

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ





شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها
علي هذه الأقراص المدمجة قد أعدت دون أية تغييرات



يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار





بالرسالة صفحات لم ترد بالأصل





بعض الوثائق الأصلية تالفة



HYPERTENSION AS A CAUSE OF END-STAGE RENAL DISEASE

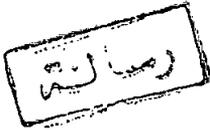
Thesis
Submitted For Partial Fulfillment
Of The Master Degree in Internal Medicine

616.614
N. 9

By

658.77

Neveen Farouk Tamam
M. B., B. Ch.



Faculty of Medicine – Ain Shams University

Under Supervision Of

PRO. DR. ADEL AFIFY

*Professor of Internal Medicine and Nephrology
Faculty of Medicine – Ain Shams University*

DR. MAHMOUD M. ZAKI

*Assistant Professor of Internal Medicine and Nephrology
Faculty of Medicine – Ain Shams University*

DR. EMAN A. EL-AZAB

*Lecturer of Internal Medicine and Nephrology
Faculty of Medicine – Ain Shams University*

Faculty Of Medicine
Ain Shams University
2000



1948

1949

1948
1949
1950

1951
1952
1953

1954
1955
1956

1957
1958
1959

1960

ACKNOWLEDGMENT

I would like to express my deepest gratitude and appreciation to my dear professor *Dr. Adel Afifi*, Professor of Internal Medicine and Nephrology, Ain Shams University, for his continuous guidance, expert advice and valuable suggestions that greatly enriched this work.

I am deeply grateful to the kindness of *Dr. Mahmoud Zaki*, Assistant Professor of Internal Medicine and Nephrology, Ain Shams University, for his keen support, sincere help and valuable efforts throughout this study.

I am much obliged to *Dr. Iman Anour El- Azzab*, lecturers of Internal Medicine and Nephrology, Ain Shams University, for her keen support, sincere advice, and valuable suggestions.

Last but not least, I would like to thank all the physicians as well as the nurses and the patients who agreed willingly to participate in my study

1. The first part of the document is a list of names and addresses of the members of the committee.

2. The second part of the document is a list of names and addresses of the members of the committee.

3.

4. The third part of the document is a list of names and addresses of the members of the committee.

5. The fourth part of the document is a list of names and addresses of the members of the committee.

6. The fifth part of the document is a list of names and addresses of the members of the committee.

7.

8.

9. The sixth part of the document is a list of names and addresses of the members of the committee.

10. The seventh part of the document is a list of names and addresses of the members of the committee.

11. The eighth part of the document is a list of names and addresses of the members of the committee.

12. The ninth part of the document is a list of names and addresses of the members of the committee.

13. The tenth part of the document is a list of names and addresses of the members of the committee.

14. The eleventh part of the document is a list of names and addresses of the members of the committee.

15. The twelfth part of the document is a list of names and addresses of the members of the committee.

16. The thirteenth part of the document is a list of names and addresses of the members of the committee.

17. The fourteenth part of the document is a list of names and addresses of the members of the committee.

18. The fifteenth part of the document is a list of names and addresses of the members of the committee.

19. The sixteenth part of the document is a list of names and addresses of the members of the committee.

20. The seventeenth part of the document is a list of names and addresses of the members of the committee.

21. The eighteenth part of the document is a list of names and addresses of the members of the committee.

22. The nineteenth part of the document is a list of names and addresses of the members of the committee.

23. The twentieth part of the document is a list of names and addresses of the members of the committee.

Table of contents

Introduction and Aim of the work.....	1
Introduction.....	1
Aim of the work.....	2
Review of Literature.....	3
Nephrosclerosis.....	3
Mechanism of progression of renal disease in hypertension.....	8
The spectrum of renal disease in hypetension.....	13
Hypertension as a cause of renal failure in different countries.....	41
Patients and Methods	44
Results.....	46
Discussion	54
Summary and conclusions.....	63
Appendix.....	64
References.....	67
Arabic Summary	

1. Introduction

The first part of the paper discusses the importance of the research.

The second part of the paper discusses the methodology used.

The third part of the paper discusses the results of the study.

The fourth part of the paper discusses the conclusions of the study.

The fifth part of the paper discusses the implications of the study.

The sixth part of the paper discusses the limitations of the study.

The seventh part of the paper discusses the future research.

List of Tables

Table 1	Demographic characteristics of the study population	48
Table 2	Results of the study before applying the criteria	48
Table 3	Comparison between hypertension as a cause and unknown causes of ESRD before and after application of the diagnostic criteria	49
Table 4	Results after applying the criteria	49
Table 5	difference between hypertensives and non hypertensives as regard age, gender and smoking	50

1. The first step in the process of identifying a problem is to recognize that a problem exists. This is often done by comparing current performance with a desired state or goal.

2. Once a problem is identified, the next step is to define the problem more precisely. This involves determining the scope of the problem and the specific areas that need to be addressed.

3. The third step is to analyze the causes of the problem. This is done by identifying the underlying factors that are contributing to the problem and determining how they are related to each other.

4. The fourth step is to develop a plan of action. This involves identifying the specific steps that need to be taken to address the problem and determining the resources that will be needed to implement the plan.

5. The fifth step is to implement the plan. This involves putting the plan into action and monitoring progress to ensure that the problem is being addressed effectively.

6. The sixth step is to evaluate the results. This involves comparing the current performance with the desired state and determining whether the problem has been resolved.

7. The seventh step is to take corrective action. If the problem has not been resolved, this step involves identifying the reasons for the failure and taking steps to address them.

8. The eighth step is to prevent the problem from recurring. This involves identifying the underlying causes of the problem and taking steps to address them to prevent the problem from happening again.

9. The final step is to review the process. This involves reflecting on the entire process and identifying areas for improvement to make the process more effective in the future.

List of figures

Figure 1	Etiology of ESRD before applying the criteria of diagnosing hypertensive renal disease.	51
Figure 2	Etiology of ESRD after applying the criteria diagnosing hypertensive renal disease	51
Figure 3	Malignant hypertension among cases of hypertensive renal disease patients	52
Figure 4	Family history of hypertension among with hypertensive renal disease.	52
Figure 5	Diabetics among patients with hypertensive renal Disease.	53
Figure 6	Schistosomiasis among hypertensive renal disease Patients.	53
Figure 7	Percentage of ESRD patients due to hypertension In Different studies	64
Figure 8	Etiology of ESRD in Egypt 1996	65
Figure 9	Etiology of ESRD in Egypt 1997	65
Figure 10	Hypertension as a cause of ESRD in different Countries.	66

