdays, 8 AM-5 PM, and OH was defined as weekdays 5 PM-8 AM, weekends, during Eid (a period of several days marking the end of two major Islamic holidays), and national days. RESULTS: Of the 2825 patients qualifying for this analysis, 1016 (36%) were admitted during RH and 1809 (64%) during OH. OH patients were more likely to present with heart failure and ST elevation myocardial infarction (STEMI) and to receive fibrinolytic therapy, but were less likely to undergo primary percutaneous coronary interventions (PCI). The median door to balloon time was significantly longer (P<.01) in OH patients (122 min) than in RH patients. No differences were observed in hospital outcomes including mortality between the two groups, except for higher heart failure rates in OH patients (11.1% vs 7.2%, P<.001). CONCLUSIONS: STEMI patients admitted during OH were disadvantaged with respect to use and speed of delivery of primary PCI but not fibrinolytic therapy. Hospitals providing primary PCI during OH should aim to deliver it in a timely manner throughout the day.

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2. Benchmarking the post-accreditation patient safety culture at King Abdulaziz University Hospital

Al-Awa B (Al-Awa, Bahjat); Al Mazrooa A (Al Mazrooa, Adnan); Rayes O (Rayes, Osama); El Hati T (El Hati, Taghreed); Devreux I (Devreux, Isabelle); Al-Noury K (Al-Noury, Khaled); Habib H (Habib, Hamed); El-Deek BS (El-Deek, Basem Salama)

Abstract

BACKGROUND AND OBJECTIVES: Accreditation is an internationally recognized evaluation process used to assess, promote, and guarantee efficient and effective patient care and safety. Saudi Arabia is one of the first countries in the eastern Mediterranean region to implement health care accreditation standards. This study provides valuable information pertaining to the impact of accreditation in the unique multicultural, multilingual competitive environment at King Abdulaziz University Hospital in Saudi Arabia. The objective of this study was to perform an unbiased assessment of the impact of accreditation on patient safety culture. DESIGN AND SETTING: Cross-sectional retrospective and prospective study post-accreditation at King Abdulaziz University Hospital in Jeddah, Saudi Arabia from January 1, 2006 to December 31, 2009. PATIENTS AND METHODS: A total of 870 registered nurses from eight different cultural backgrounds working at 22 hospital units were given electronic access to the survey. A 5-point Likert scale was used, ranging from 1 for "Strongly disagree" to 5 for "Strongly agree." The survey results were matched with the international benchmarks from the Hospital Survey on Patient Safety Culture, 2005. RESULTS: A total of 605 nurses answered the survey questionnaire. The comparison between the percentages of nurses at King Abdulaziz University Hospital (KAUH) and those at international hospitals who answered "Agree" and "Strongly agree" showed a post-accreditation improved perception of the culture of patient safety. CONCLUSIONS: Accreditation has an overall statistically significant improvement in the perception of the culture of patient safety.

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3. Chemotherapy and Fingerprint Loss: Beyond Cosmetic

Al-Ahwal MS (Al-Ahwal, Mahmoud S.)

Abstract

Hand-foot syndrome (HFS) is a common adverse reaction to several chemotherapy drugs. Focus has been on the clinically relevant sequelae associated with this condition, with fingerprint loss receiving little attention. We report the case of a 53-year old male patient with terminal metastatic adenocarcinoma of the rectum involving the liver and lungs who developed grade 3 HFS while on capecitabine therapy. This resulted in his inability to process required government papers as a result of the loss of his fingerprints, imposing significant inconvenience and frustration on a person severely challenged by his deteriorating health. We believe clinicians should pay more attention to this possible outcome that can add additional stress in the lives of patients whose quality of life is already severely compromised. The Oncologist 2012;17:291-293

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4. Childhood Brain Lesions: 15 years Experience of King Abdulaziz University Hospital (1995-2010)

AlJhdali HM (AlJhdali, Hessa M.); Jamal AA (Jamal, Awatif A.)

Abstract

Pediatric age brain lesions can be of neoplastic and non-neoplastic nature, the latter include: congenital malformations, inflammatory processes, vascular and cystic lesions. One of most concerning brain pathology in childhood age is CNS tumors. Malignant brain tumors are the second most common type of pediatric cancer after leukemia. Cancer of the brain and central nervous system comprised 17% of malignancies in children younger than 20 years of age. In Saudi Arabia childhood CNS cancer accounted 11.3% of all childhood cancers. The current study presented the experience of King Abdulaziz University Hospital regarding Childhood Brain Lesions diagnosed over 15 years period (1995 to 2010) considering frequency, morphological pattern and the demographic data (age distribution and gender) of these lesions and further compared the findings with the national and international experience. A retrospective study conducted using a computerized search of the archives of Pathology Department at King Abdulaziz University Hospital in Jeddah; from 1995 tell 2010 to retrieve all the brain cases inclusive of all brain regions. In 15 years period 71 cases (25.1%) out of total brain lesions (283 cases) were childhood brain lesions. Non-neoplastic lesions were 40.8% and neoplastic lesions were 59.2%. Congenital malformations (23.9%) were the commonest nonneoplastic brain lesions, while neuroepithelial tumors ranked first among neoplastic lesions and accounted for 25.4% of childhood brain lesions (CBL) in the study. The astrocytic tumors comprised the majority of the glial tumors (94.4%) with mean age of 8.3 years and M: F ratio 1.4:1. The pilocytic astrocytoma represented 64.7% of all astrocytic tumors. The second malignant tumor was embryonal tumors (medulloblastoma) and accounted for 18.3% of CBL with male predominance. In conclusion, a single institute experience was reported revealing that primary CNS tumors were the commonest brain lesions in the pediatric age. Furthermore, in concurrence with the national and international experience, astrocytic tumors ranked as first primary CNS tumor of childhood age, followed by medulloblastoma. [Hessa M. AlJhdali and Awatif A. Jamal. Childhood Brain Lesions: 15 years Experience of King Abdulaziz University Hospital (1995-2010). Life Sci J 2012; 9(2): 617-623]. (ISSN: 1097-8135). http://www.lifesciencesite.com. 94
5. Chronic Hepatitis C in Saudi Arabia: Three Years Local Experience in a University Hospital

Akbar HO (Akbar, Hisham O.); Al Ghamdi A (Al Ghamdi, Ahmad); Qattan F (Qattan, Faten); Fallatah HI (Fallatah, Hind I.); Al Rumani M (Al Rumani, Maha)

Abstract

Background: Chronic hepatitis C (CHC) is a global infection. In Saudi Arabia, the prevalence of CHC is declining due to the implementation of a blood screening program. However, CHC still remains a leading cause of liver cirrhosis and hepatocellular carcinoma. Objectives: This is a retrospective study of CHC patients at the King Abdul Aziz University Hospital, Jeddah, Saudi Arabia. Patients and Methods: Out of a total of 291 CHC patients from the hepatology clinic at King Abdul Aziz University hospital, Jeddah, 279 patients were included in the present study. They were primarily male (152, 54.5%), with a mean age of 50.41 +/- 1.72 years. The majority of patients were either Saudi (108, 38.7%) or Egyptian (60, 21.5%). A total of 61 patients received combination treatment with pegylated interferon and ribavirin, and one patient with sickle-cell anemia received pegylated INF monotherapy. Demographic, clinical and laboratory features of the CHC patients, and their responses to treatment were studied. Results: Decompensated cirrhosis was documented in 60 patients (21.5%), and hepatocellular carcinoma in 14 (5%). The mean level of serum alanine aminotransferase was 83.6 +/- 231 u/L. The predominant genotype among the 70 patients tested, was genotype 4, followed by genotype 1 (39 and 18 patients, respectively). The sustained viral response (SVR) rate was 82.99%. The main predictive factors for SVR were baseline HCV viral load and rapid virologic response (RVR). The mean duration of follow-up was 4.2 +/- .85 years. There were 24 patients who had liver disease-related mortality. Conclusions: our data showed that 22% of CHC patients progress to cirrhosis and another 22% had treatment. Liver related mortality was more common in patients with advanced cirrhosis. Published by Kowsar Corp, 2012. cc 3.0.

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6. Demographic pattern of carpal tunnel syndrome in western Saudi Arabia

Abumunaser LA (Abumunaser, Lutf A.)

Abstract

Objective: To study the demographic characteristics of patients with carpal tunnel syndrome (CTS) in Saudi Arabia. Methods: A retrospective collection of 135 cases with CTS, diagnosed clinically and electrophysiologically. The studied cases presented to the Orthopedic Clinic of King Abdulaziz University Hospital in Jeddah, Saudi Arabia, between January 1999, and December 2009. The demographic data (age, gender, and site of involvement) were collected from the medical records. Results: The 135 cases comprised 112 females, and 23 males, with a male:female ratio of 1:4.9. The mean age was 45.5 years in women (range 17-74 years) and 48.5 years in males (range 20-77). The age related gender distribution of the subjects were the highest among the age group 45-54 years in both males (34.8%) and females (33.9%). The CTS occurred bilaterally in 74 cases (55%), and unilaterally in 61 cases (45%), with 41 cases affected on the right side and 20 the left side. Conclusion: The demographic pattern of CTS patients in the different provinces of Saudi Arabia is almost similar, and comparative to that reported in the western countries, with slightly higher male to female ratio among the Saudi patients.
7. Effect of Short-Term Proton Pump Inhibitor Treatment and Its Discontinuation on Chromogranin A in Healthy Subjects

Mosli HH (Mosli, Hala H.); Dennis A (Dennis, Alan); Kocha W (Kocha, Walter); Asher LJ (Asher, Linda J.); Van Uum SHM (Van Uum, Stan H. M.)

Abstract

Context: Chromogranin A (CgA) is used as a generic tumor marker for neuroendocrine tumors. Proton pump inhibitors (PPI) are known to increase CgA, but it is not clear to what extent, and there is little information on how long PPI need to be discontinued before the effect of PPI has disappeared. Furthermore, is it not known whether this PPI effect is dependent on the CgA assay used. Objective: The aim of the study was to determine the effect of 7-d treatment with a PPI and its discontinuation on CgA in serum and plasma comparing four CgA assays. Design and Participants: Seventeen healthy subjects took lansoprazole 30 mg at bedtime for 7 d, and blood samples for CgA were obtained at baseline, d 7 of PPI use, and 1, 2, 4, and 7 d after discontinuation of the PPI. In all samples, CgA was measured using the following assays: Alpco (serum and plasma), Cis-Bio (serum and plasma), DAKO, and Cis-Bio radioisotope assay. Results: When using the same assay, CgA was higher in plasma than in serum. Treatment with a PPI for 1 wk resulted in a significant (about 2.5-fold) increase in CgA with significant interindividual variation. After discontinuation of PPI, serum CgA gradually declined, with a half-life of 4-5 d. Conclusion: Short-term PPI use results in a significant increase of CgA in serum and plasma, an effect that is largely independent of the assay used. PPI need to be discontinued for 2 wk to fully eliminate their effect on CgA. This effect of PPI needs to be considered when interpreting results of CgA measurements.
8. Gastrointestinal basidiobolomycosis in a child; an unusual fungal infection mimicking fistulising Crohn's disease

Saadah OI (Saadah, Omar I.); Farouq MF (Farouq, Mohammad F.); Al Daajani N (Al Daajani, Nawaf); Kamal JS (Kamal, Jamal S.); Ghanem AT (Ghanem, Ahmad T.)

Abstract

Background: Gastrointestinal basidiobolomycosis is a rare disease caused by the fungus Basidiobolus ranarum. It has been reported in both children and adults. The disease mainly affects the colon and the small bowel; however, cases of the stomach, liver, pancreas, and renal system being affected have been reported. Case report: A 2 year old boy presented with the following symptoms; abdominal pain, vomiting, diarrhea, fever and palpable right iliac fossa mass. Laboratory investigations revealed elevated inflammatory markers and peripheral eosinophilia. Colonoscopy showed severely inflamed mucosa of the terminal ileum, cecum and ascending colon. CT scan of the abdomen demonstrated an inflammatory mass with wall thickening of the terminal ileum and the colon. Surgical exploration demonstrated retroperitoneal mass and inflamed terminal ileum, cecum and ascending colon. Upon laparotomy, multiple internal fistulas involving the bowel loops, the urinary bladder, the right ureter and the gallbladder were observed. Further investigations using histopathology of the resected diseased bowel showed extensive necrosis, multinucleated giant cells and numerous eosinophils and large fungal hyphae surrounded by strongly eosinophilic material were seen in the tissue suggestive of B. ranarum infection. The patient responded well to treatment with voriconazole. Conclusion: Gastrointestinal basidiobolomycosis should be considered in the differential diagnosis of every child presenting with abdominal pain, fever and palpable abdominal mass with peripheral eosinophilia. The presence of bowel inflammation and fistulas should not preclude such diagnosis. (C) 2011 European Crohn’s and Colitis Organisation.
9. Gastrointestinal basidiobolomycosis in a child; an unusual fungal infection mimicking fistulising Crohn's disease

Saadah OI (Saadah, Omar I.); Farouq MF (Farouq, Mohammad F.); Al Daajani N (Al Daajani, Nawaf); Kamal JS (Kamal, Jamal S.); Ghanem AT (Ghanem, Ahmad T.)

Abstract

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Alghamdi SA (Alghamdi, Sharifa A.); Saadah OI (Saadah, Omar I.); Almatury N (Almatury, Nesreen); Al-Maghrabi J (Al-Maghrabi, Jaudah)

Abstract

Hepatic-associated immunoglobulin A (IgA) nephropathy is a relatively common condition that occurs in adults with liver cirrhosis and portal hypertension. However, it is rare in children. This condition is characterized by the deposition of IgA in the renal glomeruli. The present report describes a 14-year-old boy with cryptogenic liver cirrhosis and portal hypertension who presented with hematuria and proteinuria associated with histological changes of IgA nephropathy.

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11. High Serum Sclerostin Predicts the Occurrence of Osteoporotic Fractures in Postmenopausal Women: The Center of Excellence for Osteoporosis Research Study

Ardawi MSM (Ardawi, Mohammed-Salleh M.); Rouzi AA (Rouzi, Abdulrahim A.); Al-Sibiani SA (Al-Sibiani, Sharifa A.); Al-Senani NS (Al-Senani, Nawal S.); Qari MH (Qari, Mohammed H.); Mousa SA (Mousa, Shaker A.)

Abstract

Sclerostin regulates bone formation by inhibiting Wnt pathway signaling. Low circulating sclerostin levels cause high bone mass. We hypothesized that postmenopausal women with increased sclerostin levels have a greater risk for osteoporosis-related fractures. We examined the association between circulating sclerostin together with bone turnover markers and osteoporosis-related fracture risk in 707 postmenopausal women, in a population-based study with a mean follow-up period of 5.2 +/- 1.3 years. Multivariate Cox proportional hazards regression models were used to analyze fracture risk, adjusted for age, body mass index, and other confounding risk factors. High sclerostin levels were strongly associated with increased fracture risk. After adjustment for age and other confounders, the relative fracture risk was more than sevenfold among postmenopausal women for each 1 SD increment increase in sclerostin level. Women in the highest quartile of sclerostin levels had about a 15-fold increase in fracture risk. Results were similar when we compared sclerostin at the 1-year visit to an average of two to three annual measurements. Fracture risk attributable to sclerostin levels was 56.6% in the highest quartile. Only high levels of bone resorption markers (plasma cross-linked C-terminal telopeptide of type 1 collagen [p-CTx], urinary CTx [u-CTx], and urinary N-telopeptide of type 1 collagen [u-NTx]) were predictive of osteoporosis-related fractures but at much lower hazard ratio (HR) values than that of serum sclerostin. Associations between sclerostin levels and fracture risk were independent of bone mineral density and other confounding risk factors. High sclerostin levels are a strong and independent risk factor for osteoporosis-related fractures among postmenopausal women. (C) 2012 American Society for Bone and Mineral Research.
12. Hyperthermic isolated limb perfusion for extremity soft tissue sarcomas: Systematic review of clinical efficacy and quality assessment of reported trials

Trabulsi NH (Trabulsi, N. H.); Patakfalvi L (Patakfalvi, L.); Nassif MO (Nassif, M. O.);
Turcotte RE (Turcotte, R. E.); Nichols A (Nichols, A.); Meguerditchian AN
(Meguerditchian, A. N.)

Abstract

Background and Objectives Extremity soft tissue sarcomas (STS) are managed with radiotherapy and limb-sparing surgery however aggressive or recurrent cases require amputation. Hyperthermic isolated limb perfusion (HILP) has been proposed as an alternative. Our aim was to systematically review phase II HILP trials, assess tumor response, limb salvage (LS), and quality of scientific publications on this technique. Methods We conducted a literature search of electronic databases (MEDLINE, EMBASE, Scopus, Cochrane Library) and clinical trial registries for phase II HILP trials on non-resectable extremity STS. Outcomes of interest were complete response (CR), partial response (PR), and LS rates. Quality of Published trials was assessed using a quality checklist. Results Of 518 patients across 12 studies, 408 had some response (CR or PR), and 428 had the limb spared. Median CR, PR, and LS rates were 31%, 53.5%, and 82.5%, respectively. Median Wieberdink loco-regional toxicity rates were 3.8%, 45.5%, 17%, 1%, and 0% for levels 1-5, respectively. No trial fulfilled either all ideal or essential quality criteria. Seven trials did not include statistical methodology. Conclusion HILP seems effective in treating advanced extremity STS. However, poor publication quality hinders results validity. Technical and methodological standardization, well-designed, multi-institutional trials are warranted. J. Surg. Oncol. 2012; 106: 921-928. (c) 2012 Wiley Periodicals, Inc.
13. Increased Body Mass Index is Associated With Larger Renal Calculi

Mosli HA (Mosli, Hisham A.); Mosli HH (Mosli, Hala Hisham)

Abstract

OBJECTIVE To examine the relationship between the body mass index and the size of renal stones in a group of patients with urolithiasis. METHODS One-hundred seventy-three patients with renal stones were enrolled. Body mass index was calculated on the basis of height and weight measurements, and stone size was either measured accurately (143 patients) or estimated by the radiologist or managing urologist (30 patients). Body mass index and stone size were then cross-tabulated and the results were analyzed. RESULTS Patients with a body mass index of >25 kg/m(2) (overweight or obese) were found to have 29 (16.8%) small, 84 (48.5%) medium, and 25 (14.5%) large stones, whereas patients in the underweight or normal body mass index categories had 7 (9.5%) small, 19 (10.9%) medium, and 9 (10.6%) large stones. Of the study group, 109/173 (63%) were found to be overweight or obese, of whom all had renal stones >= 1 cm, ie, medium or large, when measured at the greatest diameter, indicating a tendency to have larger stones with increasing body mass index that was statistically significant (P = .0001). CONCLUSION A clear relationship exists between increased body mass index and renal stone size, with overweight and obese patients having medium and large stones more frequently than patients with underweight or normal body mass index.

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Language : English    Document Type : Article
Reprint Address : Mosli, HA (reprint author), King Abdulaziz Univ Hosp, Dept Urol, POB 80215, Jeddah 21589, Saudi Arabia.
Publisher : ELSEVIER SCIENCE INC
Web of Science Categories : Urology & Nephrology
Research Areas : Urology & Nephrology
Faculty Name : University Hospital
Department : Clinics
DSR No. : 1784
14. Independent predictors of all osteoporosis-related fractures among healthy Saudi postmenopausal women: The CEOR Study

Rouzi AA (Rouzi, Abdulrahim A.); Al-Sibiani SA (Al-Sibiani, Sharifa A.); Al-Senani NS (Al-Senani, Nawal S.); Radaddi RM (Radaddi, Raja M.); Ardawi MSM (Ardawi, Mohammed-Salleh M.)

Abstract

This study was designed to identify independent predictors of all osteoporosis-related fractures (ORFs) among healthy Saudi postmenopausal women. We prospectively followed a cohort of 707 healthy postmenopausal women (mean age, 61.3 +/- 7.2 years) for 5.2 +/- 1.3 years. Data were collected on demographic characteristics, medical history, personal and family history of fractures, lifestyle factors, daily calcium intake, vitamin D supplementation, and physical activity score. Anthropometric parameters, total fractures (30.01 per 1000 women/year), special physical performance tests, bone turnover markers, hormone levels, and bone mineral density (BMD) measurements were performed. The final model consisted of seven independent predictors of ORFs: [lowest quartile (Q((1) under bar)) vs highest quartile (Q((4) under bar))] physical activity score (Q(1) vs Q(4): <= 12.61 vs >= 15.38); relative risk estimate [RR], 2.87; (95% confidence interval [CI]: 1.88-4.38); age >= 60 years vs age<60 years (RR=2.43; 95% CI: 1.49-3.95); hand grip strength (Q(1) vs Q(4): <= 13.88 vs >= 17.28 kg) (RR=1.88; 95% CI: 1.15-3.05); BMD total hip (Q(1) vs Q(4): <= 0.784 vs 0.973 g/cm(2)) (RR=2.63; 95% CI: 1.26-5.75); dietary calcium intake (Q(1) vs Q(4): <= 426 mg/day) (RR=1.66; 95% CI: 1.08-2.53); and past year history of falls (RR=1.61:95% CI: 1.06-2.48). Compared with having none (41.9% of women), having three or more clinical risk factors (4.8% of women) increased fracture risk by more than 4-fold, independent of BMD. Having three or more risk factors and being in the lowest tertile of T-score of [total hip/lumbar spine (L1-L4)] was associated with a 14.2-fold greater risk than having no risk factors and being in the highest T-score tertile. Several clinical risk factors were independently associated with all ORFs in healthy Saudi postmenopausal women. The combination of multiple clinical risk factors and low BMD is a very powerful indicator of fracture risk. (C) 2011 Elsevier Inc. All rights reserved.
15. Local inflammation influences oestrogen metabolism in prostatic tissue

Mosli HA (Mosli, Hisham A.); Al-Abd AM (Al-Abd, Ahmed M.); El-Shaer MA (El-Shaer, Marwa A.); Khedr A (Khedr, Alaa); Gazzaz FS (Gazzaz, Faten S.); Abdel-Naim AB (Abdel-Naim, Ashraf B.)

Abstract

OBJECTIVE To investigate the impact of experimentally induced inflammation on oestrogen metabolism in rat prostate. MATERIALS AND METHODS Prostatitis was induced in normal and oestrogen-treated male rats by injecting 2% carrageenan solution into the ventral prostate. After 48 h, the rats were killed and the ventral prostate was collected. Prostatic inflammation and proliferation were confirmed by gross visual evidence, histology and elevated tumour necrosis factor-alpha, prostaglandin E-2 and cyclin-D-1. Expression of oestrogen-metabolizing enzymes was assessed using capillary electrophoresis, and oestrogen metabolites within prostate tissue were assayed using liquid chromatography mass spectrometry. RESULTS Animals exposed to carrageenan insult combined with oestrogen treatment showed the most prominent inflammatory and proliferative response. Treatment of animals with oestrogen alone induced moderate inflammation and proliferation. Oestrogen-metabolizing enzymes were overexpressed in animals with experimental prostatitis with sequential accumulation of catechol oestrogens within prostatic tissues. Oestrogen receptor-alpha was underexpressed in the prostatitis with oestrogen group, while oestrogen receptor-beta was overexpressed. CONCLUSIONS The present work provides experimental evidence that local inflammation enhances oestrogen synthesis and directs oestrogen metabolism to generate catechol oestrogens within prostatic tissues. This may contribute, at least partly, to enhanced prostatic cell proliferation.

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DOI: 10.1111/j.1464-410X.2011.10796.x
Cited reference count: 36
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Reprint Address: Abdel-Naim, AB (reprint author), Ain Shams Univ, Fac Pharm, Dept Pharmcol & Toxicol, Cairo 11566, Egypt.
Publisher: WILEY-BLACKWELL
Web of Science Categories: Urology & Nephrology
Research Areas: Urology & Nephrology
Faculty Name: University Hospital
Department: Clinics
DSR No.: 667
Lower limb lengthening and deformity correction using the Fitbone motorized nail system in the adolescent patient

Al-Sayyad MJ (Al-Sayyad, Mohammed J.)

Abstract

Leg lengthening by an external fixation is associated with various difficulties. Pin-tract infections are commonly encountered, and muscle contractures and joint stiffness are additional complications associated with this method. Several researchers explored a purely intramedullary solution for leg lengthening since the 1970s. The purpose of this study was to evaluate the results of 10 adolescent patients who underwent leg lengthening with a motorized intramedullary lengthening device (the Fitbone System). We aimed to evaluate the effectiveness of the Fitbone system in deformity correction and lengthening of the femur and tibia in the pediatric and adolescent patients looking at whether the incidence of complications commonly associated with external fixators could be reduced. We compared our preliminary results with those from other reports, with a focus on leg length achieved and rate of complications. Ten patients were included, nine femoral nails and five tibial nails were implanted. The average lengthening distance was 4.8 cm (range, 2.8-10 cm). In 10 patients, leg lengthening was combined with successful correction of the mechanical axis alignment in three patients. The consolidation index averaged 24 days/cm (range, 20-39 days/cm). The average hospital stay was 8 days. No bone or soft tissue infections were observed. Only one patient had irritation and pain from the antenna system after lengthening and recovered fully after antenna removal. Our results suggest that the difficulties commonly associated with external fixators can be reduced with this method. It also allows good angular correction in patients with mechanical axis deviation. These features combined with a short time of hospitalization make it a promising procedure for limb lengthening in adolescent patients. J Pediatr Orthop B 21:131-136 (C) 2012 Wolters Kluwer Health vertical bar Lippincott Williams & Wilkins.
17. Physical Activity in Relation to Serum Sclerostin, Insulin-Like Growth Factor-1, and Bone Turnover Markers in Healthy Premenopausal Women: A Cross-Sectional and a Longitudinal Study

Ardawi MSM (Ardawi, Mohammed-Salleh M.); Rouzi AA (Rouzi, Abdulrahim A.); Qari MH (Qari, Mohammed H.)

Abstract

Context: There is limited information on the effects of mechanical loading caused by physical activity (PA) on sclerostin, IGF-I, and bone turnover markers (BTM). Objective: The objective of the investigation was to study the relationships between serum sclerostin, serum-IGF-I (s-IGF-I), BTM, and the PA level in premenopausal women and to discern how 8-wk of PA training (PAT) affects the serum levels of sclerostin, IGF-I, and BTM. Design: This was a cross-sectional study with a subgroup followed up longitudinally. Settings and Subjects: A total of 1235 randomly selected premenopausal women were cross-sectionally studied. We also followed up 58 of these women longitudinally during an 8-wk course of PAT (4 d/wk) and compared them with 62 controls. All women were medically examined, and bone mineral density (BMD) and serum levels of sclerostin, s-IGF-I, and BTM were determined. Results: Women with PA of greater than 120 min/wk showed significantly lower serum sclerostin (by 36.8%) but higher s-IGF-I (by 107%) levels than sedentary controls. Bone formation markers were also higher in the PA greater than 120 min/wk group compared with the sedentary controls. In the longitudinal study, the 8-wk PAT program led to a decrease in serum sclerostin (by 33.9%, P < 0.0001) but increases in the serum levels of the bone-formation markers and IGF-I (s-IGF-I by 74.2%, P < 0.0001). Conclusions: This study demonstrates that even minor changes in PA are associated with effects on serum levels of sclerostin, IGF-I, and BTM and suggests that sclerostin could be a link between mechanical loading and disuse osteoporosis in humans.
18. Possible central nervous system vasculitis as an early presentation of Crohn's disease. A challenge in diagnosis and management

Al-Beladi FI (Al-Beladi, Fatima I.); Al-Fawaz MA (Al-Fawaz, Mohammed A.); Al-Solami EA (Al-Solami, Enad A.); Al-Solami RA (Al-Solami, Rahma A.)

Abstract

Sources: SAUDI MEDICAL JOURNAL
ISO Source Abbrev: SAUDI MED J
Impact Factor: 0.520
Year: 2012 Volume: 33 Issue: 9 Pages: 1025-1027
Cited reference count: 5
Language: English Document Type: Article
Reprint Address: Al-Beladi, FI (reprint author), King Abdulaziz Univ Hosp, Dept Internal Med, POB 80215, Jeddah 21589, Saudi Arabia.
Publisher: SAUDI MED J
Web of Science Categories: Medicine, General & Internal
Research Areas: General & Internal Medicine
Faculty Name: University Hospital
Department: Clinics
DSR No.: 1673
19. **Prevalence of hyperinsulinism, type 2 diabetes mellitus and metabolic syndrome among Saudi overweight and obese pediatric patients**

*Al-Agha A (Al-Agha, A.); Ocheltree A (Ocheltree, A.); Shata N (Shata, N.)*

**Abstract**

Aim. Obesity and overweight among children and adolescents is increasing at an alarming rate, which lead to the increase in the incidence of their related co-morbidities. Our objectives are to establish the following: 1) the prevalence of hyperinsulinism among overweight and obese pediatric patients. 2) The prevalence of type 2 diabetes mellitus (T2DM) among those with hyperinsulinism. 3) The prevalence of metabolic syndrome (MS) and its components among T2DM pediatric patients. Methods. A retrospective cross-sectional study conducted on overweight and obese pediatric patients attending the pediatrics diabetes clinic at King Abdul-Aziz University Hospital, Jeddah, Saudi Arabia, from 2006 to 2010. Serum insulin level was measured for 387 patients (ages from 2 to 18 years). Those with hyperinsulinism underwent further investigations to assess the prevalence of T2DM and the prevalence of MS among T2DM patients. Results. The overall prevalence of hyperinsulihism and T2DM were 44.7%, and 9.04%, respectively. Among children and adolescents with T2DM, 62.86% had a body mass index BMI >= 85th percentile, 37.14% had a BMI >= 95th percentile, 14.29% had MS, 34.29% were hypertensive and 28.57% had dyslipidemia. Conclusion. Obesity and its co-morbidities were prevalent among Saudi pediatric patients. We recommend preventing excessive weight gain through the promotion of a healthy lifestyle, family educational seminars and the reinforcement of indoor exercises.

**Sources**: MINERVA PEDIATRICA

**ISO Source Abbrev**: MINERVA PEDIATR

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**Cited reference count**: 38

**Language**: English  **Document Type**: Article


**Reprint Address**: Al-Agha, A (reprint author), King Abdulaziz Univ Hosp, Dept Pediat, POB 80215, Jeddah 21589, Saudi Arabia.

**Publisher**: EDIZIONI MINERVA MEDICA

**Web of Science Categories**: Pediatrics

**Research Areas**: Pediatrics

**Faculty Name**: University Hospital

**Department**: Clinics

**DSR No.**: 1479
20. Prevalence of hyperinsulinism, type 2 diabetes mellitus and metabolic syndrome among Saudi overweight and obese pediatric patients

Al-Agha A (Al-Agha, A.); Ocheltree A (Ocheltree, A.); Shata N (Shata, N.)

Abstract

Aim. Obesity and overweight among children and adolescents is increasing at an alarming rate, which lead to the increase in the incidence of their related co-morbidities. Our objectives are to establish the following: 1) the prevalence of hyperinsulinism among overweight and obese pediatric patients. 2) The prevalence of type 2 diabetes mellitus (T2DM) among those with hyperinsulinism. 3) The prevalence of metabolic syndrome (MS) and its components among T2DM pediatric patients. Methods. A retrospective cross-sectional study conducted on overweight and obese pediatric patients attending the pediatrics diabetes clinic at King Abdul-Aziz University Hospital, Jeddah, Saudi Arabia, from 2006 to 2010. Serum insulin level was measured for 387 patients (ages from 2 to 18 years). Those with hyperinsulinism underwent further investigations to assess the prevalence of T2DM and the prevalence of MS among T2DM patients. Results. The overall prevalence of hyperinsulihism and T2DM were 44.7%, and 9.04%, respectively. Among children and adolescents with T2DM, 62.86% had a body mass index BMI >= 85th percentile, 37.14% had a BMI >= 95th percentile, 14.29% had MS, 34.29% were hypertensive and 28.57% had dyslipidemia. Conclusion. Obesity and its co-morbidities were prevalent among Saudi pediatric patients. We recommend preventing excessive weight gain through the promotion of a healthy lifestyle, family educational seminars and the reinforcement of indoor exercises.
21. Rosette-Forming Glioneuronal Tumour of the 4th Ventricle in a NF1 Patient

Alturkustani M (Alturkustani, Murad); Ang LC (Ang, Lee-Cyn)

Abstract

Not Available
22. Sputum Cytology - An Underutilized Diagnostic Tool: A Single Institute Experience

Jamal A (Jamal, Awatif); Mansoor I (Mansoor, Ibrahim)

Abstract

Objective: Sputum cytology is a valuable diagnostic tool which underutilized in our clinical practice. The aim of this study is to report our experience utilizing this tool to diagnose various respiratory disorders and to report the utility and accuracy of this procedure in our institute. Design: A retrospective analysis of all sputum smears from Jan 1995 to December 2010. Settings: The Department of Pathology at King Abdulaziz University hospital Jeddah, Western region of Saudi Arabia. Subjects and Methods: All sputum cytology samples received at the Department of Pathology were reviewed. Interventions: Cytology smears, clinical history and surgical follow-ups were reviewed. Main Outcome measures: The data was analyzed to calculate sensitivity, specificity, and predictive values. Results: A total of 191 cases of sputum cytology were examined during this period and only 38 (20%) patients had a subsequent follow up biopsies. Cytology diagnosis was categorized (reporting system of our laboratory) as atypical in 4 cases, malignant in 5 cases, inflammatory in 17 cases, insufficient in 21 cases, and negative in 144 patients. The subsequent histological follow-up in 38 cases was categorized as malignant in 21 cases, inflammatory /benign in 12 cases and negative in 5 cases. Cross-tabulating the cytology with surgical follow-up revealed 3 true-positive, one false-positive, 16 true-negative, and 15 false-negative cases. Conclusion: Sputum cytology showed high specificity (94%) and positive-predictive value (75%) and low sensitivity (16.7%) and a negative-predictive value (52%). The low sensitivity limited the sputum-cytology as a screening tool. But in patients suspected of having malignant lesions the high specificity of this tool can be utilized to get diagnosis before proceeding to invasive procedures. [Awatif Jamal and Ibrahim Mansoor. Sputum Cytology - An Underutilized Diagnostic Tool: A Single Institute Experience. Life Sci J 2012; 9(2): 681-685]. (ISSN: 1097-8135). http://www.lifesciencesite.com. 102

Sources

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Pages: 681-685
Cited reference count: 15
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Document Type: Article
Reprint Address: Jamal, A (reprint author), King Abdulaziz Univ Hosp, Dept Histopathol, Jeddah, Saudi Arabia.
Publisher: MARSLAND PRESS
Web of Science Categories: Biology
Research Areas: Life Sciences & Biomedicine - Other Topics
Faculty Name: University Hospital
Department: Clinics
DSR No.: 1392
Sterile Peritonitis with High-Dose Amino Acid-Containing Peritoneal Dialysis Solution in Children

Kari JA (Kari, Jameela A.); El-Desoky S (El-Desoky, Sherif); Abuduhair AA (Abuduhair, Al-Anoud); Habib H (Habib, Hamid)

Abstract

Not Available
24. Taylor Spatial Frame in the Treatment of Upper Extremity Conditions

Al-Sayyad MJ (Al-Sayyad, Mohammed J.)

Abstract

Background: Taylor spatial frame (TSF) is a modern multiplanar external fixator that combines ease of application and computer accuracy; it provides the capability of 1 to 6 axes of deformity correction sequentially or simultaneously by adjusting 6 connecting struts between 2 circular rings. Previous reports have documented the effectiveness of the TSF in acute fracture care, nonunion treatment, and in bone lengthening and deformity correction in the lower extremity. To the authors’ knowledge, no previous case series in the English literature have documented the use of the TSF in treating upper extremity conditions. Our experience with the use of this external fixator in the treatment of upper extremity length abnormality, angulation, and bone transport is summarized. Methods: Over a period of 7 years, TSF was used in 12 patients with varying upper extremity pathologies that were collected from our prospective external fixator database. The classic TSF planning strategy was adopted and the TSF web-based program was used. All cases were followed for a minimum of 2 years. The database and radiographs were reviewed to obtain demographic data, malalignment parameters, final correction, time in the TSF, and complications. Result: Patients' ages ranged from 8 to 18 years. Eight humeral and 4 radial cases were identified. These included 4 cubitus varus and 1 cubitus valgus deformity, 1 neglected supracondylar fracture, 2 humeral nonunion, 2 radial malunion cases, and 1 radial shaft septic nonunion. Time in the TSF varied according to patient age and bone involved. Five patients had superficial pin site infections that resolved with oral antibiotics. Postoperatively mean final angulation on the anteroposterior radiograph was 1 degree (range, 0 to 5 degrees) and the mean final angulation on the lateral radiograph was 0.5 degrees (range, 0 to 2 degrees). Union of bone was achieved in all cases. Conclusions: The TSF is an external fixator that can be successfully used as a treatment alternative for the definitive treatment of upper extremity conditions involving a deformity and or shortening or bone transport in the pediatric and adolescent patient population. Level of Evidence: Level IV

Sources

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Reprint Address: Al-Sayyad, MJ (reprint author), King Abdulaziz Univ Hosp, Dept Orthopaed Surg, POB 1817, Jeddah 21441, Saudi Arabia

Publisher: LIPPINCOTT WILLIAMS & WILKINS

Web of Science Categories: Orthopedics; Pediatrics

Research Areas: Orthopedics; Pediatrics

Faculty Name: University Hospital

Department: Clinics

DSR No.: 1304
25. Virtual Reality Simulation in Ear Microsurgery: A Pilot Study

Al-Noury K (Al-Noury, Khaled)

Abstract

Classically, teaching of otological micro procedures is achieved by cadaveric dissection of the temporal bones, achieved by attending expensive temporal bone dissection courses. The difficulty in acquiring cadaveric specimens and the cost of courses has led to the development of alternative techniques. The aim of this study is to evaluate the efficacy of using virtual reality temporal bone simulation in training otolaryngology residents for mastoidectomy procedures. Four senior residents were evaluated during six canal wall down mastoidectomy procedures. Three of these procedures were done conventionally. The other three procedures were preceded by virtual reality simulation 1 day before the operation. In simulated cases, the residents scored higher on the global rating scale and task-based checklist, and were faster and more confident. Further, fewer instructions were required during the actual operation. This outcome is encouraging for the utilization of virtual reality simulation in otolaryngology residency training. Further studies should be performed on a larger number of simulators and surgical procedures to validate our results.
26. Vitamin D deficiency in rheumatoid arthritis
Prevalence and association with disease activity in
Western Saudi Arabia

Attar SM (Attar, Suzan M.)

Abstract

Objectives: To estimate the prevalence of low serum vitamin D level (25(OH)D) in patients with rheumatoid arthritis (RA) compared with healthy controls, and to analyze the association between 25(OH)D and disease activity. Methods: This retrospective analysis included 100 RA patients (85% women) and 100 controls, not on vitamin D supplements from January 2010 to December 2011 at a tertiary care center at the Department of Internal Medicine, King Abdulaziz University Hospital (KAUH), Jeddah, Kingdom of Saudi Arabia. Disease activity was measured using the disease activity score index (DAS28). According to the DAS28 score, RA patients were divided into 3 groups as high, moderate, and low disease activity. Patients' serum 25(OH)D was measured in a centralized laboratory. Results: The mean 25(OH)D in patients with RA was similar to the control group (32.3 +/- 14.4 nmol/L) versus (31.4 +/- 16.4 nmol/L) (p=0.41). Patients with high disease activity had the lowest 25(OH)D levels (18.25 +/- 8.3 nmol/L) compared with patients with moderate (35.13 +/- 15.2 nmol/L) and low (38.05 +/- 7.3 nmol/L) disease activity (p<0.001). Serum 25(OH)D was negatively correlated with DAS28, which was statistically significant (r=-0.42, p<0.0001). Conclusion: Serum vitamin D levels in RA patients were similar to the healthy control group. However, significantly lower 25(OH)D values were found in patients who are poorly responding to treatment, and not in a state of disease remission.
Vitamin D insufficiency and treatment with oral vitamin D3 in children with chronic kidney disease

Kari JA (Kari, Jameela A.); Eldesoky SM (Eldesoky, Sherif M.); Bagdadi OT (Bagdadi, Osama T.)

Abstract

Objectives: To investigate the effects of oral cholecalciferol on the levels of vitamin D3 and intact parathyroid hormone (iPTH) in children with chronic kidney disease (CKD). Methods: We conducted a prospective uncontrolled observational study at the Pediatric Nephrology Clinic of King Abdulaziz University Hospital, Jeddah, Kingdom of Saudi Arabia between January and October 2011 to assess serum 25-hydroxyvitamin D3 (25[OH]D) and iPTH in children with CKD stages 2-5. Children with low vitamin D3 levels were commenced on cholecalciferol, 2000 IU/day. Their 25(OH)D3 and iPTH levels were reassessed, first after 3 months, then after 6 months. Data analysis was performed using the Statistical Package for Social Sciences. Paired t-test was used to compare results before and after treatment. Results: Forty-five children (31 boys and 14 girls) were included in the study. Their mean +/- SD age was 9.6 +/- 4.6 years. There was significant improvement in 25(OH)D3 after 3 months (14.2 +/- 8.2 - 20 +/- 11.1 ng/mL) (p<0.001). However, only 5 children reached levels >= 30 ng/mL. There was no further improvement after 6 months of treatment (20.17 +/- 13.4 ng/mL) (p=0.65). There was no improvement in iPTH levels after 3 and 6 months. No changes were also observed in the levels of calcium, phosphate, alkaline phosphatase, or creatinine. Conclusion: The administration of oral vitamin D3 at 2000 IU/day resulted in significant improvement of vitamin D levels in children with CKD, but normalized only in 11% of the patients. The treatment had no effect on iPTH levels.
DEPARTMENT
LABORATORIES
1. Three-dimension anatomy-based planning optimization for high dose rate vaginal vault brachytherapy

Bahadur YA (Bahadur, Yasir A.); Hassouna AH (Hassouna, Ashraf H.); Constantinescu CT (Constantinescu, Camelia T.); Naga AF (Naga, Adly F.); Ghasal NM (Ghasal, Noor M.); Elsayed ME (Elsayed, Mohamed E.)

Abstract

Objectives: To retrospectively compare 3-dimension (3D)-inverse planning optimization with 2 conventional planning methods in vaginal vault high-dose-rate brachytherapy. Methods: We randomly selected 26 patients with endometrium cancer, treated with external beam radiotherapy followed by intracavitary high-doserate brachytherapy. The study was carried out in the Radiotherapy Unit of King Abdulaziz University Hospital, Jeddah, Saudi Arabia between July 2010 and October 2011. For each brachytherapy fraction, doseevolume-histograms were analyzed for 3 different dose prescription protocols: 0.5 cm from the applicator's tip, 0.5 cm along the applicator's surface, and inverse planning. Results: Dosee-volume-histogram analysis showed a significant difference (p<0.001) between the 3 treatment planning methods regarding clinical-targetvolume prescribed dose coverage: 26.7%+/− 5.4% versus 48.5%+/− 6.7% versus 68.6%+/− 7.5%. The doses received by the volumes of 2 cm(3) of organs-at-risk were (p<0.001): rectum: 4.6 +/- 1.1 Gy versus 2.8 +/- 0.5 Gy versus 3.3 +/- 0.5 Gy; sigmoid: 1.4 +/- 0.8 Gy versus 0.7 +/- 0.3 Gy versus 0.9 +/- 0.5 Gy; and bladder: 3.7 +/- 1.0 Gy versus 2.3 +/- 0.5 Gy, versus 2.7 +/- 0.6 Gy. Conclusion: Three-dimension inverse planning provides the ability to balance the target dose coverage against the sparing of organs at risk. For vaginal vault high-dose-rate inverse planning brachytherapy, the use of a CT scan only for the first fraction of treatment is feasible, and the dosimetric impact is minimal.
DEPARTMENT

PHARMACEUTICAL

SERVICES
1. Local inflammation influences oestrogen metabolism in prostatic tissue

Mosli HA (Mosli, Hisham A.); Al-Abd AM (Al-Abd, Ahmed M.); El-Shaer MA (El-Shaer, Marwa A.); Khedr A (Khedr, Alaa); Gazzaz FS (Gazzaz, Faten S.); Abdel-Naim AB (Abdel-Naim, Ashraf B.)

Abstract

OBJECTIVE To investigate the impact of experimentally induced inflammation on oestrogen metabolism in rat prostate. MATERIALS AND METHODS Prostatitis was induced in normal and oestrogen-treated male rats by injecting 2% carrageenan solution into the ventral prostate. After 48 h, the rats were killed and the ventral prostate was collected. Prostatic inflammation and proliferation were confirmed by gross visual evidence, histology and elevated tumour necrosis factor-alpha, prostaglandin E-2 and cyclin-D-1. Expression of oestrogen-metabolizing enzymes was assessed using capillary electrophoresis, and oestrogen metabolites within prostate tissue were assayed using liquid chromatography mass spectrometry. RESULTS Animals exposed to carrageenan insult combined with oestrogen treatment showed the most prominent inflammatory and proliferative response. Treatment of animals with oestrogen alone induced moderate inflammation and proliferation. Oestrogen-metabolizing enzymes were overexpressed in animals with experimental prostatitis with sequential accumulation of catechol oestrogens within prostatic tissues. Oestrogen receptor-alpha was underexpressed in the prostatitis with oestrogen group, while oestrogen receptor-beta was overexpressed. CONCLUSIONS The present work provides experimental evidence that local inflammation enhances oestrogen synthesis and directs oestrogen metabolism to generate catechol oestrogens within prostatic tissues. This may contribute, at least partly, to enhanced prostatic cell proliferation.

Sources
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Web of Science Categories: Urology & Nephrology
Research Areas: Urology & Nephrology
Faculty Name: University Hospital
Department: Pharmaceutical Services
DSR No.: 667