

**ANNUAL SCIENTIFIC SYMPOSIUM 2014**  
**POSTGRADUATE MEDICAL INSTITUTE, LAHORE**  
**AMEER-UD-DIN MEDICAL COLLEGE**



**QUALITY ASSURANCE BY CONTINUOUS  
PROFESSIONAL DEVELOPMENT**



**19<sup>th</sup>, 20<sup>th</sup> February 2014**

**SYMPOSIUM VENUE**

NEURO AUDITORIUM, LAHORE GENERAL HOSPITAL, MAIN FERAZPUR ROAD, LAHORE  
PH: 042-9264119, 9264091

*Starting With Holy Quran*



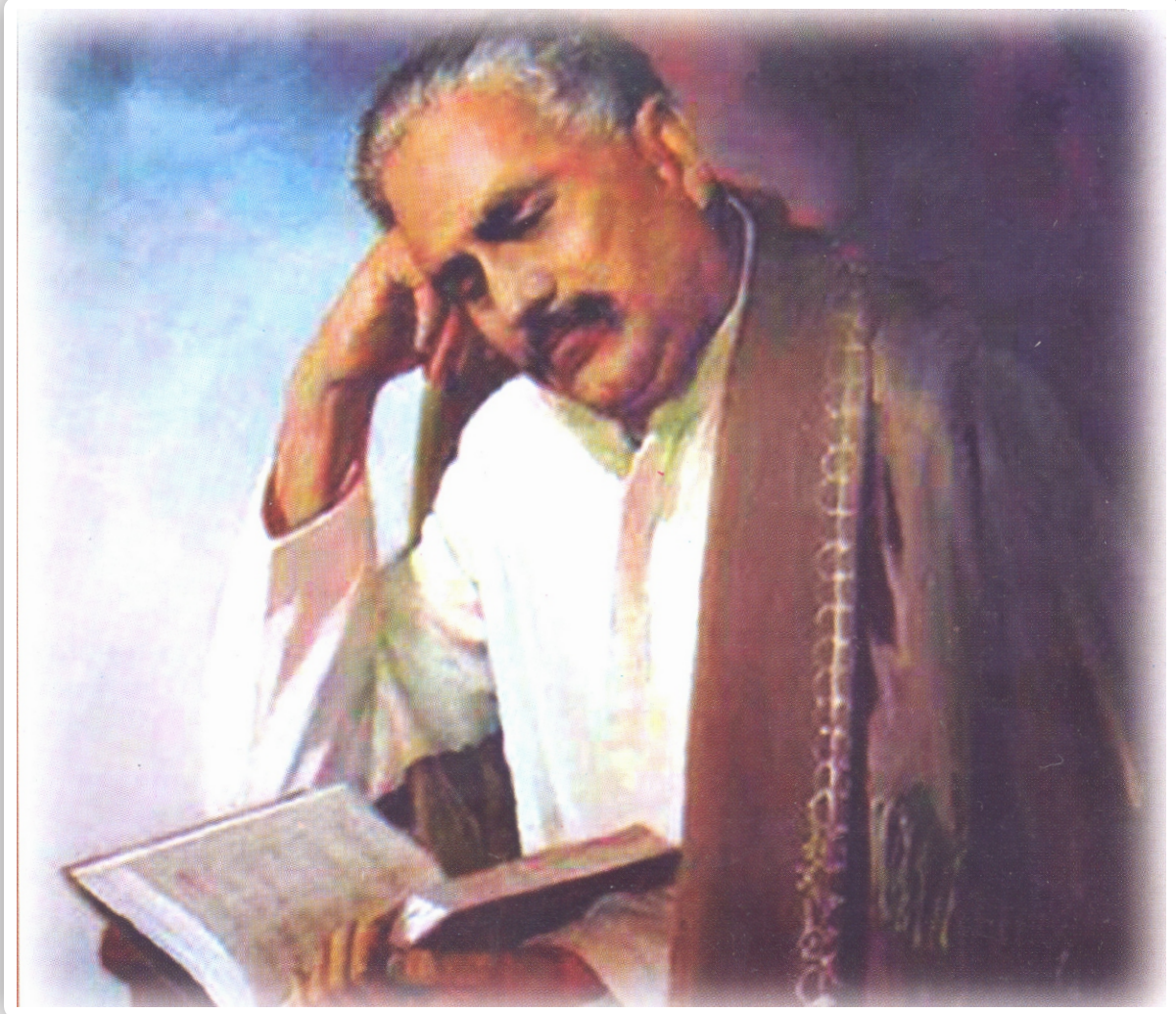
## *Message of Quaid-e-Azam*



### **قائد اعظم کے فرمان**

آپ تعلیم پر پورا دھیان دیں۔ اپنے آپ کو عمل کے لئے تیار کریں  
یہ آپ کا پہلا فریضہ ہے آپ کی تعلیم کا ایک حصہ یہ ہے کہ آپ دورِ حاضر  
کی سیاست کا مطالعہ کریں۔ یہ دیکھیں کہ آپ کے گرد دنیا میں کیا ہو رہا ہے۔  
ہماری قوم کے لئے تعلیم موت اور زندگی کا مسئلہ ہے۔

*A Word from Iqbal*



خدایا آرزو میری یہی ہے  
مرا نورِ بصیرت عام کر دے!

## MESSAGE

### Chairman board of management

Post graduate medical institute Lahore has matured over the years as a centre of excellence. Holding of annual scientific symposium consisting of, Scientific workshops and seminars are a manifestations of its R & D culture under guidance of eminent faculty.

PGMI is progressing both in patient care as well as in postgraduate training of doctors since its inception in 1974. The space of progress received a fillip after the attainment of autonomy in management since 1999. Completion of phase II and phase III building and initiation of phase I project & establishment of Pakistan Institute of Neuro Science (PINS) speaks volumes about the growth of PGMI in the recent past. Initiation of Ameer-ud-Din Medical College for undergrads this year is yet another feather in the cap of this institution. We are sure PGMI Lahore will attain greater heights as the custodian of postgraduate training in all basics as well as clinical disciplines.

I take this opportunity to express my thanks and extend appreciation on the behalf of all the honorable members of Board of management to the organizers of Symposium, faculty members and hospital management for arranging all the logistics for this symposium. I am sure that with tireless efforts and ingenuity we will make PGMI/Lahore General Hospital, Lahore, an outstanding institution in teaching as well as clinical care.

**Zia-ud-Din Khawaja**  
**Fmr General**  
**Chairman Board of Management**



## **MESSAGE**

**Principal**

**Postgraduate Medical Institute**

**Lahore General Hospital Lahore**

I feel honored and pleased to welcome all the participants and speakers at our annual scientific symposium going to be held on 19th & 20th February 2014. Looking at zeal and interest of the participants we are holding it regularly for last 4 years.

Addition of Ameer-ud-Din Medical College in the PGMI will further strengthen our clinical & teaching resources. It will provide an opportunity to our faculty to brush up their teaching skills so that ,the young graduates of our own medical college will be added in our clinical staff and post graduate students. It will make our institute a symbol of excellence in healthcare.

Postgraduate medical institute, Lahore is the premier institution of this country which is providing training and awarding degrees and diplomas in different disciplines of medical field for the past 37 years .A track record unmatched by another institute in the province of Punjab. Our vision for 2014 is to make this institute one of the best in the country

We are not only providing higher medical education and training to the doctors of other provinces but also foreign students from Nepal, Bangladesh, Azad Jammu & Kashmir and Afghanistan are also being trained at Postgraduate Medical Institute ,Lahore.

Joint efforts of all faculty member and administrative staff had pave the path of success of this institute .I am sure together we will make this a state of the art institute in this country.

**Prof. Anjum Habib Vohra**

**Principal PGMI/Lahore General Hospital Lahore**



## **MESSAGE**

### **Secretary Organizing Committee**

At the Annual scientific symposium 2014 of PGMI and Ameer-ud-din medical college ,I pay my all thanks and felicitations to faculty members and academic council to honor me as organizing chairman of this prestigious scientific activity .Wealth of scientific work presented and zeal of young researchers and postgraduate residents made all the previous symposia a success. I hope this year you will find it more stimulating and thought provoking also.

It is the wisdom and guidance of fellow faculty members which is a source of inspiration and help to improve the standard of symposium further. I am sure that such academic sessions not only will enhance knowledge of our young colleagues but also shine their presentation style as well as clinical skills .Which will b ultimately reflected in our better patient care .

It will be a two day scientific activity. Seventeen workshops in various departments will provide a hands on training to the participants in various clinical disciplines. It will provide an opportunity for the participants to improve their clinical skills. There are separate workshops for nurses as well as paramedical staff, who are backbone of this institute and their training is need of day. The whole objective of this scientific activity is to improve quality and standard of research work going in our institute. It will provide an opportunity for young doctors to share knowledge with seasoned teachers and renowned trainers of medical field.

Your valuable suggestions to improve the standard of this scientific symposium will be highly appreciated by organizing committee.

**Prof. Agha Shabir Ali**  
**Secretary Organizing Committee**



# PROGRAMME AT A GLANCE

" **1st DAY 19-02-2014**

8:30 am REGISTRATION  
9:30 am INAUGURATION & EXHIBITION

## WORKSHOPS

➤	TRANSPHENOIDAL APPROACH FOR SELLAR TUMORS	Prof. Anjum Habib Vohra
➤	NEONATAL RESUSCITATION	Prof. Rashid Mahmood
➤	DIAGNOSTIC HYSTEROSCOPY	Prof. Muhammad Aslam
➤	BASIC ENDOCOPIC SINUS SURGERY	Prof. Najam-ul-Hasnain
➤	TRANS PEDICULAR SCREW FIXATION IN FRACTURES SPONDYLOLISTHESIS	Prof Irfan Mehboob SPINAL
➤	INTENSIVE CARE MANAGEMENT OF BRAIN DEAD PTIENTS (A WORKSHOP FOR NURSES)	Prof. Khalid Mahmood
➤	HANDS ON BASIC ENDOSCOPY WORKSHOP	Prof.Ghias-Un-NabiTayyab
➤	HANDS ON GI MOTILITY WORKSHOP	
➤	ENDOSCOPIC ULTRASOUND WORKSHOP	
➤	WORKSHOP FOR DIABETES & ITS COMPLICATION	
➤	WORKSHOP ON DIABETES NURSE EDUCATION PROGRAMME	
➤	HAND ON TRAINING ON LAPROSCOPIC SIMULATORS	Prof. Syed Asghar Naqi
➤	SINGLE LAYER INTERRUPTED EXTRA MUCOSAL ANASTOMOSIS	
➤	LATEST ADVANCEMENTS IN ENDOUROLOGY	Prof. Ahmed Salman Waris
➤	HAND ON WORKSHOP IN BUILDING SMOKING CESSATION SKILLS	Prof. Saulat Ullah Khan
➤	WORKSHOP ON RETINOPATHY OF PREMATURITY	Prof. Muhammad Moin
➤	LAB ANIMAL HANDLING WORKSHOP	Prof. Saadia Chiragh



**Ist Day** - **19-02-2014**  
**8:30am** - **Registration**  
**9:00am** - **Plenary session** **9.00 -10.00 am**  
Chairman. Prof Salman Waris  
Cochairman. Prof Mohammad Moin  
Moderator. Dr Mariyam

**1. Plenary Lecture: PUBLIC EXPECTATIONS VERSUS HEALTH PROFESSIONALS**  
By Prof Farrukh Zaman (Ex-Dean PGMI) 30min

**Senior Registrar**  
Dr. Hussain Khaqan 7 min  
**House Officer**  
Dr. Asma Hanif 7 min  
**Undergraduate**  
Dr. Umair Irfan 7 min

**Panels of Experts:**

Prof. Muhammad Moin (Chairman)  
Prof. Ijaz Hussain  
Dr. Muhammad Naveed  
Dr. Umair Rasheed

**INAUGURATION**

**10:00 - 11:00am**

**(Chief Guest). Prof. Zafar-ullah Chaudhary**  
(President CPSP)

Chairman: Prof. Anjum Habib Vohra  
Cochairman: Prof. Agha Shabbir Ali  
Moderator. Dr. Sadia Rizwan

**INAUGURATION OF POSTER EXHIBITION**

**11.00 am**

**Panel of Experts for Best Poster Award:**

Prof Khalid Bashir (Chairman)  
Prof Sadia Chiragh  
Dr Raffad  
Dr Tanveer ul Hassan Zuberi

**Scientific Session - I**

**11:30 - 1:30**

Chairman: Prof. Israr Ahmed  
Co-Chairman: Prof. Rakhshanda Bajwa  
Moderator: Dr. Bilal Nasir

11:30 - 12:00 State of the Art Lecture "Evolving Technologies and unmet challenges"

• **PROF. GHAS UN NABI TAYYAB**

12:00 - 12:10 Esophageal Varices- The Most Frequent And Rising Endoscopic Finding In Patients  
With Upper GI Bleed In Pakistani Population.

• **Dr. Salman Shakeel**

12:10 - 12:20 Comparative Study Of Mathieu And Snodgrass Repair For Distal Hypospadias  
In Boys Age 2 To 16 Years

• **Dr. Kashif Ikram**

12:20 - 12:30 Topical Podophyllin Resin Vs Cryotherapy In Treatment Of Anogenital Warts

• **Dr. Syed Ahmad**

12:30 - 12:40 Comparison Of Postdural Puncture Headache In Median & Paramedian Approach In Spinal Anesthesia In Elective Cesarean Section.

- **Dr. Afshan Nisar**

12:40 - 12:50 Efficacy Of Radiofrequency Rhizotomy For Atypical Facial Pain Syndromes

- **Dr.M.Hassan Raza**

12:50 - 1:00 Anti-Hyperlipidemic Effect Of Ajwa Date Seed On High Fat Fed Rabbits

- **Dr. Zobia Usman**

1:00 - 1:10 Plasma Antithrombin Levels and Platelets Count: Predictors of PreEclampsia

- **Dr. Umbreen**

1.10- 1.20 Comparison Of Outcome Of Patients With Adhesive Small Bowel Obstruction Managed With Or Without Gastrografin

- **Dr Ahsan Ashraf**

**Panel of Experts for Best Paper Award: Prof. Ehtesham-ud-Din-Qureshi**

**Prof. Jawwad Zaheer**

**Prof. Irfan Mahboob**

**Prof. Abdul Sami Qazi**

**TEA BREAK 1:30 - 2:00**

**2ND DAY**  
**Thursday, February 20st, 2014**  
**SCIENTIFIC SESSION - II**  
**9:00 - 11:00**

**Chairman: Prof. Rashid Mahmood**  
**Co-Chairman: Prof. Muniza Saeed**  
**Moderator: Dr.Sikander Gondal**

**9:00 - 9:30 Prof. Farrukh A Khan Memorial Lecture "Quality assurance by continuous medical education"**

• **PROF. SYED ASGHAR NAQI**

**9:40 - 9:50 Factors Contributing In Default Of Tuberculosis Patients At DOTS Center Lgh**

• Dr Asia Fazal Khan

**9:50 - 10:00 The Role Of Intracranial Pressure Monitoring In Severe Traumatic Brain Injury**

• **Dr.YaserUd Din Hoti**

**10:00 - 10:10 Surgical Outcome of Anterior Decompression, Grafting and Fixation in Dorso lumbar Caries Spine**

" Dr. Ijaz Hussain Wadd

**10:10 - 10:20 Association of BMI with elevated values of CK-MB and cTnT in acute myocardial infarction**

• **Dr. Shazia Rashid**

**10:20 - 10:30 A Comparative Study Of Inferior Pole Of Patella Treated By Tension band wiring vs Resection of**

**Avulsed Fragment And Reattachment Of Patellar Ligament To Patella**

• **Dr Abdul Rauf**

**10:30 - 10:40 Outcome Treatment Of Locking Compression Plate Through MIPPO In Closed Distal Diaphyseal Fractures Of Distal Tibia**

• **Dr Sher dil**

**10:40 - 10:50 Effect of Carbonated drinks on wound healing of buccal mucosa of albino rats**

• **Dr. Ayesha Fahim**

**PANEL of EXPERTS FOR BEST PAPER AWARD:**

**Prof. Najum-ul Husnain (Chairman)**

**Prof. Khalid Bashir**

**Prof. Abdul-Mannan Babar**

**Prof. Anwaar ul Haq**

**Tea Break: 11:00 - 11:30**

### Scientific Session - III

11:30 - 1:30

**Chairman: Prof. Nadeem Riaz**

**Co-Chairman: Prof. Khalid Mahmood**

**Moderator: Dr. Muhammad Azam Niaz**

**11:30 - 12:00 Prof Ali Haider Memorial Lecture "Medical Ethics in health professionals"**

- **Prof. Mahmood Ali Malik**

**12:00 - 12:10 Frequency Of Uterine Scar Dehiscence In Patients With Scar Tenderness With Previous One Cesarean section**

- **Dr Naheed Waris**
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**12:10 - 12:20 Role of Nasal endoscopy in the diagnosis of nasal disease**

- **Dr. Wahid Saleem**
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**12:20 - 12:30 Functional outcome of lumbar core stabilization exercise versus general lumbar exercise in postoperative rehabilitation of lumbar spine surgery**

- **Hafiz Syed Ijaz Ahmed Burq**
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**12:30 - 12:40 Association of short interval pregnancy with low birth weight of full term neonate**

- **Dr Imran Yasin**

**12:40 - 12:50 Burden on primary care giver of schizophrenic patients: Determinants and quality of life in Pakistani context**

- **Dr Iftikhar**
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**12:50 - 1:00 Neutrophil lymphocyte ratio in coronary artery disease**

- **Dr Shaheena Naz**

**1:00 -- 1:10 Post Stemi Left Ventricular Ejection Fraction And Infarct Size Estimation - Can Serum Troponin T Levels Are Helpful???**

- **Dr. Salman Shakeel**

**1.10 - 1:20 Co- relation between retinal nerve fiber layer thickness measured by OCT and clinical grading on fundus photographs in cases of papilledema**

- **Dr Asif Manzoor**

**Panel of Experts for Best Paper Award: Prof. Fauzia Farzana (Chairman)**

**Prof. Nuzhat Khawaja**

**Prof. Sadia Chiragh**

**Prof. Abdul Haye**

**Concluding Ceremony**

**1:30 - 2:00 pm**

**Chief Guest: Gen. Zia-u-Din Khawaja**

**(CHAIRMAN BOM LAHORE GENERAL HOSPITAL)**

**Chairman: Prof Anjum Habib Vohra**

**Co Chairman: Prof Agha Shabbir Ali**

**Moderator: Dr Arif Zaheer**

**Refreshments**

# ESOPHAGEAL VARICES- THE MOST FREQUENT AND RISING ENDOSCOPIC FINDING IN PATIENTS WITH UPPER GI BLEED IN PAKISTANI POPULATION.

**Dr.Salman Shakeel, Prof.Ghias- Un- Nabi Tayyab**

Department of Medicine, Division of Gastroenterology, Medical Unit-1, Postgraduate Medical Institute, Ameer ud Din Medical College, Lahore General Hospital, Lahore, Pakistan.

## **OBJECTIVE:-**

To see the Upper GI Endoscopy findings in patients with upper GI bleed and its relationship with age, gender and symptoms

## **MATERIALAND METHODS:-**

It is single centered, retrospective analysis of 3910 patients who presented to GI Department from January 2010 to December 2013 for endoscopic evaluation of UGI bleed. The data was analyzed on SPSS19, descriptive statistics were recorded and results were analyzed as in given table.

**RESULTS:-** The pattern of pathologies on EGD is as shown as:-

No	Endoscopic Finding	Number	%age	Mean Age (yrs)	Male: Female ratio
1	Esophageal varices (EV)	2848	72.8 %	46	1.95:1
2	Peptic ulcer disease (PUD)	656	16.7%	40	1:1
3	Normal EGD	165	4.3%	35	1:1.4
4	NSAIDs induced gastritis	104	2.6%	39	1:1.3
5	Fundal Varices	71	1.8%	42	1.3:1
6	Portal Gastropathy	24	0.5%	34	1:1
7	Mallory Weiss	17	0.4%	32	1:1.3
8	Gastric Neoplasm	11	0.3%	45	1.4:1
9	Esophageal Neoplasm	10	0.3%	49	1.8:1

The majority of the patients with UGI Bleed presented with hematemesis alone (n=2873, 72.9%) followed by combined hemetemesi s & malena (n=510, 13%), malena alone (n=466, 11.9%) and hematochezia (n=61, 2.1%). EV were the most frequent finding of UGI Bleed (n=2848, 72.8%) followed by PUD (n=656, 16.7%) and then a Normal upper GI endoscopy (n=165, 4.3%).

## **CONCLUSIONS:-**

Hemetemesi s due to EV is the commonest cause of UGI Bleed in patients above 45 years of age with male predominance in our region as compared to the western world in which the UGI bleed is mainly due to PUD reflecting that increasing proportion of people suffering from UGI bleed secondary to EV is indicative of increasing prevalence of liver cirrhosis in our population.

# COMPARATIVE STUDY OF MATHIEU AND SNODGROSS REPAIR FOR DISTAL IN BOYS AGE 2 TO 16 YEARS

**Dr. Kashif Ikram, Prof. Ahmad Salman Waris**

Department of Urology, Dialysis and Renal Transplantation, Postgraduate Medical Institute, Ameer ud Din Medical College, Lahore General Hospital, Lahore, Pakistan

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## **BACKGROUND:-**

Hypospadias is one of the most common congenital conditions affecting males worldwide. Over 200 different repairs are described in the available literature although two repairs, the tubularized incised plate (TIP) repair and the Mathieu technique, dominate the current literature. The TIP repair has gained popularity in recent years; however, the Mathieu technique still has its advocates and is used in specialist centers worldwide.

## **OBJECTIVE:-**

To compare the outcome of Reverse flap urethroplasty (Mathieu's Repair) and Tubularized incised Plate urethroplasty (Snodgrass) in distal penile hypospadias in term of post-operative complication, hospital stay functional and its cosmetic results.

## **MATERIAL AND METHODS:-**

This was an experimental study conducted at Department of Urology Lahore General Hospital Lahore affiliated with Postgraduate Medical Institute Lahore. Total 70 patients were included in the study and randomly divided into 2 groups. In Group-A patients were treated with Snodgrass repair and in Group-B patients were treated with Mathieu repair. Postoperative completion as well as cosmetic appearance and urinary flow were also assessed in patients till 6 months' time period. Urinary stream and cosmetic appearance was assessed by using defined criteria. Data entry and analysis was done by using SPSS 17. Data was analyzed according to the proposed analysis plan to see the outcome variables during

## **RESULTS**

Mean age of all patients was  $6.34 \pm 2.96$  years. Age range of all patients was 2-12 years. None of the patients in both treatment groups had operative site infection, metal stenosis and total Disruption of tube during the follow up time period. Whereas at 1st month 5.71% had fistula in Group-A and 11.42% patients had fistula in Group-B. Snodgrass technique had good cosmetic appearance and urinary stream as compared to Mathieu's repair. As well as mean operative time for Snodgrass repair is less as that of Mathieu repair. So based on the results Snodgrass repair is better technique un terms of cosmetic appearance and urinary system for treating distal hypospadias.

## **CONCLUSIONS:-**

From this study it is concluded that Snodgrass is a more favored technique for distal penile hypospadias without chordee because of its low rate of complications than Mathieu repair. Moreover the cosmetic appearance and urinary system is better achieved by Snodgrass repair as compared to Mathieu's Repair.

# TOPICAL PODOPHYLLIN RESIN VS CRYOTHERAPY IN TREATMENT OF ANOGENITAL WARTS

**Dr. Syed Ahmad, Prof. Ijaz Hussain**

Department of Dermatology, Postgraduate Medical Institute, Ameer ud Din Medical College, Lahore General Hospital, Lahore, Pakistan

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## **OBJECTIVE:-**

To determine the efficacy of podophyllin resin and cryotherapy in treatment of anogenital warts.

## **INTRODUCTION:-**

Genital warts are one of the most frequent sexually transmitted diseases worldwide, occurring at incidence rates of 0.6%-1.2% in men and women aged 20-24 years. They represent overt clinical infection with human papillomavirus (HPV) 6 or HPV 11. A wide variety of treatments are in use, but failure of treatment and recurrence after initial clearance are seen with all treatments. The economic burden of the management of genital warts is substantial. In the United States there are estimated to be 0.5-1 million new cases annually.

The goal of treatment is clearance of visible warts; some evidence exists that treatment reduces infectivity. The choice of therapy is based on the number, size, site, and morphology of lesions, as well as patient preferences, cost, convenience, adverse effects, and clinician experience.

## **MATERIAL AND METHODS:-**

Duration of Study was Fourteen months and 104 patients were indulged, and this was Quasi's experimental study. Non probability convenience sample was used. Patients of either sex with anogenital warts having age between 15 to 60 years were included after informed consent and were divided into two groups, one was treated with Podophyllin resin applied topically, and the other was treated with liquid nitrogen cryotherapy and patients were inquired about side effects of treatment.

## **RESULTS:-**

Patients were followed up for eight weeks and they were evaluated for the clearance and/or recurrence of warts. At the completion of the study period it was observed that the patients who were treated with cryotherapy showed rapid clearance of warts with minimal side effects of treatment in lesser time as compared to those who were treated with podophyllin resin.

## **CONCLUSIONS:-**

Hence it can be concluded that cryotherapy is more efficacious than topical podophyllin resin in treatment of anogenital warts.

## **KEY WORDS:-**

Genital Warts, Human Papilloma Virus, Cryotherapy, Podophyllin Resin, Condyloma Acuminata

# COMPARISON OF POSTDURAL PUNCTURE HEADACHE IN MEDIAN & PARAMEDIAN APPROACH IN SPINAL ANESTHESIA IN ELECTIVE CESAREAN SECTION.

**Dr. Afshan Nisar, Prof. Khalid Bashir**

Department of Anesthesia, Postgraduate Medical Institute, Ameer ud Din Medical College, Lahore General Hospital, Lahore, Pakistan

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## **OBJECTIVE:-**

The objective of this study was to compare frequency of post dural puncture headache (PDPH) in Midline and Paramedian approach in patients undergoing caesarean section under spinal anaesthesia.

## **BACKGROUND:-**

Post dural puncture headache (PDPH) is a complication of spinal anaesthesia which occurs due to leakage of CSF from dural puncture site and loss of buoyancy supporting brain. There are two approaches mostly used for Spinal anaesthesia technique i.e. midline and para-median approach. Literature has reported controversial results regarding incidence of PDPH with both of these approaches. That is why we hypothesize this study to compare median and para median approach to see the frequency of PDPH.

## **MATERIAL AND METHODS:-**

This Randomized controlled Trial was conducted at Department of Anaesthesia, Lahore General Hospital Lahore. 100 cases were included through Non-Probability, Purposive Sampling. After obtaining an informed consent, they were randomly divided in two groups by lottery method. Group A received sub-arachnoid block through midline approach and group B through paramedian approach. The demographic information including name, age, gestational age, parity and weight were recorded. The blocks were performed by an anaesthetist. Then patients were admitted in the ward where she was followed-up for PDPH. The patients were asked about any complaints of headache through VAS on 1st, 2nd and 3rd postoperative day and labelled according to operational definition by researcher herself. If PDPH was noted in any patient, it was treated by departmental protocol. All this information was collected on a specially designed Proforma (attached). Data was analysed through computer software SPSS version 10. The frequency of PDPH was compared between both groups with application of Chi-square test. P-value <0.05 was considered as significant.

## **RESULTS:-**

Total 100 patients were presented with mean age of  $26.08 \pm 4.45$  years. In group A, mean age of patients was  $25.62 \pm 4.64$  years and in group B the mean age of the patients was  $26.54 \pm 4.24$  years. Out of 100 patients the mean weight of the patients were noted as  $54.94 \pm 9.54$  kg. The mean weight of the group A patients was noted as  $51.00 \pm 2.85$  Kg and in group B the mean weight of the patients was noted as  $58.88 \pm 11.93$  Kg. Out of total 100 females, only 6% females reported with PDPH. During hospital stay, only these 6% female showed PDPH. Out of these 6 (6%) females, 2(4%) were from group A and 4(8%) patients were from group B. Statistically there is insignificant difference between the study groups i.e. p-value=0.0678.

## **CONCLUSIONS:-**

We observed that PDPH was more common with paramedian approach as compared to median approach.

## **KEYWORDS:**

Postdural Puncture Headache, Median, Paramedian Approach, Spinal Anesthesia, Cesarean Section



# **EFFICACY OF RADIOFREQUENCY RHIZOTOMY FOR ATYPICAL FACIAL PAIN SYNDROMES**

**Dr. M.Hassan Raza, Prof. Khalid Mahmood**

Department Of Neurosurgery Unit 3, Postgraduate Medical Institute, Ameer ud Din Medical College, Lahore General Hospital, Lahore, Pakistan.

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## **BACKGROUND:-**

Atypical facial pain, is a persistent facial pain that does not have the characteristics of cranial neuralgias and cannot be attributed to a definite disorder. The facial pain occurs daily and persists throughout the day. Generally, it is limited to one particular area on one side of the face at disease onset, is deep and poorly localized, and is not associated with sensory loss or other neurological deficits.

## **OBJECTIVE:-**

To determine the efficacy radiofrequency rhizotomy in terms of pain relief in patients with atypical facial pain syndromes.

## **MATERIALAND METHODS:-**

This cross sectional study was carried out in 10 patients from August 2012 to July 2013 at neurosurgery unit III, Lahore general hospital. Patients were admitted through OPD. Patients of either sex between 30-50 years having atypical distribution and character of pain along with patients who were already diagnosed cases of multiple sclerosis, malignant disease, herpes zoster and connective tissue disorders were included in study. Patients with history and examination of typical trigeminal neuralgia were excluded. All patients underwent radiofrequency rhizotomy and efficacy in terms of pain relief was determined at regular follow-ups over a period of 3 months.

## **RESULTS:-**

Status of post-operative pain relief among 10 patients was analyzed as; n=7 (70%) completely pain free at follow up, n= 2 (20%) mild pain at follow up but controlled very well on medications, n= 1 (10%) moderate pain at follow up and poorly controlled on medications requiring repetition of procedure.

## **CONCLUSIONS:-**

The patients with atypical facial pain in whom medical treatments fail, radiofrequency rhizotomy should be the treatment of choice as it is safe, cost-effective, effective in terms of pain relief and can be employed in patients of all ages, medical issues and gender.

# **ANTI-HYPERLIPIDEMIC EFFECT OF AJWA DATE SEED ON HIGH FAT FED RABBITS**

**Dr. Zobia Usman, Prof.Sadia Chiragh**

Department of Pharmacology, Postgraduate Medical Institute, Ameer ud Din Medical College, Lahore General Hospital, Lahore, Pakistan.

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## **OBJECTIVE:-**

Date seeds contain such constituents which can lower the bad cholesterol and increase good cholesterol. There is no such study to show its anti-hyperlipidemic effect. In this study effect of Ajwa date seed has been observed on serum lipid levels of diet induced hyperlipidemic rabbits.

## **MATERIAL AND METHODS:-**

The study was carried out on 32 male rabbits weighing between 1-1.5 kg. Rabbits were divided into four groups HFD, HFD+2%A, HFD+4%A and NC having 8 rabbits each. The first three groups were given high fat diet containing 1gm cholesterol and 4ml coconut oil per 100 gm of normal diet for whole 12 weeks. After 4 weeks groups HFD+2%A and HFD+4%A were given diet containing Ajwa date seed powder 2gm and 4gm per 100 gm of high fat diet respectively for next 8 weeks. While group NC took normal diet for 12 weeks. Lipid profile was done at 0, 4, 8 and 12 weeks.

## **RESULTS:-**

Initially 4% Ajwa date seed powder was more effective than 2% in lowering lipid levels. But at the end of the study serum cholesterol, triglycerides, LDL-C, AIP and LDL/HDL ratio decreased significantly in both treatment groups with p-value<0.001 while HDL increased significantly.

## **CONCLUSIONS:-**

Ajwa date seeds are effective in lowering lipid levels despite high intake of fat.

# PLASMA ANTITHROMBIN LEVEL AND PLATELET COUNT: PREDICTORS OF PREECLAMPSIA?

**Dr.Umbreen Imtiaz, Prof.Naumaan Aslam Malik**

Department of Pathology, Postgraduate Medical Institute, Ameer ud Din Medical College, Lahore General Hospital, Lahore, Pakistan.

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## **ABSTRACT:-**

A strong relationship exists between coagulation inhibitors, thrombocytopenia and PE. In the present study, there were 52 preeclamptic patients out of which 21(40%) had mild disease and 31(60%) had severe disease. Mean  $\pm$  SD of AT in control group was  $119.08 \pm 18.45$  % and in the study group it was  $74.10 \pm 17.65$ % which were significant. Mean and SD of the platelet count in the control group was  $302 \pm 70.4 \times 10^9/l$  and in the study group it was  $223 \pm 76.5 \times 10^9/l$  which were significant.

## **HYPOTHESIS:**

Plasma AT levels and platelet count are reduced in PE.

## **OBJECTIVE:-**

To detect and compare plasma AT level and platelet count in normal pregnant females and preeclamptic females.

## **STUDY DESIGN:-**

Comparative study

## **PLACE AND DURATION:**

Normal pregnant females and pregnant females admitted with PE were included in the study. A specific proforma was designed to record the demographic data. The study was conducted at the Department of Pathology, Post Graduate Medical Institute Lahore and Chughtai's Lahore lab. Preeclampsia and healthy pregnant women were selected from the Obstetrics and Gynecology department of Lahore General Hospital and Services Hospital Lahore.

## **DURATION OF STUDY:**

23.9.2012 to 30.6.2013 (9 months).

## **SAMPLING TECHNIQUE:-**

Purposive convenient sampling technique

## **MAIN OUTCOME MEASURES:**

As it was proved by the tests that Antithrombin levels and platelet count fall significantly in PE; hence these markers can be used to predict the development of the condition.

## **CONCLUSIONS:-**

AT and platelet level falls in severe PE so these patients can be screened out by measuring the levels of these parameters along with a proper history. The results of the study showed that estimation of their levels may have an impact on early diagnosis of the disease hence timely management of the preeclamptic patients can be possible. This can therefore be useful for prevention of the complications of the disease.

# **COMPARISON OF OUTCOME OF PATIENTS WITH ADHESIVE SMALL BOWEL OBSTRUCTION MANAGED WITH OR WITHOUT GASTROGRAFFIN**

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## **INTRODUCTION:-**

Although the most common cause of small bowel obstruction (SBO) in adults are postoperative intraperitoneal adhesions, considerable controversy still exists regarding the recommended therapeutic strategy. To resolve this controversy we carried out this study.

## **MATERIAL AND METHODS:-**

Randomized Control Trial study was done in surgical unit III, Lahore General Hospital, Lahore, over the period of 6 months with patients presented with adhesive small bowel obstruction. Patients random ally divided into 2 groups , A and B, with 23 patients in each group. Group A was managed conservatively & Group B was given gastrograffin. We compared results of both groups

## **RESULTS:-**

Total of 46 patients were studied over the period of 6 months. The mean age of patients was 30years. 23 patients were treated conservatively without Gastrograffin and 23 patients were treated with gastrograffin. In 20 patients with gastrograffin symptoms were resolved and 3 patients needed surgery and in 15 patients without gastrograffin symptoms were resolved whereas 8 patients needed surgery. Hospital stay was 3-4 days in patients with gastrograffin and 5-7 days in patients without gastrograffin. Early oral intake was after 24 hours in patients with gastrograffin and 72 hours in patients without gastrograffin

## **CONCLUSIONS:-**

Patients presenting with adhesive small bowel obstruction can be managed with oral gastrograffin with early oral intake, less hospital stay and reduce the need of Surgery

# **FACTORS CONTRIBUTING IN DEFAULT OF TUBERCULOSIS PATIENTS AT DOTS CENTER LAHORE GENERAL HOSPITAL LAHORE**

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## **OBJECTIVE:-**

To assess the factors contributing in default of TB patients who were treated at DOTS center Lahore General Hospital Lahore.

## **MATERIALANDMETHODS:-**

This retrospective study was conducted by analyzing the record of all TB patients who were started TB treatment between Jan 2011 to Dec. 2011 at DOTS Center Lahore General Hospital Lahore.

## **RESULTS:-**

During a period of one year a total of 532 patients were enrolled for Anti Tuberculosis Treatment. Among them 99 patients had smear Positive Pulmonary Tuberculosis while 117 patients were treated for smear Negative Pulmonary Tuberculosis and 316 patients were treated for Extrapulmonary Tuberculosis. 44 patients were cured while another 433 patients also completed treatment while 51 patients lost follow up with our DOTS center. 3 patients died during treatment period while one patient had treatment failure.

Among 51 patients who defaulted 26 were males while 25 were females. Twenty Seven patients had pulmonary Tuberculosis while 24 had Extra pulmonary Tuberculosis. Among 27 Pulmonary TB patients 18 patients were smear Positive initially. While 9 patients were smear negative. Among 51 patients who defaulted 48 patients were considered Category I (new cases) while 3 patients were decided category II (Retreatment cases) at the start of treatment.

Among these 51 patients, 36 patients had early default (within three months) while 15 patients had late default (after three months). Among these defaulted patients there were 4 patients who were from outside Lahore district was also given opportunity to get treatment from our center but all these four patients had early default. Phone calls were also made to patients who were smear positive and lost follow up with our center while SMS were sent to the other patients to know the reason for their not coming and to motivate them to complete their course of TB treatment

## **CONCLUSIONS:-**

Poverty, distance from DOTS center, intolerance to anti TB drugs and poor satisfaction level were considered important risk factors in TB patients having default.

# THE ROLE OF INTRACRANIAL PRESSURE MONITORING IN SEVERE TRAUMATIC BRAIN INJURY

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## OBJECTIVE:-

To see the Upper GI Endoscopy findings in patients with upper GI bleed and its relationship with age, gender and symptoms.

## MATERIAL AND METHODS:-

It is single centered, retrospective analysis of 3910 patients who presented to GI Department from January 2010 to December 2013 for endoscopic evaluation of UGI bleed. The data was analyzed on SPSS19, descriptive statistics were recorded and results were analyzed as in given table.

## RESULTS:-

The pattern of pathologies on EGD is as shown as:-

No	Endoscopic Finding	Number	%age	Mean Age (yrs)	Male: Female ratio
1	Esophageal varices (EV)	2848	72.8 %	46	1.95:1
2	Peptic ulcer disease (PUD)	656	16.7%	40	1:1
3	Normal EGD	165	4.3%	35	1:1.4
4	NSAIDs induced gastritis	104	2.6%	39	1:1.3
5	Fundal Varices	71	1.8%	42	1.3:1
6	Portal Gastropathy	24	0.5%	34	1:1
7	Mallory Weiss	17	0.4%	32	1:1.3
8	Gastric Neoplasm	11	0.3%	45	1.4:1
9	Esophageal Neoplasm	10	0.3%	49	1.8:1

The majority of the patients with UGI Bleed presented with hematemesis alone (n=2873, 72.9%) followed by combined hematemesis & malena (n=510, 13%), malena alone (n=466, 11.9%) and hematochezia (n=61, 2.1%). EV were the most frequent finding of UGI Bleed (n=2848, 72.8%) followed by PUD (n=656, 16.7%) and then a Normal upper GI endoscopy (n=165, 4.3%).

## CONCLUSIONS:-

Hemetemesis due to EV is the commonest cause of UGI Bleed in patients above 45 years of age with male predominance in our region as compared to the western world in which the UGI bleed is mainly due to PUD reflecting that increasing proportion of people suffering from UGI bleed secondary to EV is indicative of increasing prevalence of liver cirrhosis in our population.

# **SURGICAL OUTCOME OF ANTERIOR DECOMPRESSION, GRAFTING AND FIXATION IN DORSOLUMBAR CARIES SPINE**

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## **OBJECTIVE:-**

To evaluate the surgical outcome of anterior decompression, grafting and fixation in tuberculosis of the dorsal and lumbar spine.

## **STUDY DESIGN:-**

A case series study

## **PLACE AND DURATION OF STUDY**

Department of Neurosurgery Unit-I, Lahore General Hospital, Lahore, From Jan 2008 to March 2012.

## **MATERIAL AND METHODS:-**

Patients with caries spine having compression over the thecal sac with neurological deficit and kyphosis were included in the study. Patients below 17 years and above 56 year of age; patients with bed sores and unfit patients for anesthesia were excluded from the study. Complete blood picture with ESR, X-ray Chest, X-ray of the relevant spinal level and MRI were done. All patients were treated with corpectomy, debridement, drainage of abscess and grafting followed by fixation with poly-axial screws and rods. All patients were assessed by ASIA Impairment Scale before and after surgery and with Bridwell grading after surgery.

## **RESULTS:-**

Among 79 patients, 47 Male and 32 Female patients, mean age was  $37.2 \pm 3$  years. The commonest involved level was the dorsolumbar junction 53.16% (N=42). Lower limb power improved to ambulatory level in 60% of patients with complete paraplegia and recovery was excellent in patients with partial weakness; only n=2 patients (2.53%) deteriorated to a lower grade. There was no postoperative mortality and one patient had long ICU stay due to lung injury.

## **CONCLUSIONS:-**

According to our study, corpectomy followed by grafting and fixation is safe and effective procedure. Even those patients presenting with complete paraplegia showed improvement in motor power to ambulatory level and those who had partial deficit showed excellent improvement.

## **KEYWORDS**

Caries spine, anterior spinal decompression, ASIA Impairment Scale, Bridwell grading, motor deficit.

# **Association of BMI with elevated values of CK-MB and cTnT in acute myocardial infarction**

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## **OBJECTIVE:-**

To determine the association of BMI with serum levels of cTnT & CK-MB isoenzyme in patients presented to hospital emergency with suspected myocardial infarction and in healthy individuals.

## **STUDY DESIGN:-**

Comparative cross sectional study.

## **PLACE AND DURATION OF STUDY:-**

This study was conducted at Post graduate medical institute, Lahore in collaboration with Punjab Institute of Cardiology Lahore from July 2010 to Dec 2010.

## **MATERIAL AND METHODS:-**

Serum concentration of CK-MB and Cardiac Troponin T were estimated in 80 patients of AMI (40-60 years of age both sexes) by Immunological UV assay and electrochemiluminescence immunoassay (ECLIA) respectively. 40 healthy controls were matched for age and sex

## **RESULTS:-**

Low BMI was observed in patients with both sexes. The values of both CK-MB and cTnT were markedly raised in patients with acute myocardial infarction.

## **CONCLUSIONS:-**

In the present study higher prevalence of risk factors and MI were seen in patients even with BMI < 23 kg/m<sup>2</sup>. Therefore recognition and adoption of BMI cutoffs represent a major step forward in redefining the risk stratification among Pakistanis.

## **KEY WORDS:-**

BMI, CK-MB, cTnT, acute myocardial infarction.



# **A COMPARATIVE STUDY OF AVULSION FRACTURE OF INFERIOR POLE OF PATELLA TREATED BY TENSION BAND WIRING VS RESECTION OF THE AVULSED FRAGMENT AND REATTACHMENT OF PATELLAR LIGAMENT TO THE PATELLA**

**Dr. Abdul Rauf Ch, Prof Irfan Mehboob**

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## **OBJECTIVE:-**

The objective of this study is: to evaluate the results of

" Inferior pole fracture patella treated with tension band wiring.

" Inferior pole fracture patella treated with resection of avulsed fragment and Reattachment of patellar ligament

" Comparison of both groups.

## **STUDY DESIGN:-**

Observational Comparative study

## **PLACE AND DURATION OF STUDY.**

Orthopedic department of Lahore general hospital Lahore, Affiliated with PGMI Lahore. From October 2010 to October 2012

## **MATERIAL AND METHODS:-**

20 patients of age 18 to 50 years of either gender having fracture of inferior pole of patella were included in the study. They were divided into two groups. Group A fractures in 10 patients were treated with open reduction and fixation with tension band wiring and Group B fractures in 10 patients were treated by resection of the avulsed fragment and reattachment of patellar ligament to the patella.

Prophylactic antibiotics were given to both group tourniquet was used in both groups. Patients received two more doses of antibiotics in the post-operative period. (8 hours and 16 hours after the completion of procedures). Patients were followed up according to the protocol at regular intervals and final assessment was done at the end of 6 months after the surgery.

## **RESULTS:-**

Functional outcomes were achieved in all 20 cases. Results were compared by using the Bostman scale.

Group A; 9 out of 10 (90%) patients treated with open reduction and fixation with tension band wiring had good to excellent results. 6 patients (60%) had knee flexion more than 120 degree, 8 patients (80%) had near normal range of motion (ROM) quadriceps power. 1 patient (10%) had nonunion and 1 patient (10%) had superficial infection.

Group B; 10 out of 10 (100%) treated by the resection of the avulsed fracture and reattachment of the patellar ligament to the patella had good to excellent results. 9 patients (90%) had a knee flexion more than 120 degree. 8 patients (80%) had near to normal quadriceps power and no infection (0%) had been noted in any case quadriceps wasting was seen in both groups (0.8-1.2cm) was seen in both groups but it was minimal in group B because of shorter period of immobilization.

**CONCLUSIONS:-**

We believe that it is normal extended indication of the use of suture anchors and should be in the armament of every trauma surgeons.

**KEYWORDS:**

Fracture inferior pole of patella, Anchor sutures, K-wire

# **The outcome of locking compression plate (LCP) by minimally invasive percutaneous plate osteosynthesis (MIPPO) in closed diaphyseal fracture of distal tibia**

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## **OBJECTIVE:-**

To evaluate the result of : use of locking compression plate (LCP) by minimally invasive percutaneous plate osteosynthesis (MIPPO) in closed diaphyseal fractures of distal tibia have better results

Study design

Descriptive case series

## **MATERIAL AND METHODS:-**

30 patients of age 20 to 45 years of either gender having closed diaphyseal fracture of distal tibia were included in the study

## **SAMPLE TECHNIQUE**

Non probability purpose sampling

## **DURATION OF STUDY**

Six months:

## **INCLUSION CRITERIA**

Gender: both male and female

Age : 20-45 years

All the patients with diaphyseal fractures of distal tibia of any severity ( as per operationsla definition)

## **EXCLUSION CRITERIA**

Open fractures

Pathological fractures ( fractures without history of trauma )

Fractures ie more than 3 weeks old

Demographic history (including age (in years) and sex (male or female ) was taken . Informed consent was taken .

Technique, prophylactic antibiotics were given to all patients. Tourniquet was used patients received two more doses of antibiotics in the post operative period.(8 hours and 16 hours after the completion of procedure) patients were followed up according to the protocol AT REGULAR INTERVALS AND final assessment was done at the end followup

## **RESULTS:-**

Functional outcome was achieved in all 30 cases. Results were compared with previous studies. Delayed- union was observed in 3(10%) patients while the remaining 27 (90%) patients had normal union. There were 4 (13.3%) patients who had palpable hardware. while palpable hardware was not present in 26 (86.7%)

Patients. Ankle stiffness was observed in 2( 6.%) patients while among 28( 93.4%) patients ankle stiffness was not observed

## **CONCLUSIONS:-**

Results of this study shows tht in management of closed distal diaphyseal fractures of tibia with LCP through MIPPO technique is an effective treat ment method as it gave increase union rate and decrease complications ( palpable implant and ankle stiffness)

## **KEY WORDS:**

LCP, MIPPO, Closed, Diaphyseal Fracture, Distal tibia

# **EFFECT OF CARBONATED DRINKS ON WOUND HEALING OF BUCCAL MUCOSA OF ALBINO RATS**

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## **INTRODUCTION**

Carbonated drinks are the third most consumed beverages in the world. Millions of people worldwide drink various branded carbonated drinks every day. The effects of these drinks on hard tissues and vital organs of the body have been proved beyond doubt. But not enough evidence is available to determine the effects of carbonated drinks on oral soft tissues. This study was an attempt to assess the effect of carbonated drinks on oral mucosal wound healing.

## **OBJECTIVE:-**

To see the Upper GI Endoscopy findings in patients with upper GI bleed and its relationship with age, gender and symptoms.

## **MATERIAL AND METHODS:-**

Fifty male Wistar rats were considered for the study. A circular wound of 3.0mm was created on the buccal mucosa of all animals and they were divided into two groups (experimental-1 and experimental-2 group). The animals in group-1 were fed with chow pellet and water while those in group-2 were fed with a commercially available carbonated drink instead of water. Six animals from each group were euthanized at 3, 7, 14 and 21 days. Wound site was assessed histologically.

## **RESULTS:-**

There was a marked difference in the healing pattern between the two groups. Animals in group-1 showed a normal healing pattern with formation of a fibrous connective tissue at the end of 21 days. In the group-2, there was a visible alteration in healing pattern. There was a delay in neutrophil recruitment in group-2 with a subsequent delayed inflammatory reaction at day 21. The regenerated epithelium showed hyperplasia, hyperkeratosis along with acanthosis at the end of the experiment.

## **CONCLUSIONS:-**

Consumption of carbonated drinks can disrupt oral wound healing. The contents in carbonated drinks have a proinflammatory action on the soft tissue. Results suggest that epithelial changes seen in experimental group-2 could be a result of constant irritation by the acidic and fizzy nature of carbonated drinks.

# **FREQUENCY OF UTERINE SCAR DEHISCENCE IN PATIENTS WITH SCAR TENDERNESS WITH PREVIOUS ONE CESAREAN SECTION**

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## **INTRODUCTION:**

Vaginal birth after Cesarean section (VBAC) is a vaginal delivery after one Cesarean section. Up to 80% of women will be able to have a VBAC. During trial of labour to previous one cesarean section, scar tenderness is taken as a sign for scar dehiscence. Prenatal identification of a dehiscenced lower uterine segment is believed to be predictive of subsequent uterine rupture during the labour. In a study out of 18 C-section for suspected scar dehiscence 10 were done for scar tenderness. Out of 10 for scar tenderness scar dehiscence was not found in any case.

## **OBJECTIVE:-**

The objective of the study was:

" To determine the frequency of patients with previous one Cesarean section who develop scar tenderness during trial of labour.

" To determine the frequency of Scar Dehiscence in patients with previous one Cesarean section who develop scar tenderness during trial of labour.

## **MATERIALAND METHODS:-**

" Setting: Labour Room, Lahore General Hospital/Pgmi

" Study Design: Descriptive Case Series Study.

" Duration Of Study: 6 Months After Approval Of Synopsis. (From: 01/04/2013 To 30/09/13)

## **RESULTS:-**

In our study, 57.2%(n=143) were between 20-30 years and 42.8%(n=107) were between 31-40 years of age, mean+sd was calculated as 28.62+5.25 years, 51.6%(n=129) were between 37-39 weeks and 48.4%(n=121) were between 39-41 weeks of gestation. Out of total study population of 250 patients, frequency of patients who develop scar tenderness during trial of labour was 7.6%(n=19) while 92.4%(n=231) had no tenderness. Frequency of scar dehiscence in patients who developed scar tenderness during trial of labour was 10.53%(n=2) had scar dehiscence while 89.47%(n=17) had no findings of scar dehiscence.

## **CONCLUSIONS:-**

We concluded that the frequency of patients with previous one Cesarean section who develop scar tenderness/Scar dehiscence during trial of labour are not statistically significant and the trial of labour in these patients may continue confidently and thus decrease rising cesarean section rate in our population.

## **KEYWORDS:**

Previous one Cesarean section, trial of labour, scar tenderness, Scar Dehiscence, frequency

# **ROLE OF NASAL ENDOSCOPY IN THE DIAGNOSIS OF NASAL DISEASE**

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## **ABSTRACT:-**

Nose is a very important organ in the body. It performs a number of physiological functions like providing route for breathing, olfaction and plays a part in taste. It can be affected by various pathological processes leading to production of nasal disease. The nasal disease can be diagnosed by history, direct physical examination and radiological investigation. A tool in the diagnosis of ENT disease has become available in the form of rigid and flexible endoscopic examination of nose. Endoscopy can be most useful in the diagnosis of cases where routine methods of examination with head light or mirror is not very helpful like cases with early disease in nose and nasopharynx and idiopathic bleeding from nose. Also in cases with presentation of disease in anatomical region away from nose as in ears intracranial disease or neurological manifestations with hidden disease in nose and nasopharynx endoscopic examination is most useful

# **FUNCTIONAL OUTCOME OF LUMBAR CORE STABILIZATION EXERCISES VERSUS GENERAL LUMBAR EXERCISES IN POSTOPERATIVE REHABILITATION OF LUMBAR SPINE SURGERY**

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## **OBJECTIVE:-**

To compare the effect of lumbar core stabilization exercises and general lumbar exercises on functional level of the patients in post-operative rehabilitation programs after lumbar spine surgery

## **MATERIAL AND METHODS:-**

This longitudinal interventional study was conducted at Physiotherapy department Lahore General Hospital. Patients of Lumbar spine surgery with low back pain who met the inclusion criteria were included into the present study and allocated to the core stabilization exercises group (group A) and general lumbar exercises groups (Group B) by simple randomization technique. Patients of both groups were given the treatment for six weeks and assessment of the both groups done in start and end of treatment. VAS and Oswestry Disability Index (also known as the Oswestry Low Back Pain Disability Questionnaire) were used as assessment tools for both groups.

## **RESULTS:-**

28 lumbar spine patients were equally allocated to core stabilization group and general lumbar exercises group. There were significant improvements of VAS score at the end of 6th week. Before treatment, in group A the mean pain on VAS score was  $3.64 \pm 0.745$  and in group B the mean pain on VAS was  $3.86 \pm 0.864$ . After treatment the mean pain score on VAS in group A and group B was  $1.36 \pm 1.082$  and  $1 \pm 0$  respectively. The mean score of pain after treatment was significantly reduced, i.e.  $p\text{-value} = 0.000$ . Functional Level of the patient significantly improved in terms of ODI score. Before treatment, in group A the mean total score of ODI was  $41.36 \pm 1.823$  and in group B the mean total score was  $40.14 \pm 1.748$ . After treatment the mean total score in group A and group B was  $20.21 \pm 9.86$  and  $22.14 \pm 1.406$  respectively. The mean total score after treatment was significantly reduced, i.e.  $p\text{-value} = 0.000$ .

## **CONCLUSIONS:-**

The present study suggests that both core stabilization exercises and general lumbar exercises are safe and effective treatment for Postoperative back pain and can improve the functional status during postoperative rehabilitation of lumbar spine surgery.

## **KEYWORDS:**

Core stabilization exercises, general lumbar exercises, lumbar spine surgery, back pain



# ASSOCIATION OF SHORT INTERVAL PREGNANCY WITH LOW BIRTH WEIGHT OF FULL TERM NEONATE

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## **INTRODUCTION:**

Several studies have reported greater risks of the adverse pregnancy outcomes low birth weight and small-for-gestational-age (SGA) after short inter-pregnancy intervals. Yet, a general explanation for these excess risks, estimated in a recent meta-analysis to be just over 60% for low birth weight and 25% for SGA, is still lacking. Some investigators have attributed the higher risk of poor pregnancy outcomes to factors associated with, rather than causally related to, short inter-pregnancy intervals, such as maternal socio-demographic characteristics and lifestyle. There is no consensus on definition of short inter-pregnancy interval.

## **OBJECTIVE:-**

The objective of the study was to determine the association of short inter pregnancy interval with low birth weight of full term neonates.

## **MATERIAL AND METHODS:-**

It is a Case control Study. It is conducted in Department of Pediatrics LGH, Lahore. It was done 6 months after approval of synopsis. From: January 11, 2013 to July 10, 2013.

## **RESULTS:-**

In this study, 52.67%(n=79) in cases and 45.33%(n=68) in controls were between 20-30 years, 38.67%(n=58) in cases and 36%(n=54) in controls were between 31-35 years while >35 years of age was recorded 8.66%(n=13) in cases and 18.67%(n=28) in controls, while common age was calculated as 29.82+5.04 years, mean weight of neonates was calculated as 2391.79+33.99 in Cases and 2577.89+43.72 in controls while association between LBW and short inter-pregnancy interval of full term neonates reveals as 51.33%(n=77) in Cases and 25.33%(n=38) in Controls while 48.67%(n=73) in cases and 74.67%(n=112) in controls had no association, odds ratio was calculated as 3.11 and p value was 0.000 which shows a significant difference in both groups.

## **CONCLUSIONS:-**

We concluded that low birth weight of full term neonates is significantly associated with short inter-pregnancy interval as compare to appropriate inter-pregnancy interval; however, appropriate inter-pregnancy interval should be adopted for avoidance of such complications

## **KEYWORDS:**

Short inter-pregnancy interval, full term neonates, low birth weight, association.

# PREVALENCE OF DEPRESSION IN PATIENTS WITH STROKE, IN TERTIARY CARE HOSPITAL

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## **INTRODUCTION:-**

Stroke is a major public health problem. Traditionally, epidemiological stroke studies have focused on mortality and recurrence and not on the long-term morbidity. The prevalence of disability among stroke survivors is between 24-54%.The progressive decrease in stroke mortality observed in the last few decades, and the subsequent increase. Survivors, with residual impairments and disabilities have been accompanied by a growing interest in the factors that could interfere with functional outcome and quality of life. Depression is considered as the strongest predictor of poor quality of life among stroke survivors. (Kim P et al. 1999)

Post-stroke depression (PSD) is one of the common emotional disorders afflicting stroke survivors. Previous studies have reported prevalence rates that have ranged from 18% to 61%, depending upon patient selection and criteria used. Diagnosis of PSD is challenging therefore, it often remains unrecognized and/or undertreated. PSD is associated with cognitive impairment, increased mortality and risk of falls, increased disability, and worse rehabilitation outcome. (Abhishek S. et al. 2010)

## **OBJECTIVE:-**

The Aim of study is to determine the frequency of operationally defined depressive disorder (ICD-10) in chronic stroke patients.And evaluate the relationship of post stroke depression (PSD) with disability.

Design:Cross Sectional Study

Setting:This study was carried out in The Departments of Medicine and physiotherapy, Lahore General Hospital, Lahore.

Duration:One month.

## **MATERIAL AND METHODS:-**

### **Inclusion criteria:**

Patients of both sexes, Age range between 16-60 years, Patients with stroke of more than three months post stroke duration, Patients who are Able to follow three step commands, Patients with having impaired balance and gait but with ability to walk with or without support.

### **Exclusion criteria:**

Patients with recurrent strokes, Patients with receptive aphasia, Patients with significant cognitive deficits affecting participation, Patients with past history of depression or any other Psychiatric disorder.

Hamilton Rating Scale Performa was used for data collection. The demographic information was recorded. Disability scale was used. All patients meeting the inclusion criteria were examined and investigated routinely to confirm diagnosis. The data was entered and is analyzed by using SPSS version 20. Means and standard deviation are being calculated for quantitative data age. Frequency percentage is being calculated for qualitative like gender, presence of depression.

Chi-square test is used to observe the association of PSD and disability. P-value  $<0.05$  is considered as significant.

**RESULTS:-**

Data was collected and results are being analyzed and final results will be presented in the conference.

# NEUTROPHIL LYMPHOCYTE RATIO IN CORONARY ARTERY DISEASE

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## **BACKGROUND & AIMS;**

Acute coronary syndrome (ACS) is associated with many hereditary and acquired predisposing factors. Both chronic and acute Inflammation has a very important role in the pathogenesis of coronary artery disease. There is also evidence that the intensity of the inflammatory response influences clinical outcome in acute coronary syndromes. An elevated WBC count has been associated with cardiovascular risk, but which leukocyte subtype carries this risk is uncertain. The aim of this study was to evaluate the neutrophil/lymphocyte ratio (NLR) in diagnosed cases of coronary artery disease.

## **MATERIALAND METHODS:-**

It was a cross sectional analytical study. The participants included 40 cases with coronary artery disease and 20 normal healthy males. All the participants were in the age group of 35-55 years and were nonsmokers and nondiabetic. Total and differential leukocyte count was checked by automated haemoanalyzer and neutrophil lymphocyte ratio was calculated. Data was analyzed by using SPSS version 20.

## **RESULTS:-**

Neutrophil lymphocyte ratio was significantly increased in the coronary artery disease.

## **CONCLUSIONS:-**

Our results support the role of inflammation in the pathogenesis of coronary artery disease. Prospective studies with Neutrophil lymphocyte ratio at hospital admission and later on can be used to check its role as predictor of coronary artery disease.

# POST STEMI LEFT VENTRICULAR EJECTION FRACTION AND INFARCT SIZE ESTIMATION - CAN SERUM TROPONIN T LEVELS ARE HELPFUL???

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Sialkot Medical Complex, Sialkot.

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## **BACKGROUND:-**

Current guidelines recommend the use of Troponin T as the biomarker of choice for the diagnosis of Acute Myocardial Infarction (AMI). Data revealing relationship between Troponin T and infarct size in patients with Acute ST segment elevation Myocardial Infarction (STEMI) and Left Ventricular LV Ejection Fraction (LVEF) are limited.

## **OBJECTIVE:-**

To evaluate the relationship between cardiac Troponin T levels with infarct size measured by Electrocardiography (ECG) and LVEF measured by Echocardiography (Echo) in patients with STEMI.

## **METHODS:-**

It is a single centered, prospective analysis of patients with Acute STEMI who were brought to the coronary care unit of Sialkot Medical Complex, Sialkot. A total of 116 consecutive patients were enrolled. Their ECGs were recorded at the time of their presentation and Troponin T levels were measured at 12 hours of their presentation to the hospital. Their 2D Echo was done 48 hours post admission. The relationship between infarct size and LVEF with serum Troponin T levels was evaluated.

## **RESULTS:-**

A total of 116 consecutive patients (age,  $58 \pm 17$  years; 18% women) with STEMI were studied. The areas of infarction determined by ECG were inferior wall (IWMI) in 37%, Anteroseptal wall (ASMI) in 19%, Anterolateral wall (ALMI) in 18%, Extensive anterior in 13%, posterior wall (PWMI) in 4% and 2% were having global infarction on their ECG. Regarding levels of Troponin T, 48% had high positive i.e  $>2.0\text{ng/ml}$ , 52% had quantitative readings (20% had  $1.5\text{-}2.0\text{ng/ml}$ , 18% had  $1.0\text{-}1.5\text{ng/ml}$  and 14% had  $0.5\text{-}1.0\text{ng/ml}$ ). None of them had low positive value i.e  $<0.1\text{ng/ml}$ . The mean value of Troponin T in PWMI is  $1.1\text{ng/ml}$ , IWMI is  $1.2\text{ng/ml}$ , LWMI is  $1.3\text{ng/ml}$ , ASMI is  $1.6\text{ng/ml}$  and for ALMI, Extensive MI and global MI is  $>2.0\text{ng/ml}$ . The mean value of Troponin T in patients with LVEF $>50$  is  $1.3\text{ng/ml}$ , LVEF between 40%-50% is  $1.68\text{ng/ml}$  and with LVEF  $<40\%$  is  $1.89\text{ng/ml}$  respectively.

## **CONCLUSION:-**

Troponin T is a reliable and cost effective tool at 12 hours post STEMI to determine the infarct size as measured by an Electrocardiography and LV Ejection Fraction by 2D Echocardiography. The higher values are indicative of more area of infarction with a negative correlation with the LVEF. It can substitute much expensive cardiac MRI and SPECT Myocardial perfusion imaging scans used for measuring the area of infarction and LV function in low income regions like Pakistan.

# **CO-RELATION BETWEEN RETINAL NERVE FIBER LAYER THICKNESS MEASURED BY OCT AND CLINICAL GRADING ON FUNDUS PHOTOGRAPHS IN CASES OF PAPILLEDEMA**

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## **OBJECTIVE:-**

To quantitatively measure the changes in RNFL thickness on OCT in different grades of papilledema and co-relate these changes with clinical grading of papilledema  
grades of papilledema and co-relate these changes with clinical grading of papilledema.

**DESIGN:** Descriptive case series

## **MATERIAL AND METHODS:-**

44 eyes of 22 patients of age above 12 years with suspicion of papilledema who were vitally stable and mobile recruited from neurosurgery wards were included in this study after informed consent. Fundus photographs of all patients were made and clinical grading was done by 3 masked consultant ophthalmologists. Then OCT done of each patient using Time domain OCT and correlation made between RNFL thickness and clinical grades of papilledema.

## **RESULTS:-**

Mean age of patients was 33.41 years, male and female patients were 50% and 50% respectively. 40.91% eyes were graded having no papilledema and their average RNFL thickness was 93.05 microns. 13.64% eyes were having grade 1 (early) papilledema and their average RNFL thickness was 125.70 microns, 18.18% eyes were having grade 2 (established) papilledema and their average RNFL thickness was 134.41 microns, 25% eyes had grade 3 (chronic) papilledema and their average RNFL thickness was 230.78 microns and 02.27% eyes had grade 4 (atrophic) papilledema and their average RNFL thickness was 171.79 microns.

## **CONCLUSIONS:-**

Results shown that RNFL thickness gradually increases with increasing grades of papilledema. While in grade 4 (atrophic) papilledema a start of gradual decrease in RNFL thickness was noted that probably due to atrophy of retinal nerve fiber layer. So OCT can be helpful in grading papilledema. This is an ongoing study so we still need large number of patients to establish more accurate criteria of grading papilledema on OCT.

# **SEPTIC INDUCED MISCARRIAGE AND ASSOCIATED MORBIDITY AND MORTALITY AMONG THESE PATIENTS IN LGH, LAHORE.**

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## **BACKGROUND:**

Septic induced miscarriage is a significant health problem leading to complications that affect the quality of life of those fortunate enough to avoid mortality. The frequency of Induced miscarriage is increasing in our community. Being the only tertiary care centre on Eastern side of Lahore, LGH frequently receives cases of septic induced miscarriages attempted by inappropriately trained personnel and with the complications directly due to miscarriage like fever, hemorrhage, peritonitis and visceral injuries.

## **OBJECTIVE:**

To see the septic induced miscarriages related morbidity and mortality in LGH.

## **MATERIAL & METHODS:**

It is single centered; cross sectional analysis of 32 patients who presented to the labour room of Gynae Unit-2, LGH from January 2012 to December 2013 due to septic induced miscarriages. These patients were collected by proper history, detailed gynecological examination, management protocols; complications encountered, associated morbidity & mortality. The data was analyzed on SPSS19, descriptive statistics were recorded and results were analyzed.

## **RESULTS:**

68% were from rural areas and 78% were married. 82% used mechanical device. A completed family was the main reason for induced miscarriage (66%) followed by being unmarried (22%). 78.3% needed surgical treatment, 23.7% needed major surgery like laparotomy. Termination was attempted at home 83% or other small centers 17%. The mortality of these patients was 21.85% with year wise split as; (71% in 2012) & (29% in 2013)

## **CONCLUSIONS:**

Septic induced abortion is an important contributor to maternal morbidity and mortality, increasing the burden on not only the patients but health workers and resources. Its increasing incidence in young unmarried girls is alarming in our Muslim Society. However, it is preventable, and we suggest improvement of health education, family planning promotion, training of traditional birth attendants and introduction & implementation of laws to bring down the rates of unsafe abortions.





# INTRAVENOUS BOLUS VS INFUSION TERLIPRESSIN THERAPY WITH ALBUMIN FOR PATIENTS WITH HEPATORENAL SYNDROME

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## BACKGROUND:

Hepatorenal syndrome (HRS) develops in about 8-40% of established cirrhotic patients with ascites annually. The management continues to challenge the clinician. Various approaches have been used for HRS treatment including systemic vasoconstrictor and renal vasodilator. Terlipressin is considered to be the drug of choice.

## OBJECTIVE:

To compare the efficacy of intravenous bolus vs Intravenous infusion of terlipressin with Albumin on the renal functions and clinical outcome of patients with HRS. Recurrence of HRS and survival after treatment has also been evaluated.

## MATERIAL AND METHODS:

Single center ongoing, prospective interventional study being continued on since Feb 2013 at Division of Gastroenterology, Medical unit. I, Lahore General Hospital/PGMI; Lahore. Subjects meeting the standard inclusion criteria were assigned in 1:1 into two groups, A and B. The Primary End Point of the study was Reversal of HRS after Terlipressin therapy and Secondary End point was Impact of terlipressin on survival.

Group A received titrated dose of Terlipressin in bolus form (0.5-2mg IV 4 hourly) and Group B received titrated dose of Terlipressin in infusion form (3-12 mg/24 hr) until reversal of HRS (Primary end point) or Completion of 15 days of therapy. All patients in both groups received albumin 1gm/kg body weight during the first 24 hours, followed by 20-60gm/day. Subjects were followed on standard Performa.

## RESULTS:

Parameters	Group A (n:9)		Group B (n:10)	
	Base Line	End of Treatment	Base Line	End of Treatment
<b>Creatinine</b> (mg/dl)	2.86	.98	3.06	1.4
<b>GFR</b> (ml/min)	28.35	79.89	21.85	42.84
<b>Urine Volume</b> (ml/24Hr)	316.67	1067	202	699.5
<b>Mean Arterial Pressure</b>	47	68	71.9	76.5
<b>Serum Albumin</b>	2.9	3.3	3.1	3.2
<b>Average Duration of Treatment</b>	8 days		5 days	
<b>Complete Response</b>	9(100%)		10(100%)	
<b>Recurrence</b>	3(33.33%)		0	

The two groups were comparable at baseline. All patients in two groups survived until day 15 of initiation of therapy

## CONCLUSION:

Patients on Terlipressin infusion therapy for HRS respond in shorter duration with better Mean Arterial Pressure, though GFR and Urine out put improvement have been modest as compared to bolus therapy. Though the numbers are less but recurrence of HRS has been observed in more number of patients on bolus therapy. Being an ongoing study, we hope to bring the final results after the completion of the study.

# HEMODYNAMIC STABILITY DURING INDUCTION OF GENERAL ANAESTHESIA BEFORE INTUBATION: COMPARISON BETWEEN PROPOFOL ALONE AND PROPOFOL-KETAMINE COMBINATION

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## **OBJECTIVE:-**

The objective of this study was to compare propofol alone with propofol and ketamine combination for hemodynamic stability at the time of induction of general anesthesia before intubation.

## **BACKGROUND:-**

General Anesthesia (GA) is a type of anesthesia mostly used in general surgeries. Propofol is most common drug used for induction of GA. Propofol produces a reduction in both cardiac index (CI) and mean arterial pressure (MAP) due to its sympatholytic activity which may lead to hemodynamic instability. Ketamine is analgesic which may be used for maintenance of MAP and CI. Thus We hypothesized this study to see the effect of addition of ketamine to propofol during GA.

## **MATERIAL AND METHODS:-**

This Randomized Controlled Trial was conducted at Department of Anaesthesia, Lahore General Hospital Lahore for six months after the approval of synopsis. 100 cases were included through Non-Probability, Purposive Sampling. After obtaining an informed consent, they were randomly divided into two groups by lottery method. The demographic information including were recorded. For induction of general anesthesia, the first group (P) received propofol (2mg/kg) and the second group (PK) received propofol and ketamine combination (1 mg/kg each drug) as IV bolus doses. Both groups received Atracurium (0.5mg/kg) as muscle relaxant and Isoflurane (at dial concentration of 1%) as inhalational agent MAP, as baseline values, and at one, three and five minute interval before the intubation was noted. All this information was noted on a specially designed proforma. Data was analysed through computer software SPSS version 10. The frequency of Hemodynamic stability was compared between both groups with application of Chi-square test. P-value <0.05 was considered as significant.

**RESULTS:-** The mean ages of the group P patients were noted  $40.62 \pm 8.76$  years and the mean ages of group PK patients were noted as  $43.70 \pm 8.36$  years. There were 44 (44%) males and 56 (56%) females. There were 64 (64%) patients with ASA status 1 and 36 (36%) patients with ASA status 2.

In this study, out of 100 patients, 59 (59%) patients maintained hemodynamic stability while 41 (41%) patients did not maintain hemodynamic stability. The mean MAP in group P was  $74.52 \pm 8.46$  and mean MAP in group PK was  $89.70 \pm 10.53$ . The difference between both groups was highly significant (p-value=0.000).

Out of 50 patients in group P, 14 (28%) patients maintained hemodynamic stability while in group PK, out of 50 patients, 45 (90%) patients maintained hemodynamic stability. Statistically there was highly significant difference between both the study groups i.e. p-value=0.000\*.

**CONCLUSIONS:-** Thus it was concluded from the results of this study that combination of propofol and ketamine is better than propofol alone for maintenance of hemodynamic stability in patients undergoing different surgical procedures under GA.

# MIDDLE EAST RESPIRATORY SYNDROME

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## **ABSTRACT:**

Department of Pulmonology will present a poster regarding awareness and preventive measures regarding Middle East Respiratory Syndrome (MERS).

Middle East Respiratory Syndrome (MERS) is a new Regional Health Threat in Arabian Peninsula which can be a Potential Global Health Threat in near future.

MERS is caused by a new corona virus called MERS.CO.V. It was first reported in Sep 2012. Since 2012 it has caused 136 Confirmed cases and 58 deaths.

Due to Hajj and other religious visits of Muslims in Saudi Arabia there is risk of spreading this infection to other countries

# ASSESSMENT OF SEVERITY OF LIVER INJURY IN PATIENTS WITH METABOLIC SYNDROME.

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## OBJECTIVE:-

To evaluate the impact of metabolic syndrome on liver by measuring aminotransferase levels of the patients suffering from Metabolic Syndrome.

## MATERIAL AND METHODS:-

A Prospective cross-sectional study. Data was analyzed on spss10 with 16 variables on which relevant details were noted. The study was conducted in 400 patients fulfilling the criteria of metabolic syndrome presenting at diabetes and endocrine clinic in Medical Unit-I, Lahore General Hospital, Lahore between August 2011 to November 2013. MS is defined as waist circumference

= 90cm for men and = 80cm for women for those of South and South East Asian, Japanese, and ethnic South and Central American origins

### plus any two of the following four factors:

- raised triglycerides: = 1.7mmol/L

- reduced HDL-cholesterol: <1.03mmol/L in males and <1.29mmol/L in females, or specific treatment for these lipid abnormalities

- raised blood pressure: systolic BP=130 or diastolic BP=85mm Hg, or treatment of previously diagnosed hypertension

- impaired fasting glycaemia (IFG): fasting plasma glucose=5.6 mmol/L, or previously diagnosed type 2 diabetes

## Degree of Liver Damage

The liver disease severity was classified into four groups according to AST and ALT levels (The laboratory reference values of AST & ALT for males and females are 28 & 26 IU and 30 & 26 IU/L, respectively) at the time of presentation. Grade A comprised of patients with normal AST and ALT levels. Grade B comprised of patients with one of the aminotransferases increased but no higher than two times the UNL. Group C comprised of patients with transaminitis 3 to 5 times the reference values. Group D comprised of transaminitis more than 5 times the reference values.

**RESULTS:-** 400 patients were included in the cohort. The mean age of the cohort was 44 years and 69% were females. The majority of the cohort was either overweight (32.4%) or obese (50.7%). Elevated ALT level was more prevalent in males than females. Obesity was a strong risk for abnormal ALT in both genders. Hypertriglyceridemia, hypercholesterolemia and young age were risks for elevated ALT in males only, whereas increased fasting plasma glucose was associated with elevated ALT in females only. Degree of liver enzymes rise indicating liver involvement was observed in 50% (Grade A), 34.8% (Grade B), 15% (Grade C) and 1.2% (Grade D). Grade C and D indicative of ongoing severe liver damage.

## **CONCLUSIONS:**

In this cohort of patients of metabolic syndrome, majority of patients had a rise in liver enzymes indicating liver injury. Grade C and D rise of enzymes in the studied cohort was relatively less common but may indicate the people at risk of developing NASH and its sequel requiring further research.

# **A COMPARATIVE STUDY OF LAPAROSCOPIC CHOLECYSTECTOMY VERSUS OPEN CHOLECYSTECTOMY FOR THE MANAGEMENT OF ACUTE CHOLECYSTITIS IN OUR SETUP**

**Dr Guled Ahmed Warsame, Dr Hasan Askri**

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## **INTRODUCTION:**

Cholecystectomy is the commonest operation of the biliary tract. Acute cholecystitis is found in 20% of all admissions for gallstones disease. We aim to evaluate from a clinical and economical point of view the postoperative evaluation of the cases treated by laparoscopy compared to the open surgery

## **MATERIAL AND METHODS:-**

Prospective comparative study was done in surgical unit III, Lahore General Hospital, Lahore, Over the period of 1 year. We compared results of Laparoscopic and Open cholecystectomy in 80 patients of acute cholecystitis with 40 patients each group.

## **RESULTS:-**

Operative time, hospital stay and complications were less in laparoscopic cholecystectomy than open. There were 2 conversions of laparoscopic to open

## **CONCLUSIONS:**

In our study, we conclude that patient with Acute cholecystitis can be treated safely by laparoscopically in expert hands with less operative time, hospital stay and complications.

# VON HIPPEL -LINDAU DISEASE (A CASE SERIES OF UNUSUAL FAMILIAL

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## **INTRODUCTION:**

Von Hippel-Lindau disease is a heritable multisystem cancer syndrome that is associated with a germline mutation of the VHL tumour suppressor gene on the short arm of chromosome 3. This disorder is not rare (about one in 36 000 live births) and is inherited as a highly penetrant autosomal dominant trait (i.e. with a high individual risk of disease). Affected individuals are at risk of developing various benign and malignant tumours of the central nervous system, kidneys, adrenal glands, pancreas, and reproductive adnexal organs. Because of the complexities associated with management of the various types of tumours in this disease, treatment is multidisciplinary.

## **OBJECTIVE:-**

We present an overview of the clinical aspects, management, and treatment options for von Hippel-Lindau disease in three families, a total number of 7 patients.

## **MATERIAL AND METHODS:-**

It was a descriptive observational study.

In this study we included 7 patients belonging to 3 families. In the first family there was a father and a son, both of them had Von Hippel-Lindau disease. In the second family two sisters and one brother was involved, while in the third family one brother and one sister had this disease. This study was conducted in the Department of Neurosurgery, Lahore General Hospital, Lahore.

## **RESULTS:-**

In this study we observed that 1 out of 7 patients died, 1 is bed ridden with paraparesis. The rest 5 patients are passing their normal routine life. We observed that in all of our patients (100%) there was CNS involvement, the recurrence in our series is quite high. (70%), 3 of our patients required permanent V.P. Shunt while 1 patient required per operative EVD. In 2 of our patients eye surgery was required. 1 of our patient underwent the Gama Knife (Radio surgery).

## **KEY WORDS:**

Von Hippel-Lindau disease, germline mutation, tumour suppressor gene, penetrant autosomal dominant trait.

# UNVEILING THE ANTIMICROBIAL SUSCEPTIBILITY PATTERN OF MICRO-ORGANISMS RECOVERED FROM VARIOUS SPECIMEN OF LAHORE GENERAL HOSPITAL FOR THE YEAR 2013

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## BACKGROUND:-

The emergence of antibiotic resistant bacteria is a major problem throughout the world and a rational use of antibiotics is therefore very important.

## OBJECTIVE:-

The aim of present study is to see antimicrobial sensitivity pattern of local bacterial isolates recovered from various specimen from LGH in a year 2013.

## MATERIAL AND METHODS:-

All specimen obtained from LGH were processed and isolated by the routine microbiological and biochemical tests. Antibiotic sensitivity test was done by modified Kirby-Bauer disc diffusion method according to the Clinical and Laboratory Standards Institutes Guidelines 2011.

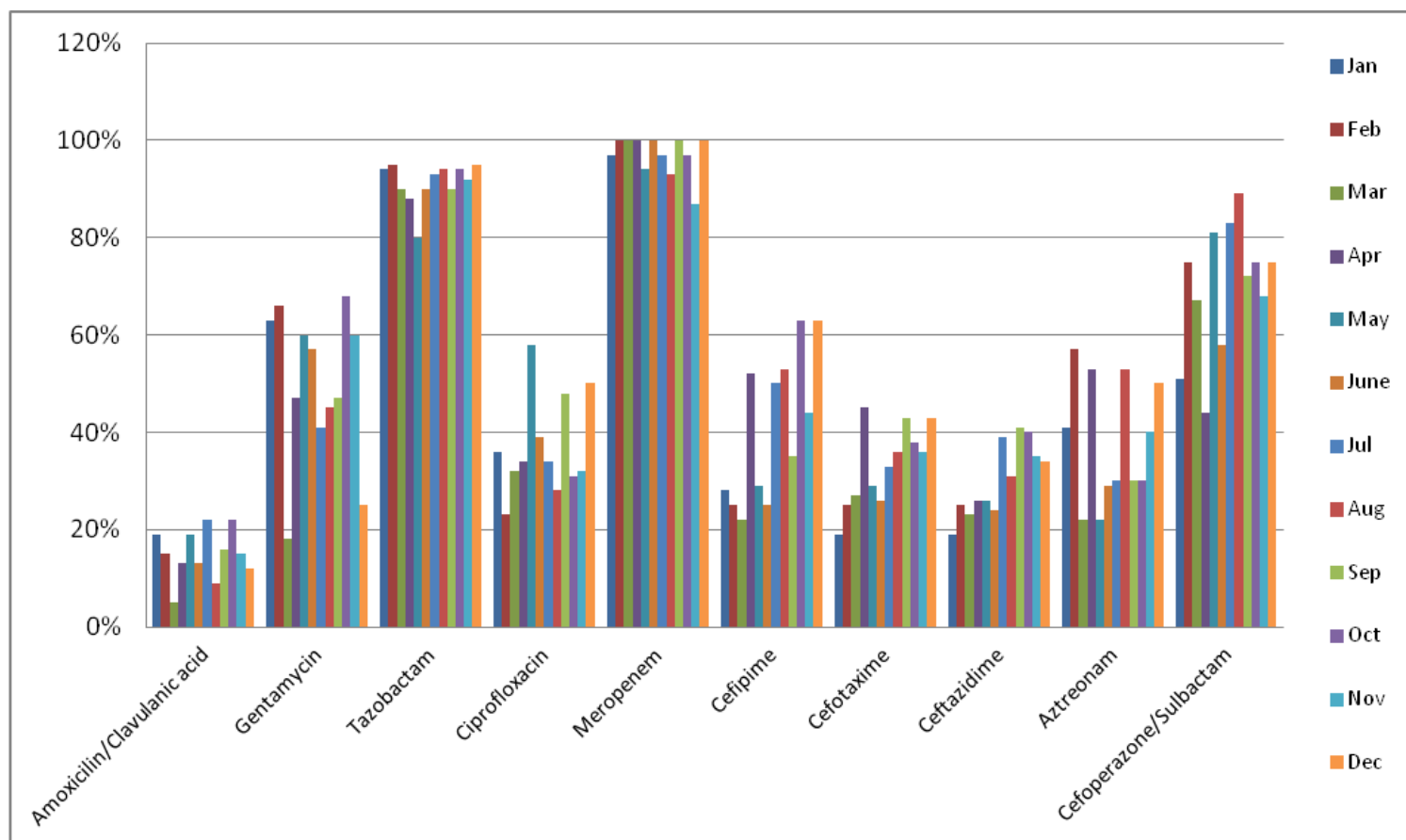
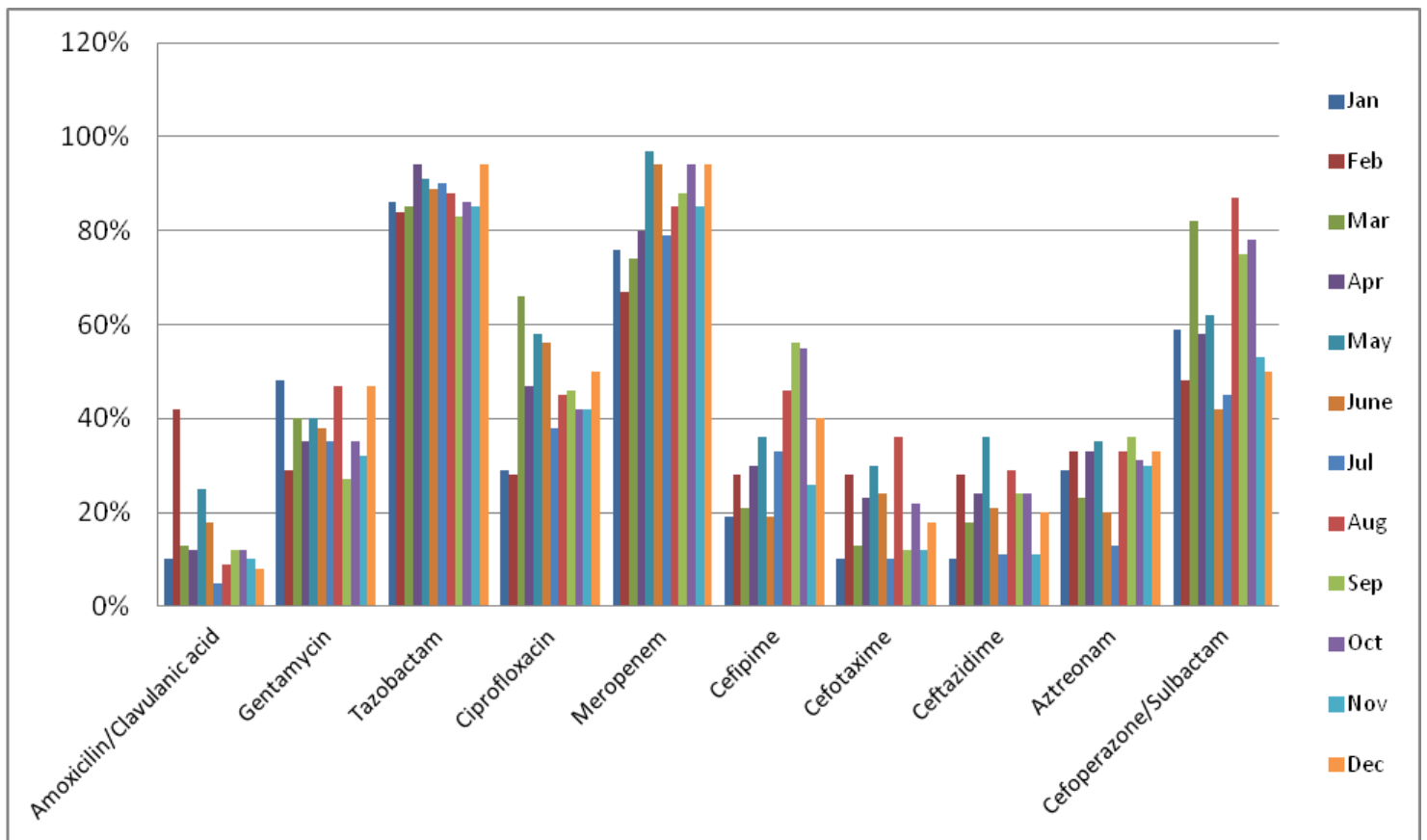
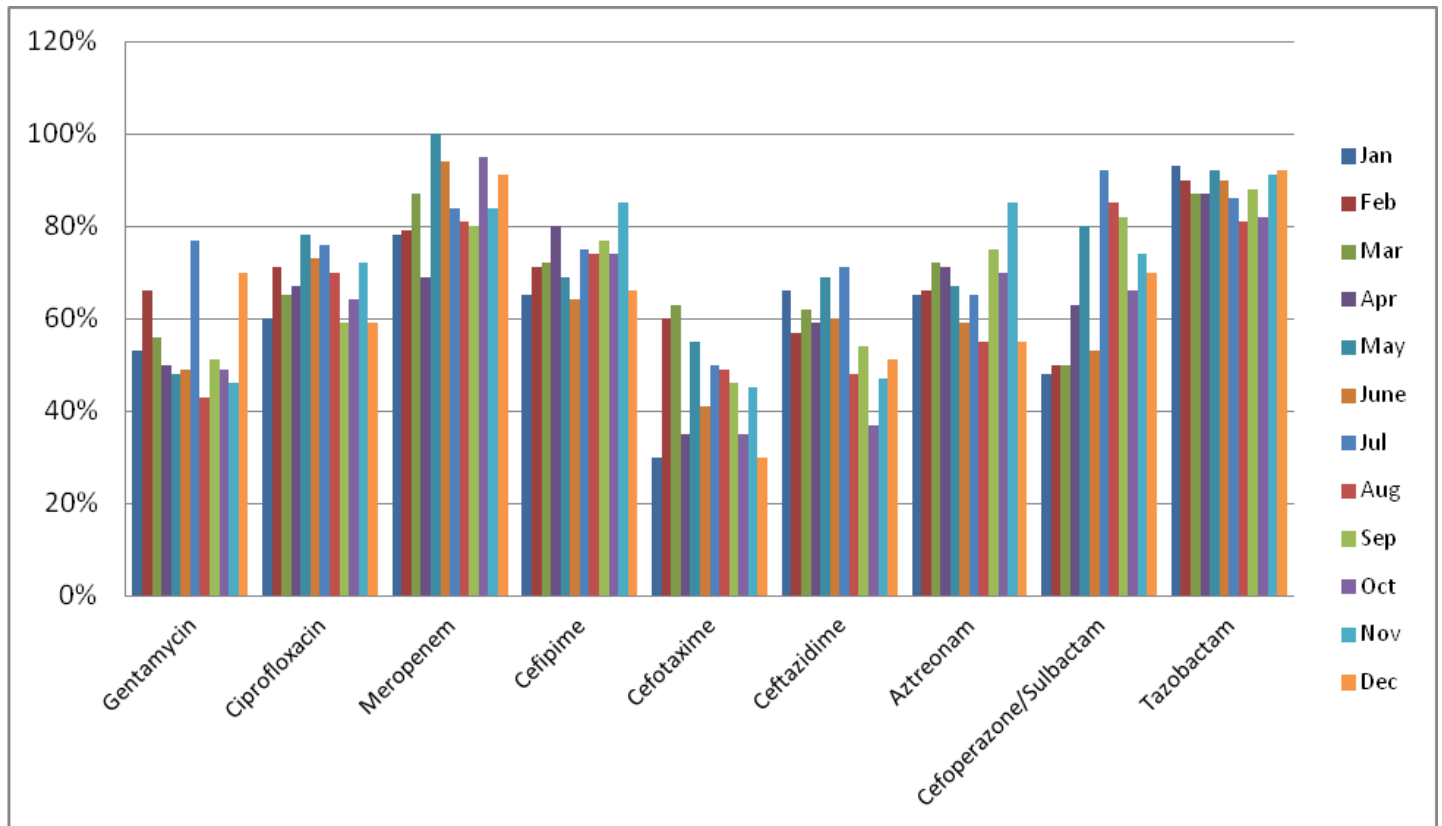


Figure-1 Sensitivity pattern of E.coli in a year 2013 to different antimicrobials

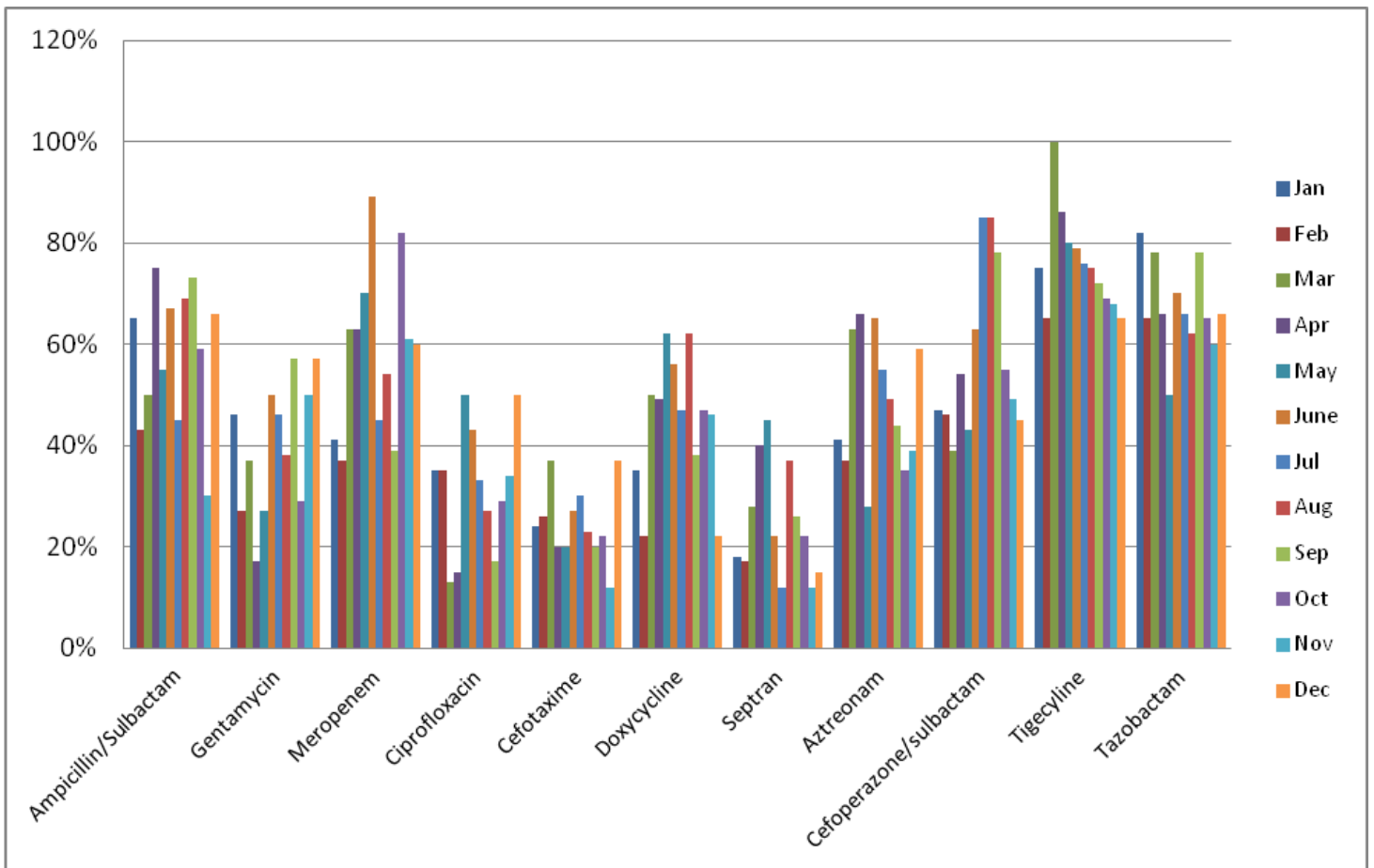




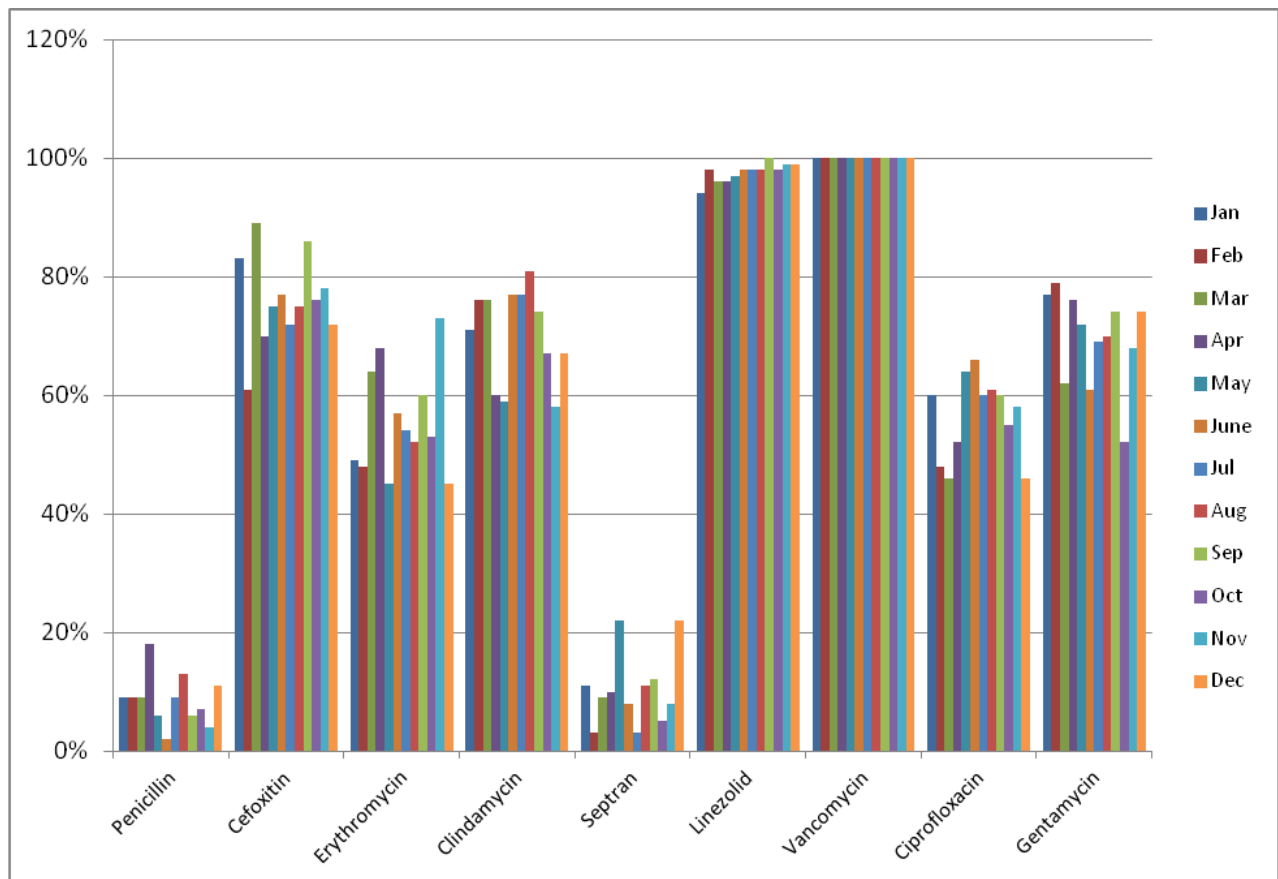
**Figure-2 Sensitivity pattern of Klebsiella species in a year 2013 to different antimicrobials**



**Figure-3 Sensitivity pattern of Pseudomonas species in a year 2013 to different antimicrobials**



**Figure-4 Sensitivity pattern of Acinetobacter species in a year 2013 to different antimicrobials**



**Figure-5 Sensitivity pattern of Staphylococcus species in a year 2013 to different antimicrobials**

## **DISCUSSION:-**

The misuse and overuse of antibiotics is widespread not only in developing countries but also in the developed world. The emergence and spread of antimicrobial resistance is a complex problem that is driven by numerous interconnected factors such as under or overuse of antimicrobial agents.

The constant increase of bacterial resistance to conventional antibiotics has indeed become a dramatic public health problem, critically requiring the discovery of innovative antibacterial drugs with new modes of action. There is an urgent need for new strategies to combat the spread of drug-resistant bacteria worldwide

## **CONCLUSIONS:-**

It is concluded that the alarmingly high pattern of bacterial resistance to antibiotics may reflect the extent of use of each antibiotic. Clinician must follow the local data. It is recommended that hospital antibiotic policies should be based on our local sensitivity pattern and which should be regularly reviewed.

# **OUTCOME OF 4.5 \ 5 MM PRECONTOURED LOCKING COMPRESSION PLATE ( LCP ) FIXATION IN PROXIMAL TIBIAL COMMUNUTED FRACTURES**

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## **BACKGROUND:-**

Tibial plateau fractures continue to be a challenge for orthopaedic surgeons. Treatment of these fractures have been plagued by complications. Recent improvement in the techniques of internal fixation and the development of locking compression plates have revolutionaries the treatment of such fractures.

## **OBJECTIVE:-**

To determine the outcome of 4.5/5 mm Precontured Locking Compression Plate fixation in intraarticular comminuted fractures of proximal tibia in terms of Infection ,

## **.MATERIALAND METHODS:-**

This was a descriptive study which was conducted at Department of Orthopedics, Lahore General Hospital, Lahore. Total 20 patients were included in the study, who presented with trauma & closed, intraarticular comminuted fracture of proximal tibia (Schatzker Type V & VI).

The anatomical reduction of articular surface was achieved by open/ close reduction under C-arm guidance. A Locking compression plate of appropriate size was inserted below the flap and extended it down to the tibial shaft far enough to stabilize the fracture securely along the lateral surface of the tibia.

Gentle active exercises of the knee and ankle was encouraged as soon as the intensity of pain decreased. Stitches were removed at 2 weeks post-operatively. Partial weight bearing was allowed at 12 weeks and full weight bearing at 16 weeks post-operatively only when some signs of radiological union was noted on X-rays.

## **RESULTS:-**

Mean age of the patients was  $36.8 \pm 9.11$  years. There was only 1 patient who suffered from superficial infection at 7th post-operative day. At 3rd month 18 patients started partial weight bearing while 2 patients were not able to bear weight. At 5th and 6th month follow up all patients had full weight bearing. Hammer et all Criteria of bony union Grade-1 (Homogenous bone structure) was observed in all 20 patients at 3rd month post operatively till 6 months follow up.

## **CONCLUSIONS:-**

Results of this study shows that the parameters of infection, range of motion, bony union, and weight bearing shows excellent results in patients treated with 4.5/5 mm Precontured Locking Compression Plate fixation in intraarticular comminuted fractures of proximal tibia.

## **KEY WORDS:**

Locking Compression Plate fixation, Intraarticular, Comminuted, Proximal Tibia, Locking compression plate

## **NASAL POLYPOSIS A RECURRENT PROBLEM.**

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### **ABSTRACT:-**

50 cases of nasal polyposis in adult patients were examined and treated at ENT Department LGH Lahore between 2012 to 2013. These cases included both males and females. Patients comprised of all age group with mean age of 30 years. Polyposis was treated by nasal polypectomy alone or polypectomy with intranasal ethmoidectomy. External ethmoidectomy was done in the presence of extensive or recurrent disease. Minimal disease recurrence was noted in cases treated with external ethmoidectomy

# TESTOSTERONE AND ADIPONECTIN LEVELS WITH AND WITHOUT CIRCUMFERENTIAL OBESITY IN MEN

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## **BACKGROUND:**

Circumferential obesity predominates in men and it dysregulates many endocrinological parameters of which two, serum testosterone and adiponectin, were studied in this project, both of which have a profound role in glucose and fat metabolisms

## **OBJECTIVE:-**

The objective of this cross sectional study was to determine the effect of circumferential obesity on the levels of testosterone in men along with its effect on serum adiponectin levels.

## **MATERIALAND METHODS:-**

Subjects with ages between 20 - 40 were selected via convenience sampling divided into obese and non obese subgroups with 20 individuals falling in each. Serum testosterone & adiponectin levels in men were measured via ELISA. The comparison between the levels of testosterone and adiponectin in men with or without obesity was made through application of t-test

## **RESULTS:-**

In the Group A testosterone and adiponectin levels of 20 young non obese subjects were  $631 \pm 179$  and  $21.1 \pm 12.6$  respectively. Group B consisted of 20 obese subjects and serum testosterone and adiponectin levels of the subjects in this group were found to be as  $448 \pm 146$  and  $32.9 \pm 12.6$  respectively.

## **CONCLUSIONS:-**

Men with circumferential obesity have lower testosterone and higher adiponectin concentrations as compared to their age, BMI & WHR matched non obese counterparts.

# **"To study clinical efficacy comparison of saccharomyces boullardi and yogurt fluid"**

Department of Pediatrics, Postgraduate Medical Institute, Ameer ud Din Medical College, Lahore General Hospital, Lahore, Pakistan

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## **Introduction:-**

Probiotics (Lactobacillus, Bifidobacteri, Saccharomyces Boulardii) are microorganisms with potential benefits as these enhance local immunity, inhibit pathogenic bacterial growth, promote digestion and provide resistance against infections.

## **OBJECTIVE:-**

To compare the clinical efficacy of saccharomyces boullardi and yogurt fluid on mean change in frequency of stool and hospital stay duration in management of acute diarrhea.

## **MATERIAL AND METHODS:-**

Study design : Randomized controlled trial

Study duration : 6 months from September-2012 to March-2013 at Pediatric Department LGH.

## **RESULTS:-**

There has been significant reduction in number of stools and duration of hospital stay in children who were given yeast probiotic Saccharomyces Boullardi during Acute Diarrohea .

## **CONCLUSIONS:-**

Sacchromyces Boullardi is more efficient than yogurt in Acute Diarrohea in healthy. So it can be prescribed for Acute Diarrohea management.

# PREVALENCE OF DEPRESSION IN PATIENTS WITH STROKE, IN TERTIARY CARE HOSPITAL

**Dr.M. Akram Shaikh, Dr .Aysha Rashid, Prof. Altaf Qadir Khan .**

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## **INTRODUCTION:-**

Stroke is a major public health problem. Traditionally, epidemiological stroke studies have focused on mortality and recurrence and not on the long-term morbidity. The prevalence of disability among stroke survivors is between 24-54%. The progressive decrease in stroke mortality observed in the last few decades, and the subsequent increase. Survivors, with residual impairments and disabilities have been accompanied by a growing interest in the factors that could interfere with functional outcome and quality of life. Depression is considered as the strongest predictor of poor quality of life among stroke survivors. (Kim P et al. 1999)

Post-stroke depression (PSD) is one of the common emotional disorders afflicting stroke survivors. Previous studies have reported prevalence rates that have ranged from 18% to 61%, depending upon patient selection and criteria used. Diagnosis of PSD is challenging therefore, it often remains unrecognized and/or undertreated. PSD is associated with cognitive impairment, increased mortality and risk of falls, increased disability, and worse rehabilitation outcome. (Abhishek S. et al. 2010)

## **OBJECTIVE:-**

The Aim of study is to determine the frequency of operationally defined depressive disorder (ICD-10) in chronic stroke patients. And evaluate the relationship of post stroke depression (PSD) with disability.

## **DESIGN:-**

Cross Sectional Study

## **SETTING:**

This study was carried out in The Departments of Medicine and physiotherapy, Lahore General Hospital, Lahore.

## **DURATION:**

One month

## **MATERIAL AND METHODS:-**

### **Inclusion criteria:**

Patients of both sexes, Age range between 16-60 years, Patients with stroke of more than three months post stroke duration, Patients who are Able to follow three step commands, Patients with having impaired balance and gait but with ability to walk with or without support.

### **Exclusion criteria:**

Patients with recurrent strokes, Patients with receptive aphasia, Patients with significant cognitive deficits affecting participation, Patients with past history of depression or any other Psychiatric disorder.



Hamilton Rating Scale Performa was used for data collection. The demographic information was recorded. Disability scale was used. All patients meeting the inclusion criteria were examined and investigated routinely to confirm diagnosis. The data was entered and is analyzed by using SPSS version 20. Means and standard deviation are being calculated for quantitative data age. Frequency percentage is being calculated for qualitative like gender, presence of depression.

Chi-square test is used to observe the association of PSD and disability. P-value <0.05 is considered as significant.

### **RESULTS:-**

Data was collected and results are being analyzed and final results will be presented in the conference

# FACTORS CAUSING DELAY IN THE ARRIVAL OF STROKE PATIENTS TO THE TERTIARY CARE HOSPITAL.

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## BACKGROUND:-

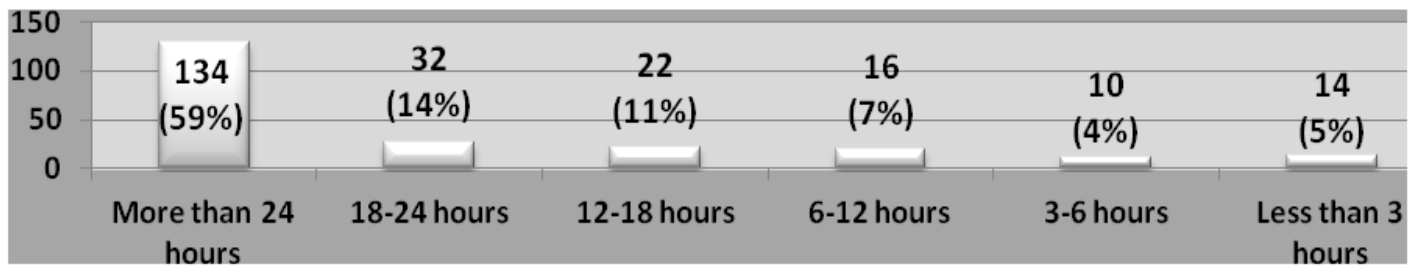
To determine the factors causing delay in the arrival of stroke patients to the tertiary care hospital.

## MATERIAL & METHODS:-

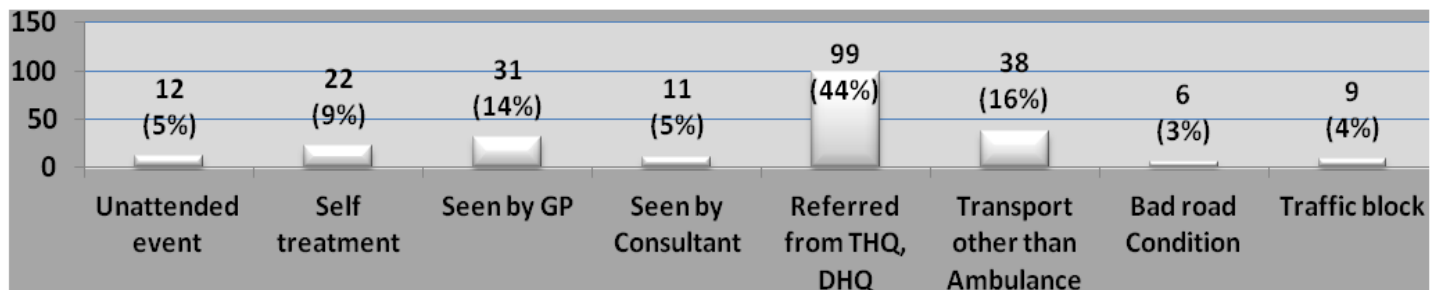
A prospective, single centered observational analysis of 228 patients who were admitted from Emergency Department of Lahore General Hospital, Lahore in the month of December 2013. All stroke patients or accompanying attendants answered a structured questionnaire. The data was analyzed to evaluate factors influencing Pre Hospital delay.

## RESULTS:-

The time taken by the patients to reach the hospital is shown by the following graph:-



The mean distance from the home to the tertiary hospital was 75 KM. The Pre Hospital time was with Mean delay of 1252 minutes (20.86 hours) and different contributors for that are shown by the following graph:-



## CONCLUSION:-

The unawareness of the patients and their families about the stroke symptoms, doing self treatment and offering unusual modes of transportation to stroke patients plus untrained primary and secondary facilities with delayed referral system are main contributors for the late arrival of these patients to the tertiary care hospitals. So, the factors which prolonged the Pre Hospital Time are mixed on the part of patient, family and the system is needed to be addressed and intervened properly.

# **PATTERN OF PROTON PUMP INHIBITOR (PPI) USE IN MEDICAL PRACTICE. JUSTIFIED?**

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## **BACKGROUND:**

Proton pump inhibitors (PPI) are one of the most commonly prescribed medications in our inpatient and outpatient settings. Their use is at times prolonged and inappropriate for poorly defined indications, leading to side effects and financial burden in the patient and our health care system

## **OBJECTIVE:-**

To determine the pattern of PPI use in Medical practice

## **MATERIAL AND METHODS:-**

Study type is non-interventional cross sectional.

The study is done in LGH/PGMI, Lahore where 1800 patients were included over the period of 30 weeks starting from 01-12-2012. Patients who fulfilled the inclusion criteria of the study were followed during the stay in the hospital and their discharge slip were critically analyzed without intervention in the management protocol of different primary consultants.

## **RESULTS:-**

Results analyzed on SPSS version 20.

Out of 1800 patients, 960 were male (53.3%), 840 female (46.7%). 1306 patients (72.6%) were found to be using PPI and 494 (27.4%) were not. Major indications for the use of PPI were GERD, NSAID, Stress Ulcer Prophylaxis, APD and Upper G.I Bleeding etc. I/V use of PPI were 57.7% and oral use was 42.3%. Most of the patients 1018 (77.9%) got PPI on discharge slip & 288 (22%) did not get it: in 440 (33.7%) patients duration of use was mentioned but 866 (66.3%) get no time limit of its use. Indications for use of PPI were not mentioned in 944 (72.3%) and it was mentioned in 362 (27.7%).

## **CONCLUSIONS:-**

PPI are overused without mentioning the indication in hospitalized patients most of them are usually discharged in oral medications resulting excessive drug consumption in out-patients.

## **KEYWORDS:**

Inappropriate use, PPI, inpatients, discharge slips

# 17 MONTHS FOLLOW UP TO EVALUATE SURVIVAL PATTERNS AND QUALITY OF LIFE IN PATIENTS WITH HEPATOCELLULAR CARCINOMA SINCE THE INITIAL DIAGNOSIS

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## OBJECTIVE:-

To evaluate the survival pattern and quality of life in patients with HCC after 17 months follow up.

## MATERIAL AND METHODS:-

It is a prospective cross-sectional ongoing study conducted in 140 patients diagnosed to have HCC and presenting at GI departments of Lahore General Hospital and Sheikh Zayed Hospital, Lahore from January 2012 to April 2012 and have been followed for 17 months to check survival, the outcome of any treatment if there has been, quality of life, terminal event in case of death, and the date of death.

## RESULTS:-

Median age at the time of diagnosis of HCC is 57 years (range: 30-60), 100 males (71%) and 40 females (29%). At seventeenth months follow up, 32 patients (22.8%) were alive, and 108 patients (77.1%) had died. Etiological cause of CLD and HCC was HCV in 67% (n.94), HBV in 14% (n.20) and 12% (n: 17) had a co-infection of HCV and HBV. 9(6.4%) patients had a negative serology for viruses. Out of the patients suffering from HCC secondary to HCV, at 17 months follow up 22(23.4%) are alive and 72(76.5%) have died and the terminal event in HCV related cancer patients at the time of death was upper GI bleed in 28, Ascites and its complications in 17, lower GI bleeding in 9 and hepatic encephalopathy in 18 patients. The HBV related cancer patients were 20 (14% of total), out of which 05 are alive and 15 had died. In these HBV related HCC patients, 05 patients died due to upper GI bleed, 04 due to PSE, 04 due to ascites and 02 due to lower GI bleeding. Seventy six percent (n.107) of patients received therapy, and 23.5% (n.33) received no specific therapy. Among patients who received therapy, surgical resection was the commonest procedure (n: 57 patients,53%) and 19(33.3%) are alive at 8 months of follow up, 38 patients (35.5%) received chemotherapy out of which only 05(13.1%) are alive, TACE has been done in 7(6.5%) out of which none are alive, RFA was done in 2 out of which one is alive, liver transplant in 3 patients(2.8%) and all are alive and stable at 17 months follow up. Rest of 35 patients (24.5%) received only supportive treatment and the death ratio in this group is 91% at 17 months. The average size of the tumor among deceased patients was >5cm and majority had multiple lesions or metastasis at the time of diagnosis n: 41. Statistical difference was found in survival of patients with single lesion or multiple lesions ( $p > 0.05$ ).

## CONCLUSIONS:-

It is concluded that majority of patients failed to survive beyond 18 months from diagnosis although survival depends on the intervention and baseline Child Pugh scoring. We shall present the survival analysis after reevaluation of the cohort at 24 months for the remaining patients.

# ANNUAL COMPARISON OF AUDITS OF COLONOSCOPY IN A TERTIARY CARE HOSPITAL

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## **OBJECTIVE:-**

To determine/ compare the detailed colonoscopy data including demographic characters, indications, findings, cecal intubation rates ,causes of incomplete intubation rate of 2012 with the audit of colonoscopy year 2011.

## **MATERIALAND METHODS:-**

A retrospective analysis of the record of the patients who underwent Colonoscopy in Endoscopy unit of Medical Unit 1 ,Lahore General Hospital from Jan2012 to Dec 2012 was done and the results were compared to the previous colonoscopy audit done in same unit in year 2011 .All the patients in the age range of 3 to 80 years, of both sexes ,who underwent colonoscopy for various indications were included. Data was analyzed using SPSS version 19 and relevant descriptive analysis including mean ,frequency and percentages were calculated and compared with the previous audit.

## **RESULTS:-**

Among the 310 patients who had their colonoscopy done for various indications ,mean age was 38 and Sex distribution included 184 males(61.3 %) and 116 Females(38.7),which were fairly comparable with last year's audit ,mean age being 37.8years with 62% males and 38% females .The most common indication in both the audits remained the same, i.e., bleeding per rectum in 42%(n=126)in current and 41.2% in the last one. Other indications worth mentioning were chronic diarrhea in 17.7%,chronic abdominal pain in 17.3% almost same as the previous audit. Indications like anemia reduced from 6.9% to 5.3% and weight loss/mass rose from 2.1% to 7.3% in the current audit. Endoscopic findings included neoplastic lesions in various segments of colon in 11.3% which was higher than previous 7.6%, Ulcerative colitis in 15.4% compared to 7.4% last year, worms in 3.3%reduced than previous 7.2 %. Other minor findings like angiodysplasias, active bleeders or mild ulcers remained the same. Colonic preparation rate was considerable higher with adequacy of 94%than previous 90%.Cecal intubation rates rose from previous 71% to current 80%. The most common reason for failure to intubate was due to termination of procedure due to patient intolerance of pain in 9.3% compared to 20% last year.

## **CONCLUSIONS:-**

Compared to audit of year 2011, the trend towards neoplastic lesions of colon occurring at a younger age group has risen and warrants change in screening policy for CRC in our region for earlier detection of these lesions.

# **SURGICAL AUDIT OF VITREO-RETINAL (VR) SURGERY IN OPHTHALMOLOGY UNIT-II. LGH. LHR**

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## **OBJECTIVE:-**

Surgical audit of vitreo-retinal (VR) surgeries done in ophthalmology unit - II LGH. LHR from April 2013 to January 2014.

## **DESIGN:**

Interventional case-series

## **MATERIAL AND METHODS:-**

All the patients admitted to ophthalmology unit-II LGH.LHR for vitreo-retinal surgery during April 2013 to January 2014 were included. Pre-op. evaluation included BCVA, IOP, pupillary light reflex and dilated fundus examination and similar examination was done on follow ups. Pre-op. & post-op. fundus picture were made. All the surgical procedures were done by single VR consultant. Any surgical complication was noted. All pre op. and follow up examinations and surgical procedure data was recorded in Microsoft Access Database.

## **RESULTS:-**

Total 59 eyes were operated during this period. Mean age of the patients was 41.14 yr. 61.02% (36) patients were male and 38.98% (23) females. 32.20% (19) eyes were having Rhegmatogenous R.D, 61.02% cases were of micro-vascular diseases (diabetic retinopathy, Eale's), 03.39% were operated for endophthalmitis after IOFB, 01.69% cases of macular hole and 01.69% had dropped lens. 84.75% patients presented with poor visual acuity while 15.25% had moderate vision before surgery. After surgery 33.9% patients had good vision, 35.59% improved their vision to moderate while in 25.42% cases vision remained poor and 05.08% cases lost follow up. In 93.22% cases anatomical success was achieved.

## **CONCLUSIONS:-**

Patients presented early (within a month) had better visual outcome as compared to late presenters in which although anatomical success was achieved in majority cases but visual improvement was not that much. Vitreo-retinal surgery outcome was good and matched with the international data.

# **IN VITRO ANTIFUNGAL ACTIVITY OF CYMBOPOGON CITRATUS AND ALOE VERA AGAINST PATHOGENS OF SUPERFICIAL MYCOSES**

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## **ABSTRACT:**

Dermatophytes and non-dermatophyte fungi are pathogens responsible for superficial mycosis. The antifungal drugs have many problems regarding toxicity, efficacy, economy, and resistance. The disc diffusion method is a qualitative test to provide information regarding antifungal properties. This study was planned to estimate the possibility of using "Cymbopogon citratus and Aloe vera as alternative antifungal agents against pathogens of superficial mycosis".

## **MATERIAL AND METHODS:-**

25 clinical isolates (5 of each species) of *Candida albicans*, *Tricophyton rubrum*, *Tricophyton mentagrophyte*, *Microsporum canis* and *Microsporum audouinii* were selected by convenience sampling to observe the in-vitro antifungal activity of *Cymbopogon citratus*, *Aloe vera*, and *terbinafine* in a randomized controlled study design.

Statistical analysis:

The data was analyzed by applying one way ANOVA and post hoc Tukey's tests to compare antifungal activities of three treatments against individual species. The p-value was calculated to note the significance of the results.

## **RESULTS:-**

The clear zone in mm around the discs of *Cymbopogon citratus*, *Aloe vera* and *terbinafine* in the petri dishes containing the growth of selected pathogens was assessed. The maximum antifungal activities of *Cymbopogon citratus* and *Aloe vera* were against *Tricophyton rubrum* (76%) and *Candida albicans* (66%), as compared to *terbinafine* (100%).

## **CONCLUSIONS:-**

Both *Cymbopogon citratus* and *Aloe vera* are the potential candidates to be utilized for the treatment of superficial mycosis alternative to *terbinafine*.

# **ANALYSIS OF HEAD INJURY PATIENTS AND REVIEW OF 100 CASES OF MOTOR BIKE ACCIDENTS**

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## **OBJECTIVE:-**

The authors show the prevalence of head injury with special emphasis on mechanism of head injury, different age groups affected & its impact on society.

## **MATERIAL AND METHODS:-**

Retrospective & prospective study conducted over a 6 months period. In this study, 3851 patients with head injury were assessed who presented in casualty outdoor department of our hospital. All age groups were included. The data from collected from patients medical record & severity of injury was assessed through Glasgow coma scale..

## **RESULTS:-**

Road traffic accidents remain the most common cause of head injury accounting for 70 % of cases and motor bike accidents were responsible for 72% head injury among all cases of road traffic accidents followed by car accidents & males are primarily affected.

## **CONCLUSIONS:-**

Motor bike accidents are the most common cause of head injury & strict implementation of traffic rules & media awareness may help to reduce incidence of head injuries

## **KEYWORDS:-**

Head injury; road traffic accidents; motor bike injuries.



# **MATERNAL AND PERINATAL OUTCOME OF RUPTURED UTERUS AMONG PATIENTS PRESENTED AT LGH IN OBSTETRIC AND GYNAECOLOGY DEPARTMENT UNIT 2 DURING THE YEAR 2013**

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## **OBJECTIVE:-**

To determine the predisposing factors, maternal and perinatal outcome of uterine rupture.

## **MATERIAL AND METHODS:-**

This descriptive study was conducted at the Department of Obstetrics and Gynaecology Unit II, Lahore General Hospital from January 2013 to December 2013 all cases of ruptured uterus presenting in emergency with this complication in Gynaecology Unit II of Lahore General Hospital, were included in the study. Patients having congenital uterine anomaly were excluded from the study. Demographic data, details of predisposing factors, type of rupture, management, maternal and perinatal outcome were taken into consideration for analysis. Data was analyzed using SPSS version 19.0.

## **RESULTS:-**

The total number of deliveries during the year 2013 was 5029. There were 13 cases of uterine rupture. Most of the patients (84%) presented between the ages 28-35. Majority of uterine rupture occurred in para 2-5. Common cause of uterine rupture was mismanaged labor in patients with previous cesareans by traditional birth attendants. Rupture in previous caesarean section scar was found in 92% and rupture in unscarred uterus was seen in 8% of the patients. Repair of uterus done in 10(77%) cases. Hysterectomy was performed in 03(23%) patients. There were two maternal mortalities (12%) and 13 perinatal deaths (100%).

## **CONCLUSIONS:-**

This study showed that mismanaged labor in patients with history of previous cesarean sections is the main cause of uterine rupture. Proper antenatal care and updated training programmes for health care providers is the need of time to prevent this catastrophic but avoidable complication.

## **KEYWORDS**

Uterus, uterine rupture, multiparity, caesarean section.

# **A CASE OF RETROBULBAR HEMORRHAGE**

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## **OBJECTIVE:-**

To report the case of a 4 months old girl, presenting with massive sudden proptosis of left eye. The Workup revealed a rare cause, that is, spontaneous retrobulbar hemorrhage, due to vitamin K deficiency.

## **MATERIALAND METHODS:-**

A review of the clinical findings, investigations, radiological studies and, management of the patient will be summarized.

## **RESULTS:-**

A 4 -months-old child presented with rapid onset of severe proptosis. Pediatric evaluation suggested hemorrhagic disease of the newborn and vitamin K deficiency was diagnosed. After appropriate medical management, systemic features resolved, but proptosis was persistent and, needed surgical intervention to prevent visual deterioration.

## **CONCLUSIONS:-**

Spontaneous intraorbital hematoma from vitamin K deficiency is rare but should be considered in the differential diagnosis of rapidly progressive proptosis in an infant.Awareness about vitamin K deficiency and, possible prophylaxis should be increased.