

سامية محمد مصطفى



شبكة المعلومات الجامعية

بسم الله الرحمن الرحيم



سامية محمد مصطفى



شبكة المعلومات الجامعية



شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



سامية محمد مصطفى



شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

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



يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار



سامية محمد مصطفى



شبكة المعلومات الجامعية



بعض الوثائق الأصلية تالفة



سامية محمد مصطفى



شبكة المعلومات الجامعية



بالرسالة صفحات لم ترد بالأصل



STUDY OF SOME PSYCHOLOGICAL ASPECTS IN ASTHMATIC CHILDREN AND THEIR PARENTS.

Thesis

Submitted In Partial Fulfillment of
the Requirements of Master Degree In Pediatrics

By

Naglaa Hussein Mohammed

(M.B., Ch. B.)

Faculty of Medicine
Tanta University

SUPERVISED By

Prof. Dr.

Sayeda Ibrahim Farag

Professor of Pediatrics
Faculty of Medicine
Tanta University

Dr.

Gamal Ibrahim Shamah

Assist. Prof. of Neuropsychiatry
Faculty of Medicine
Tanta University

Dr.

Nabil Moustafa El-Esawy

Lecturer of Pediatrics
Faculty of Medicine
Tanta University

Faculty of Medicine

Tanta University

2001

B

18710



بسم الله الرحمن الرحيم



ACKNOWLEDGEMENT

Thanks forever to **ALLAH** for helping me to achieve this work.

I am grateful to Prof. **Sayeda Ibrahiem Farag**, Professor and head of chest unit in pediatric department, Faculty of Medicine, Tanta University, for her kind, valuable advice and unfailing help and follow up all through this work.

I would like to express my deepest gratitude and sincere appreciation to Dr. **Gamal Ibrahiem Shamah** Assistant professor of NeuroPsychiatry department, Faculty of Medicine, Tanta University, for suggestion of this study and for guidance, sincere and generous help through this study, accurate supervision, valuable advice, encouragement, directing criticism and unfailing help through the course of this work. He gave me so much of his precious time for the revision of all the details and discussion of the results that made this work possible. I am truly indebted to him for learning me in a very kind and friendship manner; I will never forget.

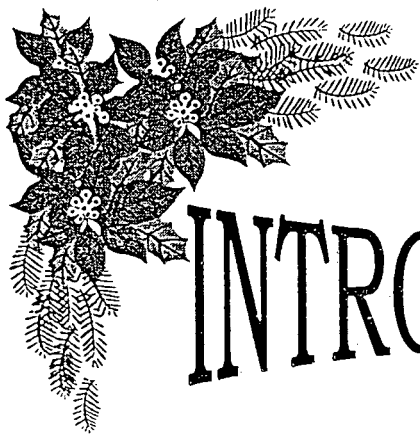
My special great thanks to Dr. **Nabil Moustafa EL Esawy** Lecturer of pediatrics, Faculty of Medicine, Tanta University, for his excellent cooperation and continuous help. I am very grateful to him for his valuable advice and directing criticism for completion of this study.

I wish to convey my great thanks and sincere gratitude to Prof. **Sheble Said Sheble** professor and head of Pediatric Department, Faculty of Medicine, Tanta University, for his sincere, very kind hand, and continuous encouragement he always gives us.

*This work is dedicated to my family for the
unconditional love that brightens my life.*

CONTENTS

Introduction.....	(1)
Review of literature.....	(3)
Aim of the work.....	(46)
Subjects.....	(47)
Methods.....	(48)
Results.....	(56)
Discussion.....	(76)
Summary and conclusion.....	(94)
Recommendations.....	(99)
References.....	(100)
Arabic summary.....	(123)



INTRODUCTION



INTRODUCTION

Asthma is one of the most frequent chronic illnesses in children⁽¹⁾. Its prevalence in Egypt is calculated around 8.2% among school children⁽²⁾.

Children with asthma are troubled by symptoms of asthma such as cough, dyspnea, and wheeze, in addition to social, educational, and emotional impairments that they experience as having asthma⁽³⁾.

There is a growing body of evidence showing that the conventional clinical indices of asthma severity (airway caliber, symptoms, airway responsiveness, etc.) correlate weakly with how patients are actually feeling and how they are able to function in their lives because of their asthma⁽⁴⁾.

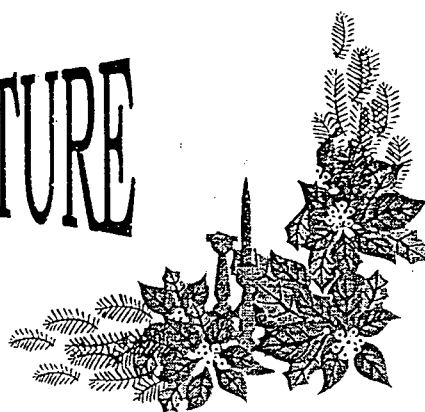
When assessing and treating asthma, it is certainly important to evaluate the airways by the pulmonary functions, it is equally important also to evaluate the impact of the condition on the patients themselves. However, illness not only has an impact on the patients only, but also affects the quality of life of the family especially the primary caregivers who are limited in their own normal daily activities and have an anxiety and stress as a result of illness of their asthmatic children⁽⁵⁾.

There are many numbers of instruments that able to measure the quality of life of the asthmatic children and can be used in both

clinical studies and practice. They may provide scientifically sound and valid information about patients' experiences that complements conventional clinical measures⁽⁴⁾.



REVIEW OF LITERATURE



REVIEW OF LITERATURE

Asthma is a chronic inflammatory disease of airways with multifactorial Pathogenesis. It is a diffuse obstructive lung disease with hyperreactivity of the airways to a variety of stimuli and high degree of reversibility of the obstructive process which may occur spontaneously or with treatment ⁽⁶⁾.

Asthma may have its onset at any age. As many as 10-15% of boys and 7-10% of girls have asthma during childhood. About 80-90% have their first symptoms before 4-5 years of age and 30% of them are symptomatic by one year of age ⁽⁷⁾.

In Egypt 23.2% of wheezy infants were proved to be real asthmatics, but the incidence of asthma among school children aged 5-15 years old was found to be 8.2% ⁽²⁾.

Both prevalence and mortality from asthma have increased during the last decade. The prevalence accounts for approximately 10% of total asthma population and the highest prevalence of sensitization occurs in children more than 7 years old and young adults ⁽⁷⁾.

Asthma is defined by three characteristic features, namely intermittent reversible airway obstruction, airway hyperresponsiveness and airway inflammation. The primarily underlying abnormality in this disease is thought to be the unique form of airway inflammation that gives rise to reversible obstruction and hyperresponsiveness ⁽⁸⁾.