

بسم الله الرحمن الرحيم



-C-02-50-2-





شبكة المعلومات الجامعية التوثيق الالكتروني والميكرونيلم





جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات



يجب أن

تحفظ هذه الأقراص المدمجة يعيدا عن الغيار







بالرسالة صفحات لم ترد بالأصل

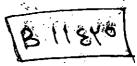








Correlation Between Systemic And Portal
Haemodynamic Changes And Serum Levels
Of Nitric Oxide End Products In Cirrhotic
Patients Before And After Endoscopic
Variceal Obliteration By Ligation



Thesis

submitted to the faculty of Medicine, Alexandria University
In partial fulfillment of the requirements of the degree of

Master of Internal Medicine

Ву

Ehab Mostafa El-Sayed Hassan

MBBch (Alex.)
Resident at Hepatobiliary Unit,
Department of Internal Medicine,

Faculty of Medicine, Alexandria University

SUPERVISORS

(2005)

Prof. Dr. Ahmed Mohamed El-Gohary,

Professor Internal Medicine,

Hepatobiliary Unit, Department of Internal Medicine,
Faculty of Medicine, Alexandria University

Prof. Dr. Mohamed Yousry Taher,

Professor Internal Medicine & Head of Hepatobiliary Unit,

Hepatobiliary Unit, Department of Internal Medicine,

Faculty of Medicine, Alexandria University

Dr. Mohamed Ayman Abdel-Monem

Assistant Professor of Cardiology,

Cardiology Unit, Department of Internal Medicine, Faculty of Medicine, Alexandria University

Co-Worker

2-12-8

Dr. Amr Aly Abdel-Moety

Lecturer of Internal Medicine,

Hepatobiliary Unit, Department of Internal Medicine,

Faculty of Medicine, Alexandria University

ACKNOWLEDGEMENT

First, thanks to **Allah** for all that I gain during my steps to accomplish this work and all coming gifts from **Allah**

Words cannot express the feelings of gratitude and indebtedness I have for *Prof. Or. Ahmed Mohamed El-Gohary*, Professor of Internal Medicine, Hepatobiliary Unit, Department of Internal Medicine, University of Alexandria, to whom I will remain grateful for his kind help and valuable advises. I am deeply obligated for his kind supervision and encouragement during the progress of this work. Actually I find no words of appreciation for his tremendous effort.

I wish to express my deepest sincere gratitude to Prof. Or. Mohamed Yousry Taher, Professor of Internal Medicine and Head of Hepatobiliary Unit, Department of Internal Medicine, Faculty of Medicine, University of Alexandria, for his kind help, valuable supervision, fatherly attitude, great support and encouragement and for the generous and numerous facilities he had offered me all through and after this work. His guidance has lightened to me so many aspects of the subject and removal many technical difficulties and for a his great experience in the field of GIT endoscopy where he is the pioneer.

It is a pleasure to express my thanks to *Or. Mohamed Ayman Abdel-Monem*, Assistant Professor of Cardiology, Cardiovascular Unit, Department of Internal Medicine, Faculty of Medicine, University of Alexandria, for his generous help in processing the Echo-cardiographic and Doppler Studies done from the patients.

I'd like to express my great gratitude to *Dr. Amr Aly Abdel-Moety*, Lecturer of Internal Medicine, Hepatobiliary Unit, Department of Internal Medicine, Faculty of Medicine, University of Alexandria for his help in the practice in this work.

Also, I'd like to express my great gratitude to *Dr. Amal Kataat*, Assistant Professor of Medical Biochemistry, Faculty of Medicine, University of Alexandria for her useful suggestion, generous help in the biochemical work done for the study.

I wish to thank all members of Hepatobiliary Unit, Department of Internal Medicine, Faculty of Medicine, University of Alexandria, who helped me in one way or another to perform this work and their encouragement and interest in the subject.

Lastly but not least my thanks to my family for their great support, comprehension and patience and to the patients who through their suffering supplied me with valuable information.

To:

My Parents,

My Wife,

My Children, (Moustafa & Norhan)

LIST OF ABBREVIATIONS

ALT: : Alanine aminotransferase

AST : Aspartate aminotransferase

BFV : Blood flow volume

BP : Blood pressure

CI : Cardiac index

cNOS : Constitutive nitric oxide synthase

Cong. Index: Congestion index

COP : Cardiac output

CRS : Cherry red spots

CSA : Cross sectional area

DR : Diffuse reddness

EIS : Endoscopic injection sclerotherapy

EVL : Endoscopic variceal ligation

BF : Blood flow

GV : Gastric varices

Hb%: Haemoglobin concentration

HBsAg : Hepatitis B surface antigen

HCS : Haematocystic spots

HCV: Hepatitis C virus

HR : Heart rate

iNOS : Inducible synthase enzyme

LVEDD : Left ventricular end diastolic dimension

LVEDV : Left ventricular end diastolic volume

LVESD : Left ventricular end systolic dimension

LVESV : Left ventricular end systolic volume

MBP : Mean arterial blood pressure

NO : Nitric oxide

OV : Oesophageal varices

PHG: Portal hypertensive gastropathy

PPF : Peri-portal fibrosis

R : Vascular resistance

RCS : Red colour sign

RWM : Red wale marking

SV : Stroke volume

SVRI : Systemic vascular resistance index

Vmean : Mean blood flow velocity

TABLE OF CONTENT

	Page No.
Introduction	1
Aim of the work	61
Material	62
Methods	64
Results	84
Discussion	149
Summary	167
Conclusion	172
Recommendation	173
References	174
Protocol	

Arabic Summary

Chapter I

INTRODUCTION

INTRODUCTION

The portal venous system is defined as one beginning and ending with capillaries. The name portal venous system is applied to the venous system that begins in the capillaries of the intestine and terminates at the hepatic sinusoids. This vascular system provides for an intimate relationship among the intestine, pancreas and liver.⁽¹⁾

Anatomy of the Portal Venous System

The portal venous system includes all the veins that collect blood from the abdominal part of alimentary tract, spleen, pancreas, and gall bladder. The portal vein begins at the level of the second lumbar vertebra, just posterior to the head of the pancreas at the junction of the splenic and superior mesenteric veins.

It is about 6 to 8 cm long, 1.2 cm in diameter and contains no valves. The splenic veins originate at the hilum and join near the tail of the pancreas with the short gastric vessels to form the main splenic vein.

Collateral Circulation

When the portal pressure rises above 10 mmHg, a collateral circulation begins to develop between the high pressure portal system and negihboring low pressure veins, permitting diversion of portal blood into systemic veins.