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Identitas Jurnal Ilmiah : a. Nama Jurnal : International Journal of General Medicine  
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f. DOI artikel (Jika ada) : <https://doi.org/10.2147/IJGM.S247438>  
g. Alamat web Jurnal : <https://www.dovepress.com/seizure-outcomes-in-patients-with-complete-versus-anterior-corpus-call-peer-reviewed-fulltext-article-IJGM>  
h. Terindeks di : SQOPUS (Q2) SJR 0,722  
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Semarang, 18 Januari 2021  
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Prof. Dr. dr. Tri Nur Kristina, DMM, M.Kes  
NIP 195905271986032001  
Unit kerja : Fakultas Kedokteran  
Bidang Ilmu : Ilmu Kedokteran  
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**LEMBAR**  
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Semarang, 22 Desember 2020  
Penilai 2



Prof. Dr. dr. Tri Indah Winarni, M.Si.Med, PA  
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International Journal of General Medicine Open Access  
Volume 13, 2020, Pages 105-110

## Seizure outcomes in patients with complete versus anterior corpus callosotomy: Analysis of outcome (Article) (Open Access)

Arifin, M.T.  Muttaqin, Z., Bakhtiar, Y., Andar, E., Priambada, D., Kurnia, H., Risdianto, A., Tsaniadi, K., Kusnarto, G., Bunyamin, J. 

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Department of Neurosurgery, Faculty of Medicine, Diponegoro University, Kariadi Hospital, Semarang, Indonesia

### Abstract

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Introduction: Corpus callosotomy (CCT) is a palliative procedure to treat injurious drop attacks or multifocal/generalized seizures in which resection of the epileptogenic focus is not feasible. We are presenting our experience in treating intractable epilepsy patients by CCT procedures. Methods: We observed 16 patients who underwent callosotomy (male to female ratio 7:9; adult to pediatric ratio 3:13). Initial seizure frequency was reported ranged from 1 to 2 attacks daily to very often (more than 20 episodes daily). Results: Our observation showed that among patients with drop attacks, complete and >90% seizure freedom was reported by 4 and 6 of 13 patients, respectively (76.9% combined). Conclusion: Our observation showed that corpus callosotomy yielded good outcome in patients with intractable epilepsy in Indonesia. Our observation showed total callosotomy achieved complete seizure freedom better compared to partial callosotomy patients. © 2020 Thohar Arifin et al.

### SciVal Topic Prominence ⓘ

Topic: Corpus | Drug Resistant Epilepsy | Generalized Epilepsy

Prominence percentile: 63.345 ⓘ

### Author keywords

Corpus callosotomy Drop attacks Indonesia

### Indexed keywords

EMTREE medical terms:

- adolescent adult anterior corpus callosotomy Article child clinical article
- clinical observation controlled study drop attack electroencephalography female
- human Indonesia intractable epilepsy male morbidity neurosurgery
- nuclear magnetic resonance imaging observational study outcome assessment
- postoperative care preoperative evaluation preschool child school child sex ratio
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Dr Fraser

He trained as an ophthalmologist initially in Newcastle and then completed his training at Moorfields Eye Hospital. At Moorfields he was also a research fellow initially looking into risk factors for late presentation of glaucoma and later as the Friend of Moorfields funded researcher looking at the genetics of glaucoma. He was awarded his MD in 2000.

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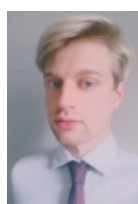
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His main clinical interest is in glaucoma in which he completed sub-speciality training at Moorfields. His research interests also include glaucoma but more widely he is interested in factors that alter compliance with eye medications. He also has an interest in evidence based medicine and is an editor for the Cochrane Eyes and Vision group. He has published over 50 peer reviewed articles and over 100 presentations at scientific meetings. He has written chapters for 7 textbooks and has co-written a manual for eye care.

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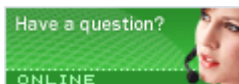


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REVIEW

## **Demographic and Clinical Factors Associated with Development of Type 2 Diabetes: A Review of the Literature**

Pinchevsky Y, Butkow N, Raal FJ, Chirwa T, Rothberg A

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## **Pulmonary Function Tests and Their Associated Factors Among Type 2 Diabetic Patients at Jimma Medical Center, in 2019; Comparative Cross- Sectional Study**

Tesema DG, Gobena T, Ayalew A

[International Journal of General Medicine 2020](#), 13:111-119

Published Date: **8 April 2020**

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## **Seizure Outcomes in Patients with Complete versus Anterior Corpus Callosotomy: Analysis of Outcome**

Thohar Arifin M, Muttaqin Z, Bakhtiar Y, Andar E, Priambada D,  
Kurnia H, Risdianto A, Tsaniadi K, Kusnarto G, Bunyamin J

[International Journal of General Medicine 2020](#), 13:105-110

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## **Association of Serum Levels of Vitamin D with Blood Pressure Status in Northern Iranian Population: The PERSIAN Guilan Cohort Study (PGCS)**

Joukar F, Naghipour M, Hassanipour S, Salari A, Alizadeh A,  
Saeidi-Saedi H, Mansour-Ghanaei F

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## REVIEW

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[International Journal of General Medicine 2020](#), 13:89-97Published Date: **10 March 2020**

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**The Predictive Value of Selenium in Diagnosis of Gestational Diabetes: A Nested Case-Control Study**

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## REVIEW

**Vocal Feminization for Transgender Women: Current Strategies and Patient Perspectives**

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[International Journal of General Medicine 2020](#), 13:43-52Published Date: **12 February 2020**

# Pulmonary Function Tests and Their Associated Factors Among Type 2 Diabetic Patients at Jimma Medical Center, in 2019; Comparative Cross-Sectional Study

This article was published in the following Dove Press journal:  
International Journal of General Medicine

Dereje Gemed Tesema<sup>1</sup>  
Teshome Gobena<sup>2</sup>  
Almaz Ayalew<sup>2</sup>

<sup>1</sup>Mettu University, Faculty of Medical Sciences, Department of Biomedical Sciences, Mettu, Ethiopia; <sup>2</sup>Jimma University, Institute of Health, Faculty of Medical Sciences, Department of Biomedical Sciences, Jimma, Ethiopia

**Background:** The presence of widespread lung microvascular circulation and abundant connective tissue with a large reserve raises the possibility that the lung may be a target organ of the pathologic processes induced by type 2 diabetes. Pulmonary function tests (PFTs) are noninvasive medical tests that show how well the lungs are working.

**Objective:** The aim was to compare pulmonary function tests (PFTs) and their associated factors among type 2 diabetic patients and non-diabetics at Jimma Medical Center (JMC).

**Methods:** A comparative cross-sectional study was conducted at JMC, Jimma, Southwest Ethiopia among 298 study participants from April 1 to May 30, 2019. A face-to-face interview with semi-structured questionnaire was conducted. Forced vital capacity (FVC), forced expiratory volume in one second (FEV<sub>1</sub>), ratio of FEV<sub>1</sub>/FVC, peak expiratory flow (PEF), and forced expiratory flow (FEF<sub>25-75</sub>) were recorded by using a digital Spirometer. Independent samples *t*-test, simple and multiple linear regression analysis were used.

**Results:** The present study indicated that means of the PFTs among type 2 diabetics were significantly reduced when compared to their matched non-diabetics (FVC (%) ( $m=73.7 \pm 13.8$  vs  $m=93.8 \pm 12.3$ ), FEV<sub>1</sub> (%) ( $m=76.4 \pm 13.4$  vs  $m=93.3 \pm 12.4$ ), FEV<sub>1</sub>/FVC (%) ( $m=78.99 \pm 11.4$  vs  $m=96.6 \pm 9.33$ ), PEF (L/s) ( $m=3.91 \pm 0.28$  vs  $m=5.03 \pm 0.35$ ), and FEF<sub>25-75</sub> (L/s) ( $m=2.89 \pm 0.75$  vs  $m=3.39 \pm 0.82$ )). This study also indicated that body mass index (BMI) ( $\beta=-1.93$ ,  $P<0.001$ ) and fasting blood sugar (FBS) ( $\beta=-0.22$ ,  $P<0.001$ ) were negative predictors of FVC%. BMI ( $\beta=-1.93$ ,  $P<0.001$ ) and FBS ( $\beta=-0.29$ ,  $P<0.001$ ) were negative predictors of FEV<sub>1</sub>%. BMI ( $\beta=-1.403$ ,  $P<0.001$ ) was a negative predictor of mean FEV<sub>1</sub>/FVC. BMI ( $\beta=-1.39$ ,  $P<0.001$ ) and FBS ( $\beta=-0.15$ ,  $P<0.001$ ) were negative predictors of mean PEF (L/s). BMI ( $\beta=-0.075$ ,  $P<0.001$ ) and FBS ( $\beta=-0.075$ ,  $P<0.001$ ) were negative predictors of FEF<sub>25-75</sub> (L/s).

**Conclusion:** The present study showed that there were significantly reduced mean scores of FVC, FEV<sub>1</sub>, FEV<sub>1</sub>/FVC, PEF, and FEF<sub>25-75</sub> among type 2 diabetic patients as compared to non-diabetic participants. The FBS and BMI were independent risk factors of the PFTs among the diabetics, unlike among non-diabetic participants.

**Keywords:** type 2 DM, PFTs, associated factors, Jimma Medical Center

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## Background

Diabetes mellitus (DM) is a systemic metabolic disorder characterized by the presence of chronic hyperglycemia accompanied by changes in the metabolism of

# Association of Serum Levels of Vitamin D with Blood Pressure Status in Northern Iranian Population: The PERSIAN Guilan Cohort Study (PGCS)

This article was published in the following Dove Press journal:  
International Journal of General Medicine

Farahnaz Joukar<sup>1,2,\*</sup>

Mohammadreza Naghipour<sup>1,\*</sup>

Soheil Hassanipour<sup>1,2</sup>

Arsalan Salari<sup>3</sup>

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\*These authors contributed equally to this work

**Background:** Evidence in the last decades has indicated an association between vitamin D and cardiovascular risk factors including blood pressure. The present study aimed to determine whether serum 25-hydroxyvitamin D is independently associated with blood pressure in a large population-based study.

**Methods:** The study was based on subjects from PERSIAN Guilan Cohort Study (PGCS), a prospective, population-based cohort study in Guilan, Iran. In 9520 men and women, aged 35–70 years, serum 25-hydroxyvitamin D, systolic and diastolic blood pressure were measured. Multiple logistic and linear regression analyses were conducted with adjustments for demographic factors (age and gender), anthropometric characteristics (waist circumference and body mass index), lifestyle variables (physical activity, alcohol, and smoking consumption), and renal function (serum creatinine).

**Results:** Fully adjusted linear regression analyses revealed a weak but statistically significant negative association between serum 25-hydroxyvitamin D levels and systolic blood pressure ( $\beta = -0.02$ , 95% CI =  $-0.052$  to  $-0.0001$ , P-value = 0.04), whereas vitamin D status was not significantly associated with diastolic blood pressure ( $\beta = -0.01$ , 95% CI =  $-0.026$  to  $0.009$ , P-value = 0.3). Serum 25-hydroxyvitamin D status showed no significant association with the presence of hypertension (OR 1.09, 95% CI = 0.94 to 1.25 for the lowest (25OHD <12 ng/mL) versus the highest (25OHD  $\geq 20$  ng/mL) category).

**Conclusion:** Lower serum vitamin 25 (OH) D levels were associated with higher systolic blood pressure; however, it was not associated with diastolic blood pressure and presence of hypertension.

**Keywords:** vitamin D, blood pressure, Guilan cohort study, Iran

## Introduction

Vitamin D deficiency is prevalent in the Islamic Republic of Iran.<sup>1</sup> Vitamin D has been known to maintaining bone health and mineral homeostasis for many decades, but recent research has shown that vitamin D receptors are present on a wide range of tissues, including the myocardium and the endothelium, proposing a much wider variety of physiological functions for vitamin.<sup>2–4</sup>

Clinical and epidemiological evidence in the last decades has indicated an association between vitamin D and cardiovascular risk factors including blood pressure.<sup>5,6</sup> Evidence demonstrates that vitamin D may regulate blood pressure by direct vascular effect via vitamin D receptors on endothelial cells,<sup>7</sup> and regulating the renin-angiotensin system via effects on the juxtaglomerular apparatus.<sup>8,9</sup>

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