

**ELECTRONIC GUIDE TO THESES APPROVED BY PHYSICAL  
THERAPY DEPARTMENT FOR NEUROMUSCULAR AND  
NEUROSURGICAL DISORDER AND ITS SURGERY  
PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

**Physical Therapy Department for Neuromuscular and  
Neurosurgical Disorder and Its Surgery**

Master Degree  
2010

Author	:	Abd El-Hamied Ibrahim El-Sayed Mohamed
Title	:	Effect of cervical collars on postural stability in patients With cervical discogenic radiculopathy/
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Ebtessam Khatab Gad-El Mawla
	2.	Mohamed El-Sayed
	3.	Abeer Abo Bakr El Wishy
Degree	:	Master.
Year	:	2010.
Abstract	:	<p><b>Background:</b> Patients with cervical radiculopathy are advised to wear a cervical collar to relieve symptoms of pain and muscle spasm or to limit neck movements. Physiotherapists issue cautionary advice that wearing the collar may be detrimental to balance, especially when vision and vestibular systems are affected. <b>The purpose:</b> of this study was to evaluate and analyze objectively the effect of cervical collars on postural stability and to correlate between multidirectional reach test and limits of stability test in patients with cervical discogenic radiculopathy. <b>Methods:</b> Thirty patients suffered from cervical discogenic radiculopathy were recruited for this study. Their age ranged from 35-50 years. Postural stability was examined by using the NeuroCom Smart Balance Master® as a method of laboratory examination and multidirectional reach test as a method of clinical examination. <b>Results:</b> There was a significant reduction in all measured variables as a result of wearing hard and philadelphia cervical collars but wearing soft cervical collar had no significant effect in all the patients who participated in this study. There was a statistically significant correlation between limits of stability test and multidirectional reach test. <b>Conclusion:</b> Cervical collars had a significant effect on reducing all measured variables of postural stability moreover; multidirectional reach test can be used as an accurate measure of postural stability in patients with cervical discogenic radiculopathy.</p>
Key words	1.	Cervical collars.
	2.	limits of stability.
	3.	cervical radiculopathy.
	4.	postural stability.
Arabic Title Page	:	تأثير الجبائر الساندة للعنق على اتران القوام فى مرضى اعتلال الجذور العصبية العنقية نتيجة الانزلاق الغضروفي.
Library register number	:	2287-2288.

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PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

Author	:	Fatma Shehata Mohammed Ahmed Yousef.
Title	:	The efficacy of electrical stimulation and task specific training on hand functions in stroke patients.
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Abeer Abo Baker El-wishy.
	2.	Ahmed Mohammed Abou Mousa.
	3.	Nevein Mohammed Mohammed Gharib.
Degree	:	Master.
Year	:	2010.
Abstract	:	Objective: To evaluate the efficacy of electrical stimulation and task specific training on hand functions in stroke patients. Design: - Pre- test, post-test study. Setting: Out-patient clinic of Faculty of Physical Therapy and out patient clinic of neurology, faculty of medicine - Cairo University. Subjects: Thirty stroke patients (aged ranges from 45 to 65 years). Intervention: For the control group placebo electrical stimulation followed by task specific training but the study group treated by combined electrical stimulation and task specific training. Main measures: - The functional improvement by motor assessment scale and the range of motion of (fingers abduction and extension of proximal and distal interphalangeal joints) by three dimensional motion analysis. Results: There is a highly significant effect of combining task specific training and electrical stimulation compared with task specific training only, on improving hand functions in stroke patients. Conclusion: Therapy combining task specific training and electrical stimulation may improve hand functions in stroke patients.
Key words	1.	task specific.
	2.	three dimensional motion analysis.
	3.	stroke.
	4.	electrical stimulation.
	5.	hand functions.
Arabic Title Page	:	كفاءة التنبيه الكهربائي والتدريب الموجه للمهمة على الوظائف اليدوية في مرضى السكتة الدماغية.
Library register number	:	2343-2344.

**ELECTRONIC GUIDE TO THESES APPROVED BY PHYSICAL  
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Author	:	Hager Rasmi Ibrahim Al-Serougi.
Title	:	Assessment of postural instability in Parkinson's disease patients.
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Moshera H. Darwish.
	2.	Mohamed S. El-Tamawy.
Degree	:	Master.
Year	:	2010.
Abstract	:	
<p>Postural instability is one of the hallmarks of Parkinson's disease (PD). The purpose of this study was to evaluate and analyze objectively the effect of different sensory and motor components on postural instability in PD and to determine the validity of using different scales as the Unified Parkinson's Disease Rating Scale (UPDRS), Berg Balance Scale (BBS) and the Push and Release test as valid methods to examine postural stability in PD patients. Methods: Twenty normal subjects (Gr. I) and twenty PD patients (Gr. II) were recruited for this study. Their age ranged from 40-60 years. Both groups (Gr. I and Gr. II) were examined using the Smart Balance Master® and the Balance Master® systems as methods of laboratory examination for postural stability. In addition group II was also examined clinically using the UPDRS, BBS, and the Push and Release test. Results: Parkinson's disease patients suffer from postural instability caused by deficits in their sensory (somatosensory, visual, and vestibular) systems, along with deficits in the musculoskeletal system. The central integrating mechanisms were also affected. The results also proved that computerized dynamic posturography is considered a more objective method than clinical scales in measurement of postural stability in PD patients. Conclusion: Parkinson's disease patients suffer from postural instability that is caused mainly by deficits in sensory and neuromuscular systems. The clinical scales used proved to be a less objective measure of postural stability in PD in comparison to computerized dynamic posturography.</p>		
Key words	1.	Parkinson's disease.
	2.	Balance.
	3.	Postural instability.
	4.	Computerized dynamic posturography.
	5.	Unified Parkinson's disease Rating Scale (UPDRS).
	6.	Berg Balance Scale (BBS).
	7.	Push and Release test.
Arabic Title Page	:	تقييم عدم اتزان القوام في مرضى الشلل الرعاش.
<b>Library register number</b>	:	<b>2137-2138.</b>

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PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

Author	:	Ikrami Abd El Rohmman Ibrahim Al Shantti.
Title	:	Three dimensional and kinetic analysis of sit-to-stand in spinal cord injury patients.
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Nawal Abd El-Raouf Abou Shady.
Degree	:	Master.
Year	:	2010.
Abstract	:	
<p><b>Back ground:</b> Moving from a sitting to standing position is a transfer that is essential to perform activities of daily living. Individuals having dysfunctional or weak lower extremities may have difficulty performing sit-to-stand movements and may depend on others for assistance. <b>The Purpose:</b> This study was conducted to investigate the biomechanical analysis of sit to stand Movement from two different methods; walker and chair armrest sit to stand. <b>Subjects:</b> Twenty incomplete spinal cord injury patients were selected from Faculty of Physical Therapy, Cairo University Out-patient Clinic and from Kasr El-Ani Hospital and clinic of El Agouza Military Physical Rehabilitation hospital. All patients were evaluated by three dimensional motion analysis to measure trunk flexion angle, total duration and force platform to measure the vertical ground reaction force in two different methods. <b>Results:</b> There was statistical significance difference in trunk flexion angle motion, total duration of sit to stand and there was statistical significance difference in vertical ground reaction force between two different methods. <b>Discussion and Conclusion:</b> The walker method form sit to stand is better than chair armrest from sit to stand and facilitate the sit to stand task.</p>		
Key words	1.	Incomplete SCI.
	2.	Biomechanics of Sit to Stand.
	3.	Three Dimensional Motion.
	4.	Force platform.
	5.	kinetic analysis.
	6.	sit-to-stand.
	7.	spinal cord injury.
Arabic Title Page	:	التحليل الحركى ثلاثى الأبعاد والكيناتيكي من وضع الجلوس للوقوف فى مرضى إصابة النخاع الشوكى.
<b>Library register number</b>	:	<b>2311-2312.</b>

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<b>Author</b>	:	Maha Mamdouh Hossien.
<b>Title</b>	:	Comparison between different postoperative physical therapy modalities on transverse carpal ligament release.
<b>Dept.</b>	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
<b>Supervisors</b>	1.	Salah Abdel-Monem Sawan.
	2.	Mostafa Wageeh Kotb.
<b>Degree</b>	:	Master.
<b>Year</b>	:	2010.
<b>Abstract</b>	:	
<p>The purpose of this study was to compare between selected post-operative physical therapy modalities on transverse carpal ligament release. Forty five female patients subjected to transverse carpal ligament release in their dominant hand participated in this study. Patients' age ranged from 25 to 45 years with a mean age <math>35.83 \pm 7.15</math>. The patients were classified into three equal groups. Group (1) received continuous ultrasound and nerve and tendon gliding exercises. Group (2) received laser therapy and nerve and tendon gliding exercises. Group (3) received nerve and tendon gliding exercises only. The patients were assessed clinically via visual analogue scale and pinch dynamometer and electro-physiologically via motor and sensory distal latencies before and after treatment program. The results showed that the three groups improved significantly after treatment with no significant difference between group (1) and group (2) while there was a significant difference between group (1) and group (3) and between group (2) and group (3), the percentage of improvement showed that, the first group improvement was 67.5% in the pain intensity, 80% in the pinch strength, 20% in the motor distal latency and 32% in the sensory distal latency, while the second group improvement was 63.4% in the pain intensity, 60% in the pinch strength, 14.7% in the motor distal latency and 32% in the sensory distal latency. The third group improvement was 40% in the pain intensity, 34% in the pinch strength, 5% in the motor distal latency and 6% in the sensory distal latency. It was concluded that continuous ultrasound, nerve and tendon gliding exercises were considered effective after transverse carpal ligament release, giving the best results compared with laser therapy and nerve and tendon gliding exercises or nerve and tendon gliding exercises only.</p>		
<b>Key words</b>	1.	carpal tunnel syndrome.
	2.	transverse carpal ligament release.
	3.	, low-level laser therapy.
	4.	continuous ultrasound.
	5.	nerve gliding exercise.
	6.	tendon gliding exercise.
<b>Arabic Title Page</b>	:	المقارنة بين وسائل مختلفة للعلاج الطبيعي لمرضى التحريك الجراحي لرباط الرسغ المستعرض.
<b>Library register number</b>	:	2257-2258.

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<b>Author</b>	:	Marwa Mohammad Hany Abousenna.
<b>Title</b>	:	Utilization of wrist caliper and pinch dynamometer in assessment of Carpal tunnel syndrome.
<b>Dept.</b>	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
<b>Supervisors</b>	1.	Osama Mohammad Rashad.
	2.	Mostafa Zein El-Abdeen Ali.
	3.	Waleed Talat Mansour.
<b>Degree</b>	:	Master.
<b>Year</b>	:	2010.
<b>Abstract</b>	:	
<p><b>Background:</b> Wrist ratio and pinch dynamometric tests are clinical tests that can be used to assess carpal tunnel syndrome. Standard nerve conduction study (NCS) is the most accurate test used to objectively confirm median nerve dysfunction within the carpal tunnel. Purpose of the study: To determine the accuracy of wrist ratio and pinch dynamometric tests in assessment of CTS compared with NCV. Materials and Methods: Thirty female patients with carpal tunnel syndrome were recruited in this study with mean age of 36.17 years. An electromyographic system was used for application of median motor and sensory distal latencies, wrist caliper was used to measure wrist ratio and pinch dynamometer was used for tip to tip pinch test. Results: Pinch dynamometric test and sensory distal latency test showed no significant correlation, wrist ratio test and motor distal latency test showed no significant correlation, wrist ratio test and sensory distal latency test showed no significant correlation. However, Pinch dynamometric test and motor distal latency test showed a significant correlation. Conclusion: 1) Wrist ratio test is not valid to be used in assessment of carpal tunnel syndrome. 2) Pinch dynamometric test can be used as an assessment tool of evaluation of carpal tunnel syndrome.</p>		
<b>Key words</b>	1.	Carpal tunnel syndrome.
	2.	Wrist ratio test.
	3.	Pinch dynamometer.
	4.	Utilization of wrist caliper.
<b>Arabic Title Page</b>	:	إستخدام مقياس الرسغ وجهاز قياس شدة القوة الميكانيكية فى تقييم ضيق النفق الرسغي.
<b>Library register number</b>	:	2267-2268.

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Author	:	Noura Gamil Ahmed Ali.
Title	:	Shock Wave versus Ultrasound in Treatment of Carpal Tunnel Syndrome.
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Nawal Abdel Raouf Abou-Shady
	2.	Mostafa Zein Al-Abedeem
Degree	:	Master.
Year	:	2010.
Abstract	:	
<p>The aim of this work was to investigate the effect of using shock wave therapy versus ultrasound therapy in treating carpal tunnel syndrome. Subjects and Methods: Thirty CTS (male &amp; female) patients participated in the present study. Age ranged between 35 to 55 years. They were selected from out-patient clinic of faculty of physical therapy, Cairo University and Kasr El Aini Hospital. All patients were divided into three equal groups: group (1): received Shock wave therapy plus a designed program of conservative physical therapy. Group (2): received Ultrasound therapy plus the same program of conservative physical therapy. Group (3): (control group) received only a program of conservative physical therapy. The data were collected pre and post treatment for all groups. VAS was used for evaluation of pain intensity and Electromyography was done to measure Conduction Velocity (CV), Sensory Distal Latency (SDL), and Motor Distal Latency (MDL) of the median nerve. Results: indicated that shock wave group and ultrasound group were improved clinically in pain intensity perception and Conduction Velocity (sensory &amp; motor); but shock wave group exhibited highly significant improvement in both Sensory &amp; motor Distal Latency of the median nerve while ultrasound group failed to provide such improvement in Sensory &amp; motor Distal Latency. Results of the designed physical therapy program only (control group) was not significant in all tested items which indicated that tendon gliding (mobilization) alone are not sufficient to show significant improvement in CTS patients. Conclusion: shock wave therapy was more effective than ultrasound therapy in treating carpal tunnel syndrome.</p>		
Key words	1.	Shock wave therapy.
	2.	ultrasound therapy.
	3.	carpal tunnel syndrome.
Arabic Title Page	:	الموجات التصادمية مقابل الموجات فوق الصوتية في علاج متلازمة النفق الرسغي.
<b>Library register number</b>	:	<b>2145-2146.</b>

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Author	:	Shreen Ibrahim Taha Sleim.
Title	:	The influence of physical therapy program on oropharyngeal dysphagia in stroke patients; (digital fluoroscopic study).
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Moshera H. Darwish
	2.	Mohamed S. El-Tamawy
	3.	Hatem S. El-Azizi
Degree	:	Master.
Year	:	2010.
Abstract	:	
<p><b>Background and objectives:</b> The purpose of this study was to evaluate the effect of a designed physical therapy program consists of physical exercises plus neuromuscular electrical stimulation on severe swallowing disorders (oropharyngeal dysphagia) in acute ischemic cerebrovascular stroke patients. <b>Methods:</b> Thirty stroke patients suffering from severe dysphagia were assigned randomly into two equal groups control group (G1) and study group (G2). The patients in the control group (G1) were under medical treatment only whereas, the patients in the study group received the same medical treatment in addition to, a designed physical therapy program mainly directed to strengthen and stimulate the elevators muscles of the larynx above and below the hyoid bone. Digital fluoroscopy was used to assess the following variables oral transportation, laryngeal elevation, hyoid elevation, esophageal sphincter opening and aspiration or penetration. Bedside water swallowing test and oromotor examination test were used also as clinical tools for evaluation. Assessment was done before and at the end of treatment after six weeks of treatment intervention for both groups. <b>Results:</b> Results proved that post treatment; there was significant improvement of all different variables measured by digital fluoroscopy and different components of both clinical tests in (G2). While in (G1) post treatment there was no significant improvement of all different variables measured neither by digital fluoroscopy nor by different components of both clinical tests. Comparison of post treatment results in (G1) and (G2) indicated that there was significance improvement of all different variables measured by digital fluoroscopy and different components of both clinical tests in (G2) compared to (G1). <b>Conclusion:</b> It can be concluded that a suggested physical therapy training program is an effective method in improving and restoring normal swallowing mechanism of ischemic stroke patients, suffering from severe dysphagia.</p>		
Key words	1.	Dysphagia.
	2.	Digital fluoroscopy.
	3.	Electrical stimulation.
	4.	Physical rehabilitation.
	5.	Ischemic stroke.
Arabic Title Page	:	تأثير برنامج العلاج الطبيعي على صعوبة البلع الفموية في مرضى السكتة الدماغية (دراسة بالتصوير بالأشعة الرقمية).
<b>Library register number</b>	:	<b>2067-2068.</b>



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Author	:	Walaa Mohammed Abd El Aziz Ragab.
Title	:	Validity of Electrical Stimulation as a Method of Pain Assessment in Patients with Low Back Pain.
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Moshera Hassan Darwish.
	2.	Laila Ahmed Rashed.
Degree	:	Master.
Year	:	2010.
Abstract	:	
<p><b>Background:</b> One of the most critical important points to be determined in different medical fields is the assessment of pain. Adequate and accurate rehabilitation program requires a precise assessment of pain by an objective and valid method. The aim of this study was to evaluate the validity of using electrical stimulation as an objective and valid method in quantitating pain intensity for the patients with chronic low back pain and sciatica. <b>Methods:</b> Sixty chronic low back pain patients with sciatica represent G1 and twenty normal subjects represent G2, participated in this study. Electrical threshold and pain tolerance were recorded from the most painful site in G1 and from the corresponding matching site in G2. Blood analysis for <math>\beta</math>-endorphin was done to objectively determine the intensity of pain as well as the objectivity and validity of electrical stimulation in the assessment of pain. Pain intensity was also recorded by visual analogue scale(VAS) for each subject. The results showed significant differences between both groups(G1 and G2) regarding the threshold and pain tolerance to electrical current (<math>P \leq .01</math>). A significant positive correlation was also observed between <math>\beta</math>-endorphin level, the threshold and pain tolerance intensity in the patient group (<math>P \leq .01</math>). Non significant correlation was also observed between VAS and <math>\beta</math>-endorphin level (<math>P \leq .458</math>). <b>Conclusion:</b> It was concluded that electrical stimulation is an objective and valid method while VAS is a subjective method in the assessment of pain intensity of chronic low back pain patients.</p>		
Key words	1.	Chronic Low Back Pain.
	2.	Threshold-Pain Tolerance.
	3.	$\beta$ -endorphin-VAS.
	4.	Electrical Stimulation.
	5.	Pain Assessment.
	6.	Low Back Pain.
Arabic Title Page	:	صلاحية التنبيه الكهربى كوسيلة لتقييم الألم في مرضى الأم أسفل الظهر.
<b>Library register number</b>	:	<b>2057-2058.</b>

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PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

<b>Author</b>	:	Waleed Fares Mohamed.
<b>Title</b>	:	Efficacy of dexamethasone iontophoresis versus phonophoresis in treatment of carpal tunnel syndrome.
<b>Dept.</b>	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
<b>Supervisors</b>	1.	Nahed Ahmed Salem.
	2.	Hussien Ahmed Shaker
	3.	Abd El Rahman Ahmed Talaat
<b>Degree</b>	:	Master.
<b>Year</b>	:	2010.
<b>Abstract</b>	:	
<p><b>Purpose:</b> to investigate the effect of dexamthasone ionophoresis versus phonophoresis in treating carpal tunnel syndrome (CTS). <b>Subjects:</b> thirty patients of both sexes with CTS were divided randomly into two groups of equal numbers 15 patients. <b>Procedures:</b> group (A) received dexamethasone iontophoresis for 20 minutes every other day for 6 weeks and group (B) received dexamethasone phonophoresis for 10 minutes every other day for 6 weeks. <b>Results:</b> there was no significant difference regarding the patient's age, gender, the duration of symptoms, the degree of pain before treatment while there was significant decrease in the level of pain, median nerve motor and sensory distal latencies, significant increases in motor and sensory amplitude, and significant improvement in functional abilities (hand grip strength) of group (A) in comparison to patients of group (B) <b>Conclusion:</b> It can be concluded that the use of dexamethasone iontophoresis is more effective then phonophoresis as it has proved its effect to reduce symptoms, improve functional deficits and distal latencies in patients with mild to moderate CTS.</p>		
<b>Key words</b>	1.	Carpal Tunnel Syndrome.
	2.	Dexamethasone Iontophoresis.
	3.	Phonophoresis.
<b>Arabic Title Page</b>	:	فاعلية العلاج الطبيعي بعملية التأين بالديسكاميثازون مقابل فاعلية الإدخال بالموجات فوق الصوتية عبر الجلد في علاج العصب الأوسط عند راحة اليد.
<b>Library register number</b>	:	2105-2106.

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PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

<b>Author</b>	:	Yasmin Said Gohar.
<b>Title</b>	:	Surface spinal electric sensory stimulation: its effect on monosynaptic reflex in stroke patients.
<b>Dept.</b>	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
<b>Supervisors</b>	1.	Salah Abdel-Monem Sawan
	2.	Foad Abdel-Monem AbdAllah
	3.	Nevein Mohamed Mohamed
<b>Degree</b>	:	Master.
<b>Year</b>	:	2010.
<b>Abstract</b>	:	
<p>The purpose of this study was to examine the effect of electrical sensory stimulation applied to thoraco-lumbar region on hyper-excitability monosynaptic reflex in stroke patients. Forty stroke patients were selected from Out-patient Clinic, Faculty of Physical Therapy, Cairo University and from El Haram specialized hospital. Patients were divided into two equal groups. Methods: Patients in the study group (n = 20) received the selected physical therapy program as well as electrical sensory stimulation to the thoraco-lumbar region, where as patients in control group (n =20) received the selected physical therapy program as well as placebo electrical sensory stimulation. The following assessment including H/M ratio, dorsiflexion active range of motion and time of ten-meters walking test were measured before and after six weeks of treatment program. Results: Before treatment there was no significant difference between the two groups regarding the grades of spasticity according to H/M ratio, dorsiflexion active range of motion and time of ten-meter walking test. After treatment there was a very highly significant different between the study group and the control group regarding the grades of spasticity according to H/M ratio, highly significant different between the study group and the control group regarding dorsiflexion active range of motion and time of ten-meter walking test. Conclusion: the surface electric sensory stimulation applied to thoraco-lumbar region is effective in controlling spasticity, increase dorsiflexion active range of motion of ankle and improving ten- meters walk test in stroke patients.</p>		
<b>Key words</b>	1.	Stroke.
	2.	H/M ratio.
	3.	Electrical sensory stimulation,.
	4.	Gait.
	5.	Spasticity.
	6.	Spinal electric sensory stimulation.
	7.	Monosynaptic reflex in stroke patients.
<b>Arabic Title Page</b>	:	التنبيه الكهربى السطحى الفقرى الحسى: تأثيره على الانعكاس أحادى الاتصال فى مرضى السكتة الدماغية.
<b>Library register number</b>	:	2255-2256.

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PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

<b>Author</b>	:	Yasmine Sabry Radwan Gomaa.
<b>Title</b>	:	The Impact of cognitive impairment on functional abilities of stroke patients.
<b>Dept.</b>	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
<b>Supervisors</b>	1.	Salah Abd El-Monem Sawan.
	2.	Ibtesam Mohamed Fahmy.
	3.	Moussa Abd El-Fattah Sharaf.
<b>Degree</b>	:	Master.
<b>Year</b>	:	2010.
<b>Abstract</b>	:	
<p>The purpose of this study was to investigate the impact of cognitive impairment on functional abilities of stroke patients. Thirty stroke patients were selected for this study, 15 patients with right Cerebro-Vascular Accident [CVA] (group A), and 15 patients with left CVA (group B). Their ages ranged from 45 to 60 years and the duration of illness ranged from three to 18 months. Cognitive functions were evaluated using RehaCom and Mini Mental State Examination (MMSE), while functional abilities were evaluated using Barthel Index (BI) for both groups. 15 normal subjects (group C) matched in age were also included as a control group. The cognitive functions of this group were evaluated by RehaCom and the obtained values were compared to that of stroke patients. The results of study revealed that patients who had highly cognitive impairment suffered from functional disabilities which vary in degree according to the severity of cognitive impairment, beside, cognitive impairment associated with right hemispheric vascular accident are more devastating than that associated with left hemispheric accident. Consequently, patients with right CVA suffered more functional decline. In conclusion: cognitive impairment in stroke patients especially those with right hemispheric lesions had an impact on functional abilities of such patients.</p>		
<b>Key words</b>	1.	Cognitive functions.
	2.	Functional abilities.
	3.	Stroke.
<b>Arabic Title Page</b>	:	تأثير الخلل الإدراكي على القدرات الوظيفية لمرضى السكتة الدماغية.
<b>Library register number</b>	:	2165-2166.

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THERAPY DEPARTMENT FOR NEUROMUSCULAR AND  
NEUROSURGICAL DISORDER AND ITS SURGERY  
PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

Author	:	Yousif Mohammed Mohammed.
Title	:	Efficacy of Pulsed Electromagnetic Therapy in Cases of Carpal Tunnel Syndrome.
Dept.	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
Supervisors	1.	Abdulalim Atteya.
	2.	Waleed Talat Mansour.
	3.	Ann Ali Abd El Kader.
Degree	:	Master.
Year	:	2010.
Abstract	:	
<p>The aim of this study was to evaluate the efficacy of Pulsed Electro Magnetic Therapy in cases of carpal tunnel syndrome. Materials and Methods: Thirty female patients with carpal tunnel syndrome aged between 25-45 years. Patients were divided into two equal groups. Patients in the first group received pulsed electro magnetic therapy .Patients in the second group received placebo treatment.Treatment was done three times per week every other day for four weeks. All patients were assessed before and after treatment by pinch strength using pinch dynamometer, pain level by visual analogue scale, median nerve conduction studies include sensory median latency, motor median latency, sensory median conduction velocities and motor median conduction velocity. Results: There were significant decrease in pain level,increase in pinch strength,decrease in median latencies and increase in median conduction velocities within the group I before and after treatment, while there were no significant difference in group II. Conclusion: Pulsed electromagnetic therapy proved to be effective in cases of carpal tunnel syndrome.</p>		
Key words	1.	Carpal tunnel syndrome.
	2.	Electromagnetic therapy.
	3.	Pulsed Electromagnetic Therapy.
Arabic Title Page	:	فعالية العلاج الكهرومغناطيسي المتقطع في حالات ضيق النفق الرسغي.
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THERAPY DEPARTMENT FOR NEUROMUSCULAR AND  
NEUROSURGICAL DISORDER AND ITS SURGERY  
PREPARED BY NERVEEN ABD EL SALAM ABD EL KADER AHMED**

<b>Author</b>	:	Zeinab Nagy Saad.
<b>Title</b>	:	Comparative study between the effect of laser and electromagnetic field on facial nerve regeneration/
<b>Dept.</b>	:	Physical Therapy Department for Neuromuscular and Neurosurgical Disorder and its Surgery.
<b>Supervisors</b>	1.	Nahed Ahmed Salem
	2.	Nawal Abd El-Raouf Abou Shady
	3.	Fouraysa Mohamed Talaat
<b>Degree</b>	:	Master.
<b>Year</b>	:	2010.
<b>Abstract</b>	:	
<p><b>Objectives:</b> The purpose of the study was to compare between the effect of laser and electromagnetic field in treatment of facial palsy. <b>Methods:</b> Thirty patients of both sexes aged (20-40) years were divided into two equal groups. Group I: was treated with laser radiation for nine minutes three days a week for two months. Group II: was treated with electromagnetic waves for nine minutes three days a week for two months. The patients in both groups received the treatment after three months to one year of lesion, both groups had been examined using nerve conduction studies and House Brackmann Functional Grading Scale. <b>Results:</b> there is a significant difference between before and after treatment values in both groups. <b>Conclusion:</b> there is no difference between both modalities (laser therapy and electromagnetic waves) on facial nerve regeneration.</p>		
<b>Key words</b>	1.	Facial palsy.
	2.	Laser Therapy.
	3.	Electromagnetic field.
	4.	Nerve conduction.
	5.	Lasers.
	6.	facial nerve regeneration.
<b>Arabic Title Page</b>	:	دراسة مقارنة بين تأثير الليزر والمجال الكهرومغناطيسي فى التئام العصب السابع.
<b>Library register number</b>	:	2331-2332.