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∢ Back



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The effect of vitamin D3 supplements on the 25(OH)D levels in the II and III trimester of pregnant women in Sleman, Indonesia: randomized controlled trial

Amalina T. Susilani (/article/search?authors=Amalina T. Susilani) 1 (https://orcid.org/http://orcid.org/0000-0003-3520-8306), Hertanto W. Subagio (/article/search?authors=Hertanto W. Subagio) 1, Noor Pramono (/article/search?authors=Noor Pramono) 1, Martha I. Kartasurya /article/search?authors=Martha I. Kartasurya) 1

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F Int J Res Med Sci 2021; 9 (1): 22-26; 10.18203/2320-6012.ijrms20205826; Language: EN

Abstract

Background: Pregnant women are among the groups at high risk of vitamin D3 deficiency due to the increased need for micro and macro nutrients during pregnancy. Vitamin D3 deficiency is associated with pregnancy complications, namely preterm birth, pre-eclampsia, gestational diabetes, and babies born small according to their gestational age.

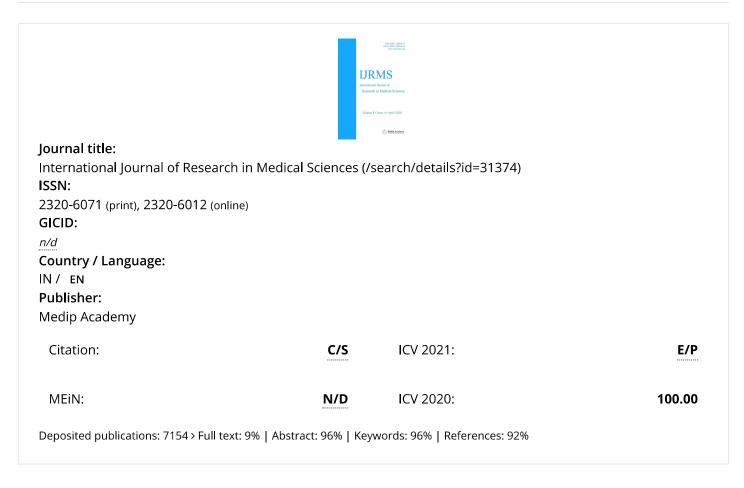
Methods: The study involved a randomized pretest-posttest control group design. Subjects selected include 80 pregnant women in second trimester. Data were collected in June 2020 to September 2020. The respondents were then randomly divided into 2 groups, comprising 40 each, where the first received 400 IU/day vitamin D3 supplementation for 12 weeks, and the second served as a control. Furthermore, 25 (OH) D were measured by using the ELISA method.

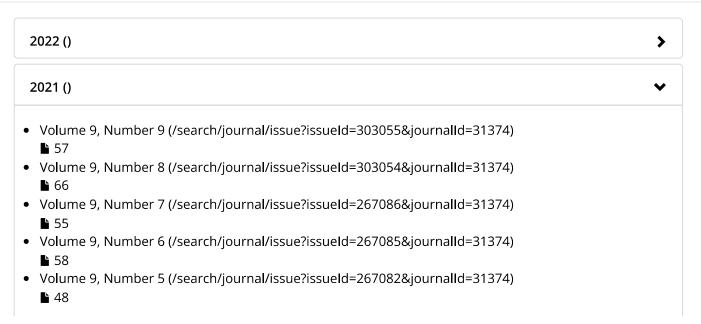
Results: The mean value of the 25(OH)D levels after D3 supplementation and statistically showed a significant difference with a significance value of p<0.05 (0.01), compared to the control group. Furthermore, the mean value of the 25(OH)D levels in the control group actually decreased by 2.7 ng/ml which was statistically significant with a p value of 0.00, compared to the control group. Furthermore, the mean value of the 25(OH)D levels in the

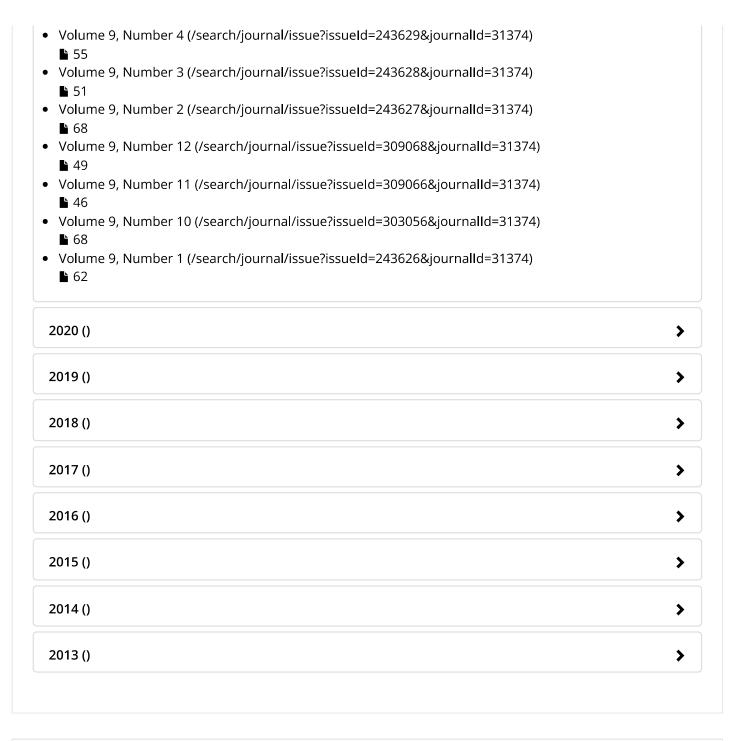
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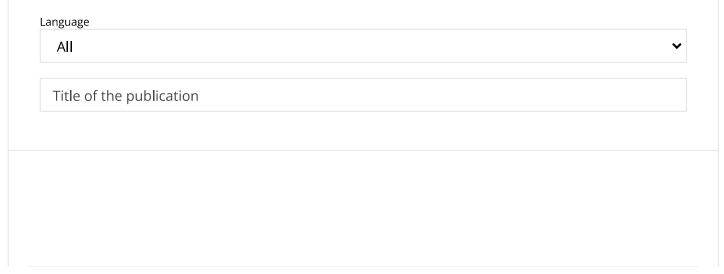
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≮ Back









The use of peripheral blood cells as an assessment of inflammation in prostate cancer in patients attending in surgery department at ESUT teaching hospital, Parklane, Enugu, Nigeria (/search/article?articleId=2831662)

- Clara Soronnadi, Nancy Ibeh, Francis Ugwene, Grace Amilo, Anthony Ede
- int J Res Med Sci 2021; 9 (1) : 1-8; DOI: 10.18203/2320-6012.ijrms20205824; Language: EN
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Use of health belief model to explain the behaviour of following safety measures during the use of household chemical products among adult females in Riyadh (/search/article? articleId=2831663)

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Use of rivaroxaban and acetylsalicylic acid as a combined treatment for peripheral arterial disease in Central Military Hospital (/search/article?articleId=2831664)

- A Rigoberto Román-Hernández, Rodrigo Banegas-Ruiz, Claudia Jiménez-Nateras, Manuel Martínez-Meraz, Carmen Torres-Alarcón, José Espejel-Blancas, José Colón, Yuri Caprielova, Román Llergo, Juan Torres, German Mendoza-Barrera, Alan Valderrama-Treviño, Baltazar Barrera-Mera
- Int J Res Med Sci 2021; 9 (1): 15-21; DOI: 10.18203/2320-6012.ijrms20205415; Language: EN
- Full text: Yes | Abstract: Yes | Keywords: 7 | References: 24

The effect of vitamin D3 supplements on the 25(OH)D levels in the II and III trimester of pregnant women in Sleman, Indonesia: randomized controlled trial (/search/article? articleId=2831665)

- Amalina Susilani, Hertanto Subagio, Noor Pramono, Martha Kartasurya
- Int J Res Med Sci 2021; 9 (1): 22-26; DOI: 10.18203/2320-6012.ijrms20205826; Language: EN
- Full text: Yes | Abstract: Yes | Keywords: 3 | References: 13

The role of serological tests and biopsy in the diagnosis of celiac disease: retrospective review of 1137 duodenal biopsies (/search/article?articleId=2831666)

- Feridun Gurlek, Eyyup Tasdemir, Taskın Erkinuresin
- Int J Res Med Sci 2021; 9 (1): 27-33; DOI: 10.18203/2320-6012.ijrms20205827; Language: EN
- **i** Full text: Yes | Abstract: Yes | Keywords: 4 | References: 15

Pathologies associated with impacted maxillary canine tooth in patients presenting at a tertiary care hospital (/search/article?articleId=2831667)

- Lisman Khan, Abid Raza, Qaimuddin Shaikh, Saadia Nazir, Nadia Ambreen
- Int | Res Med Sci 2021; 9 (1) : 34-38; DOI: 10.18203/2320-6012.ijrms20205661; Language: EN
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Usman Qadir Khan, Qaimuddin Shaikh, Zahoor Ahmed Rana, Shazia Shabnum, Nadia Ambreen, Saadia Nazir DOI: 10.18203/2320-6012.ijrms20205662	
A clinical study of hypertensive emergencies Sridhar Reddy Konuganti, Narsimha Swamy DOI: 10.18203/2320-6012.ijrms20205654	PDF 49-52
Outcome of treatment with modified Ponseti technique in atypical congenital talipes equinovarus Sanjeev Gupta, Farooq Bhutt, Manoj Kumar, Maneer Ahmad DOI: 10.18203/2320-6012.ijrms20205655	PDF 53-55
Injection propofol and ketamine in pediatric and adult patients undergoing diagnostic radiological procedure (magnetic resonance imaging and computed tomography scan) Mahendra Agrawal, Pushpal Gandhi, Bhavika Agrawal, Simarn Behl DOI: 10.18203/2320-6012.ijrms20205457	PDF 56-60
Evaluation and management of blunt injury abdomen based on focussed assessment with sonography in trauma Sameer Ahmed DOI: 10.18203/2320-6012.ijrms20205434	PDF 61-67
Prevalence of tuberculosis in silicosis patients in southern part of Rajasthan Atul Luhadia, Shanti Kumar Luhadia, Rahul Ahluwalia, Kamal Preet Singh Arora, Rahul Kumar, Trishi Nagda, Adit Zota DOI: 10.18203/2320-6012.ijrms20205458	PDF 68-72
Study of coronary artery disease in young population of Central India Vikas A. Mishra, Amit B. Kinare, Jayanta Pal, Vishwa Deepak Tripathi, Ravi Shankar Sharma, Pradeep Kumar Jain DOI: 10.18203/2320-6012.ijrms20205426	PDF 73-78
Clinical outcome of muscle invasive carcinoma urinary bladder patients treated with bladder preservation protocol John Joseph, Aswin Kumar, Susan Mathews, Jagathnath K. M. Krishna, Francis V. James DOI: 10.18203/2320-6012.ijrms20205656	PDF 79-83
Nail changes in construction site workers: an observational study Nidhi Kamra, Sahil Sardana DOI: 10.18203/2320-6012.ijrms20205435	PDF 84-88
Pre-exposure hydroxychloroquine prophylaxis for COVID-19 in healthcare workers: a retrospective cohort Raja Bhattacharya, Sampurna Chowdhury, Anita Nandi, Rishav Mukherjee, Manish Kulshrestha, Rohini Ghosh, Souvik Saha DOI: 10.18203/2320-6012.ijrms20205444	PDF 89-96
Histopathological spectrum of salivary gland lesions - in a tertiary care centre Gomathi Srinivasan, Francis Asir Joseph J., Shanmugam Kaliyaperumal, Arunalatha Ponnaiah DOI: 10.18203/2320-6012.ijrms20205658	PDF 97-101
Cataract surgery and intraocular pressure: perspective from the developing world Shaveta Bali, Shah Nawaz, Manzoor Mehdi DOI: 10.18203/2320-6012.ijrms20205659	PDF 102-105
An audit on usage of fresh frozen plasma in a tertiary care hospital in north western part of India Anshika Yadav, Priyanka Tiwari, Akhil K. Sheemar DOI: 10.18203/2320-6012.ijrms20205663	PDF 106-111
Study of clinical features and laboratory investigations for effective management of hyponatremia M. G. Bhutto, Sandeep B. R., Sharath Kumar D. Shah, Shabaz . DOI: 10.18203/2320-6012.ijrms20205466	PDF 112-120
Epidemiological and clinical profile of snakebite patients: a retrospective analysis at a tertiary care teaching hospital of southern Rajasthan, India Sanjay Kumar Paliwal, Syed Javed, Arth Shah DOI: 10.18203/2320-6012 jirms20205829	PDF 121-126

DOI: 10.18203/2320-6012.ijrms20205829

Usman Qadir Khan, Qaimuddin Shaikh, Zahoor Ahmed Rana, Shazia Shabnum,

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Original Research Article

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The role of serological tests and biopsy in the diagnosis of celiac disease: retrospective review of 1137 duodenal biopsies

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ABSTRACT

Background: The aim of this study is to evaluate gluten sensitivity and/or celiac disease (CD) on the basis of serological tests and duodenal biopsy and to draw attention to the prevalence in the population and the correlation between serological tests and biopsy results.

Methods: Patients who applied to Health Sciences University Bursa High Specialization Training and Research Hospital between 2015-2019 and who underwent serological tests and duodenal biopsies with a diagnosis of CD or gluten sensitivity were retrospectively analyzed.

Results: The study was conducted with a total of 1137 cases, 61.2% (n = 696) of who were women and 38.8% (n = 441) were men. Their ages range from 17 to 91, with a mean of 40.16 ± 16.18 years. Of the 178 patients with gluten sensitivity, 122 (68%) were female and 56 (32%) were male. According to the results of duodenal biopsy, an average of 8% Marsh 3, 5% Marsh 1-2 was detected in the last five years. For the whole study, a significant difference was found between celiac autoantibody positivity rates according to the biopsy results (p = 0.001; p <0.01). The rate of serological test positivity was higher in patients with biopsy result Marsh 3 than those with normal biopsy result, peptic duodenitis and Marsh 1 and 2. No statistically significant difference was found between the rates of Marsh 3 biopsy results and serological test positivity by years (p> 0.05).

Conclusions: The number of patients applied with a diagnosis of CD in the last five years has gradually increased (3.4-33.7%). Of the patients with Marsh 3 and Marsh 1-2 biopsy results, 78% were under 50 years old. This suggests that gluten enteropathy in young female patients having digestive system complaints should not be ignored during the diagnosis. Serological test results were highly correlated with the biopsy results in patients with Marsh 3 biopsy results. We think that if clinical findings are supported with serological tests and directed for biopsy in the diagnosis of celiac disease, it will be more cost effective and the workload and time loss will be prevented.

Keywords: Biopsy, Celiac disease, Diagnosis, Serologic tests

INTRODUCTION

Celiac disease (CD) or celiac sprue also known as gluten hypersensitivity is an immune-mediated inflammatory disease of the small intestine and it is caused by sensitivity to dietary gluten and related proteins. CD is seen in patients having genetic sensitivity. There are publications that CD is caused by human T cell mediated autoimmune mechanisms.¹ According to serological

studies, the global prevalence of CD is approximately 1%. ² However, in some studies where biopsy and serological tests were used together, the prevalence was ranged between 1:70 and 1: 300.³

In the Turkish adult population, the seroprevalence of CD was 0.77% and the prevalence of CD by biopsy was 0.39%.⁴ Studies conducted in the last 25 years show an increase in the prevalence of CD.^{5,6}

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Original Research Article

Use of rivaroxaban and acetylsalicylic acid as a combined treatment for peripheral arterial disease in Central Military Hospital

Rigoberto Román-Hernández¹, Rodrigo Banegas-Ruiz², Claudia N. Jiménez-Nateras², Manuel Martínez-Meraz³, Carmen G. Torres-Alarcón⁴, José A. Espejel-Blancas⁵, José Á. B. Colón⁶, Yuri J. Caprielova⁷, Román A. R. Llergo⁸, Juan P. E. Torres⁹, German E. Mendoza-Barrera¹⁰, Alan I. Valderrama-Treviño¹¹, Baltazar Barrera-Mera¹²*

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ABSTRACT

Background: The objective of this research was to evaluate the behavior of 3 risk indicators for peripheral arterial disease in patients under oral treatment with rivaroxaban 2.5 mg every 12 hours plus, acetylsalicylic acid 100 mg every 24 hours. It was hypothesized that the oral combination of rivaroxaban and acetylsalicylic acid presents a therapeutic advantage over other treatments.

Methods: A prospective longitudinal and non-randomized study of a single center was performed. 59 patients with peripheral arterial disease were included and treated with acetylsalicylic acid + rivaroxaban. Peak systolic velocity, ankle-brachial index and C reactive protein index were evaluated.

Results: Significant changes were found at month 1 and 3 of follow-up in maximum systolic velocity, ankle-arm index and C-reactive protein index. The baseline peak systolic velocity (PSV) in the anterior tibial artery had significant differences after one month of treatment (p=0.001) and after 3 months (p=0.001). The baseline PSV in the posterior tibial artery had significant differences compared to the values found at the month of treatment (p=0.001) and 3 months (p=0.001). In the ankle-brachial index a baseline median of 0.790 was found, one month after the treatment of 0.795 (p=0.147) and 3 months after 0.800 (p=0.019). The mean baseline C-reactive protein obtained was 73.142 mg/l, at one month 87.233 mg/l (p=0.001) and at 3 months at 79.009 mg/l (p=0.294) with a standard deviation of 67.18, 74.78 and 69.69 respectively.

Conclusions: The combined use of acetylsalicylic acid and rivaroxaban allows a clinical improvement in patients with peripheral arterial disease.

Keywords: Peripheral arterial disease, Rivaroxaban, Aspirin, Intermittent claudication, Critical ischemia, Amputation, Extremity salvaging

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Original Research Article

Use of health belief model to explain the behaviour of following safety measures during the use of household chemical products among adult females in Riyadh

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ABSTRACT

Background: The hazards and life-threatening conditions resulting from using household chemical products can be avoided or minimized by following certain safety measures. To investigate following safety measures during use of household chemical products (HHCP) among women and to explain that behaviour using the Health belief model (HBM).

Methods: This was a cross sectional study. The study was conducted among adult females in Riyadh. The total sample size was 449 by convenience Sampling, this study started in September 2019 till April 2020, the questionnaire included 3 sections which were sociodemographic characteristics, safety measures followed during use of HHCP and the last section assessed the six components of health belief model.

Results: Data analysis was done using JMP version 14.2 and the cutoff point of significance was 0.05. 30.3% of the studied sample demonstrated good level of following safety measures. There was no association between the level of following safety measures during the use of HHCP and level of education among studied sample (p value>0.05). The mean of each component of HBM was higher among women with good level of following safety measures than those who follow safety measures poorly. This was significant for perceived susceptibility (1.397 vs 1.269, p=0.03), perceived barriers (8.080 vs 7.038, p=0.0001), self-efficacy (2.889 vs 2.750, p=0.0240) and motivation factors (cues to action) (14.75 vs 13.69, p=0.0001).

Conclusions: Health belief model can successfully explain following safety measures behaviour during use of HHCP. Motivation factors has the greatest impact on this behaviour.

Keywords: Health belief model, Safety measures, Household cleaning

INTRODUCTION

The hazards and life-threatening conditions result from using household chemical products (HHCP) can be avoided or minimized by following the instructions. The amount of product consumption, frequency cleaning, the amount of time that spent on cleaning and the way of storing products are considered factors of exposure to detergents.

The appropriate storing of household cleaning products and parents' education are important factors to decrease the poisoning rate at home.³ Consumers mostly get their information about the cleaning products and its possible health impact from the label of the products. The label should contain the product's name, the proper using method and its constitutional substances. According to Globally harmonized system (GHS), the information in products label should be written in black with white background to take the purchaser attention about the

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Original Research Article

The use of peripheral blood cells as an assessment of inflammation in prostate cancer in patients attending in surgery department at ESUT teaching hospital, Parklane, Enugu, Nigeria

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ABSTRACT

Background: Full blood count (FBC) is a prerequisite investigation requested from all prostate cancer (PCa) patients pre and post treatment, poor parameter influences the outcome of cancers.

Methods: Total subjects consisted of 84 male subjects between the ages 41 to >80 years. Longitudinal study was conducted. Controls and test samples were collected at diagnosis and at different stages of the treatment. Demographic information was obtained using a questionnaire. The data was analyzed using IBM statistical package for social sciences (SPSS) PC, version 20.0; SPSS Inc., Chicago, III., USA; the receiver operating characteristic curve (ROC) curve was obtained via neutrophil-to-lymphocyte ratio (NLR), lymphocyte-to-monocyte ratio (LMR) and platelet-to-lymphocyte ratio (PLR) ratios cut-off determinations. Cox proportional-hazards regression analyses the prognostic factors (duration, ratios) and overall survival (diagnosis to death or last follow-up). A paired sample t-test compared test of significance in pre/post treatment results. The analysis of variance (ANOVA) and Tukey HSD post-hoc, test susceptibility within age groups was done.

Results: Increased NLR and LMR were significantly associated with increased hazard ratio (HR) and OS at p<0.05 while PLR, no significant difference at P>0.05 in PCa. In complete blood count (CBC) and erythrocytic sedimentation rate (ESR), control and treatment period, all red blood cell (RBC) parameters showed a significant decrease at p<0.05 in treatment results compared to the pre-treatment results while total platelet (TPLT), total white blood cells (TWBC), NC, LC, ESR showed significant increase at p<0.05 in treatment results compared to pre-treatment results. Age group 41-50 years showed more susceptibility than other age groups with significant decrease at p<0.05 in NC, LC and increased MC.

Conclusions: This study supports CBC and ESR biomarkers as a prognostic tool in early detection, treatment and monitoring of disease progression in these subjects.

Keywords: Prostate, Inflammation, CBC

INTRODUCTION

Prostate cancer (PCa) is the development of cancer in the prostate gland. Most prostate cancers are slow growing; however, some grow relatively quickly and become

hyperplastic.² Prostate cancer is diagnosed by biopsy medical imaging and screening is by PSA.^{3,4} In Nigeria, 2% of men develop prostate cancer, and 64% of them are dead after 2 years due to metastasis.⁵ Anemia in men with advanced prostate cancer may be caused by several factors,

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MEDICAL AND HEALTH RESEARCH ETHICS COMMITTEE (MHREC) FACULTY OF MEDICINE, PUBLIC HEALTH AND NURSING UNIVERSITAS GADJAH MADA – DR. SARDJITO GENERAL HOSPITAL

ETHICS COMMITTEE APPROVAL

Ref. No.: KE/FK/0328/EC/2020

Title of the Research Protocol

: Pengaruh Suplemen Vitamin D3 pada Asuhan Antenatal terhadap Kadar 25(OH)D, IL-6, Tekanan Darah, Kadar Gula

Darah dan Maturitas Kehamilan

Document(s) Approved and

: 1. Study Protocol version 02 2020

version

2. Information for Subjects version 01 20203. Informed consent form version 01 2020

Principle Investigator

: Amalina Tri Susilani

Participating Investigator(s)

1. Prof. Dr. dr. Hertanto Wahyu Subagyo, MS., Sp.OG(K).

2. dr. Martha Irene Kartasurya, M.Sc., Ph.D.

Date of Approval

2 6 MAR 2020

(Valid for one year beginning from the date of approval)

Institution(s)/place(s) of

research

: Puskesmas wilayah Kabupaten Sleman

The Medical and Health Research Ethics Committee (MHREC) states that the document above meets the ethical principle outlined in the International and National Guidelines on ethical standards and procedures for researches with human beings.

The Medical and Health Research Ethics Committee (MHREC) has the right to monitor the research activities at any time.

The investigator(s) is/are obliged to submit:

Progress report as a continuing review (state its due time)

Report of any serious adverse events (SAE)

Final report upon the completion of the study

Prof. dr. Tri Wibawa, Ph.D., Sp.MK(K).

Panel's chairperson

dr. Yana Supriatna, Sp.Rad(K)., Ph.D.

Panel's secretary

P.S: This letter uses signature scan of the panel's chairperson and Secretary of the Ethics Committee. The hardcopy official letter with authority's signature will be issued when it is possible and are kept as an archive of the Ethics Committee

Validation number: 5ea61330410ed (http://komisietik.fk.ugm.ac.id/validasi)

