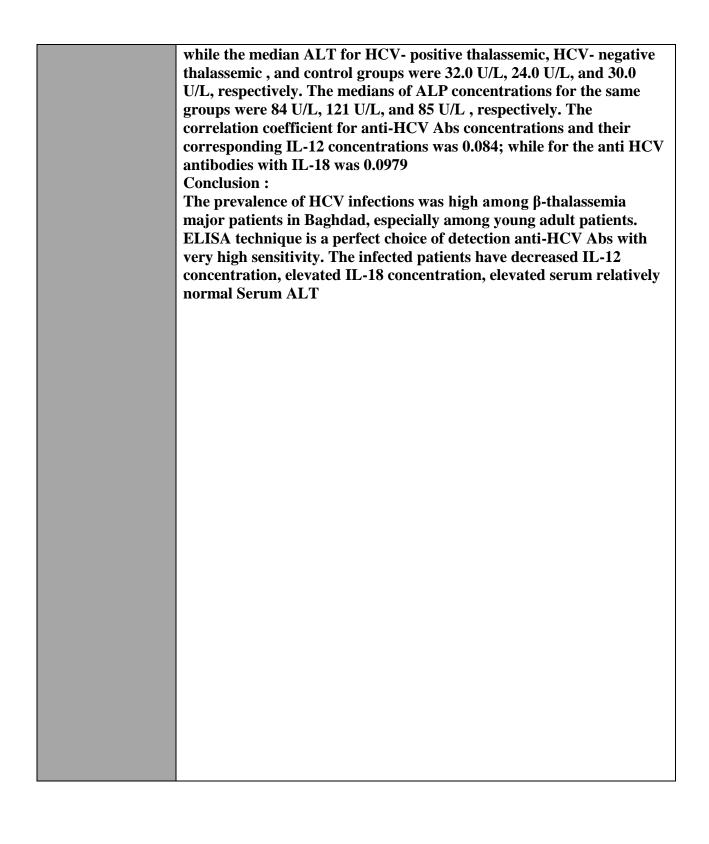
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	Frequency of Hepatitis C Vi	ral Infection In relation with		
Thesis Title	Interleukin 12 and 18 among			
	Bagl	ŭ <u>1</u>		
X 7	20	22		
Year	CD:	1419		
	Hepatitis C virus (HCV) is responsible for nearly 80 - 90% of post- transfusion hepatitis in beta-thalassemia patients. This study aimed to			
	evaluate the rate of HCV infection i	<u> </u>		
	in Baghdad and to assess the serum	•		
	liver enzymes levels among β -thalassemic patients infected with HCV .			
	Methodology:			
	A total of patient samples 150 sample included in this study, 70 male; 70 female in Baghdad, 140 beta-thalassemia patients, and 10 healthy			
	,	<u> </u>		
	control group (9 male ;1 female) who were attended Al Karama teaching hospital and Ibn AL-baladi hospital maternity &children's			
	hospital; aged 4-46 years, from Janu			
	samples collected from the study gr			
	then tested for anti-HCV Ab by ELISA and confirmed by western blot			
	technique, IL-12 concentration, IL-18 concentration, liver enzymes AST, ALT, and ALP.			
Abstract	Results:			
	% 17.9) (Twenty five out of 140 of the major thalassemic patients			
	were positive for HCV antibodies . More than half of HCV- positive			
	thalassemic patients were in age group 21-30 yrs old (56%, n=14/25)			
	and females are more frequently infected with HCV (56%, 14/25) than			
	males (44%, 11/25). The median of serum concentrations for IL-12 in HCV- positive thalassemic patients were (0.41) pg/ml was lower than			
	the corresponding median of control group while the median			
	concentration of IL-18 in sera of HCV-			
		(47.07)		
	positive thalassemia major patients (17.07) pg/ml, was significantly			
	higher than the corresponding median in control group(p<0.001). The median concentration of AST in sera of HCV- positive thalassemic			
	patients (71.0 U/L) was significantly higher than the equivalent median			
	in HCV- negative thalassemic group and control group respectively			



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	CHANGES IN THE NERV	E CONDUCTION OF THE		
Thesis Title	PARETIC LIMB IN POST-STROKE PATIENTS			
V	20	21		
Year	CD:	1429		
Abstract	Stroke is the second leading cause of death and the third leading cause of disability worldwide. Among the numerous motor and sensory sequelae that can result from the stroke, motor sequelae that eventually can lead to an abnormal limb posture and decreased function that can ultimately increase the susceptibility of the peripheral nerves in that limb to a compression, particularly within early stages of stroke. Objective Is to compare the nerve conduction parameters of the median and peroneal nerves between paretic and 1. The findings confirmed electrodiagnostic asymmetries in the paretic upper and lower extremities compared with the non-paretic ones after stroke. 2. The changes are more severe in more severely affected limbs than in the less severely affected limbs Using combined sensory index and the lumbrical/interosseous muscles comparison methods also revealed significant differences between the paretic as compared to the non-paretic side. Moreover, regarding paretic sides, the median DSL (distal sensory latency), DML, and MCV (motor conduction velocity) and peroneal CMAP amplitude were significantly different between those with ≥3 and those with <2 MRC scale. In the non-paretic upper limbs, the DSL and DML were significantly prolonged in those with <2 MRC when compared to those with ≥3 MRC. Conclusion 1. The findings confirmed electrodiagnostic asymmetries in the paretic upper and lower extremities compared with the non-paretic ones after			

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Thesis Title	Availability and utilization of	emergency health		
Thesis Title	services in Bag	ghdad hospitals		
Year	CD1420	2021		
Abstract	services in Baghdad hospitals			

available in all the surveyed hospitals. The main problems faced by the medical and nursing staff were the overload of work, cold cases, and inactive referral system. Most of the patients reported that the medical and nursing staff gave them enough privacy, listened to them and well explained their problems. Conclusion: The emergency departments in most of the surveyed hospitals had many deficiencies. Triage, waiting room, and resuscitation units were not available in most of the surveyed hospitals. There is an obvious shortage in most of the equipment and medicines.