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SYSTEMATIC REVIEW

Determinants of quality of life as measured with variants of SF-36 in patients with predialysis chronic kidney disease

Alhaji et al determine the average health-related quality of life (HRQOL) score levels and their determinants in patients with predialysis chronic kidney disease (CKD). Two thousand and 3 articles (n=2003) were identified from searches across the databases and 51 articles were retrieved after vetting. A further screening of the retrieved articles excluded 38 articles for end-stage renal disease (ESRD)/combined ESRD and CKD patients (n=18), irrelevance to set objectives (n=10), weak quality (n=6), used non-included HRQOL tools (n=3), and inaccessibility (n=1). Thirteen studies consisting of cross-sectional (n=10) and prospective cohort (n=3) studies were included in this review, following the preferred reporting items for systematic reviews and meta-analysis (PRISMA) guideline. They conclude that several risk factors influence HRQOL impairment in patients with predialysis CKD, with PCS being more impacted than MCS. The risk factors for poor HRQOL are important for future research and for improving renal care in patients with predialysis CKD.

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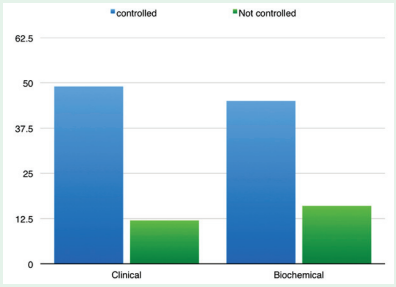
ORIGINAL ARTICLES

Growth characteristics in children with congenital adrenal hyperplasia



Clinical and biochemical control in patients affected with congenital adrenal hyperplasia

Alzanbagi et al evaluate the growth parameters in congenital adrenal hyperplasia patients in Jeddah, Saudi Arabia. A total of 90 subjects, of which 67.8% were females and 32.2% were males. Subjects who were underweight constituted 19.1% of the population, while those who were obese were estimated up to 17.6% of the population. Of the children, 25.7% were suffering from short stature and 74.3% had normal height. Approximately 11.8% of the children who suffered from short stature also suffered from hypothyroidism. Mid-parental height of those who suffered from short stature is 159.8 cm. The study This study showed a significant effect of congenital adrenal hyperplasia on both height, weight, and body mass index. Risk factors includes glucocorticoids dosage, compliance to treatment, and regular follow up. Personalized treatment approach should be followed with all patients diagnosed with congenital adrenal hyperplasia as well as close monitoring and targeted therapy.

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Prevalence of lipid abnormalities and cholesterol target value attainment in patients with stable coronary heart disease or an acute coronary syndrome in Saudi Arabia

Al Sifri et al provide an overview of the extent of hyperlipidemia in very high-risk patients, and how lipid-lowering therapy (LLT) is used in a real-world setting. A total of 737 patients were included in the study, 597 with stable CHD and 140 with ACS. Few patients in either group had an LDL-C level of <70 mg/dl, which is advocated for very high-risk patients (24.3% and 11.4%, respectively). The median distances to this value were 19.0 mg/dl (CHD) and 25.0 mg/dl (ACS). Low doses of statins were being utilized (31 and 24 mg/day for CHD and ACS, respectively), with only minimal intensification for the ACS patients after hospital admission (41 mg/day at follow-up). They conclude that achievement of recommended LDL-C levels was poor for patients with stable CHD or an ACS. Statin intensity was low, indicating huge scope for intensifying the treatment of these very high-risk patients.

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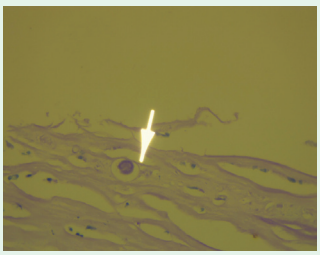
CASE REPORT

Schistosomiasis as a cause of acute cholecystitis



Microscopic image of gall bladder wall showing the presence of Schistosoma haematobium (40x magnification; Haemotoxylin and Eosin staining)

Majrashi & Al Amoodi presents a 50-year-old obese diabetic male, born in Saudi Arabia, was presented to our department for elective laparoscopic cholecystectomy. He hailed from rural area with poor socioeconomic and sanitation status. He was suffering from gallbladder symptoms since past 9 years and was on oral hypoglycemic medication. He had been following the hospital for 3 months with recurrent attacks of biliary colic and multiple emergency department visits for pain control. All throughout this period, he kept afebrile. They conclude that it is still indecisive whether the schistosomal eggs deposition in the gallbladder can cause an episode of acute cholecystitis.

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