

RECOMMENDATIONS

1. Additional, large-scale studies targeting the Egyptian population are encouraged to further emphasize the association between DM and PSA and prostate volume.
2. BMI calculation is recommended as an additional tool for screening for prostate cancer risk.
3. Further studies should evaluate the relationship between prostate cancer treatment modalities and their relationship with DM.
4. Further large-scale studies targeting the Egyptian population should test the hypothesis that lower testosterone levels among Egyptians may be considered as a protective factor against prostate cancer.

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الملخص العربي

يعتبر مرض البول السكري مشكلة صحية خطيرة و متنامية في جميع انحاء العالم، كما انه يرتبط بالعديد من المضاعفات الحادة و المزمنة و التي قد تؤثر سلبا على حياة الافراد المصابين.

لقد تمت دراسة العلاقة بين مرض البول السكري و السرطان على نطاق واسع و تبين في معظم الدراسات التي اجريت (ولكن ليست كلها) ان مرض البول السكري يرتبط مع زيادة خطر الاصابة بعدة انواع من السرطان.

على العكس، معظم الدراسات اثبتت انخفاض خطر الاصابة بسرطان البروستاتا بين مرضى البول السكري و هذا في الغالب بسبب انخفاض مستويات هرمون التستوستيرون عندهم.

كان الهدف من إجراء هذه الدراسة هو إلقاء الضوء على أية علاقات قد تتواجد فيما بين مرض البول السكري وحجم البروستاتا أو مستضد البروستاتا الخاص (والذي يعتبر من مؤشرات نشاط البروستاتا) وكذلك بنسبة هرمون التستوستيرون (هرمون الذكورة) في المصل في عينة من ٥٠١ رجل مصري قد اتوا الى المستشفى الرئيسي الجامعي بجامعة الإسكندرية بمختلف المشاكل البولية الحميدة، و كان منهم ٢٠٧ مريضا مصابين بالبول السكري، اما المرضى الاخرين لم يكونوا مصابين بالبول السكري.

تم إجراء الفحص السريري وأخذ التاريخ المرضي لجميع الرجال المشاركين في الدراسة وكذلك تم قياس نسبة مستضد البروستاتا الخاص ونسبة هرمون الذكورة لديهم، كما انه قد تم قياس مستويات السكر الصائم و مستويات السكر التراكمي في دم مرضى البول السكري فقط. وتم تحديد أوزانهم ومعامل كتلة الجسم وكذلك تم تحديد حجم البروستاتا لديهم باستخدام الفحص بالموجات فوق الصوتية.

لقد توصلت هذه الدراسة بعد تحليل النتائج إحصائيا إلى ما يلي:

- ثمة علاقة عكسية قوية ما بين مرض البول السكري ومستضد البروستاتا الخاص في الدم.
 - أيضاً، وُجد أن حجم البروستاتا يرتبط بمرض البول السكري بصورة طردية.
 - أخيراً، أوضحت الدراسة وجود علاقة عكسية ما بين نسبة هرمون الذكورة في مصل الدم وبين مرض البول السكري. وهذا يؤكد ما توصلت إليه دراسات سابقة أكدت على وجود علاقة مشابهة.
- كما انه لوحظت نفس النتائج السابقة مع معامل كتلة الجسم و لكن كان تأثير مرض البول السكري اقوى من تأثير معامل كتلة الجسم.

حتى وقتنا هذا نحتاج الى توضيح هل وجود مستويات اقل من مستضد البروستاتا الخاص بين مرضى البول السكري و التي اثبتت في الدراسات السابقة يقلل خطر الاصابة بسرطان البروستاتا ام لا، حيث انه لو كانت الزيادات الطفيفة في مستويات مستضد البروستاتا الخاص تؤخر تشخيص سرطان البروستاتا فان مرضى البول السكري من الممكن ان يشخصوا في مراحل متاخرة من المرض.

لذلك تأثير مرض البول السكري على اكتشاف سرطان البروستاتا يحتاج الى تدقيق اكثر في الدراسات المستقبلية.

العلاقة بين مستوى مستضد البروستاتا المحدد الكلى بالدم وحجم البروستاتا ومستوى
هرمون التستوستيرون الكلى بالدم بين مرضى البول السكرى وغير مرضى البول
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الماجستير في جراحة المسالك البولية والتناسلية

مقدمة من

على الليثى غانم

بكالوريوس الطب والجراحة – جامعة الإسكندرية

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٢٠١٤

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للحصول على درجة

الماجستير فى جراحة المسالك البولية والتناسلية

موافقون

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أستاذ مساعد جراحة المسالك البولية والتناسلية

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د/ أحمد فؤاد قطب

مدرس جراحة المسالك البولية والتناسلية

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