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قسم

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بعض الوثائق الأصلية تالفة

بالرسالة صفحات لم ترد بالأصل

Impact of variation of Pediatric Body Mass Index on Lower Respiratory Tract Infection of Children

A Thesis

Submitted for Partial Fulfillment of Ph. D. Degree in Childhood Studies
(Children of Special Needs)
Department of Medical Studies for Children

By

Mariam Salah El-Deen
MBBCH (2008)
Master's Degree (2016)
Ain Shams University

Supervised By

Dr. Ahmed Mohamed OthmanAl-Kahky
Professor of Physiotherapy
Department of Medical Studies for Children Faculty of Post Graduate Childhood Studies
Ain Shams University

Dr. Dina Ebrahem Darweish Sallam
Lecturer of Pediatrics
Faculty of Medicine
Ain Shams University.

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Contents

List of Abbreviations

AECC	**:**	American European Consensus Committee.
ARDS	**:**	Acute Respiratory Distress
BMI	**:**	Body Mass Index.
C dyn	**:**	Dynamic Compliance.
CAP	**:**	Community Acquired Pneumonia.
CDC	**:**	Centers for Disease Control and Prevention.
CMV	**:**	Cytomegalo Virus**.**
CRP	**:**	C reactive Protein.
ED	**:**	Emergency Department.
Embase	**:**	Excerpta Medica Database.
EPIC	**:**	Etiology of Pneumonia in the Community.
ESR	**:**	Erythrocyte Sedimentation Rate.
GFR	**:**	Glumerular Filtration Rate.
HPA	**:**	Hypothalamo-Pituitary Adrenal Axis.
HSV	**:**	Herpes Simplex Virus.
IBW	**:**	Ideal Body Weight.
ICU	**:**	Intensive Care Unit.
MARSA	**:**	Mecillin Resistant Staph Aurius.
MDG	**:**	Millenium Development Eradication Goal.
MDG 1	**:**	First Millennium Development Goal.
MEDLINE	**:**	Medical Literature Analysis and Retrieval. System Online.
NHANES	**:**	National Health and Nutrition Examination Survey.
PARDS	**:**	Pediatric Acute Respiratory Distress.
PMS	**:**	Premenstrual Syndrome.
RSV	**:**	Respiratory Syncitial Virus.

RTIS	**:**	Respiratory Tract Infections.
SPSS	**:**	Statistical Program of Social Science.
US	**:**	United States.
VCV	**:**	Volume Control Ventilation.
VHL	**:**	Virtual Health Library.
WHO	**:**	World Health Organization.

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Introduction

Abnormal pediatric body weight is a common public health problem among children within the community, for which the healthcare costs are gradually rising ***(Breitfelde et al., 2011).*** Pediatric overweight or underweight are considered as a growing worldwide problems that requires a great care &follow up due to its broad reflex on the medical systems for both children and adults ***(Janssen et al., 2009).***

The prevalence of overweight among children and adolescents has rapidly increased**.** In the past Thirty years, pediatric obesity had doubled in children and tripled in adolescents worldwide ***(Joe-Ann, 2019)***.

There are usually vulnerable periods for weight gain through childhood and adolescence periods that also there is ideal time of opportunities for prevention & control of overweight & obesity ***(Janssen et al., 2009).*** Overweight in children and adolescents can result in a variety of adverse health outcomes, including type 2 diabetes, obstructive sleep apnea, hypertension, hyperlipidemia and metabolic syndrome**.** The best approach to face this problem is the prevention of increased weight gain ***(Freedman et al., 2013).***