شبكة المعلومات الجامعية

بسم الله الرحمن الرحيم

شبكة المعلومـــات الجامعية

التوثيق الالكتروني والميكروفيلم

شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الالكتروني والميكروفيلم

﴿ قـسـم ﴾

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها
علي هذه الأفلام قد اعدت دون آية تغيرات

يجب أن

تحفظ هذه الأفلام بعيداً عن الغبار

في درجة حرارة من 15 – 20 مئوية ورطوبة نسبية من 20-40 %

To be kept away from dust in dry cool place of
15 – 25c and relative humidity 20-40 %

بعض الوثائق الأصلية تالفة

بالرسالة صفحات

لم ترد بالأصـــل

PROSTATIC INVOLVEMENT IN BLADDER CANCER.

Thesis
Submitted for partial fulfillment of the master degree in

UROLOGY

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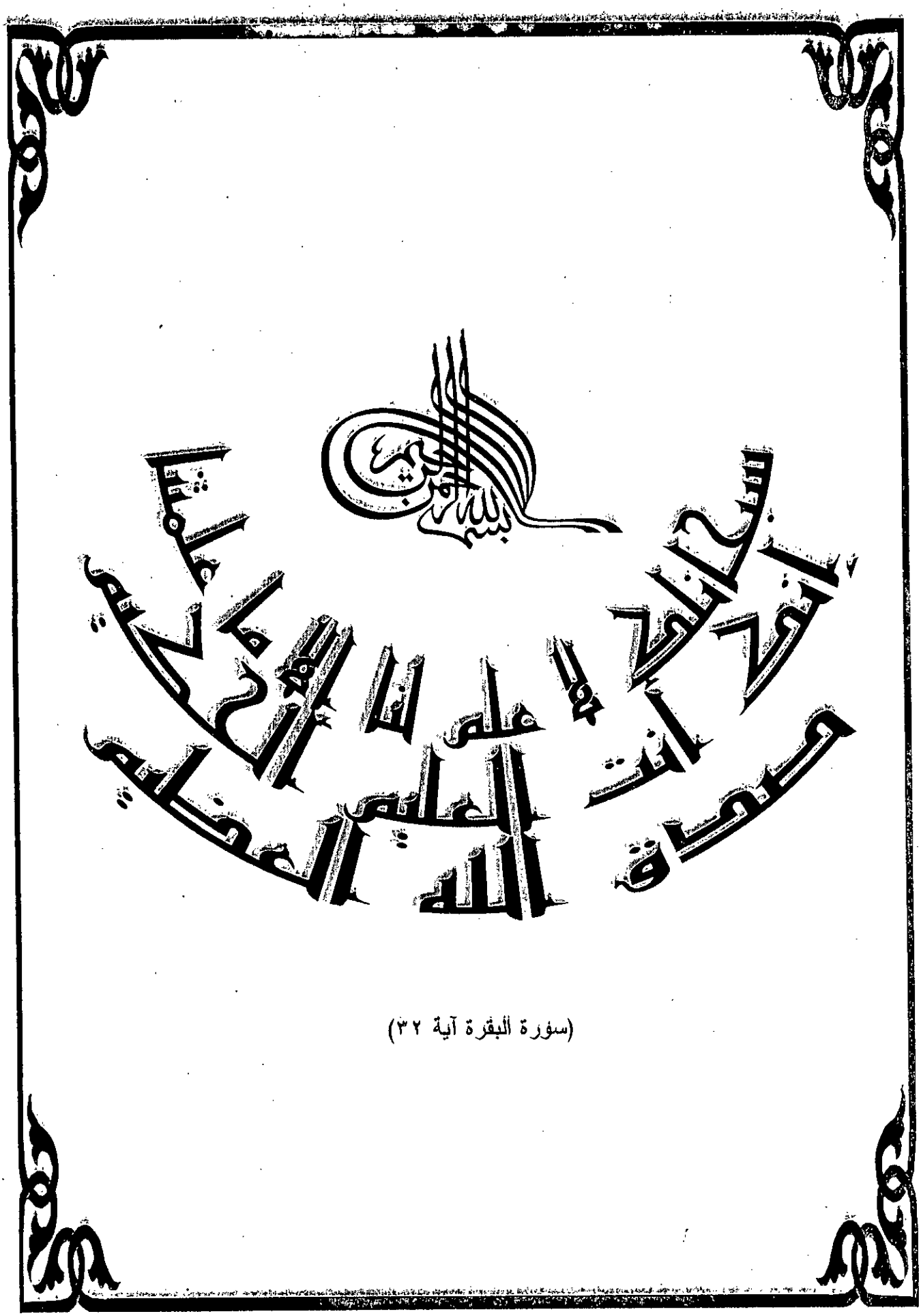

(سورة البقرة آية ٣٢)

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Introduction

Introduction

Carcinoma of the bladder is the most common malignant disease in Egypt and it was known, and mentioned by the ancient Egyptian and described in the medical papyri.*(Badr, 1963)*

The bladder cancer often behaves as a field-change disease in which the entire urothelium from the renal pelvis to the urethra is susceptible to malignant transformation.*(Messing & Catalona, 1997)*

Frequent involvement of the prostate has been reported in cases with various forms of bladder cancer and the issue of this involvement has assumed increased importance because it affects the staging, management and prognosis of bladder cancer.*(Mahadevia et al., 1986)*

Also, the simultaneous presentation of the bladder and prostatic cancers has been described in urological literature mostly in patients with incidental prostatic cancer on cystoprostatectomy specimens removed for bladder cancer.*(Winfield et al., 1987)*

The bladder and prostate cancers have acquired alterations in DNA often lead to either the induction of oncogenes or the negation of tumour suppressor genes resulting in malignantly transformed cell. So, the bladder

and prostate cancers share similarities at epidemiological and molecular levels.*(Chun, 1997)*

Aim Of The Work

Aim of the Work

The aim of this study was to estimate the incidence of prostatic involvement in patients with cancer bladder with different stages, grades, and pathologic types.

Review Of Literature

Review of literature

ANATOMY OF THE LOWER URINARY TRACT

✱ Pelvic ureter

The ureter is divided into abdominal and pelvic portions by the common iliac artery. Intra-operatively, the ureter is identified by its peristaltic waves and is readily found anterior to the bifurcation of the common iliac artery. At ureteroscopy, pulsations of this artery can be seen in the posterior ureteral wall.*(Brooks, 1997)*

The ureters come within 5 cm of each others as they cross the iliac vessels. On entering the pelvis, they diverge widely along the pelvic side walls towards the ischeal spines. the ureter travels on the anterior surface of the internal iliac vessels and is related laterally to the branches of the anterior trunk, near the ischeal spine, the ureter turns anteriorly and medially to reach the bladder. The antero-medial surface of the ureter is covered by peritoneum and the ureter is embedded in retroperitoneal connective tissue which varies in thickness. As the ureter courses medially, it is crossed anteriorly by the vas deferens and runs with the inferior vesical vessels and nerves in the lateral vesical ligaments.*(Brooks, 1997)*

The ureter proper has only one muscular coat, because of the irregular helical pattern of its muscle fibers, the