

RECOMMENDATIONS

In the light of the results and conclusions of the current study, the following is recommended:

- In this study, CTX-II was elevated in the serum and synovial fluid of knee osteoarthritis patients, so we recommend other studies on large numbers of patients to determine the link between OA of the knee and CTX-II.
- We recommend other studies to demonstrate the relation between OA at other sites e.g; (the hip joint) and CTX-II.
- In this study, CTX-II highly correlated with severity of OA according to radiographic changes. So it could be used as a marker of OA severity, so we recommend other studies to determine its role in severity of OA.

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الملخص العربي

الالتهاب الغضروفي المفصلي هو سبب شائع من امراض المفاصل التنكسية التي تتميز بتغيرات في الغضروف المفصلي مع تقدم السن، مما يؤدي الى فقدان وظيفة المفصل ويسبب عينا من المراضة والاعاقة لدى كبار السن.

الالتهاب العظمي المفصلي هو الشكل الأكثر شيوعا من التهاب المفاصل يسبب عينا كبيرا من المراضة والإعاقه وخاصة لدى كبار السن. تقليديا يعتبر الالتهاب العظمي هو مرض الغضروف المفصلي، ولكن هذا المرض هو واضح في جميع الهياكل المشتركة؛ الغضاريف والعظام تحت الغضروف، الزليلي، كبسولالمفصل والأربطة.

الالتهاب المفصلي للركبة هو السبب الرئيسي للالام الشديدة وتحديد وظائف المفصل واعتلال العضلات، ولم تكن المسببات الوراثية لهذا المرض معروفة من قبل.

اظهرت الدراسات الحديثة ان عملية الالتهاب تلعب دورا في حدوث هذا المرض وايضا تورط السيتوكينات الموالية لالتهابات كوسطاء في هذا المرض.

وقد صنف الالتهاب العظمي المفصلي كما هو الحال دائما انه ليس التهاب بالمفاصل، ومع ذلك هناك أدلة متزايدة لحدوث التهاب والإفراج الفلزي في المفصل. لذلك على المدى لم تعد مناسبة عند الإشارة إلى الالتهاب العظمي المفصلي انه مرض المفاصل التنكسية.

ويمكن تصنيف المرض الي نوعين (النوع الاساسي ويطلق عليه ايضا الابتدائي) أو النوع الثانوي وذلك وفقا لخصيته أو أهم عوامل المؤهبة.

التهاب الغضروف المفصلي الأساسي هو النوع الأكثر شيوعا وليس لديه المسببات يمكن التعرف عليه. العوامل الرئيسية التي تؤثر على درجة من المخاطر لتطويرة تشمل السن والجنس، والسمنة، والاستعداد الوراثي، الأعراض السريرية النموذجية هي الألم والتيبس، وخصوصا بعد نشاط لفترة طويلة.

الغضروف المفصلي للركبة يتكون من اربع طبقات ميكروسكوبيه وان تاكل هذا الغضروف يعتبر من التغيرات الاساسيه في مرض الالتهاب الغضروفي المفصلي. وان اكثر مكونات الغضروف هو الكولاجين من النوع الثاني و سي تلوبيبينيد(سي تي اكس ٢) يتكون خلال الميتابوليزم الذي يحدث للكولاجين من النوع الثاني.

من الطرق الحديثه في فحص المفاصل هو استخدام الموجات فوق الصوتيه حيث انها لديها العديد من الميزات مثل: عدم التعرض لاشعه - سهوله عملها - امكانيه فحص اكثر من مفصل في نفس الجلسه - تكلفه اقل - يكمن عملها بجانب سرير المريض كما يمكن من خلالها عمل حقن للمفاصل او بدل للمفاصل .

وكان الهدف من هذا العمل إلى دراسة سي تلوبيبينيد كولاجين من النوع الثاني(سي تي اكس ٢):علاقته مع التصوير بالموجات فوق الصوتيه والاشعة التقليدية والنتائج السريريه في الالتهاب الغضروفي المفصلي للركبه.

وقد اجريت هذه الدراسة على ٥٠ مريضا مصابا بالتهاب المفاصل في الركبة و- ٢٠ شخصا متطابقين العمر والجنس كمجموعة محايد.

طرق البحث اشتملت علي: تاريخ المرض واعراضه وتقييم نشاط المرض و عمل الفحوصات المعملية والاشعه التقليديه والموجات الصوتيه .

وتم موازنة مستوى (سي تي اكس ٢) فى كل مريض مع تقييم وظيفة المفصل باستخدام (WOMAC) ومقياس شدة الألم باستخدام (VAS).

وايضا تم موازنة مستوى (سي تي اكس ٢) مع كل من ESR,CRP وايضا التغيرات الاشعاعية لقياس شدة المرض.

تم الحصول على النتائج التالية :

- انه يتم التعبير عن (سي تي اكس ٢) بدرجة عالية فى مصل المرضى المصابين بالالتهاب الغضروف المفصلى .
- وقد وجدنا ان (سي تي اكس ٢) يرتبط ارتباطا وثيقا ب ESR, CRP و k-L grading للالتهاب الغضروف المفصلى.
- وجد ان هناك زيادة ذات دلالة احصائية فى معدل ESR ,CRP فى المرضى .



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قسم الأمراض الباطنة

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بالموجات فوق الصوتيه والاشعة التقليدية والنتائج السريره فى الالتهاب
الغضروفى المفصلى للركبه

رسالة مقدمة

لقسم الأمراض الباطنة - كلية الطب - جامعة الإسكندرية
ضمن متطلبات درجة

دكتور

فى

الأمراض الباطنة

من

احمد شعبان اسماعيل أبورايبية

مدرس مساعد

قسم الامراض الباطنه

[٢٠١٥ / ٢]



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الغضروفى المفصلى للركبه

رسالة مقدمة من

احمد شعبان اسماعيل أبورايبية

للحصول على درجة

دكتور

فى

الأمراض الباطنة

التوقيع

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