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Thesis Title	THE ROLE OF MOTOR EVOKED POTENTIALS USING TRANSCRANIAL MAGNETIC STIMULATION IN THE EVALUATION OF CLINICAL DISABILITY IN MULTIPLE SCLEROSIS			
Year	٢٠٢٠		CD: ١٢٨١	
Abstract	<p>Multiple Sclerosis is an autoimmune condition in which the immune system attacks the myelin sheath that surrounds and protects the nerves of the central nervous system and causes serious disability ,although it can occasionally be mild.</p> <p>Transcranial magnetic stimulation is a noninvasive procedure used to a small targeted region of the brain via electromagnetic induction and used diagnostically to measure the connection between the central nervous system and skeletal muscle to evaluate the damage that occurs in MS.</p> <p>Objective: The study aims to assess the strength of the correlation between clinical disability and transcranial magnetic stimulation abnormalities.</p> <p>Methods: Twenty-six patients with Multiple Sclerosis comprised of 16 females and 10 males aged (19- 63) years, duration of disease (few months to 20 years), and 26 healthy subjects comprised of 20 females and 6 males aged (range 18-63 years) serves as the control group. Both groups were submitted to medical history, clinical neurological examination, and transcranial magnetic stimulation of both upper and lower limbs.</p> <p>Results: The results of this study showed no significant difference between the right and left side of the upper and lower limbs considering all motor evoked potential parameters in patients with Multiple sclerosis and controls. The cortical latency , radicular latency , central motor conduction time , and central motor conduction with F wave of upper and lower limb and the motor evoked potentials amplitude of upper</p>			

limb were significantly higher in patients with MS, while the motor evoked potential amplitude of lower limb was significantly lower in the patients with Multiple Sclerosis when compared to the control group.

Also, the central motor conduction time with F wave recorded from the upper limb was the only parameter which is significantly prolonged in patients with pyramidal signs as compared to those without. Likewise, the central motor conduction time and central motor conduction time with F wave recorded from upper and lower limbs were significantly prolonged in patients with ataxia than those without, in particular, the lower limb values. Also, the upper and lower limbs central motor conduction time and central motor conduction time with F wave were significantly prolonged in those patients with Expanded Disability Status Scale of 5-9.5 as compared to those with a score of 0-4.5.

A significant positive correlation was found between Expanded Disability Status Scale and upper and lower limb central motor conduction time and central motor conduction time with F wave, while no significant correlation was found between either central motor conduction time or central motor conduction time with F wave with the duration of disease in Multiple Sclerosis patients.

Conclusion:

In conclusion, Expanded Disability Status Scale is highly correlated with motor evoked potential parameters and the motor evoked potential is a useful tool as a biomarker for clinical disability evaluation .

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Thesis Title	Frequency of hematologic and solid malignancies in the family history of patient with myeloid neoplasms and aplastic anemia Baghdad 2020			
Year	٢٠٢٠		CD: ١٤٥٤	
Abstract	<p>Background: Studies proved that there are several germline mutations that cause familial predisposition for Myelodysplastic syndrome and acute myeloid leukemia. The American Society of Clinical Oncology state that, minimum cancer family history should include first- and second-degree family history, type of primary cancer, and age at which the cancer was diagnosed. This study was aimed to estimate the frequency of positive family history for hematologic and solid malignancies in patients with Myeloid Neoplasms /Aplastic anemia.</p> <p>Patients and Method: A cross sectional study was carried out at the Center of Blood Diseases, Medical City Campus during the period from March-December 2020. A convenient sample of all adult patients with Myeloid Neoplasms [Acute Myeloid Leukemia, Myelodysplastic Syndrome, Chronic Myeloid Leukemia and Aplastic Anemia] were included in the study. A data collection form was prepared, based on the hereditary hematopoietic malignancies Screening form adopted by the University of Chicago, and modified by the researcher; the data was collected by direct interview with the patients.</p> <p>Part 1: Demographic and social characteristics of the patients and their diagnosis.</p>			

Part 2: Screening questions for the patients and his / her first degree and second degree relatives.

Patients with hematologic malignancy and one or more first-degree relatives, or

≥2 second-degree relatives, with hematologic malignancies and individuals with

Myelodysplastic Syndrome or Acute Myeloid Leukemia and two first or second

degree relatives with a diagnosis of solid tumor malignancy were considered

potential carriers of such genetic predisposition.

Results: A total of 153 patients were included; males were nearly equal to

females with a male to female ratio of nearly 1:1. Acute Myeloid Leukemia was

found in 57.5%, Aplastic Anemia was found in 19%, Chronic Myeloid Leukemia in 17% and 10 patients (6.5%) were known cases of Myelodysplastic

Syndrome. Nine patients (5.9%) reported family history of hematological

malignancies, 29 (19.0%) reported family history of solid malignancies and

only one patient reported family history of both hematological and solid malignancies.

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Regarding the official medical reports of the patients, family history was not

mentioned in patients records.

We were unable to confirm the presence of the suspected genetic predisposition

because of lack of genetic studies but we were able to make a reasonable

assumption of the possible syndromes, in eleven patients, depending on the

family history and the type of familial malignancy and the presence of some

non- hematological dysmorphic features.

Conclusion: Positive family history for hematological and solid malignancies

in Iraqi patients with myeloid neoplasms is prevalent.

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Thesis Title	Violence against Women in Time of Unrest in a Sample of Iraqi Women			
Year	٢٠٢٠		CD: ١٤٩٨	
Abstract	<p>Domestic violence is a worldwide problem, there are over a billion women who have exposed to domestic violence from their husband or male partner. In Iraq since the 2003 invasion; domestic violence has risen dramatically.</p> <p>Objectives: To estimate the prevalence, types, main source, frequency, response, future attitude, reasons for domestic violence, and some associated factors, in Baghdad city, aiming to help understand the immensity of the problem along with its impact on the victims, and guide the design of preventive measures and interventions.</p> <p>Method: a total of 735 women was collected from the attendants of the outpatients Obstetrics/Gynecology clinics of the randomly chosen four health facilities located on either sides of Baghdad city. A questionnaire form was developed to enquire about the occurrence of violence, frequency, source, and reasons. Results: 597 women reported their exposure to violence, (all of them exposed to verbal/emotional and 288 to physical violence) Violence occurs usually by the husband (248) or brother (122), mostly attributed to stressful life of unrest (250). Older and currently married women were significantly more exposed to domestic violence. Consanguinity was associated with less violence, so as high education, employment, and women independence. Stressful life of unrest is significantly associated with frequency and all types of violence (physical more than verbal).</p> <p>Conclusions: There is an outpouring of violence against women, mostly</p>			

	<p>by husbands. The main reason was the stressful life created by the uninterrupted wars and conflicts that supervened fear, deteriorating economic situation and unemployment.</p>
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Thesis Title	Factors affecting self-management behaviors of hypertensive patients attending family health care centers in AlKarkh/Baghdad, Iraq 2020			
Year	2020		CD: ١٤٩٢	
Abstract	<p>Hypertension is a major risk factor for cardiovascular mortality and morbidity. It is highly prevalent with an estimated prevalence of 40% wide world. Along with this high prevalence, the control is very poor and estimated that only 20% of all hypertensive controls the disease. One of the most important ways to increase control of hypertension is applying self-management behavior which was found to be even more important than healthcare delivery. This cross-sectional study was conducted in primary health care centers to determine the prevalence of self-management behaviors and identify its possible determinants. The study was conducted using a specially prepared questionnaire about sociodemographic and health-related variables, and the prevalence of selfmanagement behaviors was assessed using the Hill-Bone compliance to high blood pressure scale. A total of 400 hypertensive patients were recruited in this study; most of them were between 40 and 70 years of age. Females constituted 63.5% of the study sample. The majority were married, and about half of the study participants completed their secondary school education. Half of the participants</p>			

were employed. Regarding health-related variables, most of the patients were obese, more than half were non-smokers, half were on a single antihypertensive drug, and 63% had comorbidities. Most of the patients had poor self-management behaviors in all three domains of the Hill-Bone high blood pressure compliance scale, namely: the salt restriction, medication adherence, and the worst was appointment keeping domain.

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Several risk factors were associated with poor self-management behaviors, including the age group below 55 years old, female gender, low academic achievement, being employed, and associated diabetes mellitus while having hyperlipidemia was found with good self-management behaviors. No-significant association was illustrated between self-management behaviors and smoking, number of antihypertensive drugs, having multiple chronic diseases, and ischemic heart disease. The application of self-management behaviors is recommended, the patients should be trained and encouraged to apply self-management behaviors, and selfmanagement should be evaluated in the routine patient-doctor visits.

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Thesis Title	The clinical significant of interleukin-6, C-reactive protein, Procalcitonin, and Neutrophil/Lymphocyte Ratio as a laboratory biomarker in COVID-19 in Iraqi patients			
Year	٢٠٢٠		CD: ١٤٦٢	
Abstract	<p>Coronavirus disease–2019 (COVID-19) is a disease that was discovered in Wuhan, China, in December 2019. It's a new infectious disease that the World Health Organization has labeled it as a global pandemic public health emergency.</p> <p>This disease is caused by infection with the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) which is a zoonotic virus, that had been named with this due to its genetic similarities to SARS-CoV and it can spread from animals to humans, humans to humans, and animals to animals.</p> <p>According to the recent international studies, patients with COVID19 have a variety of hematological abnormalities, the most common of which are lymphopenia and thrombocytopenia. Increased serum C-reactive protein (CRP), Procalcitonin (PCT), D-dimer, and hyperferritinemia are all associated with hyper inflammation in critically ill patients, according to accumulating data. These results point to a cytokine storm playing a critical role in COVID-19.</p> <p><u>Aims of the study:</u></p> <p>This study aims to measure and investigate the laboratory markers (IL6, Procalcitonin “PCT”, CRP, Neutrophile lymphocyte ratio “NLR”) in two groups; Case group with (positive PCR test of COVID-19)which is divided into severe and non-severe (mild to moderate) according to WHO, and healthy control group consists of (healthy persons with PCR negative COVID-19 test), to compare their level and find out the correlation between the level of these markers (CRP, PCT, IL6, NLR) and the severity of the disease, also to evaluate the association of the sociodemographic variables (age, sex, BMI, smoking) and chronic diseases like (DM, HT, renal, IHD) with COVID-19 viral infection and their effect on its severity.</p> <p><u>Patients and Methods:</u></p> <p>This study was carried out on a total of 160 samples, divided into two</p>			

equal groups; Case group of 80 patients with positive COVID-19 RT-PCR test, and the other Control group consist of 80 healthy persons with negative COVID-19 RT-PCR test, were collected during the period from January 2021 to the end of July 2021.

Then the case group was divided into two groups; (40 patients were classified as severe cases) collected from Al-Karama teaching hospital at covid-19's ward and Baghdad teaching hospital's ward, and (40 patients were classified as non-severe cases (mild to moderate) collected from the outpatients of the private lab and my family members who had been infected with positive PCR covid-19 test at the same period.

The two studied groups were, age (≥ 18), had been selected from both sex (male and female) with different BMI, smoking, and chronic diseases history. The laboratory procedures included a Complete blood count (CBC) for counting (NLR), cytokine test (IL-6), CRP, and Procalcitonin.

Results:

The present study shows that the serum levels of IL6, Procalcitonin, CRP, and N/L Ratio were significantly higher in Case group patients than in healthy control with mean \pm SD (73.44 and 6.43 vs 3.95 with a P-value of 0.001) pg./ml for IL6 (3.01 and 0.11 vs 0.06 with P-value of 0.001) pg./ml for Procalcitonin and (56.56 and 8.08 vs 2.28 with P-value of 0.001) ng/ml for CRP and (32.67 versus 1.98 and 2.99, respectively) with P-value of 0.001 for N/R respectively. The comparison between the studied groups showed, there was a significant variation in serum level of IL6, Procalcitonin, CRP, and N/L Ratio; for IL6 higher mean \pm SD for the severe group, (73.44 versus non sever 6.43, $P= 0.001$) and severe group versus control (73.44 versus 3.95, $P= 0.001$) but no significant difference detected in the mean of IL6 between the (non-severe) group and controls (6.43 versus 3.95, $P= 0.750$).

The mean of PCT was significantly higher in the severe group compared to that in the (non-severe) group (3.01 versus 0.11, $P= 0.001$), and in the control group (3.01 versus 0.06= 0.001). The difference in means PCT between the (non-severe) group and controls was not significant (0.11 versus 0.06, $P= 0.890$).

The serum level of CRP was significantly higher in cases with severe COVID-19 than that in (non-severe) cases (56.58 versus 8.08, $P= 0.001$), and in controls (56.58 versus 2.28, $P= 0.001$). An insignificant difference was found in mean CRP between the (non-severe) group and controls (8.08 versus 2.28, $P= 0.266$). The mean N/L ratio was significantly higher in the severe group compared with the mean in the (non-severe) group (32.67 versus 1.98, $P= 0.001$), and the mean in controls (32.67 versus 2.99, $P= 0.001$). No significant difference was detected in the mean of this ratio between the (non-severe) group and controls (1.98 versus 2.99, $P= 0.684$). The age of the study sample ranged from 18 to 80 years with a mean of 46.96 and (SD) of ± 17.07 years and the proportion of severe COVID-19 was significantly higher among the patients aged

>50 years (60%, P= 0.046), patients who stayed in hospital >14 days (83.3%, P= 0.031), and those who had chronic diseases (65.5%, P= 0.00 especially DM is more in severe group. No significant association was found between the severity of the disease and the patient's sex (P= 0.170), BMI (P= 0.948), and smoking (P= 0.998).

Conclusion:

The increased serum levels of IL6, Procalcitonin, CRP, and N/L Ratio of patients (case group), indicate the host's immune responses against the coronavirus infection and the "cytokine storm "caused by a sudden acute rise in circulating levels of different pro-inflammatory like IL-6 and may lead to acute lung injury and ARDS with death .also the increasing level of Procalcitonin in sever COVID-19 that linked to secondary bacterial infection also will increase the mortality rate .CRP levels were positively connected with lung lesions and could reflect disease severity in the early stages of COVID-19 CRP levels were positively correlated with lung lesions and could reflect disease severity. As a result, the serum concentration of these biomarkers could be considered a reflection of COVID-19 severity, and these findings point to different immuno-regulatory events during SARS-CoV-2 infection, which could be useful in the early detection of severe COVID-19 infected patients, as well as early recognition of Cytokine Strom, which could lead to a better outcome.

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Thesis Title	EVALUATION OF HAIR TRANSPLANT PROCEEDED BY FAT INJECTION AS A CAMOUFLAGE FOR SCAR ALOPECIA			
Year	٢٠٢٠		CD: ١٣٠٦	
Abstract	<p>Hair especially that of the scalp, is an important component of body image. Alopecia, or hair loss ,may be partial or complete, affecting any part or all of the non-glabrous skin.. Hair transplantation is a continuously evolving field. The procedure was originally developed by Dr. Orentreich in 1959. Potential applications for hair grafting extend beyond treatment of hair loss.</p> <p>Hair transplant or restoration can dramatically improve aesthetic and psychosocial outcomes for the patient . One of the challenging problem for hair transplantation in these area is poor vascularity which might affected hair survive. A relatively new option for the treatment of scar tissue is the use of autologous fat grafting. First described by Neuber in 1893 and later defined by Coleman.</p> <p>Methods:</p> <p>Our study group consisted of 10 patients. The causes of scar resulting in hair loss were burns, operation, and trauma. First intervention was with fat injection. Three months later the patients underwent first session of hair transplant using follicular unit extraction technique (FUE) .some patients needed second session of hair transplant.</p> <p>Results:</p> <p>The follow-up cases over 6 months after the last session were 10 cases. The result after hair follicle transplantation was excellent in seven patients, good in three and poor in one.</p> <p>Conclusions:</p> <p>The hair follicle transplantation on the scar tissue is more difficult than grafting on normal tissue . The patients with burned scar achieved more favorable result than did others. Prior to hair transplantation fat injection to scarring alopecia is enhanced hair growth due to improvement of the bed with neoangiogenesis and growth factor</p>			

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Thesis Title	Prevalence of Sarcopenia in Iraqi Female Patients with Hypothyroidism			
Year	٢٠٢٠		CD: ١٦٧٠	
Abstract	<p>Hypothyroidism is the inability of thyroid gland to produce enough thyroid hormone to meet the metabolic demands of the body. Untreated hypothyroidism can cause hypertension, dyslipidemia, cognitive impairment, infertility, and neuromuscular dysfunction. Sarcopenia is a progressive and generalized skeletal muscle disorder that is associated with increased likelihood of adverse outcomes including falls, fractures, physical disability and mortality. The skeletal muscle is a major target organ of thyroid hormone signaling. Patients with hypothyroidism often have proximal muscle wasting, fatigue, exercise intolerance, and muscle cramps</p> <p>Aims of the study: This study was conducted to assess the prevalence of sarcopenia in a sample of Iraqi female patients with hypothyroidism and to evaluate the impact of sociodemographic and clinical characteristics of patients on sarcopenia.</p> <p>Patients and methods: This was a case-control study conducted at Baghdad Teaching Hospital diagnosed by Internist/Endocrinologist doctor from September 2019 to the end of February 2020. A total of (158) Iraqi female participants, (79) patients were diagnosed with hypothyroidism and (79) apparently healthy control people were aged between (30-53) years. Diagnosis of sarcopenia was done by using a dual energy x-ray absorptiometry scan for body composition analysis, and measuring</p>			

skeletal

mass index (SMI) which is defined as appendicular skeletal muscle mass

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(ASMM) /height m², cut off point less than 6 Kg/m² for female.

Maximal

voluntary grip strength of the hand was measured with an electronic dynamometer with a cut off value for women: less than 16 kg. Physical function was assessed by 4-meter usual gait speed test, cut off point ≤ 0.8m/s.

Results:

Mean age for patients was (43.18 ±10.5) years in hypothyroidism and (39.84±9.4) in controls. The mean BMI (kg/m²) was (32.7±7.6) in hypothyroidism and (30.02±4.8) in controls. The prevalence of sarcopenia

was 13 (16.5%) in hypothyroidism patients and 1 (1.3%) in controls (pvalue

=0.001). Hand grip strength was significantly lower in

hypothyroidism patients compared to controls (p-value = 0.000).

Physical

performance was also lower in hypothyroidism patients (p-value = 0.000).

The risk of sarcopenia was 15.3 folds increased in hypothyroidism compared to controls.

Body Mass Index, BMD and hand grip strength were significantly correlated with sarcopenia. The decrease in BMD and hand grip strength

increased the risk of sarcopenia in hypothyroidism patients. Hand grip strength was the most powerful predictor of sarcopenia in hypothyroidism patients.

Multivariate analysis predictors revealed that, BMD and hand grip strength

were independent predictors of sarcopenia and explain 26% of the predictor causes of sarcopenia in hypothyroidism.

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Conclusions:

The prevalence of females with hypothyroidism are at higher risk of developing sarcopenia than in healthy controls, and also higher BMI with

lower BMD increase risk of sarcopenia, while the difference in

Appendicular Lean Mass Index not influence the risk of sarcopenia.

And

this suggests a need to look for their presence in hypothyroidism patients,

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Thesis Title	Magnetic Resonance Imaging in Soft Tissue Tumors in Comparison to Histopathology			
Year	٢٠٢٠		CD: ١٦٧١	
Abstract	<p>Background: Soft tissue masses are frequently referred for imaging assessment. Magnetic resonance imaging (MRI) is the technique of choice for local staging of a soft tissue masses.</p> <p>Objectives: The study aimed to assess the utility of MRI-DWI in the detection and characterization of soft tissue tumors (STTs) and the classification of whether these tumors are benign or malignant.</p> <p>Methods: A prospective study was conducted in the Radiology Department of the Oncology Teaching Hospital, Baghdad Medical City complex. A total of 37 patients were enrolled during the period from 12th July 2019 to 20th February 2020. The study sample consisted of 12 male and 25 female. MRI examination was performed utilizing the 1.5 Tesla Siemens system (Germany). Diffusion weighted images (DWI) were performed for all cases. The mean ADC value for the enhancing component of was measured on the generated ADC map done at high b-value of 800 mm²/sec².</p> <p>Results: The mean age of participants was 37.65±16.159 years. The benign STTs were recorded in 15(40.5%), while malignant tumors found in 22(59.5%) of patients. The greatest ADC values (mean±SD) for the benign soft tissue masse was (1.97 x10⁻³ mm²/s ±0.39) for hemangiomas. While the greatest ADC value results for the malignant masse was for myxoid liposarcoma (2.11 x10⁻³ mm²/s ±0.45). The lowest ADC values were observed in hematological tumors. The mean ADC value for the malignant masses with intermediately hyperintense signal in T2WI (n=18) was smallest than the mean of benign (n=8) (0.863±0.28 vs. 1.675±0.39), with statistically significant association (P-value=0.002). In DW-MRI images, the ADC cut off value was ≤1.42 x10⁻³ mm²/s for malignant soft tissue masses with low signal or intermediate hyperintensity signal of the enhancing part in T2WI, with a high sensitivity of 94.44%, a high specificity of 87.5%, and accuracy was 92.31%, which was statistically significant association (P-value <0.000) for the diagnosis of malignant soft tissue masses. VIII</p>			

Conclusions: The larger lesion sizes, the higher the probability of being malignancy. Hemangioma was the most common benign STTs diagnosed, while the most common malignant STTs were myxoid liposarcoma. In general, the mean of ADC value was higher in benign STTs than that in malignant STTs. The ADC cut off value was $\leq 1.42 \times 10^{-3} \text{ mm}^2/\text{s}$ for malignant soft-tissue masses with low signal or intermediate hyperintensity signal have high sensitivity and a high specificity.

Keywords: Soft tissue tumors; MRI-DWI; Myxoid liposarcoma; Hemangioma; ADC values

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Thesis Title	FOOT PROBLEMS AND FOOT DEFORMITIES IN A SAMPLE OF IRAQI PATIENT'S WITH RHEUMATOID ARTHRITIS			
Year	٢٠٢٠		CD: ١٦٧٢	
Abstract	<p>Background: Rheumatoid arthritis (RA) is a chronic systemic autoimmune inflammatory disease that affects different ethnic groups throughout the world. It primarily affects cartilage and bone of small and middle sized joints of hands and feet, characterized by inflammation of synovial joints in a symmetrical pattern with peri and extra articular manifestations.</p> <p>Long-standing rheumatoid arthritis (RA) can cause foot problems in approximately 90% of patients, foot complaints has been shown to affect patients' daily activities, especially ambulation and other weight bearing tasks, yet little attention was given in the literature to deal with this problem.</p> <p>Objective: To evaluate the frequency of foot problems and foot deformities in adult Iraqi patients with rheumatoid arthritis and to assess the correlation of foot deformities to variable demographic and clinical characteristics of patients with RA.</p> <p>Patients and Methods: A total of 110 Iraqi patients with RA diagnosed according to the American College of Rheumatology/European League Against Rheumatism (ACR/EULAR) classification criteria for Rheumatoid arthritis (89 female: 21 male). Patients above 70 and less than 16 years old and any Patients with history of foot trauma or foot surgery, diabetic foot, peripheral neuropathy, and Patients with inflammatory rheumatic disease as gout and other autoimmune or connective tissue disease overlapping with RA all of them were excluded from the study. Demographic data, clinical manifestation disease activity scores were reported and lab data (RF, ACPA, CRP and ESR) were</p>			

measured, previous and current treatment were reported also. Then full history was taken about foot problems articular and extra articular symptoms and medical examination of the foot was done for all patients by inspection and palpation. Plain X-rays for feet were performed to all patients in form of weight-bearing X-ray in anteroposterior (AP) and lateral views.

Results: A total of 110 rheumatoid arthritis patient were included in this study. The mean age was 43.8 years ranging from 27 years up to 67 years old. Majority of the enrolled patients were females 89 (81%). More than two thirds of the studied sample 75 (68.2%) had feet involvement. Foot problems were noted in 14(18.6%) male patients and among 61(81.4%) female. Forefoot pain and tenderness were the commonest and reported in 41(37.3%) patients. The second commonest involvement was tender ankle joint 30(27.3%) which was associated with swelling in 25(22.7%). Midfoot pain was noted in 14(12.7%), and hindfoot in 20(18.2%). Other problems as foot swelling, numbness, ulcers and other cutaneous lesions were seen in 51(46.4%).

Less than one third 34(31%) of the studied sample had foot deformities. The commonest was forefoot deformity 26(23.6%), and hallux valgus was the most prevalent 15(57.6%). The second after were hindfoot 8 (7.3%), and only five (4.5%) patients showed midfoot deformities which is mainly flatfoot and usually accompanied with forefoot deformities. There was no significant association between foot deformities and BMI or laboratory tests (RF, ACPA and CRP), but there was significant correlation of foot deformities with disease duration and disease activity.

Conclusions: Up to the best of our knowledge this is the first study to focus on foot problems and foot deformities in Iraqi rheumatoid patients, that determined the prevalence of foot involvement as 68.2% and the most frequent current foot problems were forefoot pain and ankle joint pain, also determined the prevalence of foot deformities as 31% with forefoot

deformity as the commonest and hallux valgus was the most prevalent one.

This study showed significant association of foot deformities with disease

duration and disease activity, but there was no significant correlation with

BMI or laboratory tests (RF, ACPA and CRP

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Thesis Title	Prevalence and Impact of Fibromyalgia on Disease Activity in a Sample of Iraqi Patients with Rheumatoid Arthritis			
Year	٢٠٢٠		CD: ١٦٧٣	
Abstract	<p>Rheumatoid arthritis (RA) is a common chronic systemic autoimmune inflammatory disease that affects all ethnic groups throughout the world. It leads to chronic articular, extra-articular manifestations and disability and its pain still remains the most important problem for people with RA. Fibromyalgia is common in several rheumatic diseases, like the relationship between FMS and RA and its effect and impact on disease activity leading to higher pain and higher measures of disease activity among those patients.</p> <p>Objective:</p> <ol style="list-style-type: none"> 1.To find the prevalence of Fibromyalgia syndrome in Rheumatoid Arthritis patients attending the Rheumatology unit in Baghdad teaching hospital. 2. To explore the impact of Fibromyalgia on disease activity of RA patients. 3. To find out the association between sociodemographic variables and Fibromyalgia in RA patients. <p>Patient and method:</p> <p>A total of 170 Iraqi patients (16 males and 154 females) who were a known cases of RA diagnosed by Rheumatologists according to the 2010 American College of Rheumatology/European League Against Rheumatism (ACR/EULAR) classification criteria for RA were involved in this cross – sectional study. The enrolled patients in the study attended the outpatient clinics in Baghdad Teaching Hospital for receiving their treatment and/or</p>			

follow up.

Data collection was done using questionnaires and interview. Age, gender, BMI, marital status, educational level, occupation and smoking history, disease duration and medications used were reported. Diagnosis and assessment of fibromyalgia was done by using fibromyalgia criteria -2016 revision. Disease activity in those patients was measured by using (CDAI) and (DAS28).

Abstract

VII

Results:

The mean age of FMS patients was 51.263 ± 11.531 years, and for non FMS

was 48.469 ± 13.932 years. The prevalence of FMS among female patients 36.4%

was significantly higher than that among male patients 6.3% ($p = 0.015$).

The disease activity according to CDAI was significantly higher among FMS

patients with mean 22.2 ± 7.300 than non FMS patients mean 15.1 ± 5.668 (p

$= 0.001$). Disease activity according to DAS 28 score was also significantly higher

in FMS patients than non FMS patients. FMS prevalence was increased among

higher functional class RA patients ($p = 0.001$). Regarding disease activity class

there was no significant correlation seen between active RA and inactive RA

patients of both with and without FMS ($p = 0.552$). Regarding drug use it shows

that patients with no FMS used NSAIDs more frequently than patients with FMS

RA patients, while no statistical significant deference were noticed between use

of steroids, DMARDs and biological treatment in association with FMS and non

FMS RA patients ($p = 0.455, 0.297, 0.973$) respectively.

There is no statistical significant difference between the mean level of ESR in

FMS 40.965 ± 26.415 and no FMS RA patients 37.478 ± 23.912 ($p = 0.388$). There

was significant association found between positive CRP and FMS RA patients (p

$= 0.002$), while there was no statistical significant association between

positive

RF or positive ACPA and the presence of FMS in RA patients ($p = 0.230$ and

0.072) respectively.

Conclusion:

prevalence of FM in RA patients was common and there was significant positive relation between FMS severity and disease activity CDAI and DAS28.

Female gender and functional class were significantly associated with FMS

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Thesis Title	Requalification Method for Reentry of Blood Donors with positive anti hepatitis B core			
Year	٢٠٢٠		CD: ١٦٧٤	
Abstract	<p>Hepatitis B virus (HBV) is transmissible by the parenteral route and commonly found in blood and other body fluids. Positive hepatitis B surface antigen (HBsAg) indicates infection with HBV, but does not in itself distinguish between recent and chronic infections. All HBsAg positive donations should be considered to be at high risk of transmitting HBV and should not be released for transfusion. Antibody to hepatitis B core (anti-HBc) is produced later in acute infection, after the appearance of HBsAg, and marks the start of the immune response to HBV infection. In general, anti-HBc persists for life, irrespective of whether the infection resolves or progresses to chronicity. In the vast majority of cases of hepatitis B, if HBsAg is already present the detection of anti-HBc has limited value.</p> <p>The Aims of the study: to assess the prevalence of blood donor deferment with reactive anti-HBc and to discriminate blood donors reactive for anti-HBc who are non-infectious from those who have unresolved HBV infection.</p> <p>Method and Materials:</p> <p>Among 4121 HBsAg-negative blood donors, 74 blood samples reactive for anti-HBc were collected from the National Blood Transfusion Center during the period in October 2019. Blood samples were tested for anti-HBs titer.</p> <p>Results:</p> <p>Among 4125 blood donors, 78 (1.9%) were positive for anti-HBc, 4/4125 (0.097%) were positive for both HBsAg and anti-HBc.</p> <p>About 59.5% (44/74) blood donors with negative HBsAg and reactive anti-HBc had anti-HBs level ≥ 100 mIU/ml, those who are considered healthy and be requalified for reentry of blood donors.</p> <p>About 40.5% (30/74) blood donors had anti-HBs levels < 100 mIU/ml, those are regarded as unsafe blood donors and would be deferred from donation.</p>			

Sixteen out of 74 (21.6%) blood donors with anti-HBs <10 mIU/ml regarded as negative, need further evaluation according to these criteria:-HBsAg negative, anti-HBc positive, anti-HBs negative.

Fourteen out of 74 (18.9%) blood donors with anti-HBc ≥10 mIU/ml and less than 100 mIU/ml immunized donors but not accepted for donation

Conclusions:

Anti-HBc is essential to improve blood safety, but the presence of positive anti-HBc does not differentiate whether the donor is in a recovery state or not. More than half of anti-HBc-positive donors can be accepted as healthy donors depending mainly on quantitative measurement of anti-HBs.

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Thesis Title	Identifying Opportunities and Barriers to Enhance Research among Family Physicians in Iraq; A cross-sectional Survey 2021			
Year	٢٠٢١		CD: ١٤٨٠	
Abstract	<p>Background: Family Medicine research is any study that addresses questions of importance to physicians with the intent to improve the care of patients. Research is essential to enhance the role of family physicians in health care systems, to improve the optimal functioning of health care systems, and to improve the health of populations in general, also serve as the basis to aid in policy-making. Aim: to shed the light on the readiness of Family Physicians towards conducting research.</p> <p>Subjects and method: Descriptive cross-sectional study with an analytic element conducted for a period started from 1st of march through 31st of May 2021. The target population included family physicians in Iraq. A total of 297 participants were recruited for this study. Participants were asked to fill an electronically distributed questionnaire specially constructed for the sake of the study.</p> <p>Results: Females constituted 79% of the sample, 82% of the participants were less than or equal to 40 years of age. the specialists in family medicine constituted 70% of the participants; 81.5% had medical experience less than or equal to 15 years, 52.9% worked for more than 30 hours per week. The mean of the participant</p>			

response regarding the attitude questionnaire was 45.03 (± 9.21). The participants with a positive attitude were 167 (56.2%). Applying multivariate binary logistic regression, the only significant association was between attitude and frequency of reading medical articles. Lack of time and health care support were the main stated barriers that obstacles research conduction among family physicians. Conclusion: More than half of the participants had a positive attitude towards research conduction. Lack of time and health care support were the main barriers for research conduction. Increasing the frequency of research reading was the main predictor of research conduction

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Thesis Title	Lisinopril versus Losartan effects in patients with left ventricular systolic dysfunction (comparative study)			
Year	٢٠٢١		CD: ١٤٦٣	
Abstract	<p>Heart failure is a progressive clinical syndrome, caused by structural and/or functional defects in myocardium resulting in impairment of ventricular filling or the ejection of blood. Angiotensin converting enzyme inhibitors (as Lisinopril) and Angiotensin II receptor blockers (as Losartan) play a central role in the management of heart failure to improve both the morbidity and mortality.</p> <p>Objectives: To compare the effect of Lisinopril and Losartan in Iraqi patients with left ventricular systolic dysfunction regarding the improvement in cardiac function, clinical features and side effects of both Lisinopril and Losartan.</p> <p>Method: One hundred patients over 18 years old were randomly enrolled into the study; 50 patients were given Lisinopril and 50 patients were given Losartan (initiated by small dose and gradually increased according to tolerance of patients and blood pressure). The study period was from September 2020 to July 2021. Patient's history, signs, symptoms, risk factors for cardiovascular diseases, possible causes(s) of left ventricular systolic dysfunction, and echocardiographic examination have been recorded in each patient at baseline and after 6 months of treatment initiation. In addition, side effects of treatments were monitored regularly in each patient.</p> <p>Results: In the current study, there was a significant improvement in most signs, symptoms, and echocardiographic findings for patients in both treatment groups compared to baseline. However, Lisinopril-treated group IV demonstrated better improvement and statistically significant in many of signs (chest crepitation p-value 0.044), symptoms (dyspnea p-value 0.041) and echo findings (left ventricular ejection fraction p-value 0.0001) than Losartan-treated group. The incidence of adverse effect (such as cough, headache, dizziness and itching or skin rash) was lower</p>			

with Losartan when compared with Lisinopril (cough 52% for Lisinopril group while 11% for Losartan group).

Conclusion:

The study of these two drugs (Lisinopril and Losartan) provides distinct benefit in patients with left ventricular systolic dysfunction. Lisinopril produced statistically significant better improvement in most of signs, symptoms and echocardiographic findings of the patients when compared with the improvement that was obtained from the use of Losartan but the incidence of some of adverse effects like cough, was significantly higher with Lisinopril than Losartan.

Key words: Heart failure, Systolic dysfunction, Lisinopril, Losartan

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Thesis Title	Assessment of Serum HbA1C in Ischemic Stroke Patients			
Year	٢٠٢١		CD: ١٤٨١	
Abstract	<p>Background: A stroke is defined as a sudden onset of a focal neurological deficit that is caused by focal vascular lesion. Hyperglycemia is an important predictor of poor outcomes in patients with acute ischemic stroke. Admission hyperglycemia has been associated with poor functional outcomes and increased mortality in patients with acute ischemic stroke. HbA1c (glycated hemoglobin) is a marker for elevated glucose levels and is commonly used to measure the average glucose during the last 3 months in a patient to monitor diabetic control.</p> <p>Aim: Impact of HbA1c on the occurrence & severity of ischemic stroke.</p> <p>Methods and materials: A cross-sectional study to investigate the association and impact of HbA1C level on the occurrence of ischemic stroke and its severity, conducted at Medical city Baghdad teaching hospital, Baghdad, Iraq during a period from October 2020 to Feb 2021. The study included 50 patients who met the inclusion criteria, as well as 50 individual (No stroke at time of data collection) as a control group.</p> <p>Results: The mean age of patients was 63.8 ± 10.2 years and males were represented 60% (30) of patients. The majority of patients were had hypertension (72%) and DM (56%). Among control group, only 8 patients were had hypertension while DM was presented in 29 (58%) patients. The mean HbA1C across patients was 8.02 ± 2.5, which was significantly higher in comparison to mean HbA1C across control group. The assessment of NIHSS score across patients showed that, a significant higher HbA1C among severe and moderate NIHSS in comparison to mild NIHSS. Also, all mild NIHSS patients were in control status for HbA1C, while all severe NIHSS patients were uncontrolled. The distribution of HbA1C group was not equally across</p>			

NIHSS. The multinomial logistic regress test have been performed to assess the association between the NHSS and study variables. Apart from HbA1C, which showed a strong association with NHSS, no association have been found between NHSS and other variables.

Conclusion: A high HbA1C level was associated with more severe symptoms at time of admission in patient with ischemic stroke. There was a risk of 3.1 fold increase of stroke in patients with uncontrolled HbA1C.

