



شبكة المعلومات الجامعية

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ





شبكة المعلومات الجامعية



شبكة المعلومات الجامعية

التوثيق الالكتروني والميكروفيلم



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جامعة عين شمس

التوثيق الالكتروني والميكروفيلم

قسم

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



يجب أن

تحفظ هذه الأفلام بعيداً عن الغبار

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

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بعض الوثائق الأصلية تالفة



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بالرسالة صفحات

لم ترد بالأصل

**ANKYLOSING SPONDYLITIS: CLINICAL AND
RADIOLOGICAL ASSESSMENT OF VERTEBRAL
DEFORMITES AND DISCAL LESIONS**

Thesis

*Submitted In Partial Fulfillment Of Master Degree In Rheumatology &
Rehabilitation.*

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THE UNIVERSITY OF CHICAGO

PHYSICS DEPARTMENT

أَعُوذُ بِاللَّهِ مِنَ الشَّيْطَانِ الرَّجِيمِ

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

لَقَدْ كَانَ لَكُمْ فِي رَسُولِ اللَّهِ أُسْوَةٌ حَسَنَةٌ
لِمَن كَانَ يَرْجُوا اللَّهَ وَالْيَوْمَ الْآخِرَ وَذَكَرَ اللَّهَ
كَثِيرًا

سورة الأحزاب - آية ٣٣

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Account A

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Account A

Abstract:

Objective: To study the prevalence of deformities of vertebrae and inter-vertebral discs in the patients with Ankylosing Spondylitis (AS) with the usage of the Stocke Ankylosing Spondylitis Spine Score (SASSS) in relation to clinical measurements and laboratory findings.

Methods: Altogether 30 male patients with AS were studied. Reading of spinal radiographs was undertaken, scoring for severity, syndesmophyte formation, ligamentous calcification, squaring and discal lesions, the usage of (SASSS) and the correlation of (SASSS) with the clinical measurements (chest expansion, Occiput to Wall Distance (OWD), Finger to Floor Distance (FFD) and Modified Schober's Test (MST), Functional Index (FI), Stocke Enthesities Index (SEI) and laboratory findings (ESR & CRP).

Results: Syndesmophyte formation was detected in 10 patients (33.3%), ligamentous calcifications were detected in 6 patients (20%), squaring of vertebral bodies was detected in 18 patients (60%) and discal lesions were detected in 5 patients (16.7%). The SASSS was significantly correlated with chest expansion, OWD, FFD & MST but there was no significant relationship between the final radiological scores and syndesmophyte formation and ESR.

Conclusion: The SASSS is a useful, valid score, which correlates with some clinical outcome measures.

Key words: Ankylosing Spondylitis Radiology Disc narrowing Vertebral deformity Occiput to wall distance Functional Index Spondylodiscitis.

LIST OF GRAPHS:

Graph (1) Family history of our AS patients-----	70
Graph (2) Consanguinity in our AS patients-----	71
Graph (3) CRP in our AS patients-----	85
Graph (4) Squaring of vertebral bodies in our AS patients-----	85
Graph (5) Sclerosis of vertebral bodies in our AS patients-----	86
Graph (6) Syndesmophyte formation in our AS patients-----	86

APPENDIX TO TABLE

TABLE 1. Summary of the results of the analysis of variance for the four AS programs.