

REVIEW ARTICLE

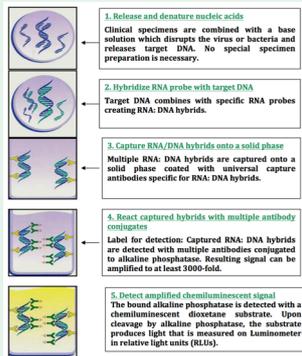
Nigella sativa and its active constituent thymoquinone in oral health

AlAttan et al summarize published reports that investigated the role of *Nigella sativa* (NS) and its active constituent, thymoquinone (TQ) in oral health and disease management. The literature studies were preliminary and scanty, but the results revealed that black seed plants have a potential therapeutic effect for oral and dental diseases. Such results are encouraging for the incorporation of these plants in dental therapeutics and hygiene products. However, further detailed preclinical and clinical studies at the cellular and molecular levels are required to investigate the mechanisms of action of NS and its constituents, particularly TQ.

see page 235

ORIGINAL ARTICLES

Detection of human papillomavirus infection by molecular tests and its relation to colonic polyps and colorectal cancer



The basic steps of the hybrid capture assay. DNA - deoxyribonucleic acid, RNA - ribonucleic acid

Gazzaz et al found that human papilloma virus (HPV) colonic colonization appears to be rare (<1%) in Saudi Arabia, which might be influenced by the cultural background. No association between HPV colonization and colorectal polyps (CRPs) and colorectal cancer (CRC) could be depicted in this cohort of patients. Based on these results, HPV colonization is not considered a risk factor for CRP/CRC in Saudi Arabia and in countries of similar cultural background. Statistical analysis did not identify any significant association between HPV colonization and the presence of CRPs/CRC. The only significant predictor of detecting CRPs/CRC on colonoscopy was symptomatic presentation (odds ratio=11.072, 95% confidence interval 4.7-26.2, $p<0.001$). Human papilloma virus colonization was detected using a hybrid capture technique of samples taken from both normal tissue, and CRPs and CRC. The association between HPV and CRPs/CRC was evaluated.

see page 256

Prevalence and risk factors of early fecal carriage of *Enterococcus faecalis* and *Staphylococcus spp* and their antimicrobial resistant patterns among healthy neonates born in a hospital setting in central Saudi Arabia

Type of bacterial isolate	n (%)
Escherichia coli	130 (35.2)
Enterococcus faecalis	73 (19.8)
Lactobacillus spp.	70 (19.0)
Klebsiella pneumoniae	23 (6.2)
Clostridium spp.	20 (5.4)
Pseudomonas aeruginosa	14 (3.8)
Staphylococcus epidermidis	13 (3.5)
Acinetobacter baumannii	9 (2.4)
Enterobacter cloacae	5 (1.6)
Staphylococcus aureus	5 (1.6)
Enterobacter aerogenes	4 (1.1)
Morganella morganii	3 (0.8)
Total	369 (100)

Distribution number of recovered positive and negative bacterial isolates from 150 examined neonate fecal specimens

El-Kersh et al found that *Enterococcus faecalis* (*E. faecalis*) did not significantly vary in relation to type of delivery, age up to 7 days, and type of feeding. The neonatal fecal carriage of multidrug-resistant (MDR) isolates should be considered as a crucial reservoir to the further spread of antimicrobial resistance genes among hospitals, cross infections, and the community. *Enterococcus faecalis* (n=73) and *Staphylococcus spp.* (n=18) were recovered. Unlike staphylococci, *E. faecalis* colonization did not significantly vary from day one up to 7 days of life, regardless of the type of feeding, but it was relatively higher among vaginally versus cesarean delivery. Both *Staphylococcus epidermidis* (*S. epidermidis*) and *Staphylococcus aureus* (*S. aureus*) carriage increase as the body weight increases, and this difference was significant ($p=0.025$) for *S. epidermidis*.

see page 280

CASE REPORT

Kimura disease. No age or ethnicity limit



The patient on presentation, with right side facial mass (arrow)

ElGhamdi et al presents a case of an 11-year-old Saudi boy, whose family were consented for reporting of his medical condition. He is not known to have any medical condition and presented to the clinic with a 5-year history of right-sided non-painful facial mass. The non-painful solitary progressively enlarging mass, tend to recur after multiple investigational and therapeutic interventions. He had a history of recurrence after a trail of excision prior to presentation. Also, there was a temporary improvement upon receiving intravenous steroids, but the swelling recurred one-year later. Embolization of right internal maxillary artery also has failed to show any resolution of the mass. There were no orbital or oral complaints in relation to that mass.

see page 315