

## ABSTRACTS OF PAPERS PRESENTED AT IMSACON 2006

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### SECONDARY CYTOREDUCTION AND POST-OPERATIVE SECOND LINE CHEMOTHERAPY WITH GEMCITABINE & CISPLATIN IN RECURRENT EPITHELIAL OVARIAN CANCER

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The role of secondary cytoreduction in recurrent epithelial ovarian cancer is not clearly defined. This study was designed to evaluate the efficacy of secondary cytoreduction and post operative and line chemotherapy with gemcitabine and cisplatin in recurrent ovarian cancer. Patients who had undergone primary cytoreductive surgery, had received chemotherapy and showed a complete response but have developed subsequent recurrence were included. Evidence of measurable disease on imaging study was required. Abdomen was opened with a vertical incision, ascetic fluid washings were removed, maximal cytoreduction was done to resect the tumor to <1 cm diameter. All patients were given gemcitabine 1250 mg/m<sup>2</sup> on day 1 and 8 and cisplatin 70 mg/m<sup>2</sup> on day 8 only. Cycles were repeated every three weeks. RECIST was used for response evaluation. Fifty-four patients were enrolled from Dec 98- Jun 05, Median age was 52 years (range 40-68). Thirty-two had previously received cyclophosphamide and cisplatin while 12 had received paclitaxel and cisplatin. The disease free interval was more than 6 months in 38 patients and less than 6 months in 14. Optimal cytoreduction was achieved in 21 (38.8%) patients only. Gut injury was seen in 4 (7.4%) and bladder perforation in 4 (7.4%). Among 21 patients with optimal cytoreduction, 10 had a CR while 11 showed a PR with chemotherapy whereas in patients with sub-optimal surgery CR was seen in 7 patients, PR in 1 and NR in 7. All patients who had a CR previously had DFI > 6 months, 17 patients are still alive at a median follow up of 16 months (range 6-42 months). Secondary cytoreduction and postoperative second line with gemcitabine and cisplatin is a reasonable treatment option for patients with recurrent epithelial ovarian cancer who present after a disease free interval of more than 6 months.

### EXTENDED SPECTRUM BETA-LACTAMASES -PREVALENCE AND CLINICAL IMPLICATIONS

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Hospital acquired infections are a major cause of morbidity and mortality in patients admitted to medical care units. The pressing requirement in treatment of severe nosocomial infections is: urgent and appropriate antimicrobial therapy. Initial antimicrobial therapy is usually empirical which can later be targeted towards a specific organism with a known sensitivity pattern once culture results have become available. Increasing microbial resistance to antimicrobials poses a major therapeutic dilemma. The most recognised mechanisms of bacterial resistance are restricted entry of antimicrobial into the microbial cell, modification of target site and enzymatic destruction of the antimicrobial. This latter is the mechanism of resistance of most aerobic gram negative bacilli to beta-lactam antibiotics, including all penicillins, cephalosporins, monobactams and carbapenems. Beta-lactamase enzymes arose as a bacterial response to the introduction of antibiotics and were first isolated in the mid 1980s. These are known to encompass a large and rapidly increasing group of enzymes. Out of this group the Extended Spectrum Beta-Lactamases (ESBL) which arose in response to the oxyiminocephalosporins such as cefotaxime and ceftazidime are by far the largest and most important member. Nosocomial prevalence and resistance data are useful tool in guiding the clinician towards the correct choice of antibiotic while initiating empirical therapy. This paper will review the national and international data on ESBL prevalence and discuss the diagnostic, therapeutic and infection control implications of infection with an ESBL producing organism.

### NEW COMBINATION TREATMENT OF VITILIGO

Sheikh & S. H. Kazami

Vitiligo is an ever increasing problem in all ages in our country. Different regimens are in practice including sun exposure, UVR, oral & topical psoralens. My paper presents an original work with a new idea where NEEDLING is combined with narrow band UVB. The needling inoculates epidermal cells (including melanocytes) into the vitiliginous patches to create a substrate and the added UVB exposure enhances melanogenesis and hence pigmentation of the vitiliginous areas.

A study of this combination is being done over 70 patients, in both sexes, in different from Jan 2005 to date. A comparison is also being done with UVB alone (without needling) in the same patients at some patches. A 30-G needle with short stem is softly pushed through the normal edge in to the vitiligo patch at the level of the D.E junction which drags epidermal cells including melanocytes as micro-inoculation to produce a small population of melanocytes in the vitiliginous area, which is then exposed to increasing doses of narrow band UVB. Photographs of all patients were taken at the start and then

every 3 weeks. This combination treatment has proved very safe and effective in vitiligo as compared to UVB alone in all age groups.

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### ABORTIONS IN THE LEGAL AND RELIGIOUS PERSPECTIVE.

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In low-income countries, approximately 200 women die each day as a result of unsafe abortions (WHO). According to United Nations Population Fund (UNFPA), each year more than 20 million young women aged between 15 and 19 years undergo unsafe abortions, which results in around 78,000 deaths and because of unsafe abortions women are at risk of developing complications.

Most women do not even know that induced abortions are illegal and often the husband agrees to the procedure. The typical profile of women seeking an abortion is a married woman with a minimum of three children

**POLICIES AND LEGISLATION:** Abortion was considered a crime unless performed in the good faith to save the life of a pregnant woman. The policy makers in Pakistan slowly recognized that women practice induced abortion in this country, often in unsafe environment endangering their lives & causing a public health problem. Revised provisions of abortion laws 1997 declares abortion as an offence with a three years of imprisonment and a full Diyah if a child is born alive.

The abortion laws are specified in PPC 338A 3380. Pakistani Law does not allow abortion in rape cases or even when the victim is insane. Pakistan's abortion law allows abortions to be performed to save the life of the woman or to provide "necessary" treatment. The law does not indicate which abortions constitute "necessary" treatment. Abortion is sometimes legal "with significant restrictions" and different verdicts for different sects of Islam. How vigorously laws are enforced vary globally. Following the International Conference on Population and Development (ICPD), held in Cairo in 1994, Pakistan has gradually integrated family planning with reproductive health services and adopted a voluntary and target-free approach to family planning services. In the end there are General Recommendations for improving Health Care, thereby reducing the back street procedures of abortion.

### ACS AND LMWH FROM CLINIC TO CATH

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(ACS) is a major public health problem throughout the globe with very high morbidity and mortality. The mortality rate is 10% at 3 months sudden cardiac death 8% to 16% at one month. The Therapeutic approach of ACS has dramatically advanced few years. It is evident by various clinical Trials that Low (LMWH) is useful in stabilizing the vulnerable plaque in ACS by reducing the high sensitivity of CRP, Interleukin 6 and increasing Nitric Oxide levels. The data from CAPTURE, TIMI 11b, NICE (I), (3), (4), MULLER, ESSENCE, FRISC, FRIC, PRAXIS, ARMADA, EVET, INTERACT, ACUTE, CRUISE and SYNERGY studies will be presented. It is concluded that LMWH in ACS has tremendous potential in reducing the morbidity and mortality and can be used effectively from (clinic to cath before, during and after PCI with or without Glycoprotein IIb/IIIa, inhibitors.

### ALTERATIONS OF P53 PROTEIN IN BENIGN AND MALIGNANT THYROID GLAND LESIONS

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Alterations of p53 protein in benign and malignant thyroid gland lesions.

Study Design : An experimental 24 weeks.

Place and Duration : The study was carried out on tissue samples that were obtained from local medical colleges of Lahore including Post Graduate Medical Institute from April to September, 2004. The study included 80 cases of resected thyroid specimen with benign or malignant thyroid disease along with the relevant clinical history and provisional diagnosis.

Among 50 benign there are two major groups; non-neoplastic. 30 cases with malignant thyroid carcinoma that include papillary, follicular, medullary and anaplastic carcinoma. On the other hand among 30 cases malignant thyroid carcinoma 26 shows the positive slides for p53 while 04 slides shows the negative result for p53.

Conclusions : However, keeping in mind the limited number of subjects studied in each sub group and the rather low correlation coefficients, these possibilities would have to be substantiated in a larger study population