LEMBAR HASIL PENILAIAN SEJAWAT SEBIDANG ATAU PEER REVIEW KARYA ILMIAH : JURNAL ILMIAH

Judul Jurnal Ilmiah (Artikel)		 Psychosocial Associated and Predictors of Post Stroke Depression 3- 6 Months after Onset: A Systematic Review 			
Jumlah Penulisa		: 4 orang	<i>n</i> 2		
Statu	s Pengusul :	Fitria Handayani, Setyowati,	Dwi Pudjonarko, D	Dian Ratna Sawitri	
Ident	itas Jurnal Ilmiah	: a. Nama Jurnal	:	: PJMHS	
		b. Nomor ISSN	:	1996-7195	5
		c. Volume nomor bulan tahu	in :	Vol.13, No.4, Oct-1	Dec, 2019
		d. Penerbit	: D	Department of Surgery, Mayo Hospital	
		e.DOJ artikel (Jika ada)	: -		
		f. Alamat web Jurnal	: http:/	/pjmhsonline.com/20)19/oct_dec/index.htm
		g.Terindeks di	: SCOPU	JS .	
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(beri ✓ pada kategori yang tepat)		Jurnal Ilmiah Nasional Te	· ·		
		Jurnal Ilmiah Nasional/ Nasional terindeks di DOAJ CABI COPERNICUS** Tidak Terakreditasi			
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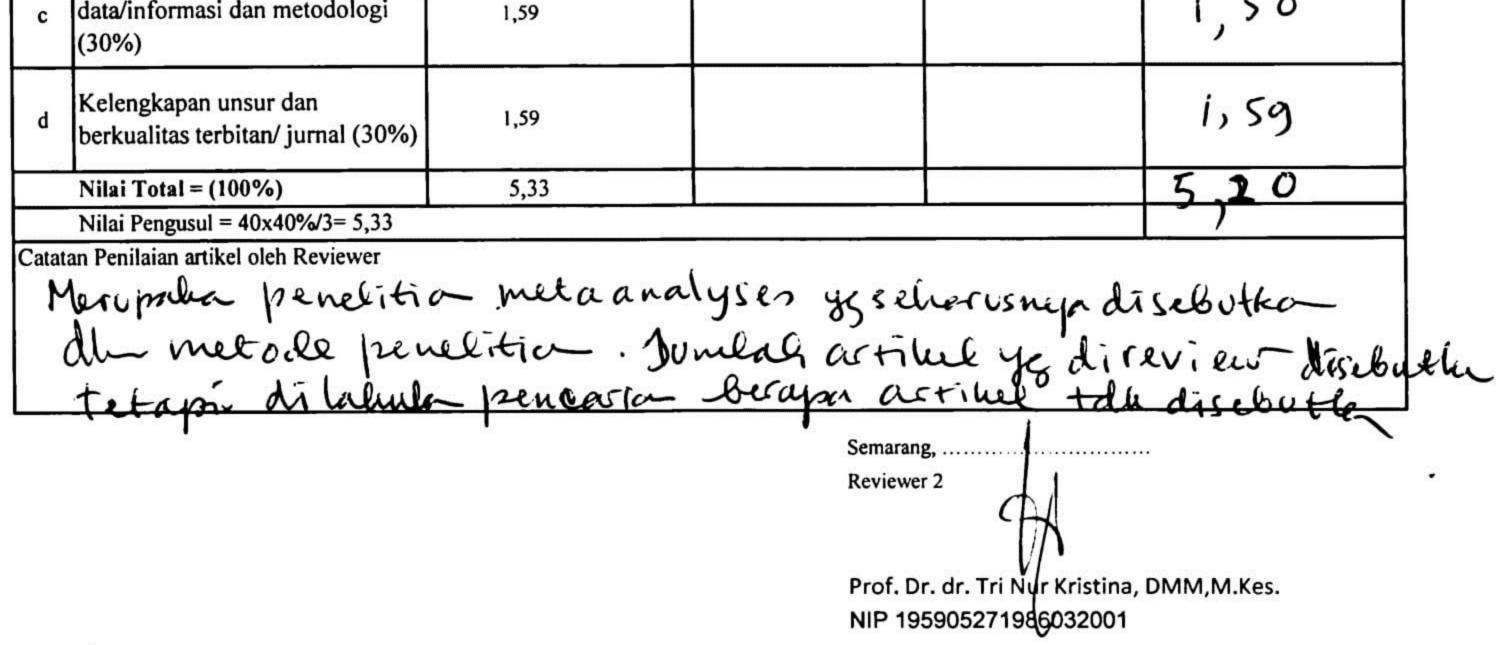
Prof. Dr. drg. Oedijani, M.S. NIP 194902091979012001

Unit kerja : Fakultas Kedokteran Bidang Ilmu : Ilmu Kedokteran Jabatan/pangkat : Guru Besar

Judul Jurnal Ilmiah (Artikel)	LEMBAR HASIL PENILAIAN SEJAWAT SEBID KARYA ILMIAH : JUR : Psychosocial Associated and Pre	NAL ILMIAH	
	3- 6 Months after Onset: A Syste	ematic Review	
Jumlah Penulisa Status Pengusul	: 4 orang : Fitria Handayani, Setyowati, Dwi Pudjonarko, Dian Ratna Sawitri		
Identitas Jurnal Ilmiah	 a. Nama Jurnal b. Nomor ISSN c. Volume nomor bulan tahun d. Penerbit e.DOJ artikel (Jika ada) 	 PJMHS 1996-7195 Vol.13, No.4, Oct-Dec, 2019 Department of Surgery, Mayo Hospital - 	
	f. Alamat web Jurnal g.Terindeks di #	 http://pjmhsonline.com/2019/oct_dec/index.htm SCOPUS 	
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а	Kelengkapan unsur isi artikel (10%)	0,533			0,53
b	Ruang lingkup dan kedalaman pembahasan (30%)	1,59			1,58
	Kecukupan dan kemutahiran data/informasi dan metodologi	1.59			1 50



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Quality of Pharmaceutical Education Ensures A better Pharmaceutical Care

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Themes of Conference

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6 – 7 / November 2019

CONFERENCE PROGRAM 1st Day: Wednesday 6 November 2019

- Opening Ceremony (starts at 9 am)
- Panel Discussion about Quality of Postgraduate Pharmaceutical Education organized by Dr. Masar Basim Mohsen and presented by the following international visitors
- Constantin Mircioiu (Romania)
- Mohammed Azmi Bin Ahmed (Malysia)
- Hasan Shikoh (United Kingdom)
- Coffee break
- Drugs and medical appliances fair and poster presentations

1st Scientific Session

Chairman: Prof. Saad Abdul Rahman

Chairman deputy: Assist. Prof. Inam Sameh Arif

- The session starts from 12 pm until 1 pm
- Rescuing the functional deficits and meliorating regeneration capacity of hypertrophy muscle via genetic manipulation
 Solid Optimized (12.12.12.5 pm)
 - Dr. Saleh Omairi (12-12.15 pm)
- Formulation and Evaluation of Oral Disintegrating Tablets of Etoricoxib using Various Super-disintegrants
 Dr. Shaikh Haron (India) (12.15-12.30 pm)
- Improvement of hospital discharge summary among patients with acute heart failure: pharmacist -based intervention

Mrs. Helen Faris Marzok (12.30-12.45 pm)

 Effect of CO Q10 and candesartan on male rats with lung fibrosis

Mrs. Fatima Mohammed Saed (12.45-1.00 pm)

Discussion

> Lunch

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Pharmacy Care

- Tissue Culture Applications
 - Natural Products
- Pharmacology of drugs
- Clinical Laboratory Sciences
- Techniques of Drug Industry





2nd Day: Thursday 6 November 2019

- Panel Discussion about Quality of Undergraduate Pharmaceutical Education organized by Dr. Athmar Dhaher Habeeb and presented by the following international visitors (9 – 10 am)
- Munther Al-Kadhimi (United Kingdom)
- Rawia Abdelhadi ElSayed (Egypt)

1st Scientific Session

Chairman: Prof. Qasim Al-Shamma'a Chairman deputy: Assist. Prof. Bahir A.Razzak

- The session starts from 10 am until 11 am
- Anthelmithic activity of Methanolic extract of *Phaseolussemierectus (L.)* Dr. Dora Babu (10.00-10.15 am)
- Evaluation of the anti-inflammatory and antioxidant effect of curcumin as additive therapy to meloxicam in management of knee osteoarthritis Mrs. Mais Saadi Baqir (10.15-10.30 am)
- Vitamin D3 status and insulin resistance in Iraqi patients with osteoarthritis disease Dr. Aufaira Nasif (10.30-10.45 am)
- Preparation and In-Vitro Evaluation of Ketotifen Fumarate as Rectal Suppositories Assist. Lec. Rafid Mohammed (10.45-11.00 am)
- Discussion

2nd Scientific Session

Chairman: Prof. Nidhal K. Marie

<u>Chairman deputy</u>: Assist. Prof. Hamoudi Al-Sonboli The session starts from 11.00 am until 12.00 pm

 Development and validation of bioanalytical method for determination of valsartan concentration in human plasma

Pharmacist Samir Hasson Aziz (11.00-11.15 am)

- Detection of stigmasterol in *Calen* (*Asteracea*) grown in Iraq by GC/. Mrs. Noor Ali Kadhim (11.15 am
- Serum hepcidin and ferritin level of patients with non-transfusion depermajor and intermedia Dr. Eham Amir Ali (11.30-11.45 a)

Discussion

3rd Scientific Session

Chairman: Prof. Laith Hamza Chairman deputy: Assist. Prof. Huda Ja

▶ The session starts from 12 pm unt

- The role of clinical pharmacists in cardiovascular disease risk factors patient sample of Iraqi patient Mr. Alhussain Safaa Hussain (12.0
- Molecular modelling, drug design evaluation of new celecoxib deriva cyclooxygenase-2 inhibitors Dr. Basma Munjid Abdul Razzak (
- Design, synthesis, preliminary pha evaluation, molecular docking and 4-thiazolidinone derivatives bearin targeting cyclooxygenase enzyme Mr. Mustafa Mahir Allawi (12.30-
- Preparation and evaluation of imm containing famotidine nanoparticle Mrs. Marwa Malik (12.45-1.00 pm
- Discussion
- > Lunch

State of Kuwait Prize for the Control of Cancer, Cardiovascular Diseases and Diabetes in the Eastern Mediterranean Region

The State of Kuwait Prize for the Control of Cancer, Cardiovascular Diseases and Diabetes in the Eastern Mediterranean Region is one of several Foundation awards, administered by the World Health Organization, which acknowledges the work of well-known scientists, researchers or dedicated people who have greatly contributed to the advancement of public health.

Purpose

The purpose of the prize is to recognize individuals who have made an outstanding contribution in prevention, control or research in one or more of the following disease groups: cancer, cardiovascular disease and diabetes.

Eligibility

The Prize will be awarded to one or more persons for making an outstanding contribution in prevention, control and research in one or more of the following disease groups: cancer, cardiovascular disease and diabetes.

Current and former members of the WHO Secretariat shall not be eligible to receive the Prize nor should the candidature of a deceased person be submitted to the Foundation Committee, unless death occurs after the nomination has been made.

A candidate who has been previously awarded, and has been renominated after several years, will only be eligible if a new contribution has been made.

Candidates are more likely to receive the prize (maximum three recipients per year, one per disease) if they fulfil the following criteria:

- Contribute to the successful formulation and implementation of national policy and strategy for one or more of the following disease groups: cancer, cardiovascular disease and diabetes.
- Submit documentary evidence that research and other programmes have been translated into policy and have contributed to improving prevention and/or control in one or more of the three disease groups.

In order to facilitate the assessment of their work, candidates will be requested to upload documentation in support of their application, illustrating how they made a substantive contribution in prevention, control or research in one or more of the three disease groups. The Foundation Committee reserves the right to request further information from the applicant to better review his/her application.

Nature of the prize and attribution

The prize consists of a bronze medal and a sum of money.

The prize is presented to the recipient, or representative thereof, in case of absence, at the Regional Committee for the Eastern Mediterranean by the Committee's Chairman.

Deadline for submission

The deadline for submission for the 2018 State of Kuwait Prize for the Control of Cancer, Cardiovascular Diseases and Diabetes in the Eastern Mediterranean Region is 30 June 2018.

Prize timeline

A list of the shortlisted candidates will be sent to national health administrations for endorsement from July to mid-August 2018.

The Regional Committee for the Eastern Mediterranean in October 2018 will decide which candidate will receive the prize, which will be awarded to the recipient the following year at the Sixty-Sixth Session of the Regional Committee for the Eastern Mediterranean in October 2019.



REGIONAL OFFICE FOR THE Eastern Mediterranean

http://kuwaitprize.emro.who.int/ Deadline for online submission 30 June 2018 Home Checklist Editorial Policy Format Requirement Plagiarism Policy Submission Review Procedure

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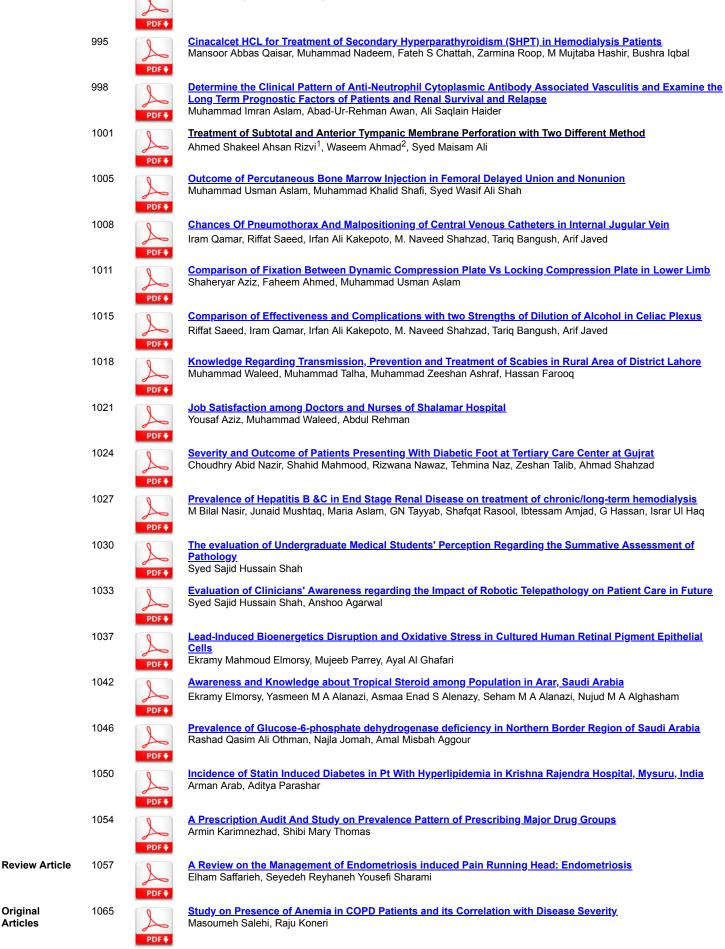
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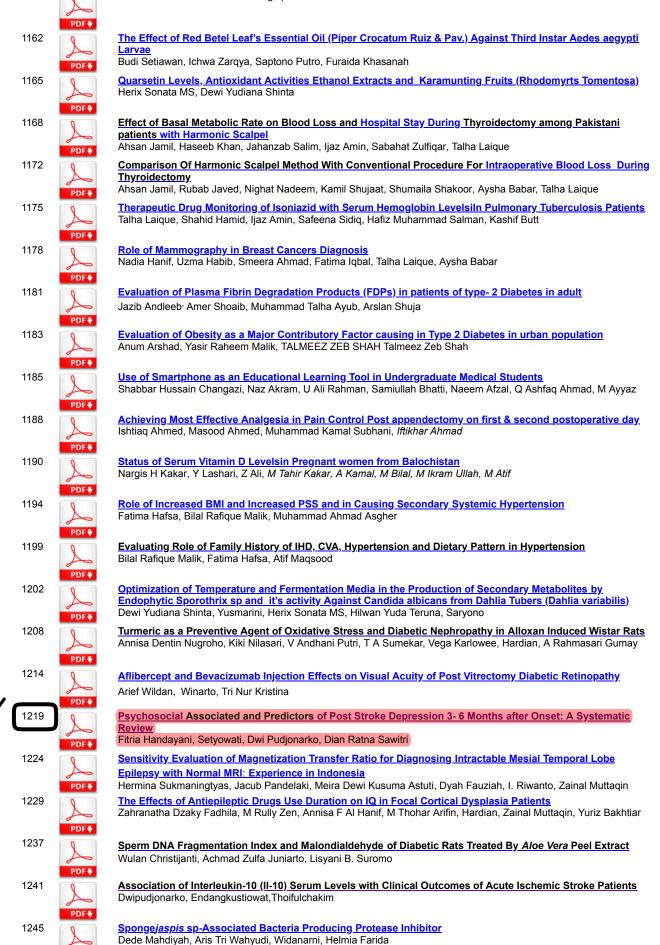
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Integrating 5As for the Management of Overweight and Obese Adults in Malaysian Primary Care

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5As obesity management in primary care

ABSTRACT

Malaysia has been reported to have the highest prevalence of obesity among Southeast Asian countries. The recent Malaysian National Health and Morbidity Survey also found that the prevalence of overweight and obesity has markedly increased as compared to fifteen years ago. It can be attributed to changes in dietary and physical activity patterns that are a consequence of modern environmental and societal changes. Primary care has been well known to be successful in providing care for chronic diseases. However, interventions for obesity in primary care have seldom been documented in Malaysia. In both government and private primary care clinics, initiation of discussion and counselling for patients with obesity are infrequent. This article will discuss the 5*As* intervention, which is based on behaviour change theory, as a feasible initiative to manage obesity and overweight patients in Malaysian primary care.

Keywords: Obesity; Primary care; 5As; Counselling

OBESITY AND MALAYSIA'S PRIMARY CARE

Obesity poses a significant public health concern worldwide, with its prevalence tripling since 1975 to over 1.9 billion individuals now classified as overweight and 650 million obese.¹ Once considered a problem of the high income countries, obesity and overweight now plague low to middle income countries as well. In addition to their previous challenges pertaining to infectious illnesses and malnutrition, they also face a drastic growth of obesity and overweight. This double burden of diseases has grave economic perils and strain the overburdened health system in these countries. For instance, in Asia-pacific, the monetary burden due to overweight and its complications such as coronary artery diseases ranges from 1.5% to 9.9% of the total health-care expenses.² This rapid transition in trends of obesity and overweight can be attributed to changes in dietary and physical activity patterns that are a consequence of modern environmental and societal changes.1

The World Health Organization defines an overweight individual as having a body mass index (BMI) $\geq 25 \text{kg/m}^2$ and obesity as a BMI \geq 30kg/m^{2,1} The indices for diagnosing obesity among Asians are lower than their European counterparts because Asians have more visceral adipose tissue than Europeans.³ In Asian context, the BMI cut-off levels have been modified such that $\geq 23 \text{kg/m}^2$ indicates a mild increase in risk, while a BMI \geq 27kg/m² marks high risk for cardiovascular diseases and diabetes⁴. Using these diagnostic criteria in Malaysia, at least five large scale surveys have documented prevalence of obesity including a series of National Health and Morbidity Surveys (NHMS).⁵ Malaysians report one of the highest rates of obesity among the Southeast Asian countries. The most recent estimates reported in the NHMS (2015) place the prevalence of overweight individuals at 30.0% and obesity at 17.0%, a four-time increase in prevalence rates of obesity since 2004⁵.

The rapid rise in the prevalence of individuals with obesity is a major public health concern in Malaysia, with several stakeholders prompting action at the national level. These efforts spanned across prevalence surveys, documentation of nutritional behaviours and introduction of public health interventions combating obesity. The Technical Working Group on Nutrition Research gave birth to the Nutrition Research Priorities in Malaysia (NRPM 2016 to 2025), whereby fourteen research priority areas have been set to aid in our understanding of obesity in Malaysia, the effectiveness of existing interventions and design new modalities.⁶ Despite these major efforts, so far in Malaysia, only five studies have reported the development and evaluation of interventions for obesity⁶.

The successful role of both government and private primary care clinics (PCCs) in providing preventative and treatment interventions for chronic diseases has already been documented.⁷ However, PCC focused interventions for obesity have seldom been documented in Malaysia where a majority of the population visits PCCs for management of non-communicable diseases. In these PCCs, counselling for patients with obesity is seldom done owing to a lack of competency in obesity management among providers; and lack of time and financial incentivization^{8,9}. То overcome these challenges, Behaviour Change Theory (BCT) based interventions for obesity specifically designed for a PCC setting may be a cost-effective initiative¹⁰. One of the BCT derived interventions is 5As (Table 1), which is applicable across all health settings. However, the 5As acronym has always been synonymous with smoking cessation intervention and unheard of to manage weight problems in Malaysia. Thus, the discussion about 5As in this article may serve as an initial step to better manage obesity in the country.

Pattern of Injuries in road traffic accidents in Ar'ar central hospital

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ABSTRACT

Background: In Saudi Arabia, road traffic accidents are becoming a serious health problem due to its rapid expansion of road construction and increase in the number of vehicles.

Aim: To find the pattern of injuries in road traffic accidents.

Methods: This prospective study was conducted in Ar'ar Central Hospital, Saudi Arabia from Jan to June 2018. All the patients with road traffic accidents who remained admitted for more than 24 hours were included in the study. The data was collected on a structured proforma. The information was obtained on variables such as sociodemographic profile, mechanism of injury and time at which the accident occurred. Medical records of the victims were reviewed to obtain information regarding body region injured and types of injury.

Results: Out of 124 persons, the majority of the injured were males (88%) aged between 20-40 years (53.2%). Over speeding was the most common reported cause of accident (62.1%). There was statistically significant (p=0.016) difference between the different age groups regarding the reported time of the accidents. Limbs were the commonest site for injuries (41%), followed by Head and neck (24.2%).

Conclusion: Over speeding by young males is a critical factor in RTA. Fractures are the commonest injuries and limbs are the most frequently injured site in road traffic accidents.

MeSH words: Road traffic accidents (RTA), Pattern of injuries, Fracture, Wound

INTRODUCTION

Road traffic accident is a significant but preventable cause of morbidity and mortality which accounts for heavy economic burden on health-care system¹. The World Health Organization (WHO) defined Road Traffic Injury (RTI) as "a fatal or non-fatal injury incurred as a result of a collision on a public road involving at least one moving vehicle "². Each year road traffic accidents take the lives of 1.2 million people around the world and millions more are seriously injured.³

In Saudi Arabia, road traffic accidents are becoming a serious health problem due to its rapid expansion of road construction and increase in the number of vehicles. It has been reported that more than 6 million cars are there on the roads of the country.⁴This resulted in a large increase in the number of road traffic accidents with high mortality and morbidity leading to a serious health problem. Previous studies have shown that casualty and fatality rates in UAE and in other Gulf countries are much higher than in the developing countries.^{5, 6} The World Health Organization's (WHO) Global Status Report on Road Safety, reports that mortality due to road traffic accidents per 100 000 population in Saudi Arab is 24.8 (> 130,000 deaths annually)⁷.

The pattern of injuries varies with the speed and type of the vehicle, the position of the victim in and outside the vehicle and use of the seat belt³. Very few local studies are available on the pattern of injuries in road traffic accidents. This study is planned to find the pattern of injuries in road traffic accidents in patients admitted in Ar'ar Central Hospital, Ar'ar, Saudi Arabia.

METHODOLOGY

This prospective study after approval from institution review board was conducted in a period of six months from

January 2018 to June, 2018 in Ar'ar central hospital of Northern region of Saudi Arabia. All road traffic accident patients who were admitted for at least 24 hours were included in the study. Patients who were treated in emergency department and were sent home on oral medications or patients who were brought dead due to RTA were excluded from the study.

Informed consent was obtained from all patients or from their attendants in case of children or unconscious adults. Data confidentiality was warranted through all steps of the research projects. Patients or their close relatives (if patients were unable to give interview) were interviewed. The data was collected on a structured proforma. The questionnaires was designed to obtain information on variables included in the study such as socio-demographic profile (age and gender), mechanism of injury, type of road users (pedestrians, drivers, passengers) and time at which the accident occurred. Additionally, medical records of the victims were reviewed to obtain information regarding body region injured and types of injury.

The data was analyzed using the Statistical Package for Social Science (SPSS) version 20. Mean ± standard deviation was calculated for age. Frequencies and percentages were calculated for gender, nature of injury and body region involved. Descriptive statistics were used and statistical significance was tested for using the chisquare test.

RESULTS

The current study was conducted to evaluate pattern of injuries among RTA victims in Arar during the period January to June, 2018. One hundred twenty-four persons were included in the study. Their demographic data related to ages and genders are shown in table (1). The majority of the traumatized persons 109 (88%) were males aged