MedEdu Tabuk

Weekly Newsletter

Department of Medical Education, Faculty of Medicine, University of Tabuk

January 24, 2018
Volume 2; Issue 8

In and Around Tabuk

Sharma Beach overlooking the Red Sea is less than two hours drive from University of Tabuk. Tourists can rent tents for as low as 50 riyals to enjoy the beach in private - Dr. Tanveer

MedEdu Tabuk Student Section

Message From the Editor

The Medical Education Committee in its last meeting has decided to include the participation of students in the weekly newsletter. In the future, it will include articles written by students. The newsletter would also be distributed among students by email. I look forward to your kind suggestions- **Dr. Tanveer Raza**

SETTING THE STANDARD FOR TYPE A MCQ

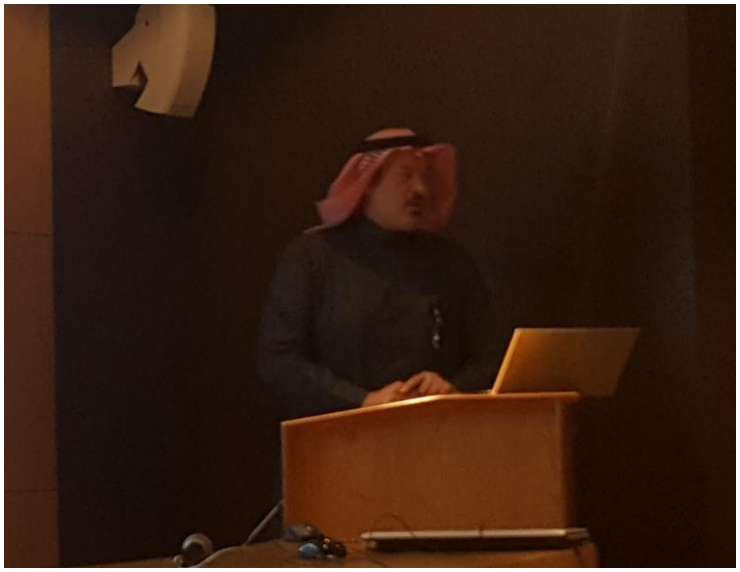
Dr. M A K SHAWIR FRCS

It has been a customary issue to decide who is going to pass and who is going to fail among our students during their various exams .This means we have to establish the minimum overall pass level (MPL) which represents the pass for each individual MCQ (MPI) .In our surgical department we adopts modified Angoff method to determine the final pass mark (MPL).We encourage other departments in our college to pursue a similar course. Regarding what is the actual technique kindly have a look at the attached leaflet. I similar proposal

Dr. Tanveer Raza.
Prof. M. Ihab Mostafa
Dr. M. Zubair
Phone: 0537251324
Email:

has been sent to the academic affairs. If you have any comments, views, suggestions please do not hesitate to contact me. **Please see attachment**

THIS WEEK LAST WEEK



FOOT COMPLICATION IN DIABETES

Dr. Mohammad Zubair
Department of Medical Microbiology, Faculty of Medicine,
University of Tabuk, Tabuk, Kingdom of Saudi Arabia

The foot is a complex structure that requires delicate and deliberate orchestration for normal weight bearing and ambulation in diabetes. The problem of foot in diabetic patients account for frequent hospital admission than any other long-term complications of diabetes which leads to increased risk of morbidity and mortality. The foot in diabetes is at high risk for complications because of its change in physiological changes that cannot bear stress and its own body weight. Diabetic foot ulcers (DFUs) are one of the most common and serious complications of diabetes and affects 15% of all diabetic patients and results in a high financial burden. There was 15% higher rate of lower limb amputations in diabetic patients compared with non-diabetic patients and more than 50% of diabetic amputees need a subsequent amputation of the contralateral limb within 4 years of the loss of the first leg. Diseases of lower extremity, such as peripheral neuropathy, peripheral arterial disease, foot ulceration, or lower extremity amputations (LEA) are known to occur twice as commonly in diabetes as compared to non-diabetics out of whom 30% are older than 40 years. Diabetes associated lower extremity complications are emerging as a noteworthy public health concern in both developing and developed countries. The lifetime risk to a person with diabetes for developing a foot ulcer could be as high as 25%. The primary factors in the development of these lesions are vascular insufficiency and peripheral neuropathy. Decreased tissue blood flow and insensitivity to pain results in tissue damage and poor healing of what might otherwise be minor lesions. Approximately 20% of diabetic patients with foot ulcer will primarily have inadequate arterial blood flow, ~50% will primarily have neuropathy, and approximately 30% will have both conditions. Neuropathy, peripheral vascular disease, and reduced resistance to infections are recognized risk factors leading to the development of DFUs, which have all the characteristics of a chronic wound. **For book chapter please refer to attachment**

[*Editor's Note:* The book chapter falls under conventional copyright laws, which should be respected. If you have any queries please contact the author or me - Dr. Tanveer]

UPCOMING ACTIVITY

MEDICAL EDUCATION COMMITTEE MEETING

Date: January 31st, 2017 Wednesday

Venue: Meeting room adjacent to Vice Dean of Academic Affairs Office

Time: 9am-10am

Academic Affairs arrangement for Next Week

Prof Magdy M. ElShamy

For Female Section:

- **Medicine Module:** 6th Year, **Mid-Module MCQ Exam** on Sunday 28/1/2018
- **Medicine Module:** 6th Year, **Mid-Module OSPE** on Sunday 28/1/2018
- **Pediatrics Module:** 5th Year, Announcing the **Mid-Module Exam Results**

For Male Section:

- **Surgery Module:** 6th Year, **Mid-Module MCQ Exam** on Sunday 28/1/2018
- **Surgery Module:** 6th Year, **Mid-Module OSPE** on Sunday 28/1/2018
- **Obstetrics &Gynecology Module:** 5th Year, Announcing the **Mid-Module Exam Results**

Exam Invigilation Schedule 28/1/2018- 1/2/2018

Dr. Zubair Mohammed

Date	Module	Invigilators	Time	Venue
28/01/2018	Surgery and subspecialties	Dr. Haider Osman Dr. Hassan Moria Mr. Mahmood Hasaan Alfaifi	10am-12noon	Central Exam Hall

READER'S CORNER: Antiproliferative effect of Hepatitis C virus on mitogen-stimulated peripheral blood mononuclear cells

Prof Shereen Fawzy

We aimed to study the effect of hepatitis C virus (HCV) and sera of chronic HCV patients on phytohemagglutinin (PHA)- stimulated normal donor PBMCs and to study the effect of chronic HCV infection on some cytokine profile. Subjects and methods: 3 H-Thymidine uptake was utilized to study effect of pelleted virus and patients sera on PBMCs proliferation in vitro. The study included 337 Egyptian chronic liver patients from Ain Shams University Hospitals and 90 healthy control subjects. The patients' group included chronic hepatitis C (250 subjects), and other chronic liver diseases (87 subjects). All subjects' sera were subjected to RT-PCR for HCV RNA detection, IL-4, IL-1β, and TNF-α measurement by EIA, and biochemical measurement of ALT and albumin. Results: Treatment of PHA-stimulated normal donor PBMCs with pelleted virus led to decrease (dose response) in their rate of proliferation. This was partially reversed after addition of HCV RNA positive patients' sera. HCV RNA positive patients were significantly higher in IL-4 and ALT, and lower in IL-1β and albumin than HCV RNA negative patients. Conclusion: HCV infection suppresses early immune response. This leads to increased IL-4 Th2 cytokine. Link to Article