

## Abstracts From the Journals of the East

Pages with reference to book, From 51 To 52

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### **The Role of Urinary Cytology in The Early Diagnosis of Bladder Cancer. Tasneem, R.A., Mannan, A., Akhtar, F.K. Specialist, Pak. J. Med. Sci., 1994; 10:303-306.**

A prospective study was conducted on 50 patients with urinary bladder carcinoma to evaluate the role of urinary cytology in the early diagnosis of this malignancy. The patients were selected from the department of urology, K.E Medical College and Mayo Hospital, Lahore. Cytology was performed on the bladder washings obtained by inserting a Foley's catheter and washing out with normal saline. Cystoscopy was then carried out and a biopsy taken for histopathology. The irrigation fluid was fixed in alcohol and the cytology results were classified as positive suspicious, atypical, dysplastic or negative. The bladder tumour was visualized through the cystoscope in 40 cases. Of these 35 had a positive and 5 negative cytology. In the 10 patients where the tumour could not be seen. 4 cases had a positive result and 6 were negative. The results of the study suggested that urine cytology was as accurate as cystoscopy in diagnosing bladder carcinoma. Early precancerous lesions which may not be visible cystoscopically. can be diagnosed early by cytology. False negative results can be reduced by skillful collection and preparation technique and an accurate clinical interpretation of the cytological diagnosis. As urinary cytology is a simple and practical procedure, it should be utilized as a screening method especially in high risk individuals as dye workers. It is also a good examination method for following up patients after resection of bladder tumours and in evaluating cases with symptomatic genitourinary disease.

### **Nutritional Status of Children Under Five Years of Age in A Slum Community in Lahore. Ahmad, M. Pak. J. Med. Res., 1993;32:82-84.**

Malnutrition in children below years of age has been estimated by the World Health Organisation to be prevalent in 100 million children belonging to the developing countries. These children face the risk of an adverse effect on their intellectual development and social behaviour. A number of surveys conducted in Pakistan, to determine the nutritional status of children below 5 years, gave alarming figures of more than 60% to be suffering from malnutrition and 25% of these fail to survive. The presented study was performed in Liaqatabad, a slum area of Lahore where low income families live in an unhygienic surrounding. The sample size comprised of 280 residential units with a population of 2150 subjects. A structured questionnaire was filled out. Physical examination was performed and the socioeconomic history noted. Anthropometric measurements were taken and the weight forage was analysed according to the Gomez classification. The results revealed only 28% of children under five to be normal, of whom 53% were below one year of age. Grade I malnutrition was encountered in 39% of the children, of whom 48% were in the age group of 48-60 weeks. Grade H malnutrition was diagnosed in 25% children with those above 2 years age being more affected. Only 8% suffered from Grade III malnutrition. It was evident from the findings that as age advances, more children suffer from malnutrition. Also the size of the family was a great influencing factor on the degree of the malnutrition. With a larger family, the grade of malnutrition is higher. A high infant mortality prevails in Pakistan and the major cause of this is poor nutrition. These children are also exposed to numerous risk factors in the underprivileged community such as illiteracy, lack of clean water and proper sanitation. An effective health education programme is necessary to create awareness in the mothers about the health aspects of children and the related subjects of breast feeding, weaning food, oral rehydration therapy and proper nutrition of pre-school children.

### **Duplication Cyst of Small Intestine. Shakya, K.N. J. Nep. Med. Assoc., 1993;31:262-264.**

A case of a duplication cyst of the ileum in a 4.5 weeks baby girl is presented. The infant was brought

into the Kanti Children's Hospital, Kathmandu, Nepal with a history of gradual abdominal distension since 15 days and vomiting 4 to 5 times since the previous day. She was given symptomatic treatment but returned 4 days later with aggravated symptoms. The child had an uneventful birth with a weight of 2.3 kg. She had passed meconium within 6 to 8 hours and had been well for 16 days. The abdominal symptoms began gradually and there was no relief obtained with conservative measures. The baby appeared normal except distended abdomen and audible loud bowel sounds. The upper G.I. barium studies showed a cystic mass in the terminal ileum. The routine blood and urine analysis were all normal. Abdominal explorative surgery was performed which showed a normal stomach, duodenum and jejunum. The ileum was found stretched across a cystic mass. A small part of the gut on either side along with the mass were mobilized and resected and the bowel anatomy restored by anastomosis. The post-operative recovery was uneventful. The histopathology examination of the mass reported a loculated mucoid intestinal duplication cyst of 5.1 cms diameter.

Duplication cysts of the alimentary tract are congenital abnormalities and are more commonly found in the small intestines. They are considered to be the result of exceptional overgrowth of intestinal diverticula in the embryonic life. Depending on the site of the duplication, these cysts may cause torsion, volvulus or intussusception. Barium studies are helpful in making a diagnosis. Resection along with segments of intestine on either side is the treatment of choice.

**Spectrum of Thyroid Disorders Observed at the Institute of Nuclear Medicine, IPGMR, Dhaka. Siddiq, S.X., Ahmed, T., Haque, R., Yasmeen, S., Ahmed, F., Husain, Mushtaq. Bangladesh Med. J., 1992;21:71-74.**

Evaluation studies of the thyroid gland were conducted on 4388 patients, referred to the Institute of Nuclear Medicine, Dhaka, during the period July, 1991 to June, 1992. A detailed history was recorded, a physical examination performed and thyroid function tests done by radioimmunoassay, scans and ultrasonography. The final diagnosis was made by correlating the clinical findings with the laboratory data. Of the total patients studied 3376 (77%) were diagnosed to have thyroid disorders, Patients with diffuse goitre were in the highest number 1320 (39%) followed by single nodular goitre 1176 (34.8%). Hyperthyroidism was seen in 172 (5.09%) cases and 196 (5.81%) were hypothyroid. Multi-nodular goitre was encountered in 468 (13.86%) patients. Thyroiditis was found in 44 (1.3%) individuals. A large majority of the patients, 67% belonged to the 15-45 years age groups, 21% were above the age of 45 years and 12% below 15 years. The female to male ratio was 2.7:1. Environmental iodine deficiency thyroid disorder is still a major public health problem especially in the developing countries. Dietary, chemical or environmental goitrogens interfere with the biosynthesis of the thyroid hormone. Genetic factors, protein calorie malnutrition are also important causes. A high incidence of diffuse goitre in the Bangladesh patients points to the prevalence of Iodine deficiency in the country. The figures resemble those from India as also in the statistics of the solitary nodule of the thyroid and the sex ratio. The age pattern again is similar to other reports. A countrywide survey for determining the spectrum of thyroid disorders is necessary.