



شبكة المعلومات الجامعية

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



شبكة المعلومات الجامعية  
@ ASUNET



# شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم





شبكة المعلومات الجامعية

# جامعة عين شمس

التوثيق الالكتروني والميكروفيلم

## قسم

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



## يجب أن

تحفظ هذه الأفلام بعيدا عن الغبار

في درجة حرارة من ١٥-٢٥ مئوية ورطوبة نسبية من ٢٠-٤٠%

To be Kept away from Dust in Dry Cool place of  
15-25- c and relative humidity 20-40%

# بعض الوثائق الأصلية تالفة

# بالرسالة صفحات لم ترد بالاصل



# MANAGEMENT OF STEAL PHENOMENA DUE TO ARTERIOVENOUS HEMODIALYSIS FISTULA

*Thesis submitted for partial fulfillment of  
Master Degree in General Surgery*

By

**Amr Issa Hafez**

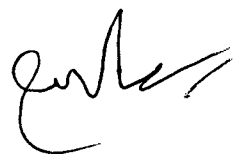
Diploma in General Surgery (D.S. Alex)

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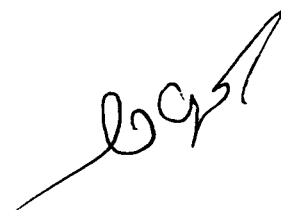
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2005**

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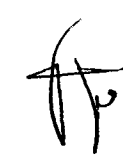
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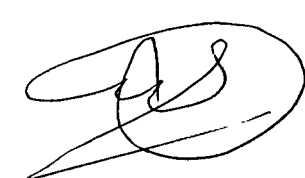
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*To My Family*

# CONTENTS

Chapter	Page
I. REVIEW OF LITERATURE . . . . .	1
II. PATIENTS AND METHODS . . . . .	92
III. RESULTS. . . . .	96
IV. DISCUSSION. . . . .	137
V. CONCLUSION. . . . .	142
VI. SUMMARY . . . . .	143
VII. REFERENCES . . . . .	146
PROTOCOL	
ARABIC SUMMARY	





# List of Figures

	Page
1. The superficial veins of the upper extremity . . . . .	12
2. The axillary artery and its branches . . . . .	15
3. The brachial artery. . . . .	16
4. The radial and ulnar arteries . . . . .	18
5. Flow patterns in arteriovenous fistulae. . . . .	43
6. 'Steal phenomenon' in the radial artery at the anastomotic region	85
7. Steps of venous banding. . . . .	127
8. Pre- and postoperative photos of case 1 . . . . .	128
9. Preoperative Duplex of case 1 . . . . .	129
10. Postoperative Duplex of case 1. . . . .	130
11. Preoperative and postoperative figures of case 2 . . . . .	131
12. Preoperative and postoperative Duplex of case 2. . . . .	132
13. Preoperative figures of case 3 . . . . .	133
14. Preoperative and postoperative Duplex of case 3. . . . .	134
15. Preoperative and postoperative figures of case 4 . . . . .	135
16. Preoperative and postoperative Duplex of case 4. . . . .	136



# REVIEW OF LITERATURE



# REVIEW OF LITERATURE

## Renal Failure

Renal failure occurs when the functioning renal mass is reduced sufficiently that the kidney is no longer able to carry out excretory function. (*Wyngaarden et al., 1992*).

Acute renal failure is due to sudden deterioration of renal function with subsequent retention of nitrogenous wastes normally excreted by the kidneys. It can be caused by prerenal causes as hypovolaemia or heart failure, renal causes as acute glomerulonephritis, interstitial nephritis or acute vasculitis. Or it may be caused by post renal causes as bladder neck obstruction or ureteral obstruction. (*Geis and Iwatsuki, 1977*).

Acute renal failure is manifested by oliguria, anorexia, nausea, vomiting, hypertension, arrhythmia, lethargy, confusion and sometimes fits. Also gastrointestinal bleeding may occur. Laboratory investigations revealed massive proteinuria, elevation of blood urea, serum creatinine and serum potassium. The acute renal failure is usually reversible. (*Geis and Iwatsuki, 1977*).

Chronic renal failure is a permanent impairment of renal function characterized by progressive irreversible decline in glomerular filtration rate. (*Wyngaarden et al., 1992*).



Chronic renal failure can be defined as a syndrome which develops as a sequence of a significant reduction in renal function; the excretory, metabolic, endocrine and homeostatic functions of the kidney are lost, with consequent anemia, bone disease, metabolic acidosis, neuropathy and frequently there is hypertension, great susceptibility to infection and generalized deterioration of renal organ function. (*Fikry and Hozyen, 1985*).

Chronic renal failure is caused by conditions which lead to gradual deterioration of nephrons (*Fikry and Hozyen, 1985*) as :

1. Congenital renal diseases for example; polycystic kidney, hypoplasia and congenital nephritis.
2. Infections as; chronic pyelonephritis and renal T.B.
3. Glomerulonephritis which may be proliferative, membranous, membrano-proliferative or focal glomerulonephritis.
4. Interstitial nephritis as; radiation nephritis, analgesic nephropathy and drug hypersensitivity.
5. Systemic diseases affecting the kidney as; diabetes mellitus, amyloidosis, systemic lupus erythematosus, polyarteritis nodosa and multiple myeloma.
6. Obstructive renal disease as; enlarged prostate, renal stones, ureteric reflux, retroperitoneal fibrosis and urethral stricture.

Manifestations of chronic renal failure include; anorexia, nausea, vomiting, hypertension, pulmonary oedema, congestive heart failure, pericarditis, bone decalcification (osteodystrophy), anaemia, weakness, lethargy, confusion, fits or coma. (*Geis and Iwatsuki, 1977*).