

Assessment of Vocal fold Changes and their Correlation with Pulmonary Functions in Asthmatic Children

Thesis

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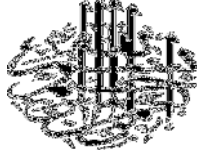
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قَالُوا سُبْحَانَكَ لَا عِلْمَ لَنَا
إِلَّا مَا عَلَّمْتَنَا إِنَّكَ أَنْتَ
الْعَلِيمُ الْحَكِيمُ

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List of Abbreviations

A Jitt	Absolut Jitter
ABAS	Allergic Bronchopulmonary Aspergillosis.
B.D	Bronchodilator
BMI	Body Mass Index
B2-receptor	Beta 2- receptor
COPD	Chronic Obstructive Pulmonary Disease
COX	inducible Cyclo-Oxygenase
ECM	Extra Cellular Matrix
EDTA	Ethylene-Diamine-Tetra-Acetic acid
EERD	Extra Esophageal Reflux Disease
ETS	Environmental Tobacco Smoke
FDA	Food, Drug Associations
FEF25-75%	Forced Expiratory Flow rate over 25-75% part of FVC
FEFR	Forced Expiratory Flow Rate
FEV1	Forced Expiratory Volume in first second
Fo	The Average Fundamental frequency
FVC	Forced Vital Capacity
GCRβ	Glucocorticoid Receptor Beta
GERD	Gastro-Esophageal Reflux Disease
GINA	Global Initiative for Asthma
GM-CSF	Granulocyte-Macrophage Colony Stimulating Factor
GR	Glucocorticoid Receptors
HA	Hyaluronic Acid
HDAC2	Histone De ACetylase-2
HDM	House Dust Mites
ICAM	Inter Cellular Adhesion Molecule

List of Abbreviations contu.

ICS	Inhaled Corticosteroid
IgA	Immunoglobulin A
IgE	Immunoglobulin E
IGL	Immune Globulin
IL	Interleukin
IL6R	Interleukin-6 Receptor
iNkT	invariant Natural killer T cells
iNOS	Inducible Nitric Oxide Synthase
iPLA2	inducible Phospho-Lipase A2
IQR	Inter Quartile Range
IU	International Unit
IκB-α	inhibitor of NF- κ B
Jitt %	Jitter Precent
LABA	Long Acting B2 Agonist
LES	Lower Esophageal Sphincter
LLN	Lower Limit of Normal
LPR	Laryngopharyngeal Reflux
LTRA	Leukotriene Receptor Antagonists
MDC	Macrophage-Derived chemokines
MDVP	Multi Dimensional Voice Program
MFo	Mean Fundamental Frequency
MKP-1	Mitogen-activated protein kinase Phosphatase-1
MMEF	Mean Mid Expiratory Flow
mRNA	Messenger RNA
N	Normal
NFκB	Nuclear Factor Kappa B
NHLBI	National Heart, Lung, and Blood Institute
NHR	Noise to Harmonic Ratio

List of Abbreviations contu.

NK	Natural Killer cells
NK1	Neurokinin
NO	Nitric Oxide
O3	Ozone
OSA	Obstructive Sleep Apnea
PBMCs	Polymorph Mononuclear Cells
Pco2	Pressure of carbon dioxide
PEF	Peak Expiratory Flow
PEFR	Peak Expiratory Flow Rate
PFTs	Pulmonary Function Tests
PMDI	Pressurised Meter-Dose Inhaler
RSV	Respiratory Syncytial Viruse
SABA	Short Actining B2 Agonist
SD	Standered Deviation
Sh (dB)	Shimmer decibel
Shim%	Shimmer Precent
SO2	Sulpher dioxide
TARC	Thymus and Activation Regulated Chemokines
Th1	T- Helper 1 Lymphocytes
Th2	T- Helper 2 Lymphocytes
TIF	Transoral Incisionless Fundoplication
TIM1	T-cell Immunoglobulin Mucin 1
TNF-α	Tumor Necrosis Factor-alpha
UK	United Kingdom
VC	Vital Capacity
VFD	Vocal Fold Dysfunction
VF	Vocal Fold
WHO	World Health Organization

INTRODUCTION

Asthma is a chronic inflammatory disease characterized by recurrent attacks of breathlessness and wheezing, which vary in severity and frequency from person to person (*WHO, 2010*). Cellular inflammation of airway with eosinophils and neutrophils is a characteristic feature of asthma and is considered relevant to the pathogenesis of the disease (*Fahy, 2009*).

Asthma is a serious global health problem. People of all ages in countries throughout the world are affected by this chronic airway disorder that, when uncontrolled, can place severe limits on daily life and is sometimes fatal. The prevalence of asthma is increasing in most countries, especially among children. Asthma is a significant burden, not only in terms of health care costs but also of lost productivity and reduced participation in family life (*GINA , 2008*).

Vocal fold dysfunction (VFD), also commonly known as paradoxical vocal fold motion, can be characterized as an abnormal adduction of the vocal folds during the respiratory cycle (especially during the inspiratory phase) that produces airflow obstruction at the level of the larynx. VFD frequently