



شبكة المعلومات الجامعية

بسم الله الرحمن الرحيم



شبكة المعلومات الجامعية
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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

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بالرسالة صفحات لم ترد بالاصل

٢٥٩١

اجتماع لجنة الحكم على الرسالة المقدمة من

الطبيب / محمد حسني عبد الله ابراهيم

توطئة للحصول على درجة الماجستير / الدكتوراة

في طب الحالات الحرجة

تحت عنوان : باللغة الانجليزية : the proaggregating & potentiating effect of unfractionated and low molecular weight heparin on platelets of critically ill patients

: باللغة العربية : تأثير زيادة التجمع وزيادة القابلية للرياسية
التمحيزي والرياسية في الدم الحرجة الحادة على الصفائح الدموية
في مرضى الحالات الحرجة

بناءً على موافقة الجامعة بتاريخ ١٨ / ٨ / ٢٠٠٧ تم تشكيل لجنة الفحص والمناقشة للرسالة من

الدكتوراة أعلاه على النحو التالي :

- (١) د. خالد شامس عن المشرفين
- (٢) د. محمد الدرين عن المتحن الداخلي
- (٣) د. محمد عتيق عن المتحن الخارجي

بعد فحص الرسالة بواسطة كل عضو منفردا وكتابة تقارير منفردة لكل منهم لمناقشة اللجنة مجتمعة في يوم الاثنين ١٨ / ٨ / ٢٠٠٧ انقسمت اللجنة الى قسمين : القسم الأول الذي ناقش الرسالة بكلية الطب - جامعة القاهرة وذلك لمناقشة الطالب في جلسة علنية في موضوع الرسالة والنتائج التي توصل اليها وكذلك الاسس العلمية التي قام عليها البحث .

قرار اللجنة : بعد انشغال اللجنة الطبية بمسائل جوهرية في الرسالة حيث انشغل الاعضاء بحسب اختصاصاتهم في الموضوعات الجارية في العمل والطوارئ في الموضوعات العلمية العرفية والرسائل التي تقدمت بها للجنة في وقت سابق من هذا العمل فقد قررت اللجنة قبول الرسالة ونشرها في المجلة العلمية للطب في جامعة القاهرة .

توقيعات أعضاء اللجنة :-

المتحن الخارجي

المتحن الداخلي

المشرف المتحن

(عصام)

The proaggregating and potentiating effect of unfractionated and low molecular weight heparin on platelets of the critically ill patients

Abstract:-

Heparin has been widely used in the prevention and treatment of various thromboembolic disorders for many years, and is considered to be a relatively safe drug. However, a small but significant number of patients receiving heparin develop thrombocytopenia and are at risk for associated complications. Recent studies suggest that the frequency of heparin-induced thrombocytopenia (HIT) is approximately three per cent with unfractionated heparin.

The patients were randomized into one of the following two groups: -

Group I: *Forty patients 23 males and 17 females who received L.W.M.H. with mean age of 51 ± 15 years.*

Group II: *Forty patients 22 males and 18 females who received U.F.H. with mean age of 51.9 ± 12.9 years.*

All patients receiving heparin were eligible to be included in the study irrespective of the disease for which heparin is prescribed.

Our study has shown the following findings:-

- **In group I:** Out of 40 patient on L.M.W.H. 3-patients (7.5%) developed thrombocytopenia mainly on the 1st and 3rd day however on the 5th and 7th days, it resumed back its level with no significant change from base line.
- **In group II:** Out of 40 patients on U.F.H 11-patients (27.5%) developed thrombocytopenia starting from the 3rd day with the maximum drop of platelets count in the 5th.
- Comparison between THE effect of L.M.W.H. (Group I) versus U.F.H. (Group II) on percent change of platelets count.

There was no significant difference percent change of platelets count from the baseline level in both groups under deferent types of heparin treatment in the 1st and 3rd days however on 5th and 7th days there was significant % reduction changes in platelets count in group II (U.F.H) compared to group I (L.M.W.H).

Heparin-PF4 IgG Test: -**Group I:**

Out of 40 patients that received L.M.W.H. only 4 of them developed heparin-PF4IgG antibodies in their serum out of those 4 patients only one (2.5%) developed thrombocytopenia however 3 of them exhibited a platelets count that was within normal level

Group II:

Out of 40 patients that received U.F.H. only 4 of them developed heparin-PF4IgG antibodies in their serum out of these 4 patients only three (7.5%) developed thrombocytopenia. However platelets count in one of them was within normal level.

So, sensitivity, specificity and diagnostic accuracy of heparin-PF4 IgG test in H.I.T is:

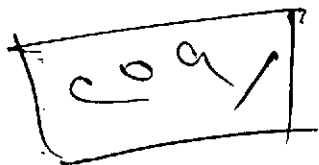
Sensitivity = 28.5 %, specificity = 93.9% and diagnostic accuracy = 82.5%,
So heparin-PF4 IgG test is a highly specific test to detect patients with H.I.T.
It is a good negative test but it is a weak positive test.

Conclusion:-

1. The incidence of H.I.T. with L.M.W.H. is lower (2.5%) than that with U.F.H. (7.5%).
2. Heparin PF4 IgG test is a good -ve test but a weak +ve test for detection of H.I.T.
3. H.I.T. did not cause any thrombotic or bleeding complications.

***The proaggregating and potentiating effect of
unfractionated and low molecular weight heparin on
platelets of the critically ill patients***

***Submitted for partial fulfillment in master degree in critical
care medicine***



Mohamad Hossny Abdalla

M.B., B.Ch.

Supervised By

Prof. Dr. Hassan Khaled Nagi

Assistant Professor of Critical Care Medicine

Cairo University

Dr. Ahmed Hussein El-Sherif

Lecturer of Critical Care Medicine

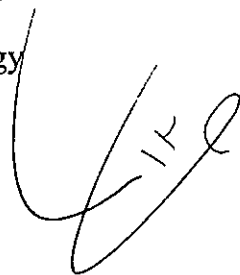
Cairo University

Dr. Amal Fouad Rezk

Consultant of Clinical Pathology

Of Critical Care Medicine

Cairo University



Faculty of Medicine

Cairo University

2002

Acknowledgment

I wish to express my deep thanks to *Prof. Dr. Hossam Mowafy*, Professor and Head of Critical Care Medicine Department, Cairo University for his encouragement in performing of this work.

My sincere gratitude to *Prof. Dr. Hassan Khaled Nagi*, Assistant Professor of Critical Care Medicine, Cairo University for his ethical model and enthusiastic supervising of this work.

My profound thanks for *Dr. Ahmed EL-Sherif*, Lecturer of Critical Care Medicine, Cairo University for his great patience and continuous help in achievement of this essay.

My deep thanks to *Dr. Amal Rezk*, Consultant of Clinical Pathology of Critical Care Medicine, Cairo University for her useful advises and revision of this work.

Finally, I would like to extend my thanks to all staff and my colleagues at Critical Care Unit, Kasr El-Ainni for their help during accomplishment of this work.

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